

Disclosure Statement

- I have no affiliation (financial or otherwise) with a pharmaceutical, medical device or communications organization.

Working Towards a Coordinated Health System

Partnership between the Region of Peel and Central West Local Health Integration Network Regional Quality Table

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Acknowledgements

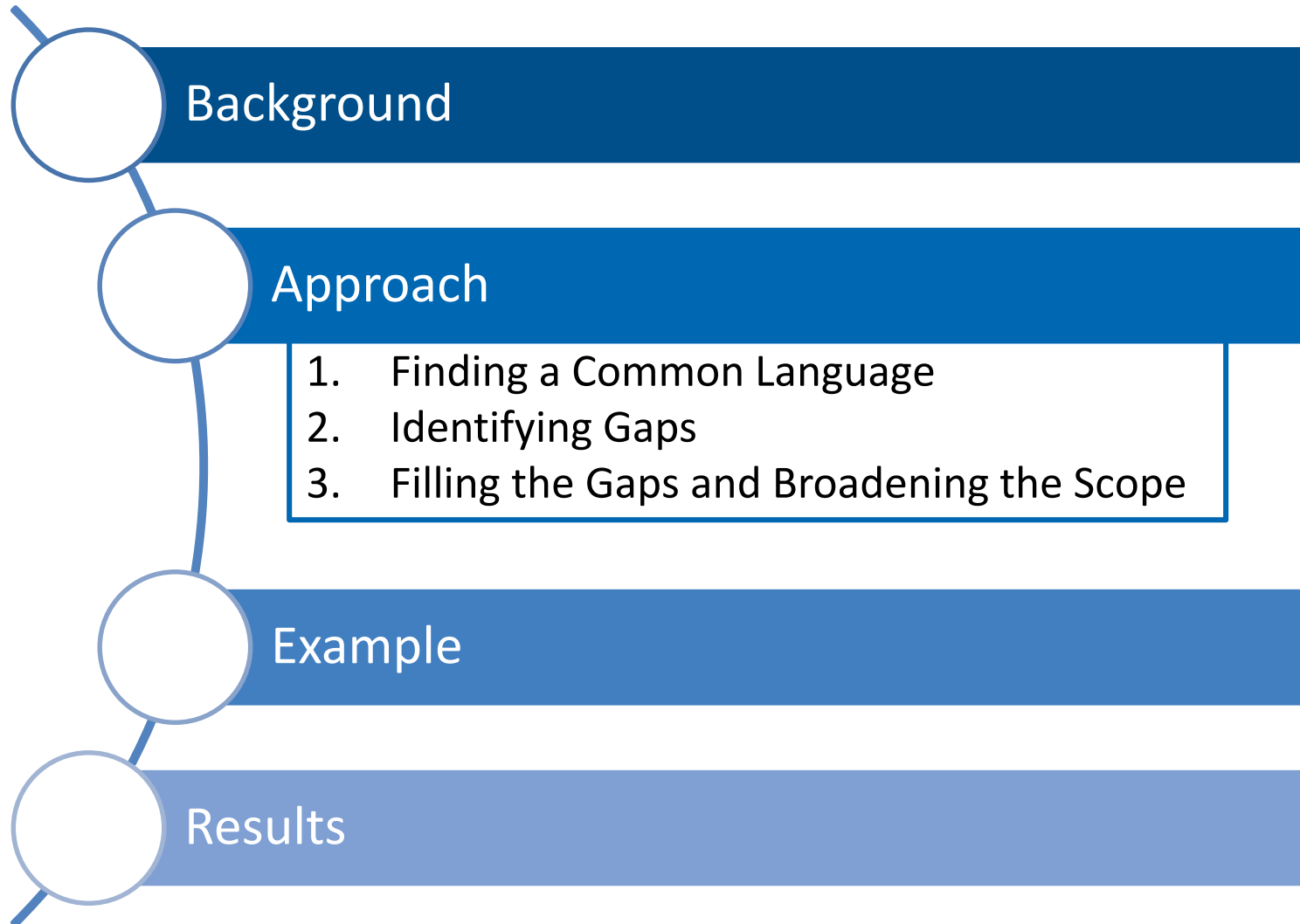


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Presentation Outline

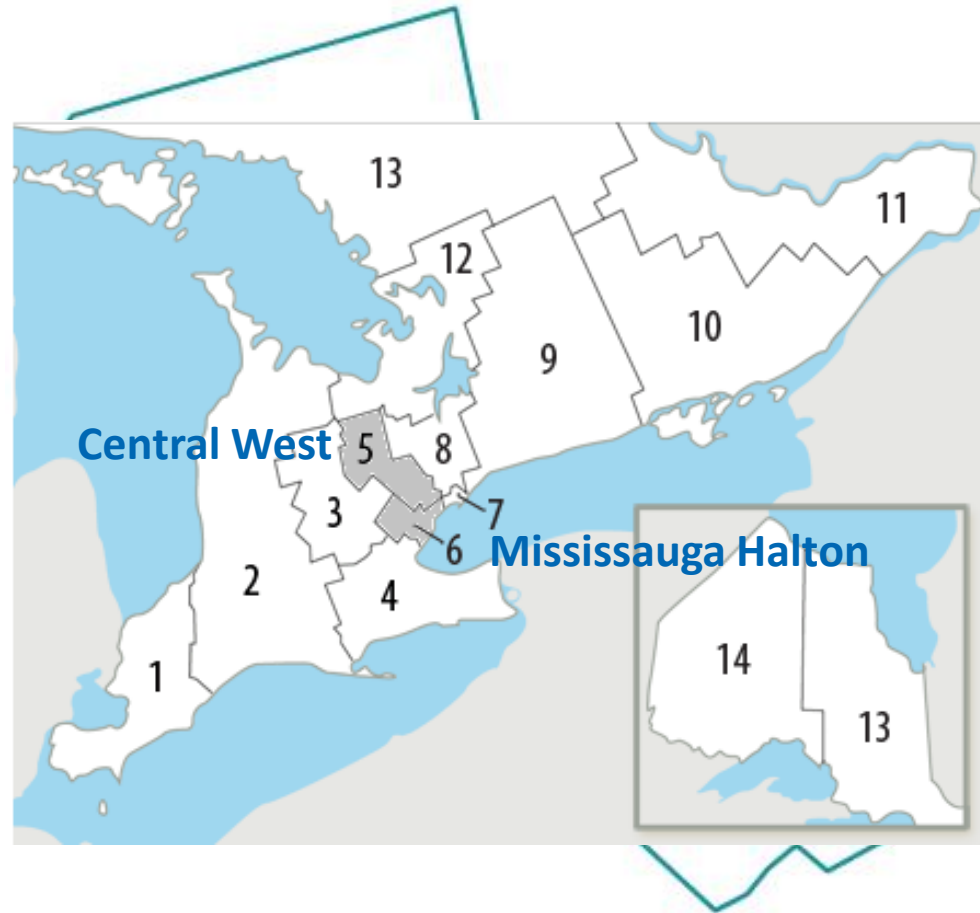




Background

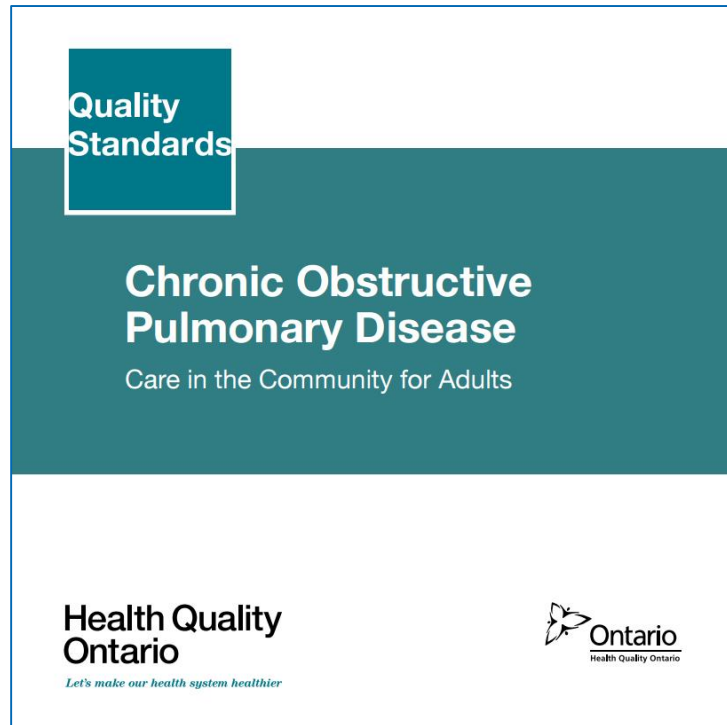
Central West Local Health Integration Network (CW LHIN)

- Health care planning, integration, funding and monitoring
- Serves part of Peel Region (Caledon and Brampton)



Health Quality Ontario (HQO)

