

Now Is The Time To Choose Wisely: Advancing Quality Improvement In Primary Care

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Disclosures/ Potential Conflicts of Interest

- Peter:

Honorarium and expenses from the following organizations:

- Choosing Wisely Canada
- Ontario College of Family Physicians
- Canadian College of Family Physicians
- Canadian Medical Association: Joule, Physician Leadership Institute
- MUMS Guidelines
- Accreditation Canada International

- Kimberly:

- No industry or for-profit funding
- Supported by Choosing Wisely Canada
- Stipend from OCFP for facilitating Practising Wisely Course

Objectives

- Deepen familiarity with Choosing Wisely Canada, at time when “Less is More”
- Discover that for docs, one QI project can count multiple times
- Discover how CWC toolkits lend themselves to QI for inter-disciplinary teams

Poll Questions!



83 Professional Societies



425+ Recommendations



13 Provinces and Territories



17 Medical Schools (STARS)



**18% Public Awareness &
250,000 hits to website
per month**



2 Public Campaigns



Over 440 QI projects

CoVid and Resource Stewardship

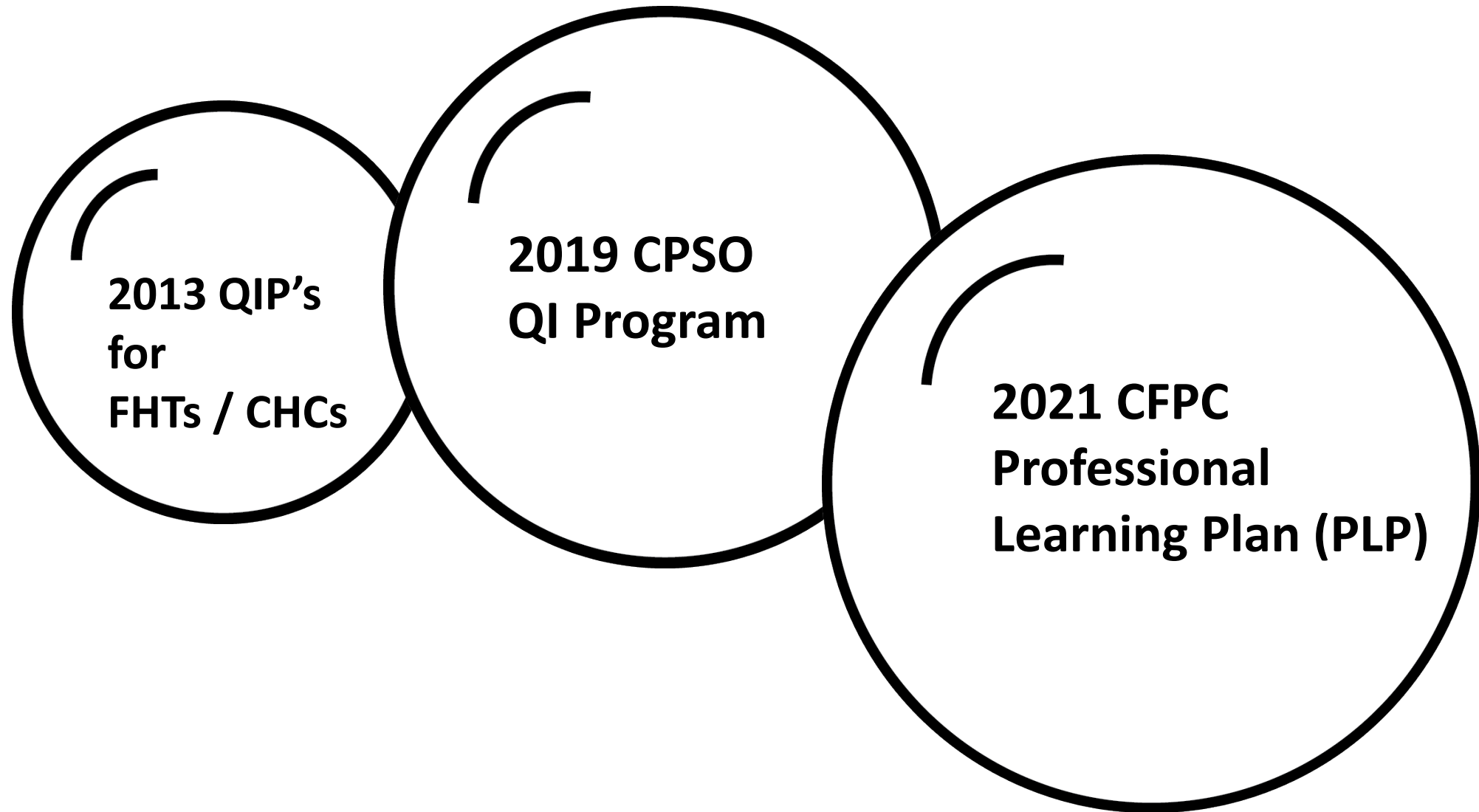


Priority Recommendations 2020-21



Will launch March 2021

Physician QI Requirements



CPSO QI Program

- Implemented 2019
- Proactive, self-directed
- Required every 5 year cycle
- Replaces practice audit
- CWC recommended as subject matter for QI
- **Physicians can count FHT QI toward this**

CPSO QI Program



CPSO

PUBLIC



PHYSICIANS



ABOUT



NEWS



[SIGN UP](#)



QUALITY IMPROVEMENT FOR INDIVIDUALS

FAQS: QUALITY
IMPROVEMENT PROGRAM
FOR INDIVIDUALS

QI PROGRAM RESOURCES

[QI PROGRAM CPD CREDITS](#)

