



**Quest Community Health Centre  
Executive Director's Report  
December 13, 2018**

***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***

- Work Toward increasing physician resources Dr.
  - Dr. Mark Prodger hired as a six month Locum at Quest
- Increase use of Groups to address client needs
  - A total of ten health promotion groups now underway including Client Advisory Group, Gender Quest Reunion Group, Healthy You, Hepatitis C Education Workshops, Hot Topics in Health, Let's Get Moving, Quit Smoking, Skills to Cope, SMART Recovery Group, and Trans/Gender Questioning Youth Group.
  - The Volunteer Coordinator & Health Promoter have been working together to build Quest's base of learners and volunteers for various initiatives/groups. Several College departments have been contacted including Recreation and Leisure, Exercise, Science, Human Performance and Fitness, and Health Promotion. The goal is to begin taking learners in January and expand this collaboration in the future. Outreach to other volunteers including those interested in facilitating an art journal group, music therapy group and providing Reiki treatment has also taken place, with a January goal for program start up.

***Obj. 2 Develop and Implement Outcome Measures***

- Further develop quality outcome measures across program areas
  - Health Promoter working with Niagara College to have a Niagara College learner undertake a field project for their Research and Evaluation report, the intention being to create standard evaluation tools and processes across various Quest CHC programs and services.

***Obj. 3 Increase resources to address community need and serve more clients***

- Help the community at large to understand our client population
  - Quest met with a group of youth at Port Colborne Community Living's Transitional Aged Youth Group and provided information about Quest and our services, and Rainbow Niagara. Also did the "star" activity together, and poke about community resources generally.
  - Quest presented to 30 lawyers from the Lincoln County Law Association Family Law Day on December 7th. Presentation focused on CHC model of Health and Wellbeing/Quest, Rainbow Niagara program, terminology, Social Justice Framework for LGBTQ Wellness, challenges LGBTQ youth face, ways we can be positive allies, and community resources.
  - Staff participation in REACH Niagara Workshop re impact of Poverty on Health



- Outreach to Seniors to increase service engagement
  - Senior Pride Network Niagara held their end of life planning workshop for LGBTQ+ seniors on November 15<sup>th</sup>, using Quest CHC funding from the Ministry of Senior Affairs grant. There were 15 participants. A lawyer from Justice Niagara spoke, as well as representatives from Dying with Dignity.
  - Health Promoter made many visits to the Niagara Region Seniors Housing complexes at Gale Crescent and Carlton Street. A presentation/booth was set up at both sites to promote Quest as well as the flu clinics that were being held at these sites the following week, in an effort to encourage those who normally do not get a vaccine to get one this year.

**Obj. 4 Improve Support to Mental Health & Addictions**

- *Increase training for primary care in supporting MH and Addictions*
  - Suicide assessment implementation plan to start in Jan/Feb 2019; working group has been meeting to review gap analysis findings and determine recommendations to be implemented
  - Quest's MAWP and Grand River (GR) CHC's MAWP met to discuss the upcoming MAWP season and MAWP mental wellbeing, and for Quest and local community partners to share with GR their work to date re combating loneliness and isolation.
  - Quest' MAWP met with a Brock University nursing student working on a project for MAWs. The focus of the work was mental wellbeing and the student is conducting an environmental scan
  - Quest is facilitating the training and use of the Integrated Community Lead (ICL) by co-facilitating trainings with the Health Links transformational leads. Training was conducted on with staff from MH&A agencies and a Case Studies Training was conducted on Nov 29<sup>th</sup> (Also see Partnerships Objective #3).

**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**

- Offer presentations yearly to other health care providers to increase awareness re Quest CHC
  - Quest's Program Manager lectured at Brock University. The lecture was for 3<sup>rd</sup> year nursing students to meet their harm reduction objective in their MH&A course
- **General**
  - Meetings with Centre de Sante re Interprofessional Primary Care Program (Support for Solo Practitioners); Therapist and Community Outreach staff to be located at Quest beginning April 1, 2019

**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
  - USAT and the LHIN's on site Home and Community Care, Care Coordinator are now meeting regularly re client referrals and shared clients. Six USAT client's were referred and joint visits were scheduled with the Coordinator and USAT team members in November
  - Quest attended the Positive Living Niagara's (PLN) Red Scarf Event to demonstrate our support for PLN and for this HIV/AIDS initiative. Quest works with PLN on several initiatives (e.g. Overdose Prevention & Education) and also has shared clients
  - Clients of the Niagara Detention Centre are sometimes released without connection to a primary care provider and can't get medications renewed in a timely manner and/or don't