“Let’s Make our Health System Healthier”



Quality Statement 1: Diagnosis Confirmed With Spirometry

Quality Statement 2: Comprehensive Assessment

Quality Statement 3: Goals of Care and Individualized Care Planning

Quality Statement 4: Education and Self-Management

Quality Statement 5: Promoting Smoking Cessation

Quality Statement 6: Pharmacological Management of Stable COPD

Quality Statement 7: Vaccinations

Quality Statement 8: Specialized Respiratory Care

Quality Statement 9: Pulmonary Rehabilitation

Quality Statement 10: Management of Acute Exacerbations of COPD

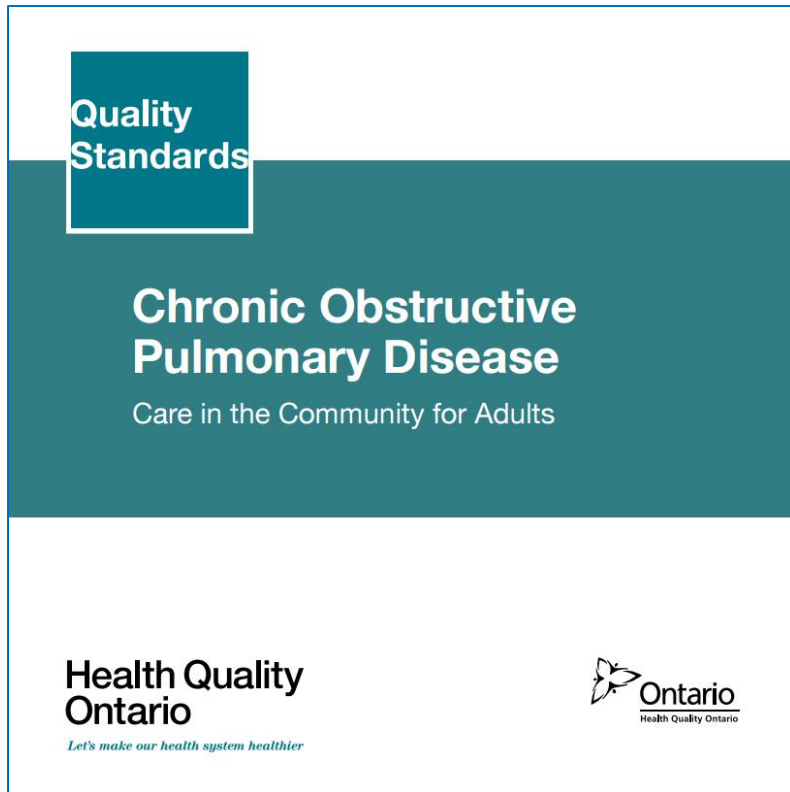
Quality Statement 11: Follow-Up After Hospitalization for an Acute
Exacerbation of COPD

Quality Statement 12: Pulmonary Rehabilitation After Hospitalization for an
Acute Exacerbation of COPD