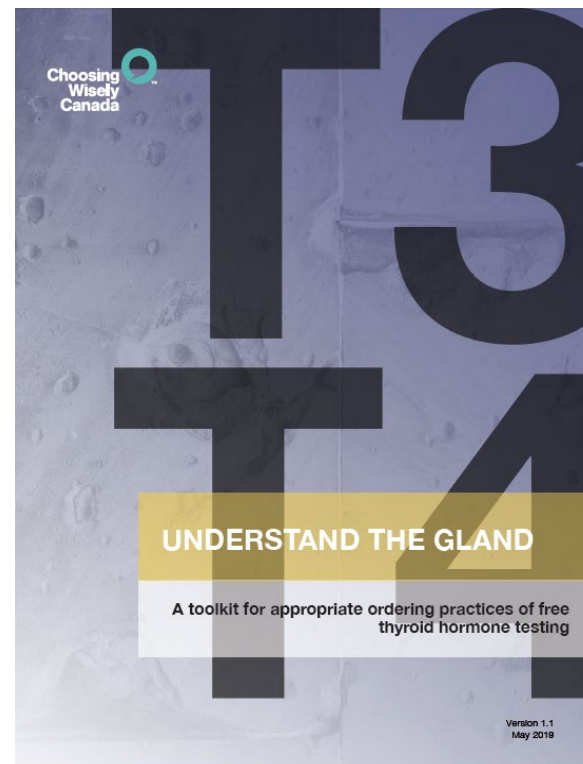
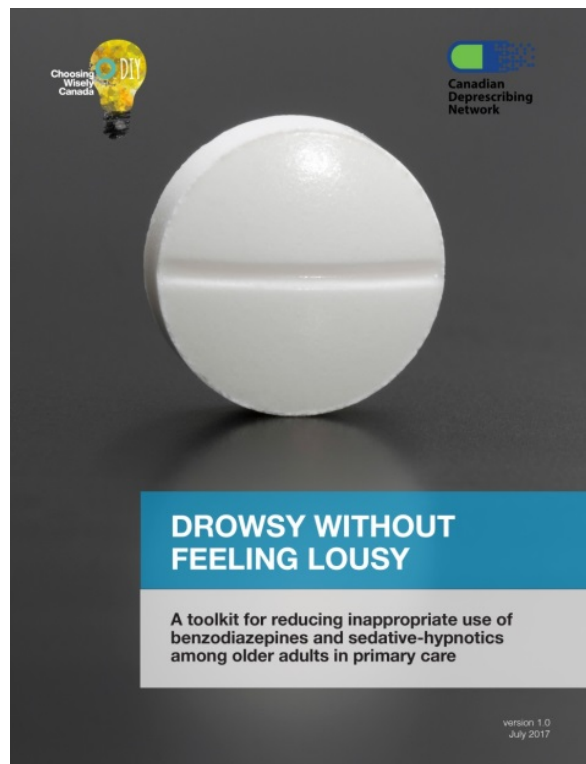
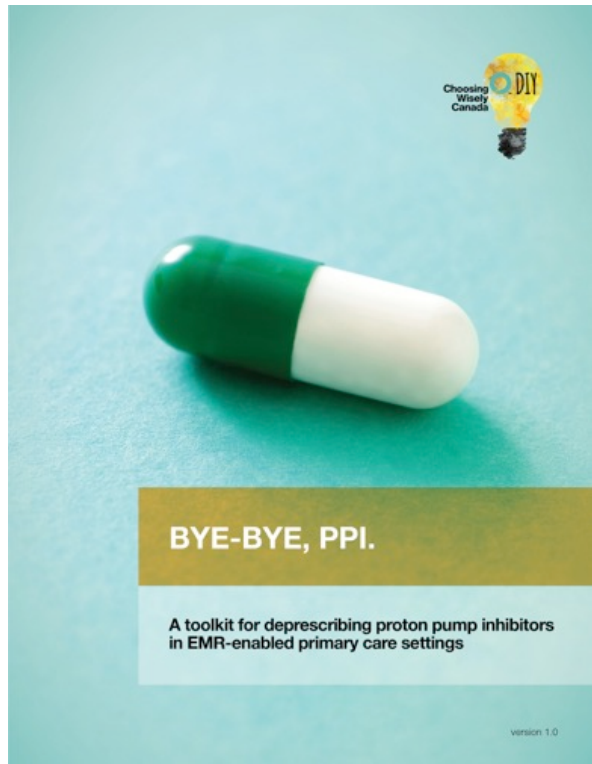
QI PROGRAM	# OF CREDITS MAINPRO+ CERTIFIED	MAINPRO+ ACTIVITY FORM
Practice Profile	6	Practice Audit/Quality Assurance Program
Self-Guided Chart Review	6	Practice Audit/Quality Assurance Program
Data Driven Quality Improvement	6	Practice Audit/Quality Assurance Program
Practice Improvement Plan	6	Practice Audit/Quality Assurance Program
Implementing 2 PIP Goals	10 (5/goal)	Linking Learning to Assessment or Practice
QI Coaching	Variable depending on time spent	Linking Learning to Assessment or Practice
TOTAL POTENTIAL CREDITS	34 (or more)	

CFPC “PLP”

Physician Learning Program

- Scheduled to launch fall 2021
- Practice improvement, yields MainPro+ credits
- **Physicians can count FHT QI toward this**

Have you ever used a Choosing Wisely Canada Toolkit?



