

Date: November 22, 2023

To: CEOs, executive directors, and quality improvement leads in hospitals, long-term care homes, and interprofessional primary care organizations

From: Dr. David Kaplan, Vice President, Quality, Clinical Institutes and Quality Programs, Ontario Health

Re: Launch of the 2024/25 Quality Improvement Plan program cycle

Dear colleagues,

I am writing to announce the launch of the Quality Improvement Plan (QIP) program cycle for 2024/25.

We recognize that it continues to be a challenging time for the health system. We continue to experience unprecedented health human resource challenges while striving to provide high-quality care and access to those who need it. We have taken these challenges into account when developing the program cycle for the upcoming year.

This year's QIP program requirements align with system priorities to support quality care in Ontario. Specifically, the priority issues and indicators were selected with Ontario Health, Ministry of Health, and Ministry of Long-Term Care priorities in mind and with input from partners in our consultation process. The QIP priorities align with those established in service accountability agreements (SAAs), and the two are complementary tools for accountability and quality improvement. SAAs establish the performance standard and set minimum expectations, while QIPs enable health service organizations to set stretch targets and test innovative changes while building a culture of continuous quality improvement. Where there are common indicators, the decision to include them for consideration in the QIP is to support alignment of system priorities, reduce indicator burden, and provide organizations with an opportunity to publicly share quality improvement activities and targets through the QIP, as a complement to ongoing work in fulfilling performance expectations.

The 2024/25 QIP priority issues are:

1. Access and flow
2. Equity
3. Experience
4. Safety

Important changes to the 2024/25 QIP program are a shift from priority indicators to a focus on four priority issues and a shift to a suite of optional indicators associated with those priority issues. Focusing on system-level priority issues rather than priority indicators supports health service organizations with more flexibility and options to align their quality improvement activities to high-priority areas where quality gaps exist. The indicators included in the matrix for

each priority issue are starting points – organizations may consider including these indicators in their QIP but are not required to do so. As always, organizations may also choose to add custom indicators aimed at improving issues that are important to their communities. Other changes to the QIP program are highlighted in the *Appendix*.

At Ontario Health, we are committed to driving improved and equitable outcomes across the province. We have included new equity indicators aimed at improving equity, diversity, and inclusion and addressing interpersonal and systemic racism, which contributes to disparities in services. In the narrative component of the QIP, we encourage organizations to share achievements and innovations in reducing disparities in services related to access, equity, experience, and safety.

[Ontario Health Teams](#) continue to drive improvement of population health outcomes across the full continuum of care, with an emphasis on equity-based and culturally appropriate approaches to improve outcomes and reduce health disparities. Organizations that submit a QIP may also consider highlighting collaborative work with other health service organizations or within Ontario Health Teams (for those who are part of an OHT) in the new narrative section **Population Health Approach** and including custom indicators in the workplan.

As we renew our collective commitment to quality, the QIP is an enabling tool for organizations to share quality improvement actions and targets with the people in Ontario. We encourage organizations to post their QIP on their websites, and we look forward to receiving your organization's 2024/25 QIP by April 1, 2024.

We are pleased to work with you once again to improve care for the people of Ontario. Please email QIP@OntarioHealth.ca if you have any questions. As always, the team is here to support you.

Regards,



Dr. David M. Kaplan MD, MSc, CCFP, FCFP
Vice-President, Quality
Clinical Institutes and Quality Programs
Ontario Health

c.c.: Renee Mahalanobis, Ministry of Health
Susan deRyk, Ontario Health
Brian Ktytor, Ontario Health
Anna Greenberg, Ontario Health
Judy Linton, Ontario Health
Chris Simpson, Ontario Health

Appendix

Key Updates to the QIP Program for 2024/25

Changes to the QIP Workplan

We have made several changes to the workplan and indicators since last year.

Prepopulated current performance data

More fields will be prepopulated in *QIP Navigator*; current performance data will be prepopulated when administrative data are available.

Optional indicators

Under each priority issue, there will be a suite of optional indicators, which health service organizations may consider including in their QIP. As always, organizations may also choose to add custom indicators that are aimed at improving issues that are important to their communities.