Quality Statement 13: Palliative Care

Quality Statement 14: Long-Term Oxygen Therapy

The Regional Quality Table (RQT) and COPD Quality Standard

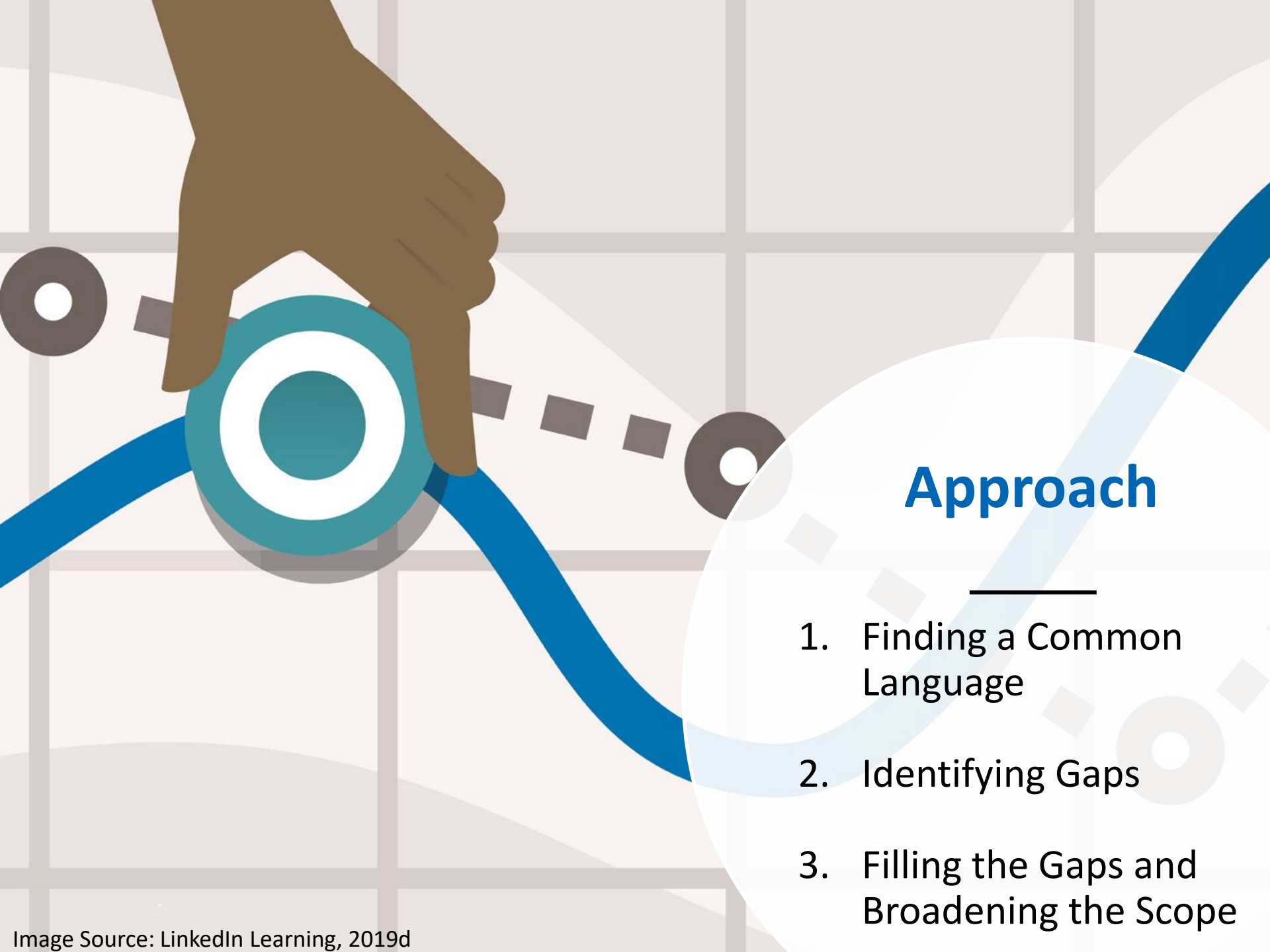


- The CW LHIN and HQO co-lead a RQT
- The RQT was involved in the creation of the Quality Standard for Chronic Obstructive Pulmonary Disease (COPD)

Purpose

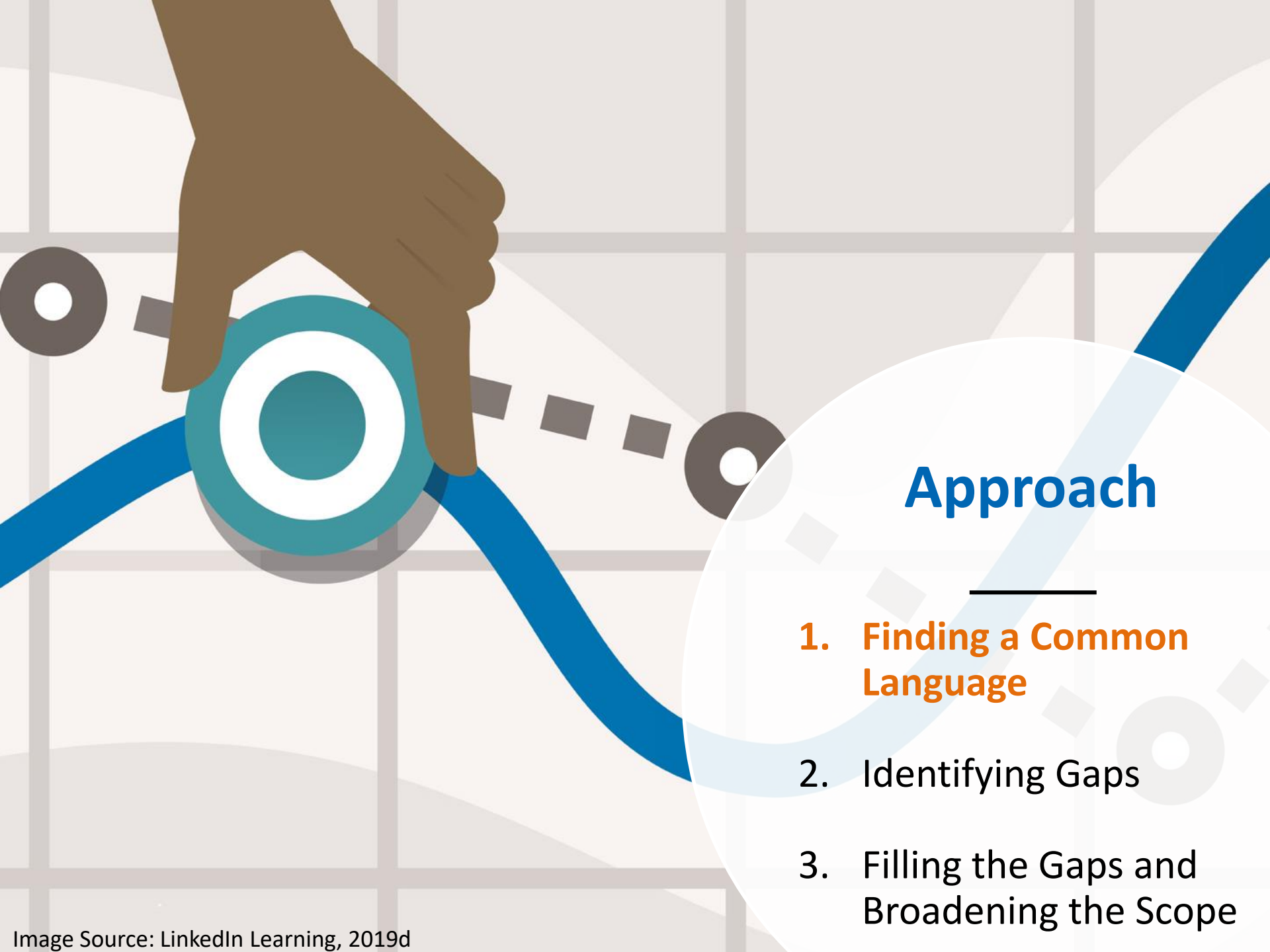
- I. Apply a public health lens to a quality standard
- II. Demonstrate how population health approaches enhance quality of care





