



**Quest Community Health Centre
Executive Director's Report
January 18, 2019**

Strategic Priority - Quality:

As a Centre of Excellence in Primary Care we will continue to provide high quality, equitable, and timely services

Obj. 1 Reduce Wait Lists

- *Attract more volunteer resources for Chiropractic & Dental Services – recruit more volunteers*
 - Developed database of local dental office addresses from St. Catharines to Burlington
 - We have initiated a wide variety of new strategies to promote the programs and volunteerism:
 - Reached out with letters of introduction and inquiry re volunteer opportunities to all churches/congregations from St. Catharines to Stoney Creek; with poster attached (have heard back from 3 Churches with leads).
 - Connected with Niagara College Dental Program, Southern Ontario Dental Hygiene, Trillium College, Ontario Dental Hygiene Association (ODHA)-posting on website for Dental Volunteer Opportunities, Ontario Dental Assistants Association (ODAA), Canadian Dental Association (CDA), Information Niagara Website Posting, University of Toronto Dental Program, Niagara Peninsula Dental Association to promote the program and volunteerism.
 - Quest recently joined Media Groups including Niagara Dental Hygienists Society Forum, Niagara College Dental Assisting Group, to both promote the program and volunteerism.
 - Posted a Volunteer Opportunity poster on Niagara Employment Network e-mail blast
 - Quest connected with the OCA and the Canadian Chiropractors Association (CCA) to provide information regarding Quest's volunteer Chiropractor Program and promote participation by members
 - Reached out to chiropractors in Niagara Region through the Niagara Chiropractic Association and contacts at the Toronto Chiropractic Association
- *Work Toward increasing physician resources*
 - Monthly advertisement on Ontario Medical Association (OMA) website in place, as well as HealthForce Ontario

Obj. 2 Develop and Implement Outcome Measures

- *Further develop quality outcome measures across program areas*
 - Quest MAWP is completing its end of season evaluation including focus groups with clients and students and meeting with community partners
 - Quest is in the process of identifying a placement opportunity where a learner can work on developing a standard evaluation process and tools across a variety of Quest programs and services.



Obj. 4 Improve Support to Mental Health & Addictions

- *Increase training for primary care in supporting MH&A*
 - Working group scheduled to meet on January 14, 2019 to finalize BPG recommendations re suicide assessment implementation plan, for implementation beginning in February

Strategic Priority - Partnerships

We will optimize collaborative partnerships to increase community capacity and create a client – centred experience that integrates and is seamless.

Obj. 1: Work with other types of primary care models

- *General*
 - Signed Memorandum of Understanding with Centre de Sante re Interprofessional Primary Care (IPC) Program Therapist and Community Outreach staff being located at Quest beginning April 1, 2019; Program provides support to Solo Practitioners
- **Obj. 3: Continue to work with clients and other Niagara Community Organizations to create better service integration**
- *Identify strategic community partnerships Quest would like to enhance e.g. ACTT Teams, Home and Community Care, MHART, Safe Consumption Services, etc*
 - A Memorandum of Understanding is now in place with Quest and De dwa de dehs nye - *Aboriginal Health Centre Hamilton (AHCH)*; AHCH staff will be delivering services from 145 Queenston St. beginning January 22nd; staffing will include 3.0 FTEs -- a Therapist, Community Outreach Worker and receptionist.
 - Program Director and Health Promoter working with other CHCs to enhance collaboration across Niagara CHCs. Quest has assisted with collating scheduling information regarding common groups that the CHCs offer. This information is being used to coordinate access and develop collaborative promotional materials
 - Quest CHC was invited to a round table at the Anglican Diocese of Niagara. The Diocese is in the process of reorganizing to increase their program for migrant workers in response to the growth of the program across three of their sites in Jordan, Vineland and Beamsville and Quest was asked to support the conversation/provide their thoughts
 - Quest CHC met with Cornerstone Community Church in Virgil to sign our Memorandum of Understanding and to create a GANT chart for next steps in developing this new clinic space for our MAWP service delivery in 2019
- *Work with community partners to identify and reduce gaps in services that address the Social Determinants of Health*
 - Quest is participating on the committee that is developing a two year strategic plan for the Niagara Poverty Reduction Network (NPRN)
 - As a member of the Health Equity Task Group of the NPRN, Quest is working towards developing a pilot project that enhances wrap-around services in the Emergency Department for people experiencing homelessness
 - Quest is participating on a Task Group planning a spring conference focused on how to meaningfully and respectfully engage social assistance recipients in the workforce, given that this has been identified as a key component of the Government's social assistance reforms

