

**Presenter's Guide –  
CHOOSING OPPORTUNITIES  
FOR IMPROVEMENT**

**QUALITY IMPROVEMENT**

Welcome to the Residency Program in Quality Improvement.

## LEARNING OBJECTIVES

After engaging in this session, you will be able to:

- **Describe** and evaluate your practice.
- **Identify** perceived opportunities for improvement in your practice.
- **Apply the QI Framework and QA approaches to identify** previously unperceived quality improvement opportunities in your practice.
- Prioritize opportunities for improvement
- **Select** a QI opportunity at the system level to initiate your QI journey.



After this session you will be able to

Describe and evaluate your practice.

You already started this in the Practice Profile pre-work.

You will be able to identify perceived needs in your practice and progress to identify unperceived needs, using insights from your health care team.

You will rank and prioritize all of those opportunities for improvement

And finally, you will have the skills to select and prioritize a QI initiative at the system level, that will be attractive for your entire team. At this early stage of project development you are still working at the system level.

## WHY WE ARE HERE...

Take a moment to visualize a patient (client) who might have been able to receive better care. Consider jotting down his/her name.

Take a moment and think about a patient who might have been able to receive better care.

### *Reflection:*

When choosing an opportunity for improvement, remember that Quality Improvement must be relevant to improving patient outcomes or health care for your community.

## CHOOSING A QI PROJECT

Choosing the right improvement opportunity for your QI project is the crucial first step.

The crucial first step in a QI initiative is choosing the right improvement opportunity – beginning with the system you wish to improve.

Time, thought and analysis to choose the right improvement opportunity is a great investment and sets you up for success.

## 4 STEPS TO CHOOSE A QI PROJECT

1. Describe the reality of your practice.
2. Identify perceived opportunities for improvement.
3. Apply Quality Improvement Framework parameters to identify unperceived needs in your practice.
4. Prioritize and select an area you would like to improve.

There are four progressive steps to choosing an opportunity for improvement for your QI project. Community practitioners become responsible for choosing the quality improvement initiatives that are most relevant to their practice.

The first step to choosing a QI Project is to describe the reality of your practice, using the Practice Profile Tool to look at your practice from many perspectives.

The second step, using the Practice Profile, is to identify perceived opportunities for improvement.

During the third step, apply a quality improvement framework, which are criteria established by experts to define quality to find unperceived needs.

And then finally, during step four, go through a prioritization and selection process to clarify the first opportunity improvement on which to focus.

## 4 STEPS TO CHOOSE A QI PROJECT

- 1. Describe the reality of your practice.**
2. Identify perceived opportunities for improvement.
3. Apply Quality Improvement Framework parameters to identify unperceived needs in your practice.
4. Prioritize and select an area you would like to improve.

Using the Practice Profile, you have described your practice from multiple perspectives: patients, processes for care, and the other health care professionals you work with.

Describing the reality of your practice is a way to demonstrate professional reflection.

## 1. DESCRIBE THE REALITY OF YOUR PRACTICE

You prepared a description of your practice for today's session.

*Ask everyone to pull out their completed Practice Profile.*

## 1. DESCRIBE THE REALITY OF YOUR PRACTICE

### THE 5 P'S OF YOUR PRACTICE.

- P**urpose
- P**atients
- P**rofessionals
- P**rocesses
- P**atterns

The Practice Profile uses the 5 Ps of Practice:

The purpose of your practice

Your patients,

The professionals you work with in your practice and in the community.

The processes you employ,

and the patterns that emerge.

Through the different lenses of The 5 Ps, a complete picture of your practice develops.



## 1. DESCRIBE THE REALITY OF YOUR PRACTICE

### PURPOSE

- Why does your practice exist?

The first P to describe your practice is Purpose –

Why does your practice exist? Another way to think of this is “what would happen if your practice wasn’t there?”

