

WELCOME

Board engagement event



Land Acknowledgement

OVERVIEW

CWC PCN Board Governance

Our Board

SERVES AS THE CWC PCN'S GOVERNING BODY

- **Board members:**
 - Set the **strategic direction** of the PCN, in accordance with Alberta Health expectations and policies
 - Work with the Executive Director to **review and evaluate programs and services**, ensuring they meet the needs of physicians and their patients



How many members are on the Board?

- **The current Board is composed of:**
 - Nine physician members
 - One public member (External Director)
- **Actively recruiting:**
 - Up to two additional public members



Why join the Board?

BE PART OF A GREAT TEAM

Board responsibilities

**Strategic direction
and business plan
alignment**

**Monitor and evaluate
programs and services**

**Appoint and evaluate
Executive Director and
Medical Director**

**Compliance with laws
and regulations**

**Monitor and evaluate
financial
performance**

**Collaborate with
Calgary Zone**

Roles

OFFICERS AND SUBCOMMITTEES

Officer roles

- Chair
- Vice-Chair
- Past-Chair
- Treasurer

Four subcommittees

- Finance Audit & Risk
- Board Policy & Human Resources
- Membership & External Relations
- Board Development



Board subcommittees

Board Development Committee

- Sources training opportunities
- Supports the facilitation of an annual Board self-evaluation
- Coordinates strategic retreats



Board subcommittees

Board Policy & Human Resources Committee

- Provides policy-relevant guidance
- Conducts annual performance reviews and objective setting of the:
 - Executive Director
 - Medical Director



Board subcommittees

Finance Audit & Risk Committee

- Oversight of financial planning, reporting, and external audit
- Monitoring internal financial controls
- Risk management



Board subcommittees

Membership & External Relations Committee

- Oversight of engagement and communication with members
- Review CME & PD program
- Oversight of Board recruitment and AGM activities

Board member qualifications and expectations

- Membership with the CWC PCN
- Able to build trusting and collaborative relationships with fellow Board members and senior staff
- Engage fully and make positive and constructive contributions in meetings
- Prepare for and attend meetings

How we support you

- Onboarding support
 - Orientation for new members
 - Board Orientation Guide and Policy Manual provided
- Learning and development opportunities
- Continuous support from PCN staff as needed





Contact us



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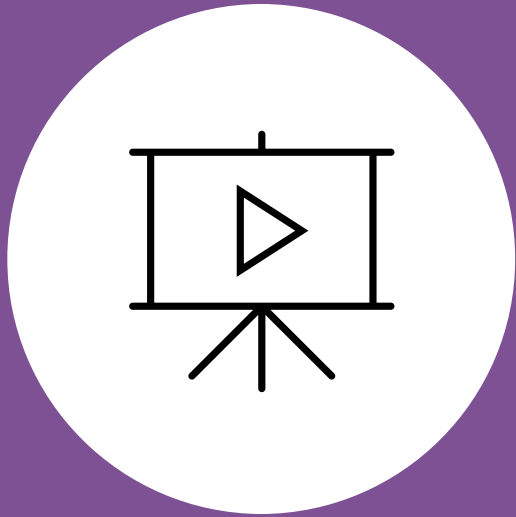


Dr. Vince Vong
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Thank you

VISIT SUBCOMMITTEE STATIONS



CPSA video

THE WHAT WITH DR. SAM LOU



PPIP and QI support

FROM THE CWC PCN



Information and resources

- PL and PMHCs
- Information sessions
- PPIP one-pager
- Project examples
- Action plan examples
- Examiner articles
- Dedicated website page

INTERNAL SUPPORT

ALL MEMBERSHIP TYPES

- Panel Support Program (PSP)
- Discovery Reports
- Facilitation workshops

ENHANCED/COMPREHENSIVE

- Panel reports, TNA reports
- PMH team members, QI goals
- Project documentation through Monday.com