Strategic Priority - Leadership

We will foster a culture of learning, leadership, and growth

Obj. 1 Evaluate and implement best practice clinical management guidelines

- *Initiate clinical Best Practice Spotlight Organization (BPSO) initiative, including:*
 - *explore methods for new evidence to be implemented*
 - *develop opportunities for learning acquired by staff during training/workshops to be shared across team*
 - *maximize client self-management opportunities*
 - All nursing staff now trained as best practice guideline champions: involved using their expertise with guideline working groups
 - Fourth quarter baseline and implementation data collected; will be entered into BPSO NQuIRE electronic data systems for monthly reporting
 - Implementation for Assessment and Management of Pain BPG ongoing in Complex Care Clinic – plan to expand to full general services being considered
 - Extremely positive feedback re First Biannual Report
 - Quest participating in monthly RNAO knowledge exchange teleconferences with RNAO staff, project coach and project leaders from other pre-designate organizations
 - Planning underway re application for Alliance for Healthier Communities
 - Quest BPSO conference poster presentation/manuscript submission

Obj. 2 Continue to evolve as a client centered and responsive culture

- *Continue to enhance staff knowledge and skills regarding meeting the needs of Quest priority populations*
 - Men's Health Forum, University of Toronto (NP, RN)
 - Annual Clinical Day, Hamilton Academy of Medicine (NP)
 - Trauma-Informed Care - Building a Culture of Strength, Crisis & Trauma (COW)
 - Resource Institute Bad attitudes, negative behaviours, Fred Pryor (Client Coordinator)
 - Forget Your Bath Bombs & Scented Candles - Radical Self Care on the Front Line Niagara Region (COW, RPN, NP)
 - Pri-Med Canada Fall Updates, Prim-Med (MD)
 - Niagara Food Forum, United Way Niagara (Health Promoter)
 - NH Diabetes Day Symposium, Niagara Health (NP)
 - Additions and Mental Illness, CTRI - Crisis & Trauma Resource Institute (Social Worker)
 - Human Trafficking Training, Bethesda (RPN, RN)
- *Ensure consistent and practical response to complex/crisis situations*
 - See BPSO project implementation information above; pre-implementation planning underway for the Crisis Management Best Practice Guideline (BPG); Work Groups will be established in early spring of 2019

Strategic Priority - Telling Our Story

We will increase awareness of the exceptional role Quest plays to improve the lives of our clients and strengthen our community.

• General

- Quest participated for the first time in the annual St. Catharines Santa Claus Parade; in addition to a float we carried the Quest Banner and staff as well as family members participated; all in all a very successful first time event and enthusiastic support for doing in again next year
- Post on Quest's website regarding a series of Holiday Socials hosted by Quest at Queenston St.; lots of participation

- Meeting with Rainbow Health Ontario re 2020 conference in Niagara Falls to help inform agenda; Quest invited to participate on conference planning committee

Strategic Priority - Resources

We will creatively seek and secure sufficient and stable resources to strengthen and grow

Obj.2 Obtain final approval for Capital Project and begin construction

- **Complete Community Health Service Capital Project Tool Kit**
 - Meetings with Health Capital Investment Branch have recommenced and planning is underway once again.
 - Ministry identifying additional space implications re Interprofessional Primary Care (IPC) staff (1.5 FTEs) and Home and Community Care staff (1.0 FTE)
 - Potential for Hamilton Aboriginal Health Centre co-location in permanent site being explored (FTEs to be determined).
 - Eligibility of St. Joseph's Geriatric Mental Health Program to be part of program vs. need to generate separate capital dollars being determined by Capital Branch