For family physicians, a good reference point in beginning is the four principles of Family Medicine

## 1. DESCRIBE THE REALITY OF YOUR PRACTICE

### PATIENTS

- Age distribution
- Numbers
- Disease indicators
- Most frequent
  - Diagnoses/conditions
  - Referrals
  - “Frequent Flyers”

The second P to describe your practice is Patients. Patients can be identified by :

Their distribution across different age groups,

How many patients you have, and of which gender,

Disease indicators and risk factors, such as obesity or smoking rates,

And why they see you. What are your most frequent diagnoses? What are your most common reasons for referring patients? Who are your frequent fliers – the people who come to your practice the most often?

**1. DESCRIBE THE REALITY OF YOUR PRACTICE**

PATIENTS: Determinants of Health

**“PROGRESS”**

- P**lace of residence/ **P**ets
- R**ace/ethnicity/culture
- O**ccupation
- G**ender
- R**eligion
- E**ducational level
- S**ocio-economic status
- S**ocial capital/social exclusion

Source: Tim Evans and Hilary Brown (Evans T, Brown H. Road traffic crashes: operationalizing equity in the context of health sector reform. *Injury Control and Safety Promotion* 2003;10(1-2): 11–12).

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Another valuable way to describe your patients is to analyze

The determinants of health: summarized with the mnemonic PROGRESS.

PROGRESS stands for their place of residence, including pets in the patients’ household

Your patients races, ethnicities or cultures

Their occupations,

The gender distribution

Religions or spirituality practices

Their levels of education,

The socioeconomic status and

The social capital or social exclusion they have . Using the

## 1. DESCRIBE THE REALITY OF YOUR PRACTICE

### PROFESSIONALS

- Staff
- Interprofessional team

The third P to describe your practice is Professionals .

Who do work with in your immediate practice setting?

Who is your interprofessional team?

And who are the other professionals you may collaborate with?

Keep in mind, these may be professionals in your immediate practice environment, as well as professionals you collaborate with in your community.

## 1. DESCRIBE THE REALITY OF YOUR PRACTICE

### PROCESSES

- Flow charts of routine processes
- Patient cycle time
- Days/hours of operation
- Appointment types
- Appointment duration
- Billing

The fourth P is your practice processes.

Processes are things like routine office processes,

Patient cycle time,

Hours of operation,

Appointment types

Appointment duration, and

Billing

## 1. DESCRIBE THE REALITY OF YOUR PRACTICE

### PATTERNS

- Culture – What do you see as you observe your practice?
  - Is it “service oriented?”
  - Is it a happy place to work?
  - What are the priorities that govern people’s activities?

The fifth P is patterns.

Patterns are things that you see regularly recurring in your practice as you observe it.

It is your practice’s culture, often reflective of the behaviours that you see occurring by those who work in the environment.

## 1. DESCRIBE THE REALITY OF YOUR PRACTICE

Debrief pre-work:

Describe your practice to your table group.

We will take some time to break out into table groups to debrief your practice profiles.

Each of you will describe your current practice to your table group. As you do this, reflect on which one or more of the 5 Ps was most relevant in describing your practice.

*Team consult:*

## 1. DESCRIBE THE REALITY OF YOUR PRACTICE

Who sees primarily geriatric patients?

Who is presented with a lot of psychiatric issues?

Who works with multiple cultures?

Who works with the homeless?

Who has a staff of less than 5?

More than 5?

*Regain attention of entire group.*

*Ask for responses from the entire audience by show of hands:*

Who is seeing primarily geriatric patients?

Who is managing psychiatric issues?

Who is working with multiple cultures?

Who works with the homeless?

What works is a practice with less than 5 staff?

Who works with more?

*Debrief:*



## 4 STEPS TO CHOOSE A QI PROJECT

1. Describe the reality of your practice.
- 2. Identify perceived opportunities for improvement.**
3. Apply Quality Improvement Framework parameters to identify unperceived needs in your practice.
4. Prioritize and select an area you would like to improve.

Now, you can start to identify perceived opportunities for improvement.

## 2. IDENTIFY PERCEIVED OPPORTUNITIES FOR IMPROVEMENT

### PURPOSE

- Identify any Performance Gaps
- Where are you not meeting recognized best practices?
- Is there an opportunity to better meet patient needs?
- e.g. Only 40% of your patients over 55 have done FOBT (not meeting clinical guidelines)

When you think about the Purpose of your practice,

Are there any performance gaps?