New for 2024/25 – Equity indicators

In alignment with Service Accountability Agreements, the Black Health Plan, and with Ontario Health's 2024/25 focus on Equity as a priority issue, organizations may consider including the optional indicator ***Percentage of staff (executive-level, management, or all) who have completed relevant equity, diversity, inclusion, and antiracism education.***

Additionally, in alignment with the newly released [Ontario Health Quality Standard – Sickle Cell Disease](#), hospitals may consider including optional indicators associated with improving care for individuals with sickle cell disease: ***Average emergency department wait time to physician initial assessment for individuals with sickle cell disease (CTAS 1 or 2), Rate of emergency department 30-day repeat visits for individuals with sickle cell disease, and Percentage of emergency department visits for individuals with sickle cell disease triaged as high severity (CTAS 1 or 2).***

New for 2024/25 – For hospitals

Regions may prioritize an indicator(s) within one of the priority issues to encourage hospitals to consider in their QIP. In this case, the indicator(s) will appear as a priority indicator within the workplan. If an organization elects not to include the priority indicator(s) in the QIP, the reasons for this decision must be described in the Comments section of the workplan.

Below are indicators that are new for 2024/25 (refer to *2024/25 Quality Improvement Plan Indicator Matrix* or *2024/25 Quality Improvement Plan Indicator Technical Specifications* for the complete suite of optional indicators):

- For the **hospital** sector
 - 90th percentile ambulance offload time
 - 90th percentile emergency department length of stay
 - 90th percentile emergency department wait time to inpatient bed
 - Alternate level of care throughput ratio

- Percentage of patients who visited the emergency department and left without being seen by a physician
- Percentage of staff (executive-level, management, or all) who have completed relevant equity, diversity, inclusion, and antiracism education
- Average emergency department wait time to physician initial assessment for individuals with sickle cell disease (CTAS 1 or 2)
- Rate of emergency department 30-day repeat visits for individuals with sickle cell disease
- Percentage of emergency department visits for individuals with sickle cell disease triaged with high severity (CTAS 1 or 2)
- Rate of delirium onset during hospitalization
- Rate of workplace violence incidents resulting in lost time injury
- For the **interprofessional primary care** sector
 - Patient/client perception of timely access to care
 - Number of new patients/clients/enrolment
 - Percentage of staff (executive-level, management, or all) who have completed relevant equity, diversity, inclusion, and antiracism education
 - Completion of sociodemographic data collection
- For the **long-term care** sector
 - Percentage of staff (executive-level, management, or all) who have completed relevant equity, diversity, inclusion, and antiracism education
 - Percentage of residents who fell in the last 30 days

Changes to QIP Narrative Questions

QIP narrative questions enable organizations to provide context for the quality improvement work within the four priority issues. In 2024/25, there are three new sections:

- The section **Access and flow** allows organizations to describe initiatives that will support people in receiving care in the right place at the right time
- The section **Population health approach** allows organizations to describe how they are caring for the needs of their population in partnership with other health service providers and within Ontario Health Teams
- The section **Administrative burden** allows interprofessional primary care organizations to describe initiatives that support clinicians and the interprofessional team in being able to spend more time on direct patient care

QIP Navigator Access

Access to *QIP Navigator*, Ontario Health's online platform for developing and submitting QIPs, is expected to open by January 2024.

Information for Long-Term Care Homes

In addition to completing and submitting the QIP, the QIP Navigator platform may be used to prepare a continuous quality improvement initiative report, which is required under section 168 of O. Reg 246/22 of *the Fixing Long-Term Care Act, 2021*. This enables the completion of one report instead of two separate reports. QIP Navigator has been updated with prompts and hover help to suggest areas where information for continuous quality improvement initiatives may be included; however, the information can be included in any section. A copy of the report can be downloaded via QIP Navigator to publish on your home's website.

Please be advised if you are using QIP Navigator to complete the continuous quality improvement initiative report, it is the responsibility of the long-term care home licensee to ensure all legislative and regulatory requirements have been met. Using the Navigator tool does not presuppose compliance with other requirements. Please note that the QIP must be submitted through Navigator by April 1, 2024. Further information is available in the FAQ document posted on our website.

Submission Deadline

The QIP submission is due by **April 1, 2024**.

Contact Us

You can connect with a quality improvement specialist at Ontario Health by emailing QIP@ontariohealth.ca.