Choosing Wisely: An Idea Worth Spreading, 2016-18



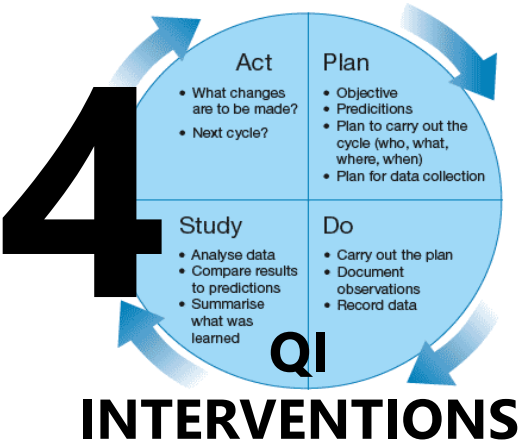
SHARED IDEA



DINNERS



LUNCHES



6 FAMILY
HEALTH
TEAMS

Measurable CWC Recommendations, Stratified by QI Pillar

	Choosing Wisely Canada Recommendation	Society List(s)	QI Pillar	Relevant for us? Yes/No	Possible ways of Measuring	Can we Measure? Yes/No
1	Don't use antibiotics for acute asthma exacerbations without clear signs of bacterial infection.	Respiratory Medicine	Safety Effectiveness		Search bills for dx 493, concurrent antibiotic Rx given Link to The Cold Standard Toolkit	
2	Don't initiate long-term maintenance inhalers in stable patients with suspected COPD if they have not had confirmation of post-bronchodilator airflow obstruction with spirometry.	Respiratory Medicine	Effectiveness Efficiency		Search for dx COPD (492 or 496) and presence of pulmonary function test or spirometry result. If CPPs not complete, search by common medication (tiotropium)	
3	Don't initiate medications for asthma (e.g., inhalers, leukotriene receptor antagonists, or other) in patients ≥ 6 years old who have not had confirmation of reversible airflow limitation with spirometry, and in its absence, a positive methacholine or exercise challenge test, or sufficient peak expiratory flow variability.	Respiratory Medicine	Effectiveness Efficiency		Search for dx or bill 493 and presence of pulmonary function or spirometry result; could stipulate age range eg ≥ 6 years	
4	Don't use antibiotics in adults and children with uncomplicated sore throats	Emergency Medicine	Effectiveness Patient Safety		Search bills for dx 460 and Rx antibiotic posted; could stipulate age range Link to The Cold Standard Toolkit	



