

Helping your Hospital Achieve its Quality Improvement Goals

Our QI Program

"Every physician, every 5 years"

QI forIndividuals and Groups

Our QI Partnership

The CPSO's QI Partnership program offers an opportunity for hospitals to fully engage their physicians on a quality improvement project. This will streamline the quality requirements for hospital-based physicians saving time and reduce administrative burden.

Collaborating with the College will provide hospital physicians with access to our online tools designed to promote evidence-based self-reflection, peer support and self-improvement. Physicians practicing at

partnered institutions will also be exempted from the College's Quality **Improvement requirements for five years, reducing their administrative** burden. QI initiatives that are meaningful to each physician's clinical environment and align with their group or organizational strategy can be the most impactful.

Throughout this document you will find further detail about what the ${\bf QI}$ Partnership can offer your team.

The Benefits

- ▶ Elimination of redundancy in Quality Improvement activities – Physicians will receive an exemption for five years¹ from their CPSO QI requirements, reducing their administrative burden, which is a key contributor to burnout.
- Earn up to 12 Credits per physician for completing the program.
- Collaboration between CPSO and hospital environments.

- Increased public confidence that physician practice is continuously improving.
- Access to our Medical Advisors.
- Capacity to share best practices and optimize quality programs.
- Engagement in self-refection by physicians through the use of QI reflection activities that promote the continuous improvement of practice.

¹ Physicians older than 70 will not be eligible for this exemption. Also, physicians older than 70 will still be subject to a peer and practice assessment through the CPSO Quality Assurance program, which is mandatory and conducted every 5 years while they remain in practice.

Proposal Overview



Creating your QI Partnership Proposal

1. Alignment with Organization's Strategic Direction

How does the QI initiative support physicians in advancing the organization's strategic priorities in terms of organizational Quality goals?

2. Data/Measurement

What data will you be collecting and analyzing to support the QI initiative? How will you share the data within your facility? Is there existing practice data that can be used for self-reflection? Is this data descriptive or quantitative (HQO reports, EMR, other hospital data)? How does your data compare to established/institutional benchmarks?

3. Reflection

What process will your facility use to support physicians to reflect on their personal or group data, identify what is working well, and what opportunities for improvement exist? On what level is this self-reflection performed (e.g., Individual or Group Reflection)?

4 Facilitated Feedback

What is your plan to support physicians in their reflection by providing them coaching and feedback? Who will provide this feedback and how (e.g., Coaching, feedback from Chief/Department Lead, Peer to Peer, facilitated by an expert)?

5. Action

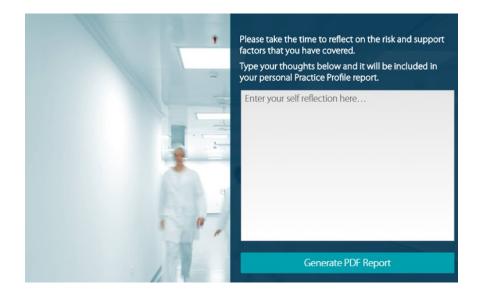
What is/are the proposed action(s) your facility will take in response to what is learned? Goals should be SMART (specific, measurable, achievable, relevant/realistic, time-based.)

Online QI Activities

Akey benefit to collaborating with us on your quality initiatives will be access to our QI reflection activities and resources. Note that physicians who are part of the QI Partnership program will still be expected to complete two of these tools—the 'Practice Profile' and 'Self-Guided Chart Review'—to meet College requirements. Together they should take between 2-3 hours to complete. Please note that the College will be able to see if you have logged on to the program but will not have access to the responses and results of the exercises.

Practice Profile Tool & Reflection Exercise

The goal of the Practice Profile is to provide physicians with knowledge of risk and support factors so that they can manage and mitigate risks in practice to the extent possible. Upon completion of the Practice Profile tool, physicians will have the opportunity to download a personalized report based on their responses. They then complete a short list of reflective questions. Both the content input into the tool and reflection exercise is not available to the College.



Self-Guided Chart Review Checklist & Reflection Exercise

The Self-Guided Chart Review checklist & reflection exercise is a simple and effective activity developed by the CPSO. This activity will guide physicians through a review of their medical records using a checklist that is reflective of medical record-keeping requirements contained in College policies and medical record-keeping best practices. They then complete a short list of reflective questions.

Maintaining medical records in accordance with this checklist can help physicians comply with their legal and professional obligations pertaining to medical records. The College recognizes that not all questions are relevant to every medical specialty. This activity is designed to promote reflection and can be adapted to any medical documentation, such as diagnostic reports. As with the Practice Profile, the content input into the Self-Guided Chart Review checklist and reflection exercise is not available to the College.

Self-Guided Chart Review: Checklist			
Medical Record Keeping Activity	Strengths	Opportunities	N/A
The records are legible and presented in a systematic and chronological manner.			
The records tell the story of patients' health care conditions to allow other healthcare providers to read and understand the patient's health concerns or problems.	r 🔲		
The record keeping system allows for ready retrieval of an individual patient file.			
Each patient file clearly shows full name, address, date of birth, and gender information.			
The patient's identity is clearly evident on each component of the file.			
The date of each visit or consultation is recorded.			
E-mails or telephone conversations are documented.			

Participating in QI - Next Steps











APPLY

REVIEW

APPROVE

MOU

QI REFLECTION ACTIVITIES

Submit your QI Partnership application tous

CPSO will work with you to support and strengthen your QI **hospital work**

Once approved, participating physicians who complete the Practice Profile and Self-Guided Chart Review are considered to have completed their QI requirements with CPSO for 5 years

Hospital and **CPSO sign MOU.** Hospital submits list of participants.

Each participating physician completes **2CPSO online** reflection activities

If you'd like to learn more about the program or speak with a medical advisor about this opportunity, contact us at QIPartnership@cpso.on.ca – you may also download and fill out the QI Partnership form here-new-may-also-download and fill out the QI Partnership form here-new-may-also-download and fill out the QI Partnership form here-new-may-also-download and fill out the QI Partnership