Approach

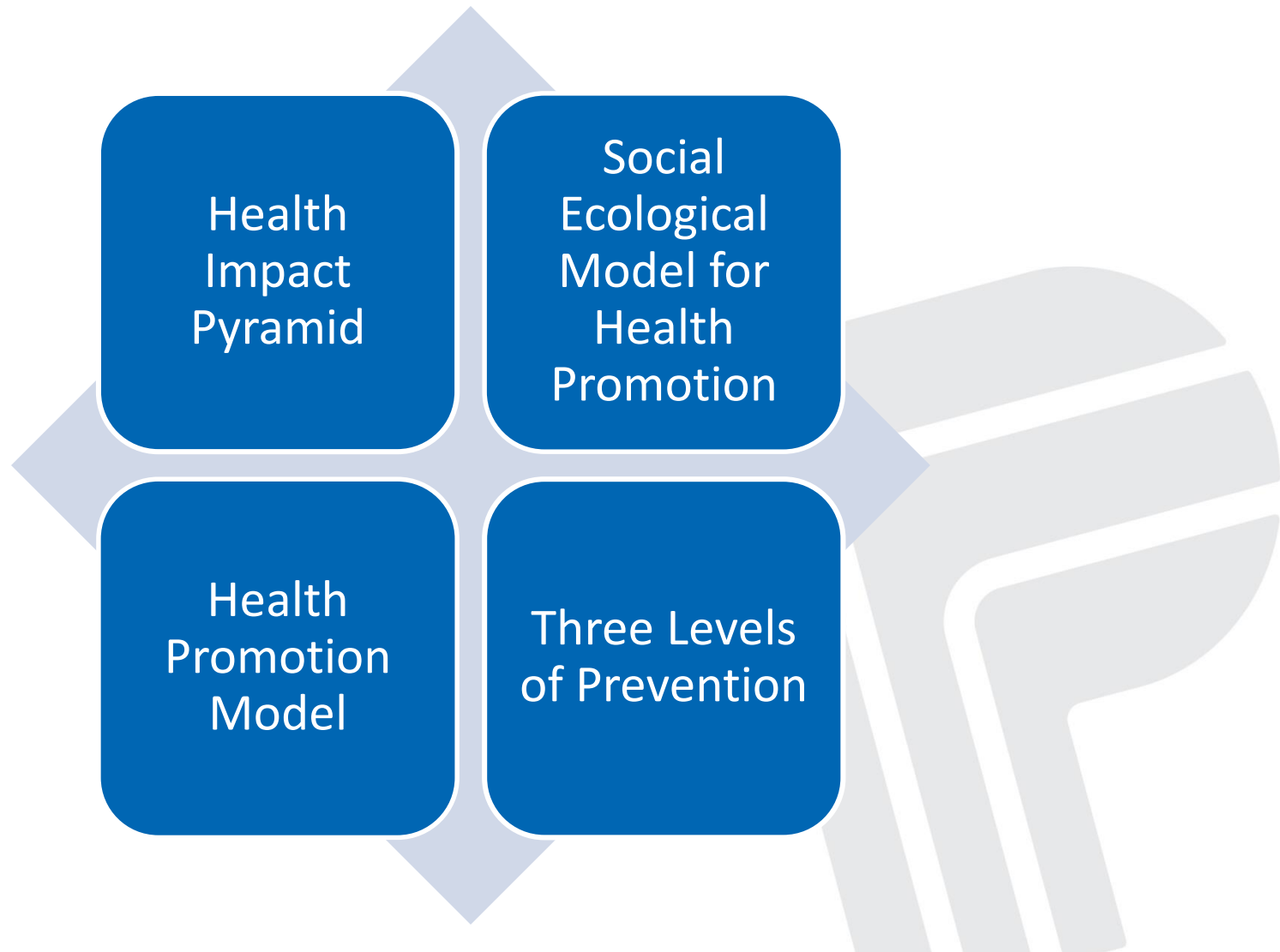
1. Finding a Common Language
2. Identifying Gaps
3. Filling the Gaps and Broadening the Scope