Times when you may not be meeting best practices  
or meeting patient needs?

Is there anything specific you could change to improve?

## 2. IDENTIFY PERCEIVED OPPORTUNITIES FOR IMPROVEMENT

### PURPOSE - Link to QA

- Accreditation soon for Primary Care
  - Focus on policies and procedures
  - Indicators/measures driven
  - Tells you where to improve, versus you analyzing your practice and choosing where to improve
- Example:
  - <http://qualitybookoftools.ca/> (free download)



Soon accreditation will be introduced for primary care. Accreditation processes can also provide perceived opportunities for improvement.

Accreditation often focuses on overall policies and procedures.

It is often measures/indicators driven (more about indicators and measures later)

Accreditation can be a driver for improvement. We believe it can provide useful reference information, although overall developing a culture of QI is more sustainable if you to choose where you want to improve, versus reacting to some outside third party's mandate.

An excellent resource for standards driving quality is the Family Practice Book of Tools developed at McMaster by Levitt and Hilts – available as a free download once you register at this website.

## 2. IDENTIFY PERCEIVED OPPORTUNITIES FOR IMPROVEMENT

### PATIENTS

- Identify patients at high risk
- Identify patients without resources (human or financial)
- What will positively impact patients?
  - e.g. patients in need of same day service

20

To identify perceived opportunities for change, reflect and ask:

Are there patients at higher risk?

Do some lack resources?

What change will positively impact patient care?

## 2. IDENTIFY PERCEIVED OPPORTUNITIES FOR IMPROVEMENT

### PROFESSIONALS

- Insufficient clinical patient time
- Excessive time spent coordinating care
- Need for administrative support for clinical time or non-acute care
- Resources needed to manage practice
- Aspect of care challenging or problematic for health care team
  - e.g. professionals not working at full scope

21

When you think about the professionals you work with, are additional (or redeployed) human resources needed to provide better care?

Do people feel they lack clinical time?

Are they pressured with the paper work of coordinating care?

Is more administrative support desired?

Are management resources needed?

Is there a specific patient type or aspect of care which is especially problematic for the health care team?

## 2. IDENTIFY PERCEIVED OPPORTUNITIES FOR IMPROVEMENT

### PROCESSES

- Lack of after-hours coverage
- Lost reports
- Problem prone processes
- Excessive waiting
- What bottlenecks, waste, waits and/or other inefficiencies could be eliminated?
  - e.g. line-ups when receptionist opens window to begin the day.

There may be a perceived opportunity for change if you identify a challenge for providing after hours coverage, lost reports are not infrequent, Other problem prone processes, or excessive waiting?

Can you identify bottlenecks, wait times, or inefficiencies that can be eliminated?

## 2. IDENTIFY PERCEIVED OPPORTUNITIES FOR IMPROVEMENT

### PATTERNS

- Patients on hold while staff carry out personal conversation
- Providers chatting about patients in the halls
- Outside walls papered with signs for patients
- High number of patient complaints about limited phone access
- Staff threatened by drug seeking patients

23



Patterns of practice are what you see. Do you see

A lack of service orientation to patients, when personal interests are placed first.

Do you see casual activities that may jeopardize important policies, such as maintaining patient privacy and confidentiality?

Does every issue generate a piece of paper to the point when all messages get lost?

Are you hearing constant complaints about a particular issue?

Do you see staff feeling threatened with no standard way of responding?

All represent possible improvement opportunities.

## 2. IDENTIFY PERCEIVED OPPORTUNITIES FOR IMPROVEMENT

- Purpose – Only 40% patients have FOBT.
- Patients – Need for same day appointments
- Professional – Working beneath full scope
- Process – Line up waiting to start day
- Pattern – Angry patients in reception area.

The following are examples of opportunities for improvement identified by reviewing purpose, patients, professionals, processes, and patterns.

An example of an opportunity identified from analysis of the practice purpose would be that only 40% of your patients being tested for fecal occult blood..

Patients may be going to walk-ins when in immediate need, but cannot get appointment.

Nursing staff whose main function is to maintain patient flow.

From the beginning, you start behind, because of the line-ups at check-in.

