The Triple Aim in FHTs – Better Care, Better Quality, Better Value
Award Winner — Dr John Maxted

Building in quality from the beginning — launching a diabetes program

Tackling diabetes management is a challenge for every family health team — but John Maxted thought the Health for All team at the Markham Family Medicine Teaching Unit had a big advantage going in. The organization and the team were brand new, and ready for all-new ideas.

Unlike so many family health teams that have had to struggle to create a diabetes registry retroactively from patient records, Markham could start from square one. The team was led by family practitioner John Maxted, one of the quality-improvement leads at the University of Toronto. With his expertise, the new diabetes database was designed following the classic quality-improvement approach of "plan, do, study, act."

Health for All's ultimate goal was to establish a patient-centred diabetes program, based on the creation and maintenance of its own up-to-the-minute diabetes database and the use of standardized language for electronic medical records.

Equally important, the team created and tested its own diabetes care flowsheet, including process and outcome measures. As part of the electronic medical record, the flowsheet allows physicians and patients to track the progress of diabetes with every visit. Patients are offered a copy of the sheet to take home to help in self-management.

The quality improvement approach did not end with creation of the registry. The quality improvement team regularly monitors process and outcome measures, such as blood pressure, HbA1C, LDL cholesterol and eye exams. As well as assessing use of the flowsheet, the ability to work as a team, and ability to quantify data.

The Health for All team is adamant how care is delivered can only be improved if the system that delivers it is improved; and they're hoping to inspire other family health teams around the province to try the quality improvement approach as they implement programs of their own.

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