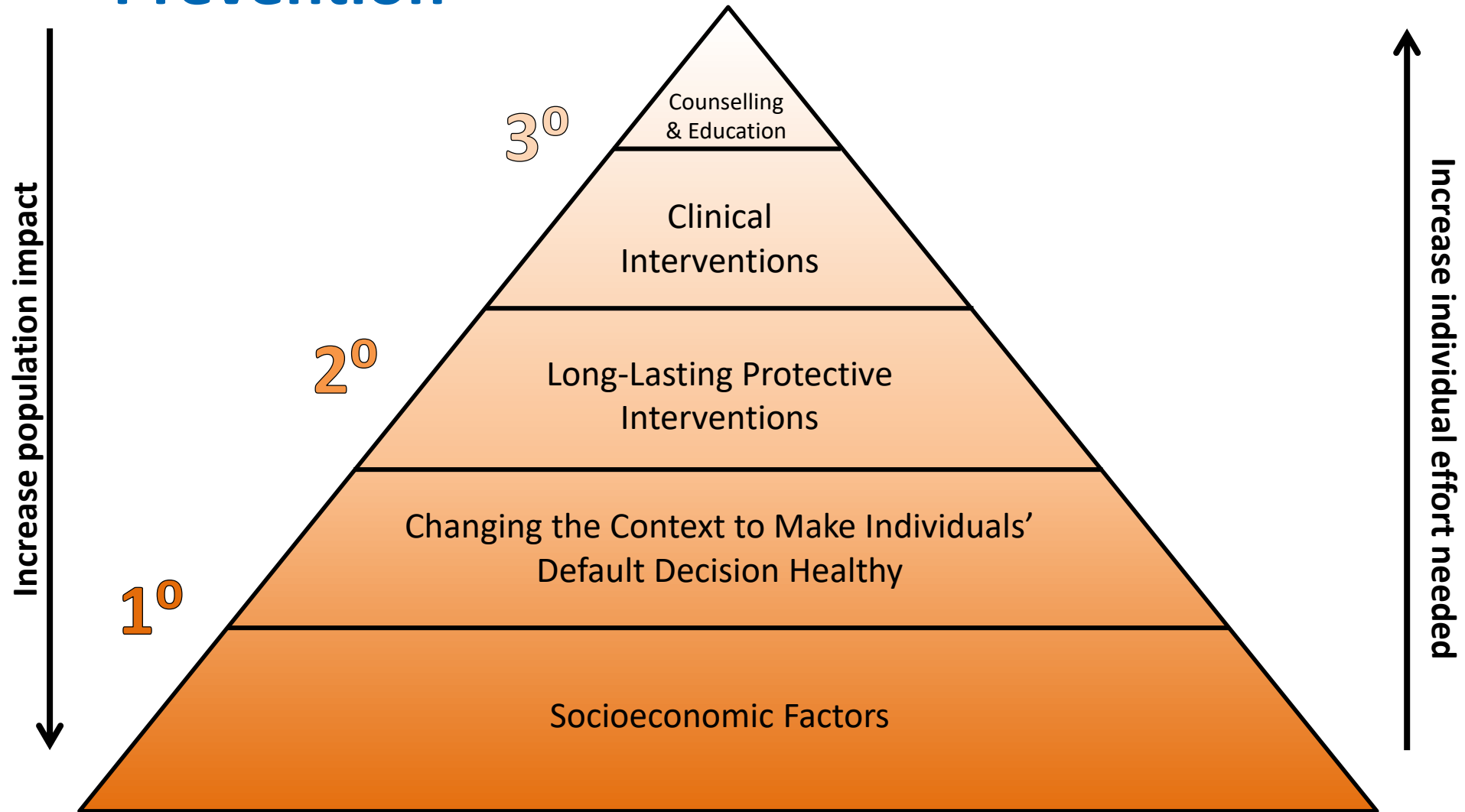
Approach

1. Finding a Common Language
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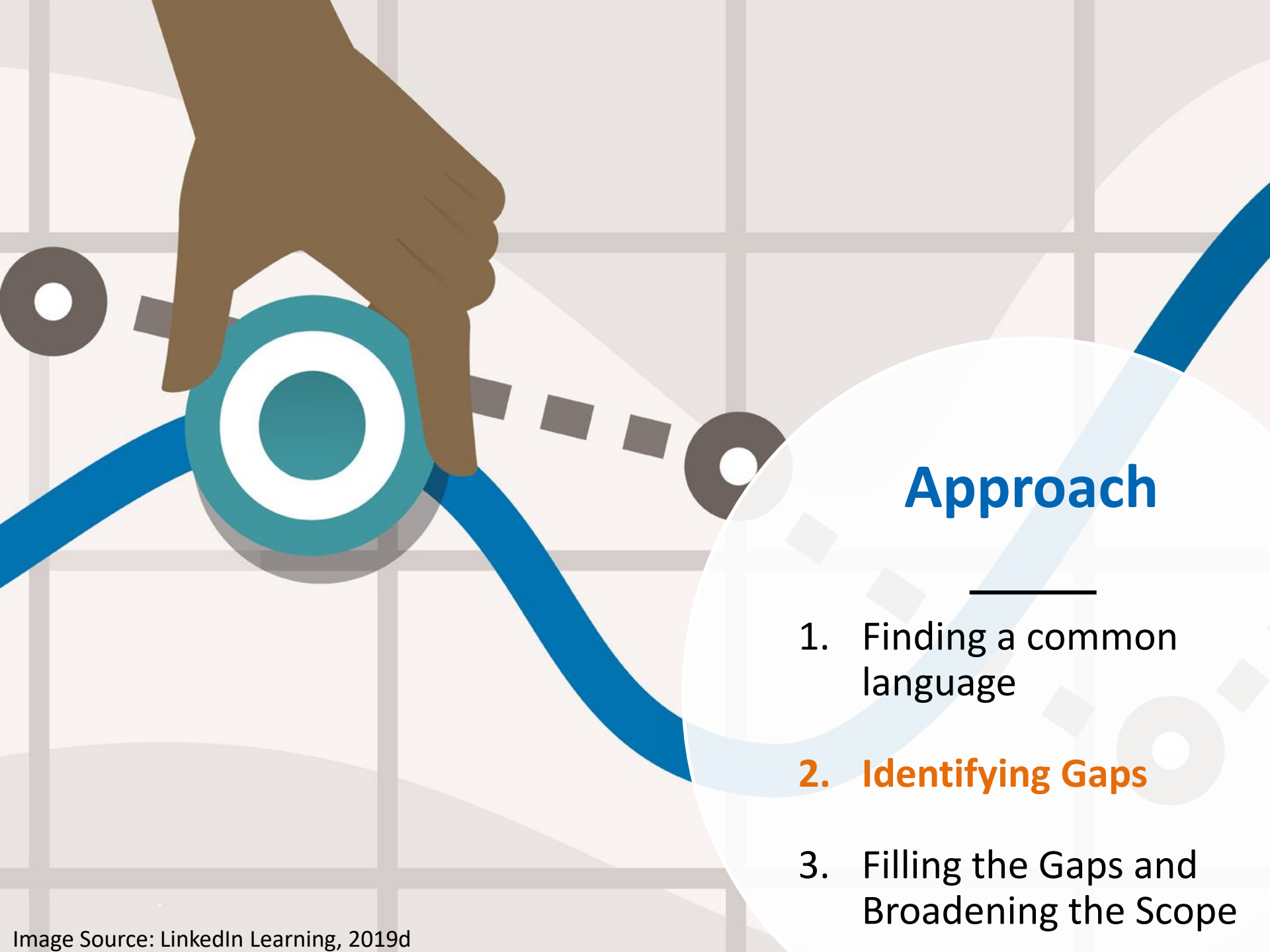
Finding a Common Language



Health Impact Pyramid & Three Levels of Prevention



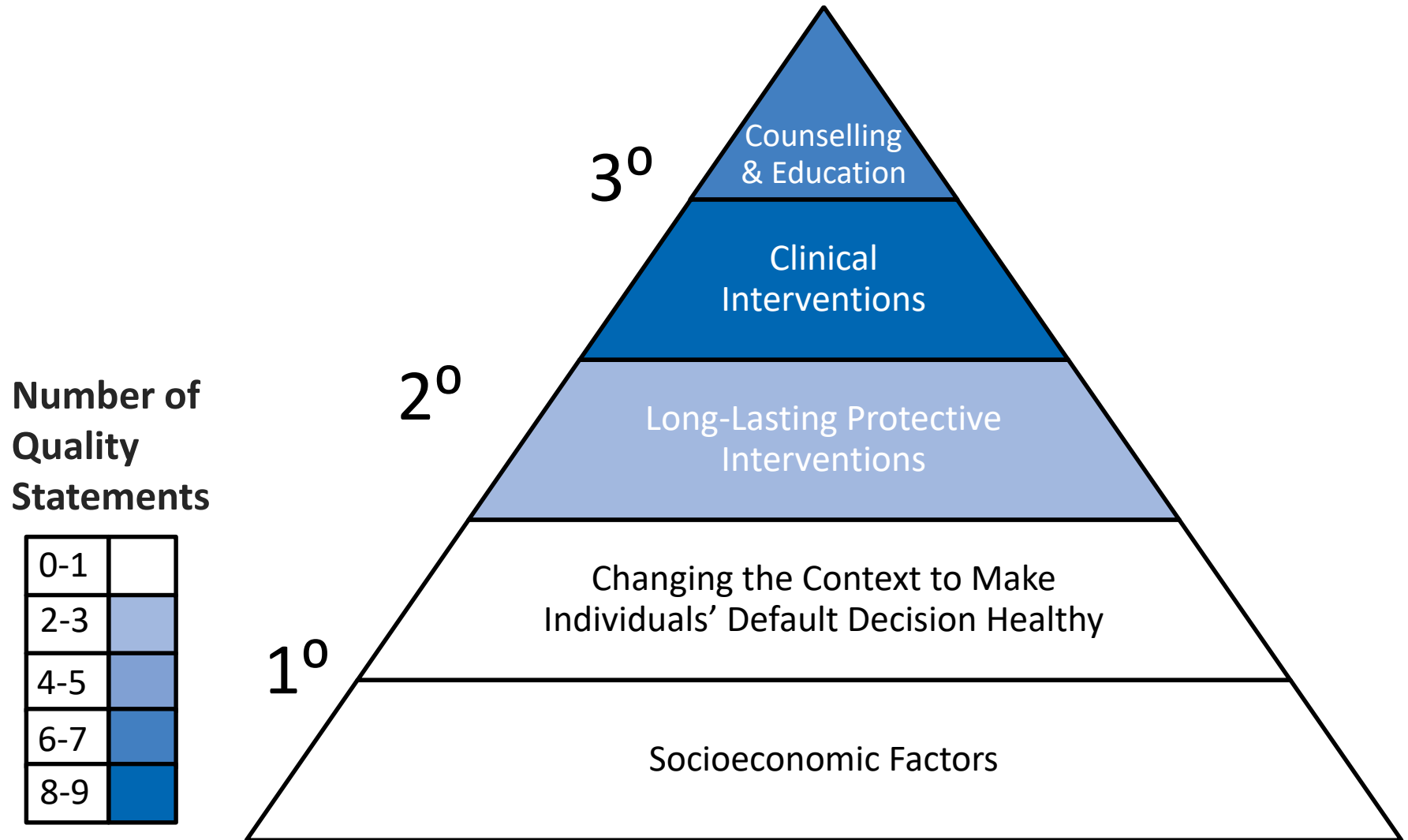
(Figure adapted from: Frieden T., 2010)