Analysis of practice patterns may reveal inadequate procedures to deal with threatening patients.



## 2. IDENTIFY PERCEIVED OPPORTUNITIES FOR IMPROVEMENT

Identify a perceived opportunity for change in your practice. Discuss at your table.

Use the five Ps of Practice to analyze practice and identify perceived opportunities for improvement.

Discuss identified opportunities with your table group.

*Team consult:*

## 2. IDENTIFY PERCEIVED OPPORTUNITIES FOR IMPROVEMENT

What perceived opportunities for improvement did you identify?

*Regain attention for large group discussion.*

What perceived opportunities for improvement have you identified?

*Debrief: Share examples from 3-4 tables.*

## 4 STEPS TO CHOOSE A QI PROJECT

1. Describe the reality of your practice.
2. Identify perceived opportunities for improvement.
- 3. Apply Quality Improvement Framework parameters to identify unperceived needs in your practice.**
4. Prioritize and select an area you would like to improve.



The third step to choose a QI project is to identify unperceived needs in your practice.

One way to help you uncover an unperceived need is to compare your practice versus criteria defined by the Quality Improvement Framework.

### 3. APPLY QI FRAMEWORK TO IDENTIFY UNPERCEIVED NEEDS

#### THE 6 CRITERIA OF THE QI FRAMEWORK

- Help evaluate how well your practice functions and performs.
- Provide metrics stick to assess your practice.
- Help expose perceived and ***unperceived*** needs.

28

There are six criteria of the Quality Improvement Framework

To assess performance and functionality.

You use external metrics to evaluate your practice.

This will help uncover unperceived needs.

### 3. APPLY QI FRAMEWORK TO IDENTIFY UNPERCEIVED NEEDS

#### THE 6 CRITERIA OF THE QI FRAMEWORK

**P**atient-centered  
**E**fficient  
**E**quitable  
**E**ffective  
**T**imely and accessible  
**S**afe

**“PE<sup>3</sup>TS”**

29  
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The six criteria of the Quality Improvement Framework complete the mnemonic PE<sup>3</sup>TS - six ways to measure quality.

Patient centeredness comes first.

Efficient,

Equitable which means that all your patient population has appropriate access to care.

Effective, which means that you're meeting what is considered practical, evidence-based best practices.

Timely and accessible, which means the right care to the right patient, in the right place, at the right time, by the right provider, and

Safe, which is first do no harm. No one should be harmed by the health care they receive.

### 3. APPLY QI FRAMEWORK TO IDENTIFY UNPERCEIVED NEEDS

#### Once you have applied PE<sup>3</sup>TS:

- Recognize an unperceived opportunity for improvement and then set a goal.
- Reveal a system that needs to be improved.

Using the PE<sup>3</sup>TS criteria of the QI Framework is a way to assess whether your practice is meeting quality expectations..

Having applied PE<sup>3</sup>TS you may uncover an previously unperceived opportunity of improvement –

A system to be improved.

### 3. APPLY QI FRAMEWORK TO IDENTIFY UNPERCEIVED NEEDS

Now apply “PE<sup>3</sup>TS” to your practice.

At your table groups, apply PE<sup>3</sup>TS criteria of the Quality Improvement Framework to uncover previously unperceived opportunities for improvement in your practice.

Discuss at your table.

*Team consult:*

### 3. APPLY QI FRAMEWORK TO IDENTIFY UNPERCEIVED NEEDS

Have you now  
identified previously  
unperceived problems  
in your practice?

*Regain attention of group.*

By applying PE<sup>3</sup>TS have you been able to identify previously unperceived opportunities.

*Debrief: Have 3-4 tables share examples.*



## 4 STEPS TO CHOOSE A QI PROJECT

1. Describe the reality of your practice.
2. Identify perceived opportunities for improvement.
3. Apply Quality Improvement Framework parameters to identify unperceived needs in your practice.
- 4. Prioritize and select an area you would like to improve.**

The fourth step in choosing a Quality Improvement project is to prioritize and select the opportunity for improvement on which you will focus first.