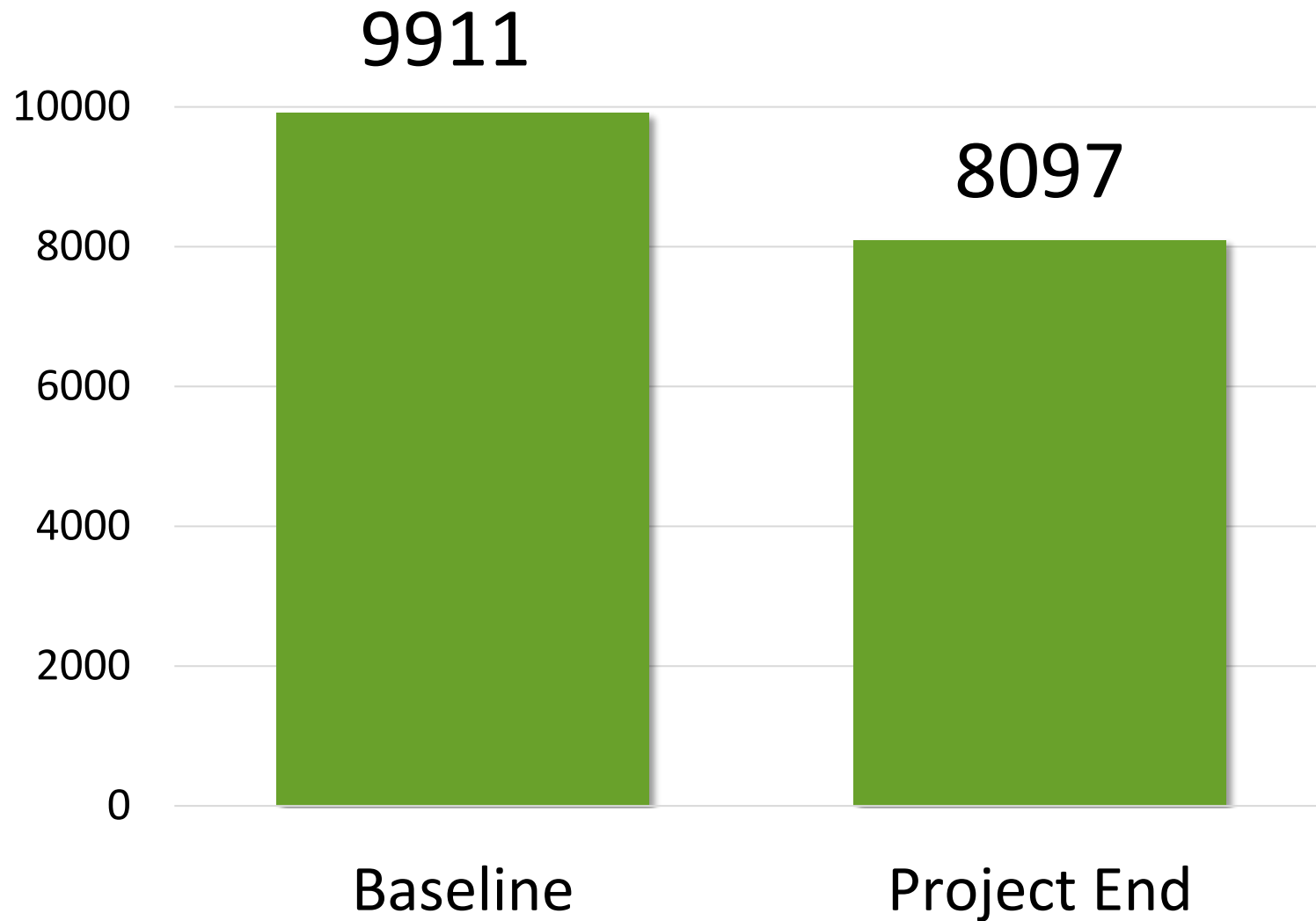
Choosing
Wisely
Canada



BYE-BYE, PPI.