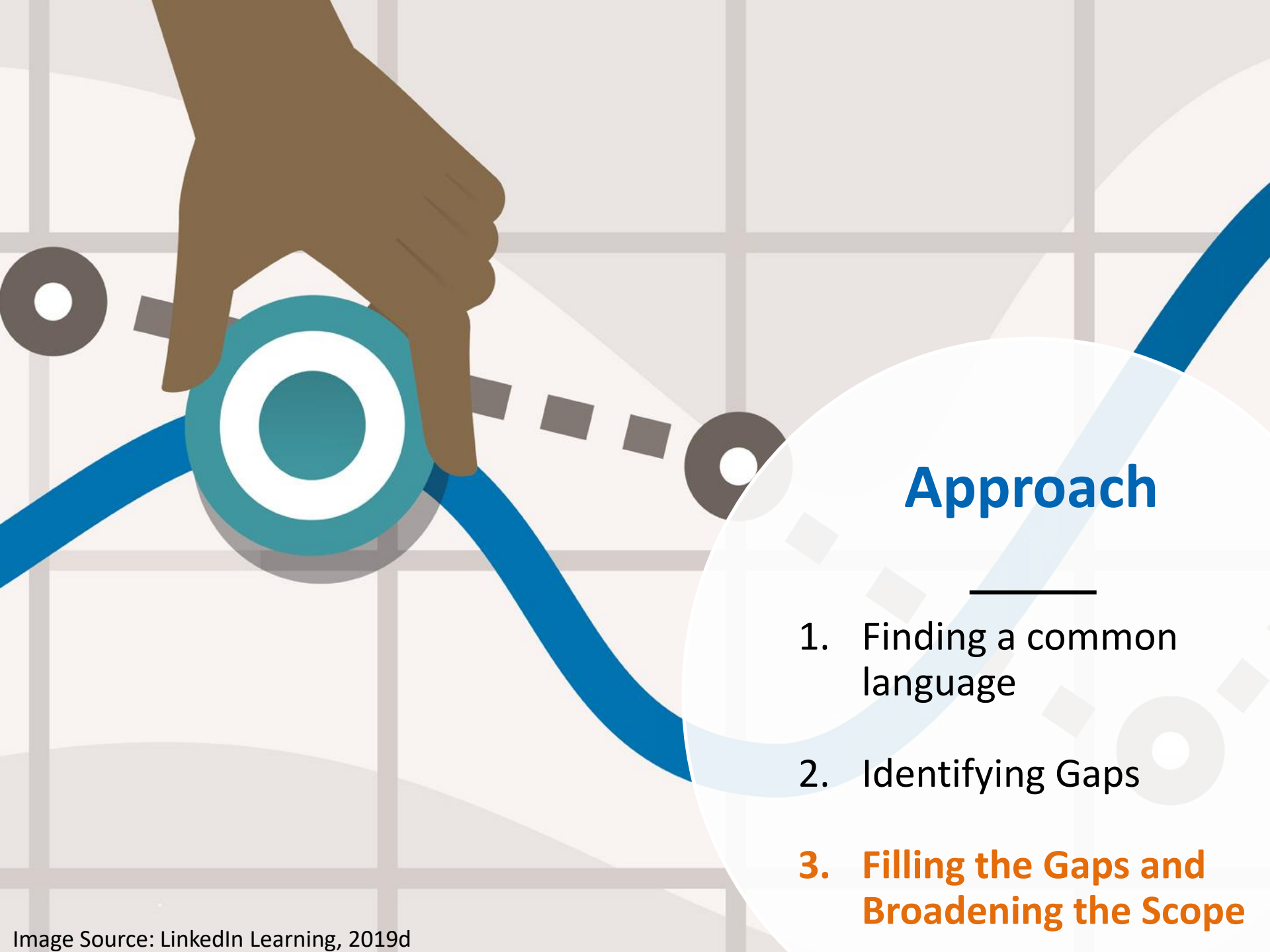
Approach

1. Finding a common language
- 2. Identifying Gaps**
3. Filling the Gaps and Broadening the Scope

Identifying Gaps



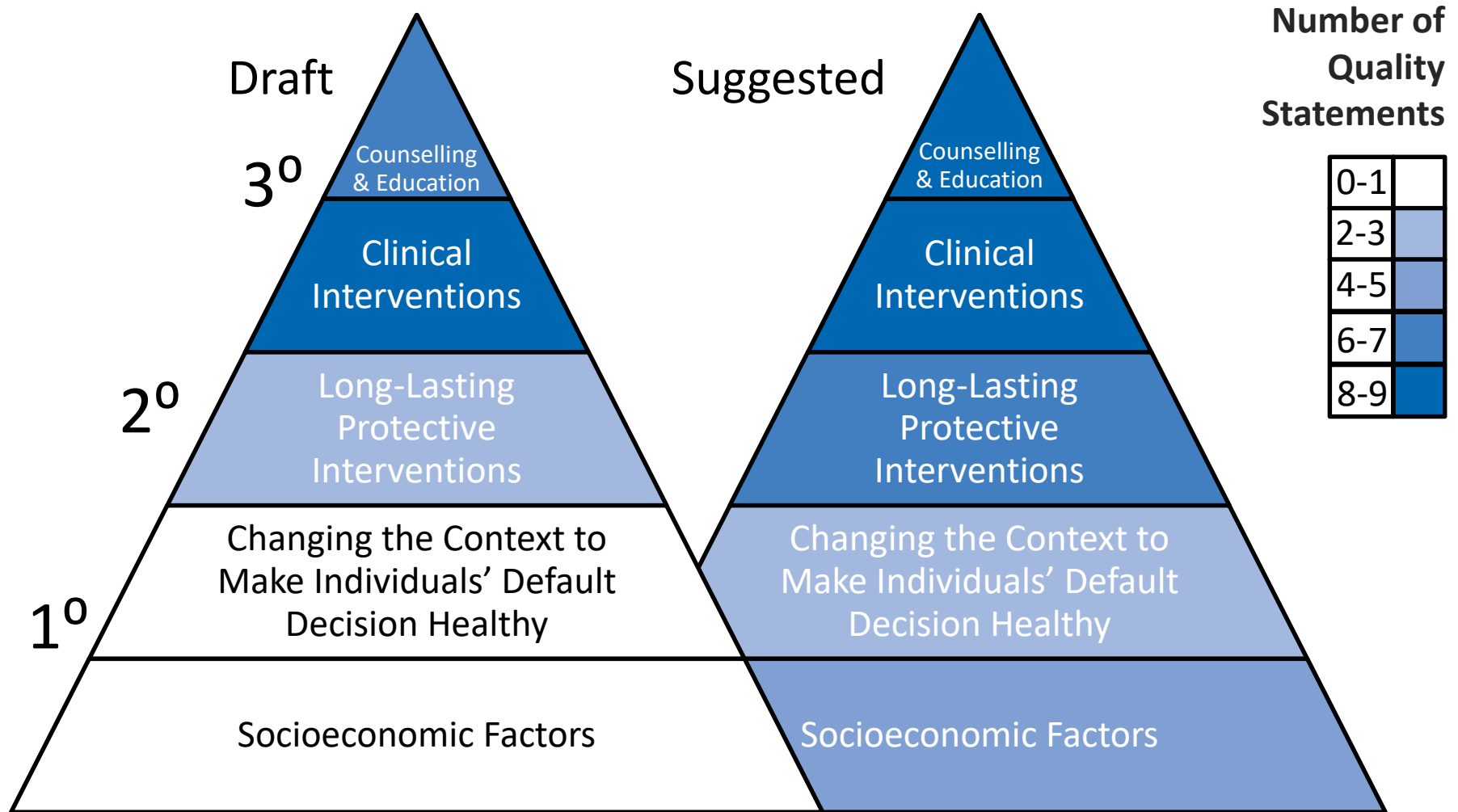
(Figure adapted from: Frieden T., 2010)



