The QI Coach/Facilitator Role in a Primary Care Research/QI Collaboration to Improve Care for Elderly Patients with Complex Care Needs

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Presenter Disclosure

• **Presenter:** Patricia O’Brien RN MScCH

• **Relationships with financial sponsors:**
  – **Grants/Research Support:**
    - Canadian Institute of Health Research (CIHR)
  – **Speakers Bureau/Honoraria:** None
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  – **Patents:** None
  – **Other:** Manager, Quality & Innovation Program
Disclosure of Financial Support

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- This program has received in-kind/cash support from the following organizations

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<thead>
<tr>
<th>Organization</th>
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<tr>
<td>North York General Hospital</td>
<td>Cash/In-kind</td>
<td>University of Toronto Practice Based Research Network (UTOPIAN)</td>
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<td>Quality &amp; Innovation Program, Department of Family &amp; Community Medicine, University of Toronto</td>
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<td>The College of Family Physicians of Canada</td>
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<td>Dept. of Family Medicine, Faculty of Medicine, University of Ottawa</td>
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<td>Dept. of Family Medicine, Faculty of Medicine &amp; Dentistry, University of Alberta</td>
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<td>Dept. of Family Medicine, Faculty of Medicine, University of Calgary</td>
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<td>Manitoba Primary Care Research Network, Department of Family Medicine, University of Manitoba</td>
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<td>Research Manitoba</td>
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<td>Fonds de recherche du Québec – Santé</td>
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<td>Réseau-1 Québec, Université de Montréal</td>
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<td>Nova Scotia Health Authority</td>
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<td>Dept. of Family Medicine, Dalhousie University</td>
<td>Cash/In-kind</td>
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<td>Vice President Research Office, Dalhousie University</td>
<td>Cash</td>
<td>Dept. of Community Health &amp; Epidemiology, Dalhousie University</td>
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<td>Dalhousie Medical Research Foundation</td>
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<td>Doctors Nova Scotia</td>
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<td>Maritime SPOR SUPPORT Unit</td>
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A QI-Research Collaboration Opportunity

Focused on translating evidence into practice, we designed collaboration between our practice-based research network - UTOPIAN and the Quality & Innovation Program

QI Lens: offering attention to a contextually-sensitive, methodological approach to change

Research Lens: offering the scientific evidence for implementation
Polypharmacy Amongst Complex Older Patients

- CIHI: Drug use among seniors in Canada, 2016:
  - 26.5% of older Canadians were prescribed 10+ medication classes each year

SPIDER: A Comprehensive QI Approach for Safer Prescribing

- **Structured Process** Informed by **Data, Evidence & Research**
  - The Institute for Healthcare Improvement (IHI) Breakthrough Series Model

- A structure to enable inter-team networking, sharing, and QI knowledge and skill capacity building
- A process to facilitate learning between teams and from experts
### Key Elements of SPIDER Approach

<table>
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<tr>
<th>QI Learning Collaboratives</th>
<th>Principle Embodiment</th>
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<tr>
<td>o Involving interprofessional teams (physicians, nurses, pharmacists, admin)</td>
<td>o Patient-focused</td>
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<td>o Engaging patient partners throughout the process</td>
<td>o Involvement of the team</td>
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<td>o ‘All teach, all learn’</td>
<td>o Learning together</td>
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<tr>
<td>Support of Practice Coaches/Facilitators</td>
<td>o Continuous improvement</td>
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<tr>
<td>o Adapt/guide QI approach for practices</td>
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<tr>
<td>o Build capacity for using improvement tools</td>
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<td>o Address sustainability to ensure lasting positive change for practices and patients</td>
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<tr>
<td>o Facilitate inter-team communication and sharing</td>
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<tr>
<td>Provision of validated and comparable EMR data for feedback and measurement</td>
<td>o Use of data for decision making &amp; learning</td>
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Quality Improvement Coach

“QI coaching is an approach used to support improvement in healthcare that focuses on building individual and organizational capacity for continuous improvement” (Knox, 2010)


Quality Improvement Coach

- QI Methodology Guidance & Capacity Building
  - System Diagnostic Tools
  - Patient Engagement
  - Measurement Interpretation & Display
  - Change Idea Generation
  - Testing Change
  - Sustainability/Spread Considerations
  - Sharing ideas from/with others
  - Amplifying your concerns/issues
Quality Improvement Application Process

What are we trying to accomplish?

To improve safer prescribing for elderly patients 65+ yrs prescribed 10+ unique medications by MM-YYYY

What changes can we make that will result in improvement?

Patient identification, engagement & deprescribing

How will we know that a change is an improvement?

- Reducing # of older patients prescribed 10+ unique medications who have a PIP*
- Patient/family perception of experience and safety
- Quarterly EMR data reports

* Reduce # prescriptions/pt.
Identify PIP → Confirm script is inappropriate → Identify opportunity to discuss deprescription with pt and family → Come to agreement on process of deprescription → Start deprescription → Monitor side effect of med change

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<tr>
<th>Deprescribing Algorithms</th>
<th>Patient Education Materials</th>
<th>Deprescribing Toolkits</th>
<th>Webinars</th>
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<tbody>
<tr>
<td>PPI</td>
<td>Patient resource for Use of PPI</td>
<td>Drowsy without feeling lowsy</td>
<td>Deprescribing in Primary care (Choosing Wisely Canada)</td>
</tr>
<tr>
<td>Antipsychotics</td>
<td>Treating dementia with Antipsychotics</td>
<td>Bye Bye PPI</td>
<td>Shared decision making with pts (deprescribing.org)</td>
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<tr>
<td>Benzodiazepines</td>
<td>Sleeping pills in older adults</td>
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<td>Sulfonylurea</td>
<td>PPI patient decision aid Deprescribing information pamphlets</td>
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*At any point in the process, a clinician may decide the prescription is still required and process stops for that patient*
Quality Improvement Curriculum

• QI Methodology Guidance & Capacity Building:
  – [https://www.dfcm.utoronto.ca/quality-improvement-curriculum](https://www.dfcm.utoronto.ca/quality-improvement-curriculum)

Modules:
• Introduction to QI
• System Diagnostic Tools
• Identifying Team
• Model for Improvement
• Measurement for QI in Primary Care
  – whiteboard video series

– Mainpro+ certified content
QI Coach/Facilitator Focus

33 physicians/9 teams participating

- Application of QI process (current state reflection, team design, diagnostic tools)
- Inter-team communication
  - Between practice teams
  - Between practice and research teams
- Sharing and collaboration culture
  - Sharing tools, e.g. project charters, diagnostic tools
  - Sharing resources, e.g. clinical pharmacist with two smaller teams
- Patient re-identification has been completed with the help of UTOPIAN data manager and SPIDER project manager
Thank you!