EXTERNAL SUPPORT

ALL MEMBERSHIP TYPES

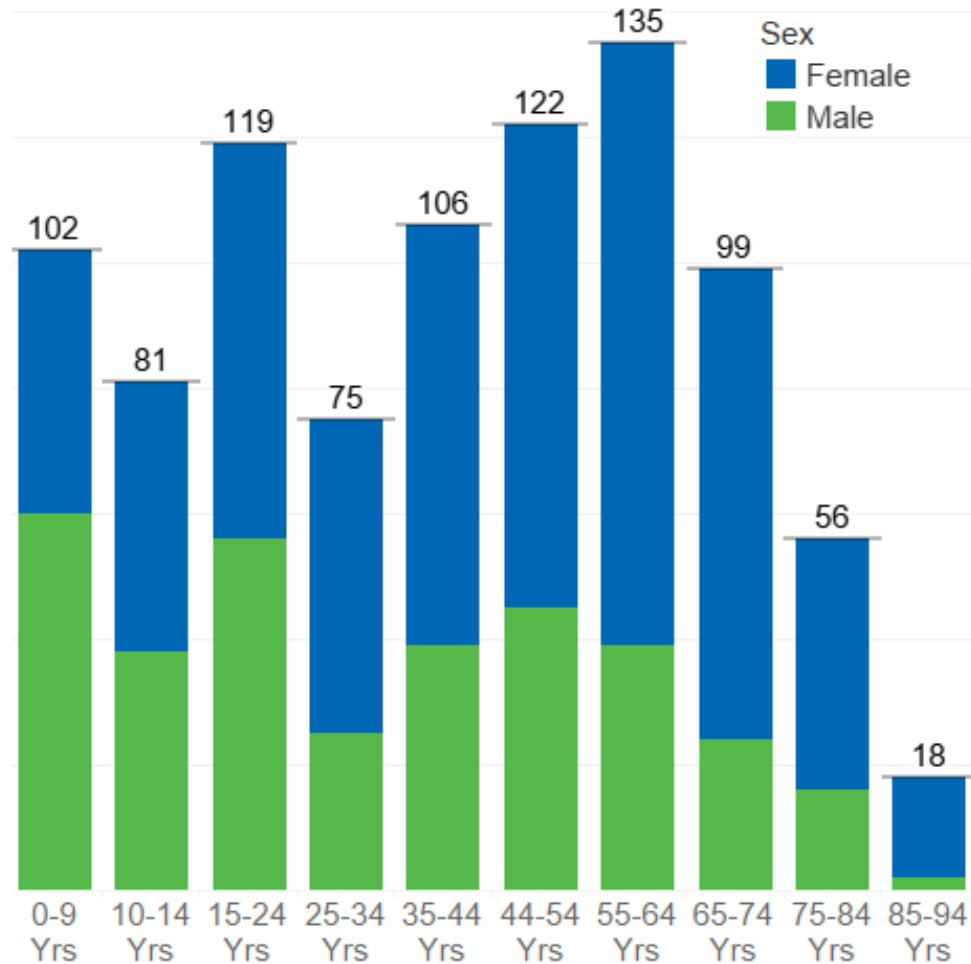
- HQCA Panel Reports
- HQCA Patient Experience Survey
- CPSA MD Snapshot Report
- CPSA's self-directed tools, sample projects
- MCC 360
- AMA ACTT Change Packages
 - e.g., opioid, H2H2H, etc.
- CME events (e.g., Well Doc Alberta)



Dr. Lisa Stevenson

QI GOAL: DIABETIC PATIENT
SUPPORT

Patient panel by age and sex



Practice demographics

- 2023 Panel Size: **913** patients
- Original diabetes patient list (*Type 1, 2, pre-diabetes*): **87**
- Narrowed focus: Patients with Type 1 or 2 diabetes: **55**

Current project

Optimizing care for patient with diabetes:

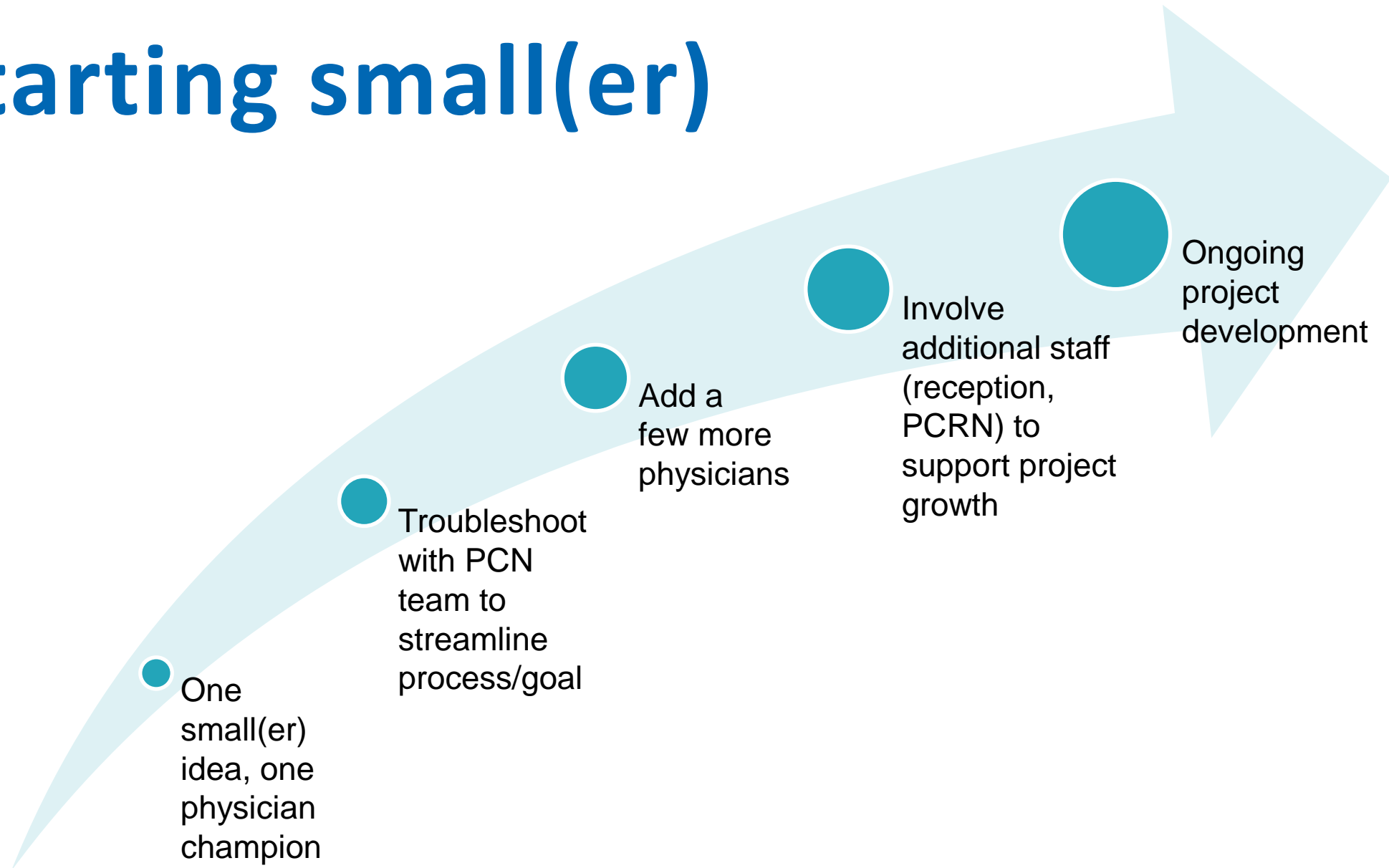
Improve the number of patients with Type 2 Diabetes who have had A1c measure recorded in the last six months to 80 per cent by September 2023