**A toolkit for deprescribing proton pump inhibitors
in EMR-enabled primary care settings**

PPI > 12 months



1814
18.3%

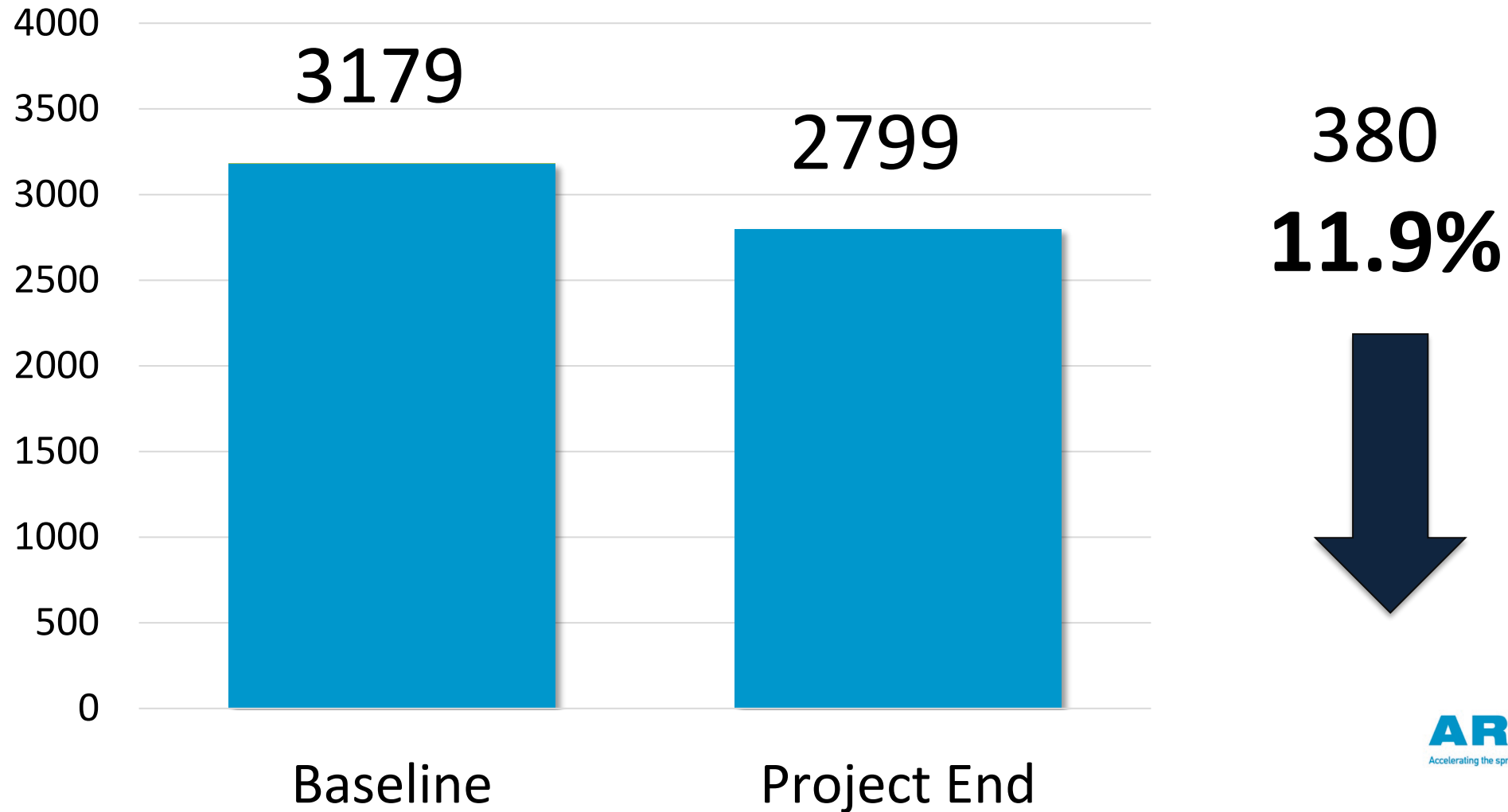




DROWSY WITHOUT FEELING LOUSY

**A toolkit for reducing inappropriate use of
benzodiazepines and sedative-hypnotics
among older adults in primary care.**