#### 4. PRIORITIZE AND SELECT YOUR QI PROJECT

Look for opportunities that will impact positively on the greatest need in your practice.

When you prioritize and select your QI project, select an opportunity which will positively impact on the greatest need in your practice AND....

#### 4. PRIORITIZE AND SELECT YOUR QI PROJECT

- Assess if the project is feasible.
- Set realistic time frames.

An opportunity for improvement that is feasible and realistically implementable.

## 4. PRIORITIZE AND SELECT YOUR QI PROJECT

### RANK IMPACT & FEASIBILITY

#### Impact (High/Low)

- What makes patient care more effective?  
...and...
- What makes it easier or more efficient for me as the health care provider, and for my team?

#### Feasibility (Easy/Hard)

- A more feasible project requires no new resources or extensive planning.

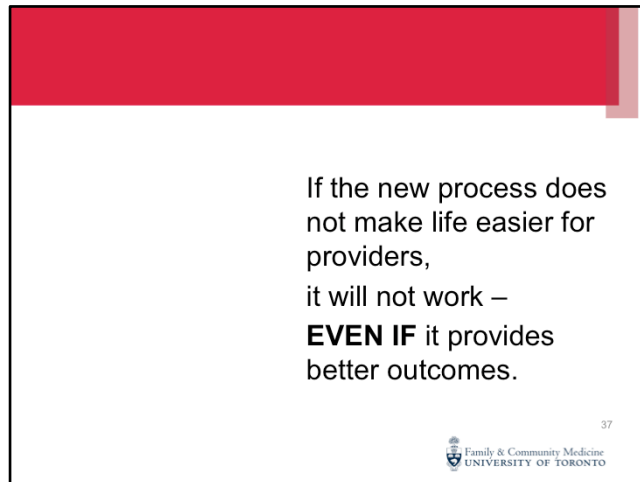
36

To prioritize and select your QI project, rank the impact and feasibility.

Rank impact high to low. Assess what makes patient care more effective

or more efficient for the health care providers.

Rank feasibility easy to hard. A more feasible project requires no new resources or extensive planning.



If the new process does not make life easier for providers,  
it will not work –  
**EVEN IF** it provides better outcomes.

37

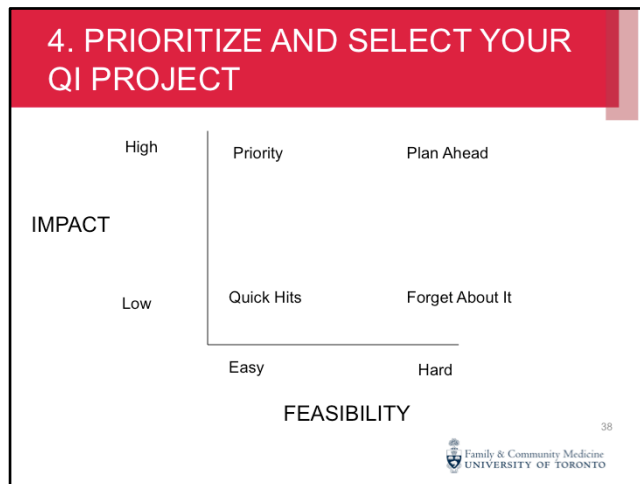
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A key point to remember for successful Quality Improvement:

“If the new process or change does not make life easier for health care providers,

it will not work,

**EVEN IF** it provides better outcomes.”



To prioritize and select your QI project, assess

impact and

feasibility

creating

A 2 by 2 matrix.

Quick Hits are easy to do, but have low impact.

Priority projects are feasible and high impact.

Improvement opportunities with high impact but are difficult and not very feasible may take more planning and multiple steps for implementation.

Initiatives which are quite hard to accomplish and have low impact.- just forget about them.

## PRIORITIZING OPPORTUNITIES FOR IMPROVEMENT

### CASE STUDY – Opportunities for Improvement

- Equity – improve outcomes for marginalized populations
- Access – house bound frail elderly
- Effectiveness – cancer screening rates

Let's do a case study of a practice looking at some opportunities for improvement. We will follow this case study throughout this program.

