

McMaster HEALTH FORUM

Topic Overview

Supporting Quality Improvement in Primary Healthcare in Ontario

Stakeholder Dialogue 21 June 2010

The McMaster Health Forum convened a stakeholder dialogue on the subject of supporting quality improvement in primary healthcare in Ontario. With the support of the Quality Improvement and Innovation Partnership, the dialogue brought together 21 participants – two policymakers, 12 staff or members of healthcare provider associations or groups, five staff or members of quality improvement and other stakeholder groups, and two researchers – from across Ontario to examine the problem, options for addressing it, and key implementation considerations.

The issue brief and the stakeholder dialogue were undertaken as part of the Quality Improvement in Primary Healthcare Project, which is supported by funding from the Ontario Ministry of Health and Long-Term Care. The views expressed in this summary do not necessarily reflect the views of the Ministry of Health and Long-Term Care, the Quality Improvement and Innovation Partnership or the sponsors.



This project is coordinated by the Quality Improvement and Innovation Partnership in collaboration with a multi-stakeholder planning group. The dialogue was co-sponsored by organizations committed to strengthening primary healthcare:

Association of Family Health Teams of Ontario, Association of Ontario Health Centres, Cancer Care Ontario, College of Physicians and Surgeons of Ontario, Nurse Practitioners' Association of Ontario, Ontario College of Family Physicians, Ontario Health Quality Council, Ontario Medical Association, Quality Improvement and Innovation Partnership, and the Registered Nurses' Association of Ontario.





















Deliberation about the problem

Most dialogue participants agreed that Ontario, while having witnessed significant improvements in access to primary healthcare over the last decade, lacks a system-wide and sustained approach to supporting quality improvement in primary healthcare. A number of dialogue participants pointed out that efforts to understand and address the problem should be based on projections of the nature of primary healthcare practices/organizations in five years, and on the practice patterns of and insights from primary healthcare providers early in their careers. A few dialogue participants noted that an important piece of the context within which the problem needs to be understood is the "tsunami" of initiatives coming towards primary healthcare providers and teams right now. These dialogue participants argued that if those providers and teams who need "consolidation time" are given it, and those providers who are "ready for change" are provided with the supports (e.g., tools and coaching) to make changes, and their first few quality improvement efforts truly do help them to do their jobs better or more efficiently, they will likely embrace quality improvement efforts.

Deliberation about options

Before working through implementation considerations and next steps, most dialogue participants supported the development of coordinating structures and processes to support quality improvements in primary healthcare in Ontario, and a smaller number of dialogue participants supported the development of a coordinating structure for the strengthening of primary healthcare in the province. After working through implementation considerations and first thoughts about next steps, dialogue participants began to shift in their views. Dialogue participants started to see the development of a strategic plan for the strengthening of primary healthcare in the province as being important, and perhaps essential to the success of quality improvement efforts. Throughout the deliberations, dialogue participants continued to see the collaborative development of principles for quality improvement and support for the scaling up of existing quality improvement initiatives as work to be done in the context of the development of quality improvement structures and processes.



Participants drawn from healthcare provider associations or groups, quality improvement and other stakeholder groups, and the researcher community at a McMaster Health Forum event on 21 June 2010

Deliberation about implementation

Dialogue participants generally agreed that "there's an appetite" for quality improvement right now, but they emphasized the importance of any next steps including a public-engagement strategy and an effort to engage all primary healthcare practices/organizations (not just those in select funding/delivery models). A few dialogue participants expressed concern that without a mandate and funding from the Ontario Ministry of Health and Long-Term Care to support this work, any progress would need to be made "off the corner of our desks." These participants observed that the absence of a coordinating structure created a vicious cycle in which it was hard to take even preliminary steps towards the creation of a coordinating structure.

Dialogue deliverables

To learn more about this topic, consult the <u>issue brief</u> presented to participants before the dialogue, the <u>summary</u> of the dialogue or the <u>video interviews</u> with dialogue participants. For an electronic copy of the issue brief or dialogue summary, or to view the video interviews, visit our website (http://www.mcmasterhealthforum.org) and click on 'Products' along the sidebar.

Those who are interested in the more general topic of strengthening primary healthcare systems across the country may wish to consult the <u>evidence</u> brief and <u>dialogue summary</u> from a dialogue convened in May 2009 or the <u>issue brief</u> and <u>dialogue summary</u> from a dialogue convened in January 2010. These products can also be found on the McMaster Health Forum website.

Next steps

Dialogue participants concluded that two parallel initiatives should be pursued:

- 1. a small planning group should draft and build consensus on a strategy for strengthening primary healthcare in Ontario, and plan a summit at which the strategy would be debated, finalized and approved by a broad-based group of key stakeholders, including citizen and patient groups, and representatives from Local Health Integration Networks and from public health units; and
- 2. the Quality Improvement and Innovation Partnership should convene one or more meetings to discuss the need and a plan of action for a strategic alliance focused on supporting quality improvement in primary healthcare, and then provide leadership and support to the strategic alliance.

McMaster Health Forum

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