

Theme I: Timely and Efficient Transitions

Measure Dimension: Efficient

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of patients who have had a 7-day post hospital discharge follow up, by a community care provider for selected conditions-CHCs.	P	% / Discharged patients	See Tech Specs / April 1 - Dec 31, 2018		75.00	As we are still streamlining processes to ensure timely and team support for clients discharged from hospital, we will aim to maintain our previous year performance.	

Change Ideas

Change Idea #1 Discharge summaries received in timely fashion (48 hours) from key hospital partners

Methods	Process measures	Target for process measure	Comments
Enable more team members to access Connecting Ontario for discharge summaries	Number of team members who have access to Connecting Ontario	Primary care providers and admin staff have access to connecting ontario portal	

Change Idea #2 enhance integration and care coordination with home and community support services

Methods	Process measures	Target for process measure	Comments
share care conference use of joint Electronic Health Record communication	number of care conferences		

Measure **Dimension:** Timely

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of patients and clients able to see a doctor or nurse practitioner on the same day or next day, when needed.	P	% / PC organization population (surveyed sample)	In-house survey / April 2019 - March 2020	43.12	60.00	New providers and changes in follow up processes, including enhanced virtual support, we will aim to improve this target.	

Change Ideas

Change Idea #1 review open access scheduling principles across the primary care team, including revisit rate, continuity of care and back log.

Methods	Process measures	Target for process measure	Comments
Share quarterly data with individual providers and set improvement targets for revisit rate, booking patterns, 3NA and back log.	number of team discussions related to open access improvements % of clients who report same day or next day appointment quarterly monitoring of team and individual 3NA indicator	60% of clients report same day or next day appointment on client experience survey 3na is 1 day or less	Total Surveys Initiated: 295

Theme II: Service Excellence

Measure Dimension: Patient-centred

Indicator #3	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percent of patients who stated that when they see the doctor or nurse practitioner, they or someone else in the office (always/often) involve them as much as they want to be in decisions about their care and treatment	P	% / PC organization population (surveyed sample)	In-house survey / April 2019 - March 2020	94.97	95.00	Continue to maintain the current performance	

Change Ideas

Change Idea #1 analyze client experience surveys according to age to learn more about this indicator related to age groups

Methods	Process measures	Target for process measure	Comments
implement youth experience survey at Teen Health Clinic during 2020 2021 calendar year add self management discussion topic at Senior Expo Community event	% of age groups who state they are involved in their own care	95%	Total Surveys Initiated: 298