PHYSICIAN QUALITY IMPROVEMENT Specialist Services Committee

Provincial PQI Alums Engagement Survey Summary Report

March 2024

Background

Purpose

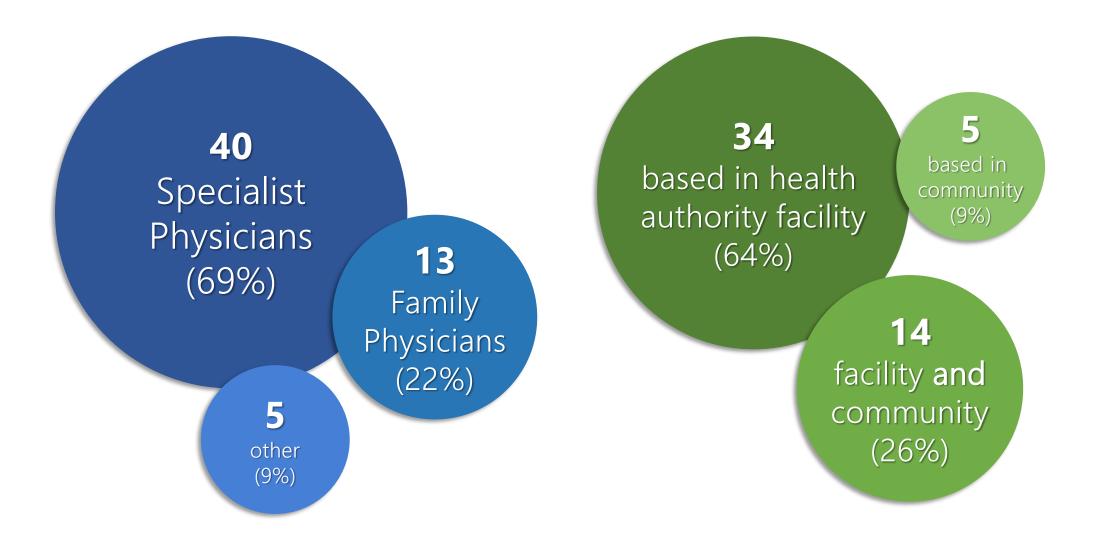
Measure and evaluate the progression of alums in QI and leadership, and the effectiveness of supports and opportunities across the regions and provincially.

What we look for

- "Strongly Agree" or "Agree"
- Insightful answers to open ended questions
- Signs of impact





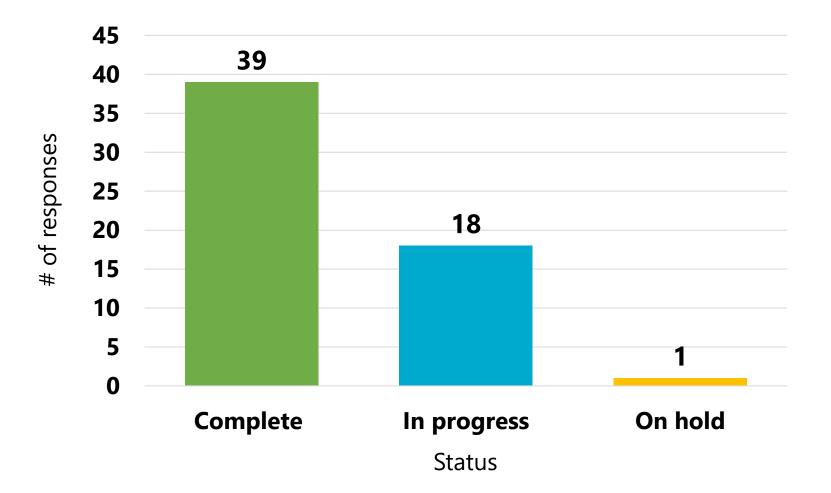


Quality Streams (opportunities for alums after graduation)

Connect	Question 14	
Learn	Conditional questions 8a, 8c	
Teach	Conditional questions 8b, 8c	
Apply	Questions 7, 8, 10	
Lead	Questions 11-13	



PQI Action Learning Projects – Current Status





2.0 – Activity, but no changes: Initial cycles for project development have begun (obtaining baseline data, completing process mapping, process and outcome measures have been determined, etc.).