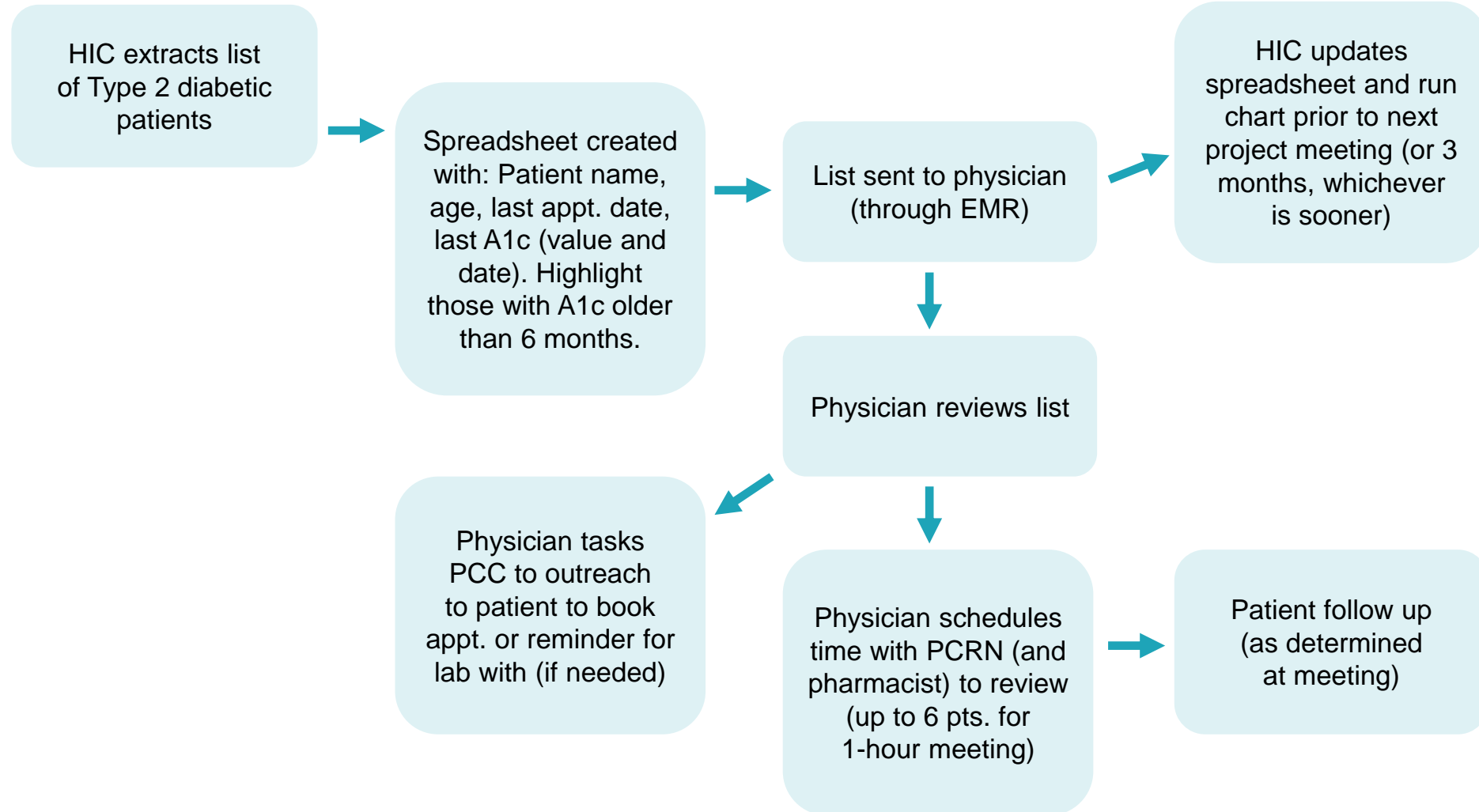
Getting here

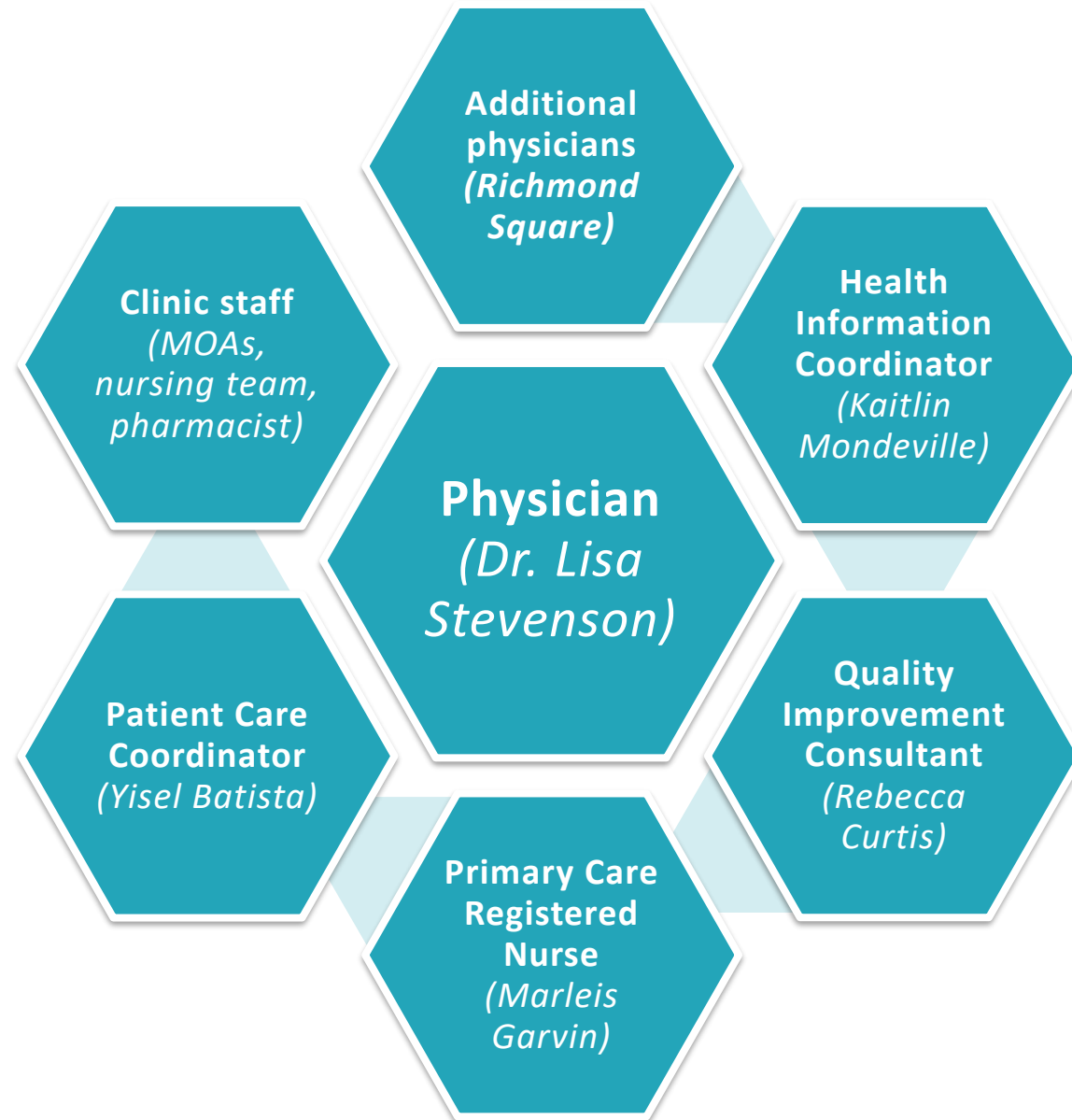
- Idea for QI goal: Improving care for patients with diabetes
- Goal grew to be too big and complex
- **Restart:** Goal broken down to more manageable scope with PCN support