After brainstorming amongst practice members and reviewing the QI framework, the following ideas were floated as to where people would like to focus their improvement efforts. Their list included

Focusing on improving care to their marginalized patients,

Housebound, frail elderly, and

Improving cancer screening rates.

## PRIORITIZING OPPORTUNITIES FOR IMPROVEMENT

### CASE STUDY – Opportunities for Improvement

- Efficiency – improve continuity of care
- Safety – medication reconciliation
- Patient centeredness – institutional versus home death

Other suggestions are

Improving the continuity of care, to reduce their patients going elsewhere,

Reducing medication errors,

Improving the rates of patients dying at home.



## PRIORITIZING OPPORTUNITIES FOR IMPROVEMENT

### CASE STUDY – Opportunities for Improvement

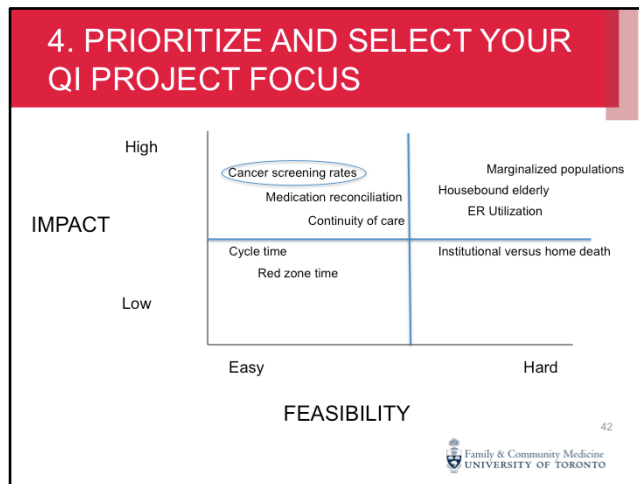
- Cycle time – reduce time in unit during appointment
- Red zone time – increase percentage of time spent with provider
- Emergency visits – reduce utilization for chronic diseases

Finally, other ideas included

Reducing the time patients spend in the office at their appointments,

Increasing the percentage of time that patients spend with their providers, and

Reducing ER visits for those with chronic diseases.



The practice then ranks their suggestions on the feasibility/impact matrix. They determined that

Cycle and red zone times could be improved, with variable impact,

Cancer screening and reducing medication errors would have greater impact and still be reasonably feasible. Improving continuity of care was believed to be more difficult.

Reducing ER utilization and improving care for marginalized populations and the home bound elderly while impactful, would require significant planning.

Improving the rate of those dying at home would also require reorganizing resources, with uncertain impact.

Finally the consensus of the group was to look to improve cancer screening rates.

#### 4. PRIORITIZE AND SELECT YOUR QI PROJECT

Looking at your own practice, prioritize perceived and unperceived opportunities for improvement and select one to work on.

Looking at your own practice, and reviewing perceived and unperceived opportunities for improvement, use the impact/ feasibility matrix to prioritize the opportunities and select a QI initiative to focus on first.

Selecting the opportunity is important. If you choose a wrong opportunity, you may spend tons of energy going down the wrong road. Thoughtful time spent up front is well spent as you start a QI project.

In your table groups, assess and place opportunities for improvement on the impact/ feasibility matrix, prioritize and select one project to focus on. Discuss at your table.

*Team consult:*

## 4. PRIORITIZE AND SELECT YOUR QI PROJECT

Have you each selected an opportunity for improvement for your QI project?

*Regain attention of the group.*

*Debrief: Have 3-4 tables share their prioritized QI initiative.*

## SO, NOW YOU KNOW:

**Describe and evaluate your practice.  
Identify perceived opportunities for improvement in your practice.  
Apply the QI Framework and QA approaches to identify previously unperceived quality improvement opportunities in your practice.  
Prioritize opportunities for improvement  
Select a QI opportunity at the system level to initiate your QI journey.**

45



Having completed the Module for Choosing an Opportunity for Improvement, you now know how to:

Describe and evaluate your practice,

Identify perceived and previously unperceived quality improvement opportunities in your practice, and

Select and prioritize a QI project to initiate.

QUESTIONS?

46

## ACKNOWLEDGEMENTS AND REFERENCES

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