Approach

1. Finding a common language
2. Identifying Gaps
3. **Filling the Gaps and Broadening the Scope**

Filling the Gaps & Broadening the Scope



(Figure adapted from: Frieden T., 2010)

Example

- Revised draft smoking cessation quality statement
- Proposed new smoking prevention and protection quality statements



Revised “Promoting Smoking Cessation” Statement

Draft Statement

People with COPD

Motivational interviewing &
Intensive counseling

Supports aligned with readiness
for change

Behavioral support &
pharmacotherapy

Suggested Statement

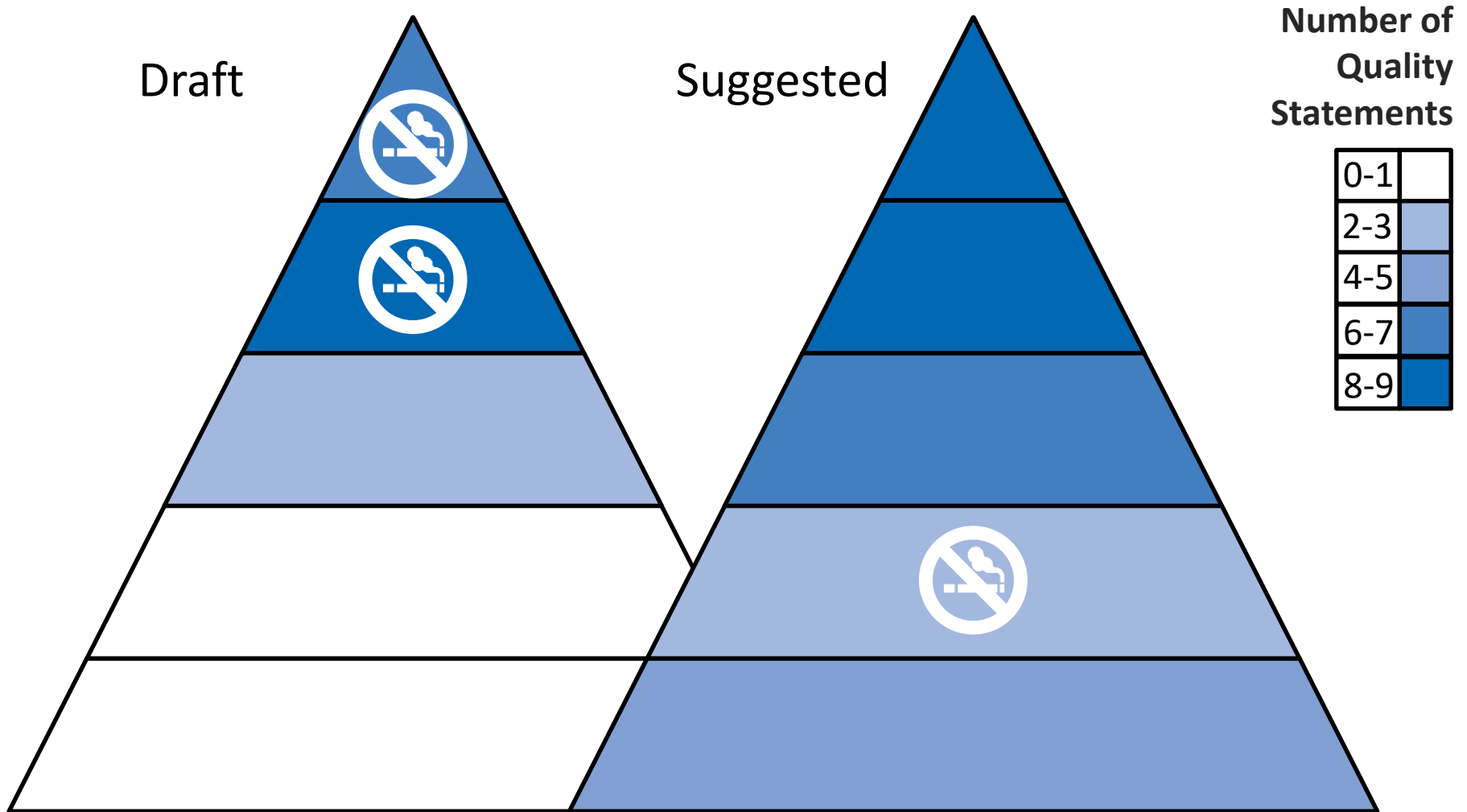
All patients

Brief Contact Intervention

Supports offered regardless of
readiness for change
(“opt-out approach”)

Low- or no-cost behavioral
support & pharmacotherapy

Revised “Promoting Smoking Cessation” Statement



(Figure adapted from: Frieden T., 2010)

An illustration featuring a grey clipboard with a white sheet of paper. On the paper is a pie chart with three segments: a large red one, a medium pink one, and a small purple one. A yellow hand with a white cuff is pointing its index finger at the red segment. Three red four-pointed stars are scattered around the chart. The word 'Results' is written in blue text to the left of the chart, with a horizontal line underneath it. Below this, a bulleted list contains 'Knowledge exchange' and 'Partnership building'.