Obj. 3 Seek resources from other sectors (non-LHIN)

- Further develop funding relationships/ partnerships for Volunteer Dental Program
 - Third shipment of free equipment & supplies for 2018-19 being organized through Henry Schein; receipt expected end of January/early Feb
 - Implemented our annual Dental Office/Totes Drive (over 80+ offices) where we both promote our program and invite offices to donate dental items to the program
- Apply for grants from various government and non-government funding sources
 - Currently exploring several grant opportunities that might have criteria consistent with Quest CHC program/funding needs including Niagara Community Foundation; Fowler Family Foundation; Niagara Prosperity Initiative; United Way; Trillium Foundation; Greenshield Community Giving Grants Program

Service Statistics: Core Indicators All Sectors

	2017/18 Totals	1st Q Totals	2nd Q Totals	3rd Q Totals	Oct/ 18	Nov/ 18	Dec. 18	YTD Total	2018/19 Target
Total New Clients	440	161	231	208	87	70	51	600	N/A
Total Active Clients (non-cumulative)	(3856) (MSAA Target = 2750)	3883	4005	4080	4041	4049	4080	NA	2750
Clients Seen (Face to Face Individual Encounters)	13,285 (MSAA Target = 12,350)	3678	4037	3841	1392	1356	1093	11556	12,350
Individual Encounters by Telephone	5257 (MSAA Target = 3100)	1474	1308	1149	395	404	350	3931	3100
Consultation Between Providers (Client Present)	2248 MSAA Target = 650	653	569	641	229	218	194	1863	650

Consultation Between Providers (Client not Present)	2345 (MSAA Target = 1620)	550	482	475	155	184	136	1507	2000
Total Client Encounters	24,937 (No MSSA Target)	6451	6912	6539	2292	2329	1918	19,902	N/A

Exceeding Target in 2017/18 Fiscal year

Exceeding Target in 2018/19 Fiscal year

Notes:

Total new clients to March 31, 2018 = 640 (2009/10) + 1022 (2010/11) + 802(2011/12) + 787(2012/13) + 713 (2013/14 YTD) + 693 (2014/15 YTD) + 734 (2015/16 YTD) + 640 (2016/17 YTD) + 440 (2017/18) + 600 (2018/19) = 7141

Active Clients = Clients using services (individually or in groups) including outreach, dietician, health promotion, primary care. Remain “Active” as long as there is contact within last 3 years.
 Clients Seen = Clients that had an appointment and were marked as arrived
 Total Client Encounters = Face to Face Client Encounters + Non Face to Face Encounters (e.g. advocating for services on behalf of client; calling in prescriptions; telephone intake, etc.)

Service Statistics: Sector Specific Indicators

	MSAA Target & Performance Standard	Actual Oct/18	Actual Nov/18	Actual Dec/18
% of Registered Clients Aged 18 to 69 who have had a PAP Test	75% (>60%)	71%	75%	76%
% of Registered Clients aged 50+ with Fetal Occult Blood Test (FOBT)	70% 48-72% Changed from 60% to 70%	71%	71%	75%
% of Registered Clients 65+ who have received an influenza vaccine.	45% 36-54%	39%	37%	36%
% of Registered Clients Aged 50-69 who have had a Mammogram in past two years	55% (40-60%)	79%	78%	86%
% Registered Clients with Type 2 Diabetes Receiving Multi-Disciplinary Care	90% (72 – 100%)	95%	96%	94%
Access to Primary Care (number of clients seen by physician/NP in last three yrs.)	70% 66.5-73.5%	84%	85%	86.5%
Retention Rate (for NPs and Physicians)	70% 65.5-73.5	NA	NA	TBC'd

Exceeding Target in 2018/19 Fiscal Year