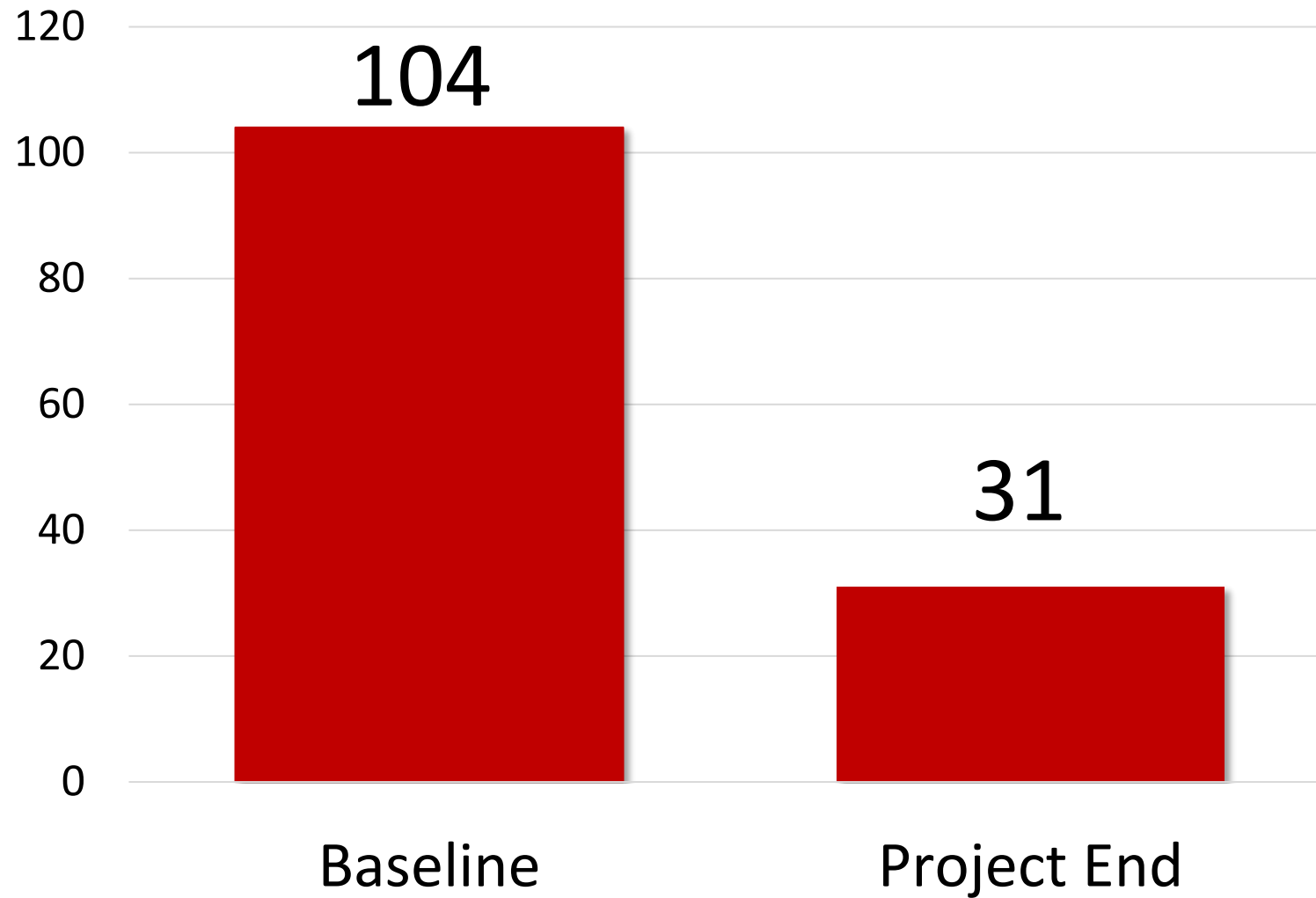
Sedative-Hypnotics \geq age 65



Avoid using medications known to cause hypoglycemia to achieve HbA1c < 7.5% in many adults age 65 and older; moderate control is generally better



Glyburide \geq age 65



73
70.2%



Factors that Enabled Success

- Alignment with strategic plan / QIP
- Dialogue among teams: pharmacists, QIDSS, data managers
- Respect for local team culture

Legacy

Are we choosing wisely?



PRACTISING WISELY

Reducing Unnecessary Testing and Treatment

Upcoming Session: March 11, 2021

*****registration will open early February*****

- **Get practical learning** to identify opportunities and develop strategies to reduce over-medicalization
- **Expand your skills** in accessing and assessing reliable, current online resources **for evidence-informed** practice
- Integrate **relevant evidence** into individual patient care decisions and plans
- **Get practical strategies** to communicate and build consensus with patients
- Critically assess appropriateness of clinical practice guidelines while **engaging with local colleagues**
- **Get helpful tips** on promoting good healthcare stewardship

Earn up to 21 Mainpro+ ® credits

ontariofamilyphysicians.ca/education

Back to our poll questions

- True or False: for physicians, participation in QI is “optional” – FALSE
- There are some non-evidence-based practices that have fallen away in the past year, and I would prefer NOT to reinstate them post-CoVid

Make It Count Twice.

Choosing Wisely and Continuing
Professional Development

FEB. 3 | 12 PM ET



Q&A