Starting small(er)



Diabetic A1c process







Documenting the project

MONDAY.COM + MYL3P

PROJECT: Diabetes 2

<input type="checkbox"/>	Item		Person	Task Status	Files	Start Date - Goal
<input type="checkbox"/>	BARRIERS: Time, patient response, lab availability	+	KM	Ongoing		Apr 14
<input type="checkbox"/>	MITIGATION: provide lab requisition, automate lab remin...	+	KM	Ongoing		Apr 14
<input type="checkbox"/>	STRATEGIES FOR SUCCESS: Provide positive feedback ...	+	KM	Ongoing		Apr 14
<input type="checkbox"/>	PROJECT REVIEW IN: Meeting again in 2 months	+	KM	Ongoing		Jun 2
<input type="checkbox"/>	STEP: Project idea initiated as part of EPIQ workshop	+	KM	Done		Mar 17
<input type="checkbox"/>	STEP: HIC pulls list of Type 2 diabetics with last A1C	1	KM	Done		Apr 13
<input type="checkbox"/>	STEP: Meet with clinic physicians to discuss project and ...	+	KM	Done		Apr 14
<input type="checkbox"/>	STEP: PCRN and Dr meet to discuss patients	1	MG	Ongoing		Apr 14
<input type="checkbox"/>	STEP: PCC outreach patients as identified by Dr	1		Ongoing		Apr 14
<input type="checkbox"/>	STEP: HIC to update list of patients due and run chart ah...	+	KM	In progress		Jun 1
<input type="checkbox"/>	STEP: Team meeting to discuss progress and process up...	+	KM	In progress		Jun 2
<input type="checkbox"/>	ACTION: ongoing	+	KM	In progress		Apr 14

MyL3P

0%  100%

3. Create Your Learning Plan

Identify and list below your goals and objectives (2 or 3). This will help you identify specific outcomes and develop an action plan to complete your cycle

Reflect on how specific, measurable, attainable, relevant and timely (SMART) your goals and objectives are

What next?

- Spread streamlined process to additional physicians
- Refine goal part two: “Save the Toes” project
- Build on goal once well-established and underway





Measuring our progress

- **Current goal:**
 - Percentage of patients with Type 2 Diabetes who have an A1c measurement in the last six months
- **Future goal(s):**
 - Percentage of eligible diabetic patients seen for foot exams in the last year

