



**Thrombosis Canada**

**Facilitated Quality Improvement Program**

**Project Overview**

## **FACILITATED QUALITY IMPROVEMENT INITIATIVE for STROKE PREVENTION**

**Facilitated Quality Improvement (FQI) program to improve stroke prevention in patients with atrial fibrillation.**

### **FQI Practice Improvement: Stroke Prevention**

First, determine from your institutional ethics committee if it is necessary to obtain ethics approval for this Quality Improvement initiative after you provide them with the following information:

- The overall objective of this FQI initiative is to improve stroke prevention in patients with atrial fibrillation.
- The practice level and patient population data collected (and extracted from Electronic Medical Record) to identify opportunities for improvement and practice change will be anonymous and used in aggregate. Data collected to measure practice outcomes and track rapid cycle test of change will be used in aggregate and will not specifically track any one patient's results. Practice improvement data may be used for presentation and/or publication in future without any identifying information of its participants.
- **If ethics approval is required, the following information may be used to complete the ethics submission, depending on the requirements of each institution.**

### **FACULTY**

**Dr Alan Bell**

*Program Chair*

*Executive Member, Thrombosis Canada*

**Dr David Makary**

*FHT Lead, Southlake Regional Health Centre*

**Dr Jim Douketis**

*President, Thrombosis Canada*

**Dr Menaka Pai**

*Secretary, Thrombosis Canada*

**Dr Pascal Bastien**

*Member, Thrombosis Canada*

**Dr Kate Hodgson**

*Medical Education Consultant*

**Dr Brent Elsey**

*Site Lead, Barrie and Community Family Health Team*

**Nicola Banks**

*Executive Director, Thrombosis Canada*

*\*Consultants/faculty may be called upon to assist with various aspects of the program (e.g. statistician)*



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## BACKGROUND AND RATIONALE

### ***Background***

Each year approximately 50,000 Canadians suffer a stroke, which is one every 10 minutes. Of these, two will recover, six will suffer permanent disability and two will die. Strokes are the leading cause of disability, and the third leading cause of death in Canada. They cost the Canadian economy at least \$2.7 billion dollars annually.

Thrombosis Canada (TC) is a registered not-for-profit physician association dedicated to furthering education and research in the prevention and treatment of thrombotic vascular disease. We believe that providing point-of-care clinical guidance, founded on national and international guidelines, is the most effective and cost-efficient way to improve patient safety and outcomes, within a framework of patient-centered values and preferences.

Primary care physicians play a pivotal role to ensure evidence-based strategies to prevent stroke are appropriately utilized, but a significant care gap exists. Addressing this care gap in the highest risk populations will reduce the economic and human cost of cerebrovascular disease.

### ***Project Rationale***

Thrombosis Canada sees an opportunity to create a best-in-class practice quality improvement program in stroke prevention for primary care physicians. We envision an EMR-structured Quality Improvement Plan (QIP), based on the Thrombosis Canada clinical guides. Our aim is to improve stroke prevention in patients with atrial fibrillation.

The many potential benefits of quality improvement initiatives include improved clinical processes, improved care outcomes, more effective team functioning, enhanced provider satisfaction, improved efficiency, and improved point of care decision making. Ontario, however, lacks a system-wide and sustained approach to quality improvement in primary healthcare. Facilitated Quality Improvement provides participants with evidence-based clinical endpoints and practice tools. It offers training to champions and clinical teams, and offers primary care quality improvement initiatives the best chance of succeeding.

Facilitated Quality Improvement (FQI) is an innovative approach to practice improvement that builds on the fields of Knowledge Translation, Patient Safety and Quality Improvement to address the challenges and barriers found in primary care environments. FQI provides participants with evidence-based clinical endpoints and practice tools based on the Thrombosis Canada Clinical Guides to improve clinical processes, point of care decision making, care outcomes, provider satisfaction and support more effective team functioning. It provides training to champions and clinical teams, and offers primary care quality improvement initiatives the best chance of succeeding.