Results

- Knowledge exchange
- Partnership building

Results

Knowledge Exchange

- Stakeholders interested in pursuing proposed recommendations
- Project information disseminated to other Public Health Units

Partnership Building

- Helped fulfill *Ontario's Patients First Act, 2016*
- Showcased how Region of Peel – Public Health can be an asset to quality care planning

Thank you

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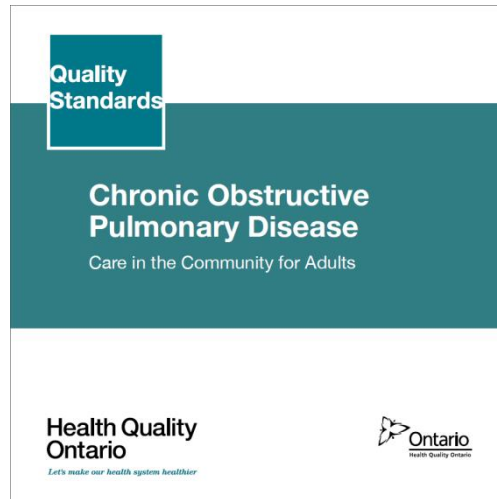
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Reference Slides

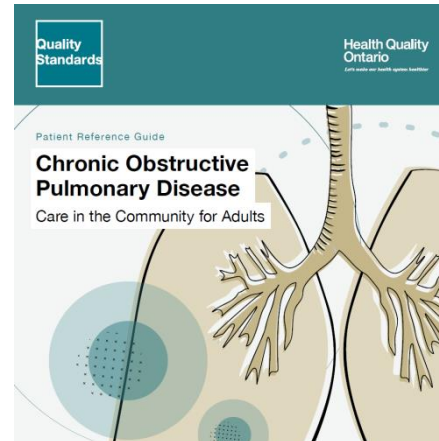


- Quality Standard Components
- Newly Proposed Quality Statements
- Revised Quality Statements
- Revised Smoking Cessation Statement
- Revised Vaccinations Statement

Quality Standard Components



Quality Standard



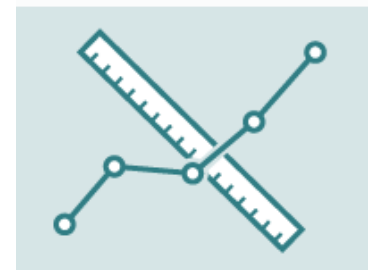
Patient Reference Guide



Recommendations for Adoption



Getting Started Guide



Case for Improvement,
Data Table,
Measurement Guide

Proposed Quality Statements in Brief

QUALITY STATEMENT

Coordination of the Healthcare System

Healthcare settings have a range of licensed nicotine-containing products and stop smoking pharmacotherapies available for no- or low- cost on site for all patients, employees and visitors.

QUALITY STATEMENT

Primary Prevention

People with or without COPD receive tobacco prevention interventions in healthcare settings from a health care provider in order to prevent and reduce smoking initiation.

QUALITY STATEMENT

Smoke-Free Grounds

Healthcare settings (i.e. all community, primary, secondary and tertiary healthcare facilities) including buildings, grounds and vehicles do not allow smoking anywhere on their grounds and remove any areas previously designated as smoking areas.

QUALITY STATEMENT

Provision of Brief Contact Intervention

Healthcare settings and social service agencies provide brief contact intervention (BCI) for all patients/clients through their service providers (i.e. physicians, nurses, pharmacists, allied health care professionals and social services workers).

QUALITY STATEMENT

Smoke-Free Employee Contracts

Healthcare settings have employees (including contract workers and volunteers) sign a contract prohibiting employees from smoking during working hours or when recognisable as an employee.

Proposed Changes to Quality Statement 5: Promoting Smoking Cessation

QUALITY STATEMENT

Coordinated Cessation System

Healthcare settings and providers operate within a coordinated cessation system which allows for smoking cessation best practices to be implemented in all healthcare settings.

Screening for Tobacco Use

All patients (with or without COPD) are asked about their smoking status by their health care provider at every opportunity and those who smoke are offered advice and referred to supports on how to quit smoking regardless of their readiness for change.

Referral to Cessation Services

People who smoke are offered a referral to an evidence-based smoking cessation service that is provided at no- or low- cost to the patient regardless of their readiness for change.

Combined Interventions

People who smoke are offered no- or low- cost behavioural support with pharmacotherapy by an evidence-based smoking cessation service regardless of their readiness for change.

Proposed Changes to Quality Statement 7: Vaccinations

QUALITY STATEMENT

Vaccinations

People with COPD are offered appropriate influenza and pneumococcal vaccinations.

Quality Statement 5: Promoting Smoking Cessation

Health Quality Ontario	Region of Peel – Public Health
<p>People with COPD are asked about their tobacco-smoking status at every opportunity. Those who continue to smoke are offered pharmacological and nonpharmacological smoking cessation interventions.</p> <p>Options include, but are not limited to:</p> <ul style="list-style-type: none"> • Behavioural support • Intensive counselling (≥ 90 minutes per session) • Motivational interviewing • Nicotine replacement therapy products • Pharmacotherapy (e.g., bupropion, varenicline) <p>Smoking cessation interventions offered to a person with COPD should be aligned with the person's readiness for change</p>	<p>The healthcare settings and providers operate within a coordinated cessation system which allows for smoking cessation best practices to be implemented in all healthcare settings.</p> <p>These best practices include:</p> <ul style="list-style-type: none"> • Brief Contact Intervention with every patient • Adoption of the Ottawa Model in all healthcare settings across Ontario • Referral to evidence-based smoking cessation service • Combination of behavioral support and pharmacotherapy • Incorporation of the opt-out approach

Red: Does not Align

Green: Aligns

Yellow: Partially Aligns

Quality Statement 7: Vaccinations

Health Quality Ontario	Region of Peel – Public Health
People with COPD are offered appropriate influenza and pneumococcal vaccinations.	
<p>For People With COPD</p> <p>The flu and some infections, like pneumonia (a lung infection), can make COPD symptoms worse. You should be offered a flu shot every year. You should also be offered vaccines against pneumonia. Your caregivers and family members should also be encouraged to get vaccinated to help protect you.</p>	<p>For People With COPD</p> <p>The flu and some infections, like pneumonia (a lung infection), can make COPD symptoms worse. You should get a flu shot every year. Your caregivers and family members should also be encouraged to get the flu shot every year to help protect you. You should also be offered vaccines against pneumonia.</p>
<p>For Clinicians</p> <p>Ensure people with COPD are offered influenza vaccination annually and pneumococcal vaccinations based on their age and individual risk factors, as outlined in the NACI statements.</p>	<p>For Clinicians</p> <p>Ensure people with COPD are offered influenza vaccination annually and pneumococcal vaccinations based on their age and individual risk factors, as outlined in the NACI statements. <i>For more information on publicly funded vaccines, please consult the Publicly Funded Immunization Schedules for Ontario.</i></p>

Red: Does not Align

Green: Aligns

Yellow: Partially Aligns