

GCHC Quality and Accountability Report FY202

MSAA		Core CHC Indicators							
	19/20 Result	Q1	Q2	Q3	Q4	YTD	CORRIDOR	20/21 TARGET	ANALYSIS
Cervical Cancer Screening Rate	82%	78%	76%			76%	(68%-100%)	85%	GCHC is in corridor for this MSAA metric. 936 of a potential 1225 eligible clients are up to date for this screen. PAPs with COVID procedures have decreased.
Colorectal Screening Rate	82%	78%	72%			72%	(68% - 100%)	85%	GCHC is in corridor for this MSAA metric. 1179 of a potential 1639 eligible clients are up to date for this screen. FIT kits have not been available in Q1 since labs have concentrated on COVID screening.
Interprofessional Diabetes Care Rate	97%	98%	97%			97%	(76%-100%)	95%	GCHC is above target for this MSAA metric. 487 of a potential 500 eligible clients are up to date for this screen for their diabetes care.
Influenza Vaccination Rate	65%	64%	42%			42%	(60%-90%)	75%	GCHC is below target for this MSAA metric. 508 of a potential 1208 eligible clients are up to date for this screen. Flu clinics are being offered starting in October.
Breast Cancer Screening Rate	75%	70%	62%			62%	(60%-90%)	75%	GCHC is in corridor for this MSAA metric. 504 of a potential 817 eligible clients are up to date for this screen. Access to mammograms has been limited during COVID-19.
Retention Rate NPs and Physicians	100%	100%	100%			100%	>=72%	90%	GCHC is above target for this MSAA metric. Retention rate of NPs and Physicians remains at 100%.
Access to Primary Care	98%	89%	86%			86%	(77-85%)	81%	GCHC currently has 4194 clients rostered to primary care. New clients intakes have been significantly decreased due to COVID. GCHC has accepted 31 new clients in FY 2021. 411 clients are currently on the waitlist.

MSAA		Explanatory Indicators							
	19/20 Result	Q1	Q2	Q3	Q4	YTD	YTD TARGET	20/21 TARGET	ANALYSIS
Client Satisfaction Access	97%	Reported in Q3						97%	
Registered Clients	8259	7253	7243			7243	7800	7800	Currently GCHC has 4194 Rostered clients (access primary care). The entire active list is currently being reviewed and updated as part of the EMR transition.
Third next Available	8	5	4			4	8	8	Physician and NP TNAA are both 4 days in Q2. Due to COVID focus has been on virtual access first (phone or video), reducing TNAA. Schedules have now been blocked to ensure for scheduled appointment access when required. This indicator only looks at physician and NP availability for scheduled appointments.

MSAA Local Obligations - Reduced Hospital Utilization

	19/20 Result	Q1	Q2	Q3	Q4	YTD	YTD TARGET	20/21 TARGET	ANALYSIS
Total Emergency Room Visits	1,132	243	307			550	500	1,000	YTD ER visits are 12% lower than last year. 80% of ER visits are CTAS 1-3. Weekend ER visits were 25% of the total ER visits. 18% of all ER visits required admission, 100% were CTAS 1, 2 or 3. ER diversion visits include on-call, same day, oral health diversion, home visits. At an average rate of \$598.00 for an ER visit, this represents in FY1920 a potential system savings of \$2,889,536.00. This diversion activity is especially important during COVID measures.
Total Hospital Admissions	230	64	78			142	115	230	
# ER visits resulting in an admission	156	34	54			88	75	150	
#ER Visits Best Managed Elsewhere (BME)	192	64	61			125	93	185	
# ER Visits on weekends	282	56	78			134	140	280	
# ER Diversion Visits	5,704	1405	3427			4832	2,852	5,704	

Accreditation

Accreditation - Hand Hygiene Audit

Hand Hygiene	19/20 Result	Q1	Q2	Q3	Q4	YTD	YTD TARGET	20/21 TARGET	ANALYSIS
# of audits completed on providers for proper hand hygiene	75	19	19			38	38	75	Hand Hygiene Clients - A total of 18 client hand hygiene moments were observed this quarter. The compliance rate for clients entering and existing the building is 100%. With COVID 19 and placing a staff member at the door has increased awareness of proper hand hygiene.
% of staff who were compliant with the 4 moments of hand hygiene	100%	89%	100%			95%	100%	100%	
# of audits completed on clients for proper hand hygiene	72	18	18			36	36	72	
% of clients who were compliant with hand hygiene protocol	94%	100%	100%			100%	100%	100%	

Accreditation

Accreditation - Medication Reconciliation Audit

	19/20 Result	Q1	Q2	Q3	Q4	YTD	YTD TARGET	20/21 TARGET	ANALYSIS
% Compliance for Periodic Health Exam	100%	100%				100%	100%	100%	This quarter our providers documented reconciliation rate is 100% of the 50 randomly sampled visits for Physicians, Nurse Practitioners and the Pharmacist.
% Compliance for New Intake	100%	100%				100%	100%	100%	
% Compliance for Home Visits	100%	100%				100%	100%	100%	
% Compliance for Post Hospital Discharge	100%	100%				100%	100%	100%	

	Occurrence Reports						
	19/20 Result	Q1	Q2	Q3	Q4	YTD	ANALYSIS
Systems Breakdown- Clinical	0	8	0			8	In the second quarter, GCHC managed 14 incidents.
Systems Breakdown- Admin	0	2	0			2	
Withdrawal of Client Services	0	0	0			0	
Inappropriate Client Behaviour	0	0	0			0	
Facility Issue	5	2	1			3	
Client Care Complaints	5	2	1			3	
Client Care Risk - Clinical	3	0	1			1	
Breach of Privacy	1	1	2			3	
Client Compliments	0	1	0			1	
Systems Breakdown-Lab Reports	0	0	1			1	
Employee/Volunteer Injury Risk	2	2	0			2	
Employee Injury Risk Resulting in WSIB	0	0	0			0	
Client Care Risk Medication Error	2	0	1			1	
Client Care Risk - Program	0	0	0			0	
Deviation from Policy	0	0	2			2	
Facility Issue- Off-site location	0	0	0			0	
Property Loss/Damage	0	0	0			0	
Infection Prevention and Control	3	2	2			4	
Miscellaneous	3	2	0			2	
Client Injury Risk	4	0	0			0	
Prevention of Workplace Violence and Harassment	1	0	0			0	
Medical Emergency	NEW	0	1			1	
Third Party Risk	NEW	0	2			2	
Total Occurrences Submitted	29	22	14	0	0	36	