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## FQI INITIATIVE OBJECTIVES and OUTCOME MEASURES

### Objectives:

1. To adopt an innovative approach to practice change - Facilitated Quality Improvement that integrates the benefits of Quality Improvement, Patient Safety and Knowledge Translation methodologies in a sustained commitment to practice improvement.
2. To apply an FQI approach to improve stroke prevention in patients with atrial fibrillation.
3. To use FQI Practice Tools to profile patient populations at high-risk for stroke, prioritize aims and improvements, and design evidence-informed rapid cycle tests of change to improve patient outcomes.

### Outcome Measures and Collected Data:

- Percentage of patients identified with Atrial Fibrillation (AF).
- Percentage of patients with AF risk stratified for stroke and bleeding.
- Percentage of patients on appropriate treatment- including lifestyle modification.

## FQI METHODOLOGY, PRACTICE TOOLS, and DATA COLLECTION

All project elements will be managed by Thrombosis Canada, a non-profit physician organization. All project elements will be reviewed by participating faculty members and steering committee.

The FQI Program will be initiated within family health teams. Team Champions will be responsible for implementing the FQI project within their treatment team and reporting on usability of the materials and practice improvement outcomes. The FQI initiative with supportive practice tools will provide a turn-key solution to stroke prevention in patients with AF. This initiative is also harmonized with the recent mandate from the MOHLTC for all Family Health Teams, Community Health Clinics and other models to initiate QIPs.

Based on patient data, extracted from electronic records, and local priorities, sites will review evidence based on benchmarks and prioritize the aim and measures.

There are three sets of FQI Practice Tools:

- Practice Tool #1: Practice Profile to analyze EMR data combined with intuitive professional clinical reflection to identify the immediate opportunities for practice improvement.
- Practice Tool #2: Aims and Measures Template to prioritize and specify the relevant practice improvement aims and measures.
- Practice Tool #3: PDSA Worksheet to collect, analyze, and apply the EMR Encounter Tools.



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## ETHICAL CONSIDERATIONS

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### **Confidentiality:**

Data extraction will be anonymous and in aggregate at the practice and patient population level. All data extraction will avoid collecting any identifiable personal information and if such information is inadvertently recorded, it will be removed before analysis. Any future publications/presentations resulting from the FQI project will not include any identifying information of participants.

The data will be stored by each Family Health team in their practice Electronic Medical Records and, after analysis, in aggregate at Thrombosis Canada

### **Risks/Disadvantages/Advantages:**

Patients will not receive any immediate direct personal benefit or risk from practice improvement data collection and analysis. However, the resulting opportunities for improvement and practice changes will impact future patient and practice health outcomes.

### **Conflict of Interest:**

Neither Thrombosis Canada nor the Family Health Teams involved in this study have a financial or proprietary interest in this FQI project.



## Project Steps and Elements

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### **STEP 1: Practice Profile**

Champion to:

- Register team
- Extract EMR data using Thrombosis Canada FQI search tools
- Report EMR search results to Thrombosis Canada
- Complete clinical impression questions

### **STEP 2: Educational Outreach Meeting**

Thrombosis Canada and Champion to book one-hour meeting at site to:

- Review practice profile
- Establish Aim & Measures

### **STEP 3: Site Team Meeting #1 (PLAN)**

Champion to book site meeting with site team to:

- Present customized slide deck
- Finalize Aim & Measures (template)
- Complete FQI plan (template)
- Complete accreditation fulfillment (sign-in, evaluation)

### **STEP 4: Report FQI Plan**

Champion to:

- Report FQI plan to Thrombosis Canada

### **STEP 5: Site Team Activity (DO)**

Assigned individuals to apply EMR encounter tool for agreed upon amount of time

### **STEP 6: Report Change**

Champion to:

- Extract EMR data using Thrombosis Canada FQI search tools
- Report EMR search results to Thrombosis Canada

### **STEP 7: Site Team Meeting #2 (STUDY)**

Champion to book meeting with site team to:

- Present EMR results
- Assess success and decide on next steps (consider Aim 4)
- Complete accreditation fulfillment (sign-in, evaluation)

### **STEP 8: Final Report (ACT)**

Champion to:

- Report team's decision on implementation to Thrombosis Canada
  - Provide feedback on FQI process and materials
  - Complete accreditation fulfillment (post program activity)
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