- How to engage physicians when the QI Lead is a non-physician?
- How do you encourage providers to take "time out of seeing patients" to participate in QI initiatives?

Designing QI projects to facilitate dissemination and research ethics requirements for QI

- Does Choosing Wisely have any collaborations with RISE or other OHT support partners?
- Comment on initiatives to taper opioids/benzos in COVID19 era - will we cause more harm than good?
- Ways to better engage/educate the patient to choose wisely?
- Would love to hear Drs. Wintemute & Kuling's thoughts on the role of patients in prioritizing recommendations



Upcoming Webinars

- **Primary Care Virtual Groups – Transitioning A CBT Program & Cardio-Pulmonary Rehab Program To Virtual**
 - February 17, 2021 (12-1 pm EST)
 - Registration [here](#)
- **Engaging And Supporting Caregivers In FHT's: Working Together To Improve Outcomes And Enhance The Patient, Caregiver, And Family Experience**
 - February 25, 2021 (12-1 pm EST)
 - Registration [here](#)

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- **Members-** to get exclusive content, including our weekly newsletter and more, sign up with your team email address on our home page.
- **Non-members** can sign up for the latest updates too- including our monthly QI in Action ebulletin.

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Communities and leadership tools and resources

Demonstrating the value of team-based care

Data to Decisions

Enabling high-quality care

AFHTO Leadership Councils

Conference

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