Key takeaways

RECIPE FOR SUCCESS

**Have a project
physician champion**

**Start small, keep it
simple**

**Meet regularly to
maintain progress**

**Gradually add more
physicians to
streamlined process**

**Don't be afraid to
scale back or
RESTART**

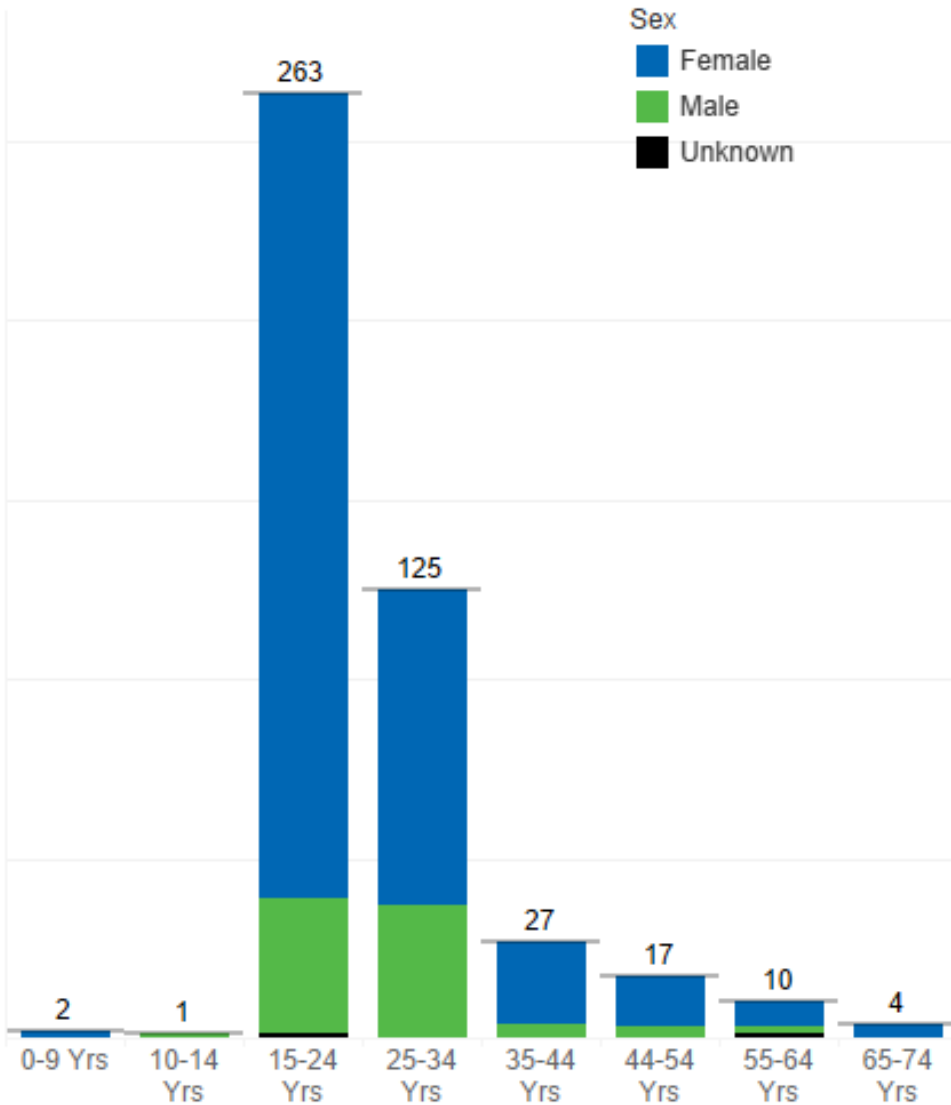
**Use external
motivators (PPIP)**



Dr. Naomi Rittberg

QI GOAL: IUD PATIENT SURVEY

Patient panel by age and sex



Practice demographics

- Patients:
 - Staff, students, and faculty at MRU
 - 2023 Panel Size: 449 patients
- Primarily students (Sept. - May)
- High volume of contraception education and support

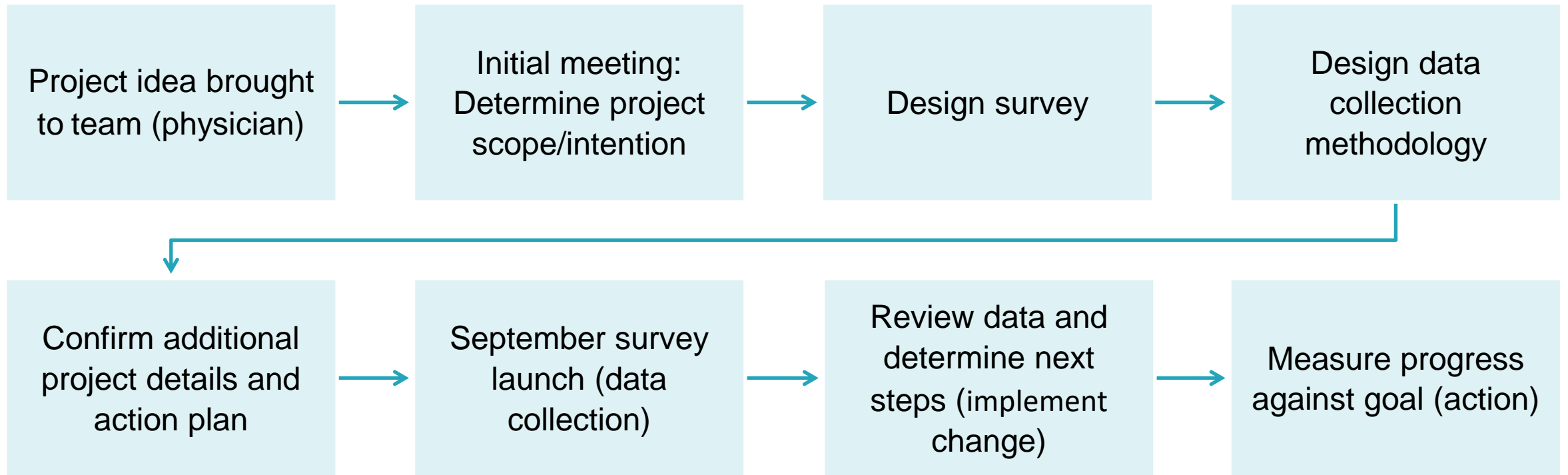
Project idea

Develop a patient survey to anonymously gather feedback on patient experience at a six-week follow-up after IUD insertion