- require a coordinated care plan. The Human Services and Justice Coordinating Committee approached USAT for support. Staff now have clearance to enter the Centre and connect with referred clients. A tour of the Niagara Detention Centre took place on
- Meetings with De dwa de dehs nye - *Aboriginal Health Centre Hamilton* re Therapist and Community Outreach Worker space at Quest; plan is to have them join us in January
  - Overdose Prevention and Education Network Niagara Steering Committee meeting re Positive Living Niagara proposal to MOHLTC for Consumption and Treatment Services; Quest CHC letter of support provided
  - Urgent Service Access Team (USAT) Project Management Team (Director of Mental Health & Addictions, Niagara Health; Executive Director, CMHA-Niagara; Executive Director, Community Addictions Services of Niagara, and Quest Executive Director as well as Quest's Program Director and Manager) meeting. Areas discussed included:
    - Facilitating USAT client access to Niagara Health's (NHs) Centralized Access to Psychiatry Services (CAPS) program
    - CMHA's participation in the ICL role
    - Locating a CASON service provider at Quest
    - Organizing a meeting with the Niagara Detention Centre to discuss transition planning for their clients
    - Collaborative joint proposal for the Overdose Prevention Site
    - Client access to outpatient IV therapy for clients denied access by H&CC
  - Maximize role of Client Advisory Committee
    - Quest is enhancing the voice/influence of clients by participating on the Niagara Addictions and Mental Health Lived Experience Committee, along with a member of Quest's Advisory Committee. Meetings will be hosted monthly. The Committee is in the forming/storming stages (Also see Leadership Objective #2)
    - Quest Health Promoter presented to the Client Advisory Committee about the outcomes of Community Health and Wellbeing Week. Committee members provided feedback on the various events and the week as a whole and discussed possible event ideas for future years. Feedback was very positive and members expressed their appreciation for opportunities to participate
  - Work with community partners to identify and reduce gaps in services that address the Social Determinants of Health
    - Quest has re-established our role as a Good Food Box Host site, providing our clients with improved access to low-cost, local produce through a monthly delivery system. Working collaboratively with Greener Links for Learning, the coordinating organization, Quest is developing our internal processes for running this service and has started to promote the service among clients. We began accepting our first orders from clients in December.
    - Quest's Health Promoter is now reaching out to various individuals and organizations regarding food security initiatives in Niagara. There is significant interest from many partners re tackling this issue collaboratively across Niagara; however partners are still trying to identify what that will look like. A Food Summit is being planned for January that aims to bring together local partners
    - Representatives from Niagara's four CHCs met to discuss opportunities for collaboration. Discussions included coordinating when common groups are run to ensure that community members have access to various groups throughout the year at different CHCs. This would also include jointly promoting these common groups

through partner agencies throughout Niagara. The potential to submit a collaborative grant application to Niagara Prosperity Initiative is being discussed.

- Quest continues to support the Screen for Life Mobile Cancer Coach. This month we focused on promoting pap tests with clients who are due by calling and informing them about the Coaches visit/scheduling appointments
- Three Flu Vaccination Clinics held in November; two in seniors housing and one on site; 70 clients participated in the three events
- Participation in Quarterly HNHB LHIN Anchor Table meeting; agenda included an Ontario Palliative Care Network presentation (potential links to CHCs/Alliance for Healthier Communities); Integrated Health Service Provision and future directions, Mental Health and Addictions Response Team (MHART) update; and Population Health Labs, which promote population-based health and delivery of health care that is most effective for clinical, socio-demographic, and geographic groups (being piloted at Mount Sinai; January presentation at Anchor Table)

### **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*
    - Best practice guideline champion training underway: online and/or in-person modules being completed by nursing staff; allied health providers involved with working groups also encouraged to participate
    - Baseline data entered pre-implementation (April to September 2018)
    - Pilot implementation plan for Assessment and Management of Pain BPG underway in Complex Care Clinic - involves use of additional baseline/follow-up assessment tool to assess functional capacity/disability related to pain scores
    - Implementation planning underway for guideline #2 (Integrating Tobacco Interventions into Daily Practice) and guideline #3 (Assessment and Care of Adults at Risk for Suicidal Ideation and Behaviour) for 2018-2019
    - Initial stages of planning underway for application to Advanced Clinical Practice Fellowship by Quest RN; application due May 2019

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

- Ensure consistent and practical response to complex/crisis situations
  - See BPSO project implementation information above; the Crisis Management Best Practice Guideline (BPG) will be implemented as part of year two (2019-2020)
- Continue to enhance staff knowledge and skills regarding meeting the needs of Quest priority populations
  - All day Diabetes Training – Nurse Practitioner
  - Human Trafficking Training – This training included overview of trauma sensitive approaches, understanding of human trafficking, exploitation dynamics, and best practice findings. Since this training Quest MAWP staff were better able to identify someone who may be trafficked and to connect them with services.
  - Quest participated in the OPENN meeting Nov 14<sup>th</sup>. The meeting included a focus group to identify needed prevention services in Niagara.