“My goal is to improve patient experience. I'm really hoping we can build a survey that . . . provides useful information so I **can review and adjust my practice to improve patient care.**”

Dr. Naomi Rittberg

Overall process





Survey development

THE SURVEY

Dr. Rittberg Patient Experience: IUD Insertion

Patient Experience Feedback - IUD Insertion

You've recently had a 6-week follow-up appointment with Dr. Rittberg. IUD insertions can be nerve-wracking and uncomfortable. We are asking you to participate in this voluntary survey to better understand what your experience was like to help us improve patient experience with IUD insertions in the future. Your responses will remain anonymous. Thank you for participating in this survey.

1. To the best of your knowledge, please indicate the day of your menstrual cycle on the day of your IUD insertion:

- Phase One: Menstrual Phase - Days 1 to 5
- Phase Two: Follicular Phase - Days 6 to 11
- Phase Three: Ovulatory Phase - Days 12 to 16
- Phase Four: Luteal Phase - Days 17-28
- I have irregular periods and cannot track my cycle
- I do not know
- Other - Write In

2. Please select the option that best reflects your experience with child birth:

- I have never given birth
- I previously have had a non-vaginal delivery
- I previously have had a vaginal delivery
- I have had both non-vaginal and vaginal deliveries

3. Have you previously experienced especially painful periods (dysmenorrhea)?

- Yes
- No

Survey development

AREAS OF INTEREST

Previous childbirth

**Period/cycle
information**

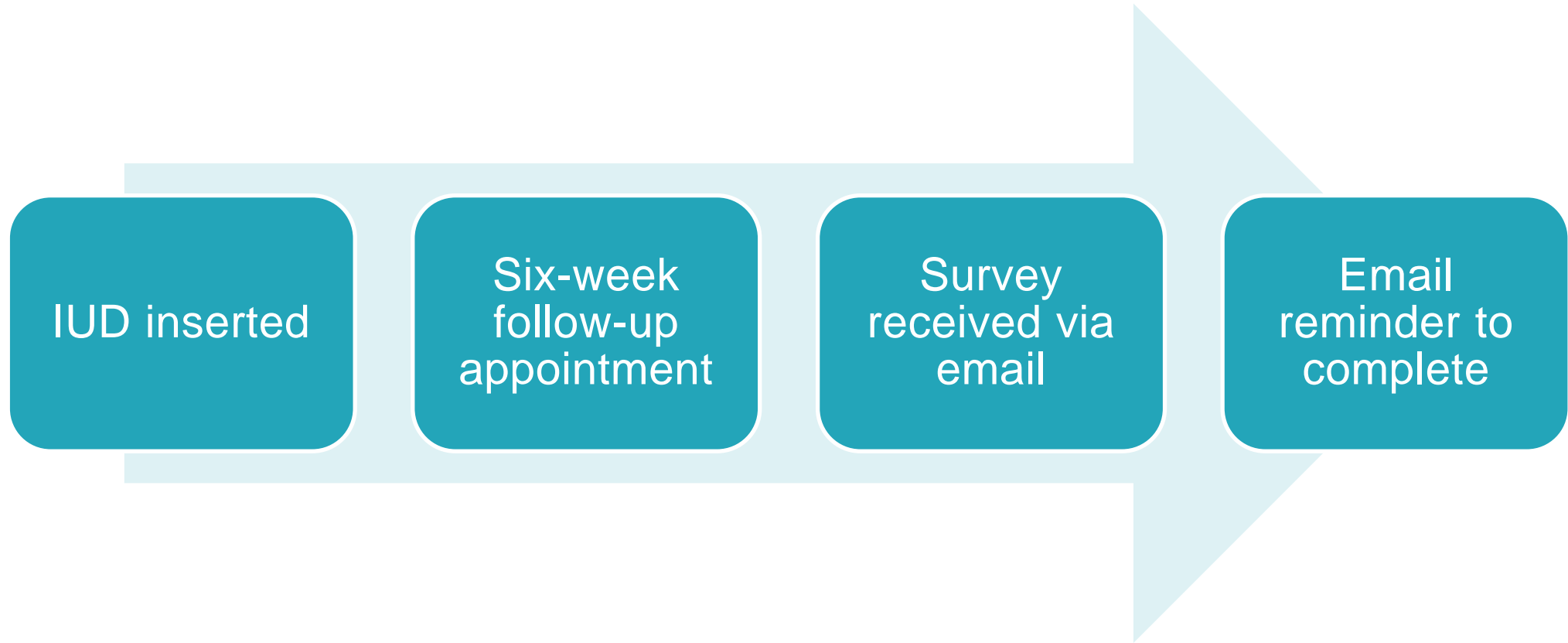
Birth control history

**Appointment
preparation/education
for procedure**

Overall satisfaction

**Recommendation of
physician/process**

Patient process



Documenting the project

PPIP ACTION PLAN

PROJECT: Individual Physician goals

<input type="checkbox"/>	Item		Person	Task Status
<input type="checkbox"/>	PROJECT STATUS: Create a 6 week follow up survey for female patients who have had an IUD inserted			In Progress
<input type="checkbox"/>	RUN CHART: Attached - process and outcome		BC	In Progress
<input type="checkbox"/>	GOAL: Collect feedback from patients following their IUD insertion (6 wk follow up) starting in september; r...		RC +2	In Progress
<input type="checkbox"/>	PLAN: Generate a survey to gather patient experience and satisfaction at the 6 week IUD appointment		RC +2	Done
<input type="checkbox"/>	RESOURCES: Dr. Rittberg, EMR, HIC to pull list of appointment types, various literature for informing the sur...		RC +3	Done
<input type="checkbox"/>	BARRIERS: Pts not attending their follow up, pts not completing the survey, appts happen infrequently so p...		RC +2	Done
<input type="checkbox"/>	MITIGATION: Follow up email for completing the survey, feed information back to the team on success and ...		RC +2	In Progress
<input type="checkbox"/>	PROJECT REVIEW IN: Ongoing, assess survey completion rate after 6 months		RC +2	In Progress
<input type="checkbox"/>	STRATEGIES FOR SUCCES: Provide updates to the team, continuous feedback on report back, track in run ...		RC +2	Done