- MAWP facilitated the Niagara Migrant Interest Workers Group meeting on Nov. 30<sup>th</sup>. The meeting took findings from the Client Advisory Meeting to inform task groups and the work plan leading up to the 2019 season.
- **General re Strategic Priority re Culture of Learning, Leadership & Growth**
  - For the health promotion bulletin board we featured information related to Diabetes Awareness Month, Fall Prevention Awareness Month and the Flu Season.
  - Staff Team Building and & Development day at Balls Falls Conservation Centre including Art Therapy Class and a Presentation re the history of Yoga and the different types of Yoga, followed by a Yoga Class
  - Program Director completed the Leadershift Program (Community Health Ontario) new cross-sector initiative that gives current and emerging leaders in community and primary health care the opportunity to develop their abilities, foster collaboration, and participate in shaping the future of our health care system.
  - ED completed the Ivey School of Business CommunityShift Program, a country wide leadership development program for C Level Managers from Not-for-Profit organizations – focused on Leadership, Negotiation Skills and Strategic Planning

### ***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**
  - MAWP Community Health Worker attended the Niagara Connects Open Data Summit. This summit was around how data and geographical mapping can help agencies educate the community about the benefits of their services as well as make informed decisions to guide service development. There was an opportunity to network and share information about Quest, as well as learn how Quest could benefit from increased access to data.
  - This month Quest has several posts on the website including a wrap up post on our Volunteer Appreciation Dinner and posts to promote both the Good Food Box and Screen for Life visit.
  - Quest continues to work on our Infographics for program and services. Both the Migrant Agricultural Worker Program (MAWP) and Urgent Service Access Team (USAT) Infographics are finalized or in the process of being finalized. The next one to be developed will focus on LGBTQ+ specific services.
  - A Health Promotion email list of clients who are actively engaged in our various groups and events is being developed. It will be used to keep our clients up to date on the various events we have planned and to cut down on the staff time needed to promote and recruit clients for events. So far we have approximately 45 recipients identified, with the goal of providing 1-2 emails per week, depending on groups or events scheduled.

### ***Strategic Priority - Resources***

**We will creatively seek and secure sufficient and stable resources to strengthen and grow**  
**Obj. 3 Seek resources from other sectors (non-LHIN)**

- Further develop funding relationship/ partnership for Volunteer Dental Program
  - Ongoing Conference Calls with Henry Schein's Senior Operations & Marketing Specialist, Special Markets and the VP Marketing and Communications re relationship and continued provision of program supplies/equipment; Second shipment of equipment & supplies received

### Service Statistics: Core Indicators All Sectors

	2017/18 Totals	1 <sup>st</sup> Q Totals	2 <sup>nd</sup> Q Totals	3 <sup>rd</sup> Q Totals	Sept/ 18	Oct/ 18	Nov/ 18	YTD Total	2018/19 Target
Total New Clients	440	161	231	157	69	87	70	549	N/A
Total Active Clients (non-cumulative)	(3856) (MSAA Target = 2750)	3883	4005	4041	4005	4041	4049	NA	2750
Clients Seen (Face to Face Individual Encounters)	13,285 (MSAA Target = 12,350)	3678	4037	2748	1249	1392	1356	10463	12,350
Individual Encounters by Telephone	5257 (MSAA Target = 3100)	1474	1308	799	351	395	404	3177	3100
Consultation Between Providers (Client Present)	2248 MSAA Target = 650	653	569	447	187	229	218	1451	650
Consultation Between Providers (Client not Present)	2345 (MSAA Target = 1620)	550	482	447	153	229	218	1479	2000
Total Client Encounters	24,937 (No MSSA Target)	6451	6912	4621	1981	2292	2329	17,984	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) + 479 (2018/19) = 7020

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 Sept/18	Actual Oct/18	Actual Nov/18
% of Registered Clients Aged 18 to 69 who have had a PAP Test	75% (>60%)	71%	71%	75%
% of Registered Clients aged 50+ with Fetal Occult Blood Test (FOBT)	70% 48-72% Changed from 60% to 70%	70%	71%	71%
% of Registered Clients 65+ who have received an influenza vaccine.	45% 36-54%	40%	39%	37%
% of Registered Clients Aged 50-69 who have had a Mammogram in past two years	55% (40-60%)	77%	79%	78%
% Registered Clients with Type 2 Diabetes Receiving Multi-Disciplinary Care	90% (72 – 100%)	94%	95%	96%
Access to Primary Care (number of clients seen by physician/NP in last three yrs.)	70% 66.5-73.5%	85%	84%	85%
Retention Rate (for NPs and Physicians)	70% 65.5-73.5	96%	NA	NA

Exceeding Target in 2018/19 Fiscal Year