<input type="checkbox"/>	STEP: Meet with Dr. Rittberg to establish next steps / intention for IUD Pt exp survey		RC +2	Done
<input type="checkbox"/>	STEP: Dr. Rittberg to share with Kayla list of areas/questions to inform the survey			Done
<input type="checkbox"/>	STEP: Kayla to review details with Kathleen before proceeding			Done
<input type="checkbox"/>	STEP: Kayla to create survey using Dr. Rittberg's list of areas/questions		KC	Done

Monday.com-PPIP alignment

PROMPT (for monday.com)	Details / explanation	PPIP QUESTION from action plan requirements	FULL EXAMPLE:
PROJECT STATUS:	Enter general project title as the main item under a CDM heading This item is where the 'overall' status will be tracked	Project record keeping (PPIP action plan, generic)	PROJECT: Diabetic patients with heart failure <i>(note: under the PROJECT: Diabetes grouping)</i>
RUN CHART:	At the top of all projects, have run chart for easy access for any team members looking to find it.	11. How will achieving the goal be identified or measured? <i>(also included below under 'action')</i>	RUN CHART: see file attachment for progress of plan
GOAL:	Indicate a SMART goal for the project. Smart goals are: specific, measurable, attainable, relevant/realistic and timely	2. What is your SMART goal?	GOAL: All patients with diabetes and HF to have an appt with RN within the last 12 months by August 2023
OPPORTUNITY/GAP:	Address intention of goal	1. What is the opportunity and/or gap?	OPPORTUNITY/ GAP: Provide education to patients with diabetes/HF from the RN
OTHERS TO INVOLVE:	Indicate any PCN or clinic team members who will need to be included in the project plan development or updated on the plan.	4. Who will help implement the change and how will they need help?	OTHERS TO INVOLVE: RN, HIC, PCC, Physician, MOAs (informed only)
ROOT CAUSE:	What is the baseline issue that is contributing to the opportunity/gap being present?	5. How will you identify the root causes of the issue?	ROOT CAUSE: Pts unaware of available resources / physicians don't have time to review in current appointment system / ability to revisit and ask questions following being informed

What next?

- Launch survey and data collection **(September 2023)**
- Utilize data provided to adjust physician practice (*implement practice change, PPIP*)
 - Facilitation of results with team
 - Determine measurable goal and plan
- Continue to collect data from patients to see if goal has been reached (ongoing)





Measuring our progress

- **Process:**
 - # surveys sent to patients
 - # surveys completed by patients
- **Outcome(s):**
 - Quantitative and qualitative assessment from survey
 - Develop goal reflecting survey results

Potential changes – results dependent

1.

Opportunity: *Improve patient preparedness prior to procedure*

Offer additional prep appointment with **PCRN** to support patient education

2.

Opportunity: *Improve patient education prior to procedure*

Develop and/or distribute educational resources for patient

3.

Opportunity: *Improve pain mitigation for patient*

Physician to adjust clinical practice and pain management techniques for pre-procedure intervention

THANK YOU!