2.5 – Changes tested, but no improvement: Initial cycles for testing changes have begun, data is being graphically displayed against targets/aims.

3.0 – Modest improvement: Successful tests of changes have been completed for some components related to the project plan/charter. Some small-scale implementation has been done. Anecdotal evidence of improvement exists.

3.5 – Improvement: Testing and implementation continues and additional improvement in project measures towards aim is seen.

4.0 – Significant improvement: Aim has been achieved.

4.5 – Sustainable improvement: Data indicates sustainability of changes implemented in the system.

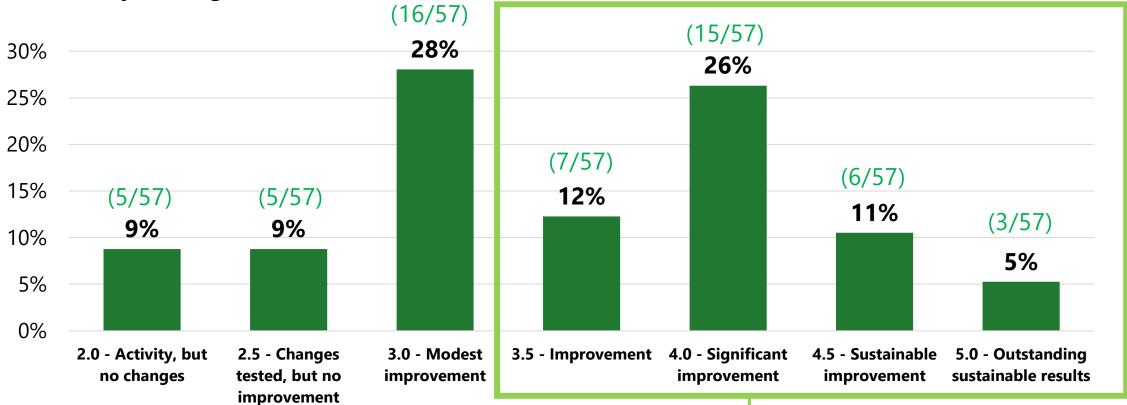
5.0 – Outstanding sustainable results: Implementation has been completed, and project aim and expected results have been accomplished. Organizational changes have been made to accommodate improvements and to make project changes permanent.

Adapted from the IHI Project Progress Self-Assessment Scores



PQI Action Learning Projects - Progress

Based on Project Progress Scores



54% of respondents report that their Action Learning Project has demonstrated improvement (3.5) to outstanding sustainable results (5.0)



Initial Theming - PQI Action Learning Project Enablers



Health authority buy in at executive and operational levels



Support from PQI post-training





Initial Theming - PQI Action Learning Project Barriers

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Lack of time to devote to QI (competing with clinical duties)



Limited health authority buy in at executive and operational levels



Challenges with data & systems (access, timeliness, analysis support, IT issues)



Lack of funding to support QI work



Continued engagement





22 projects received funding or support through the JCCs



19 projects received funding or support through a health authority



5 projects received no funding or support for other QI projects after completing PQI Level 3



Leadership impacts

"I have taken on a senior leadership position with the intent of spreading QI and improving the working relationships between physicians. This is a direct result of work I did through PQI."



77% (44/57) of respondents agree/strongly agree that PQI has positively affected their leadership abilities (formally or informally).



53% (31/58) of respondents reported taking on a new or expanded leadership role after engaging in PQI.



How does provincial alums data compare to DOBC Health Authority Engagement Survey results?

DOBC HA Engagement Survey

PQI Alums Survey















How does provincial alums data compare to DOBC Health Authority Engagement Survey results?

HA Engagement Survey (2023)	PQI Alums Survey
Senior leaders seek physicians' input when setting the health authority's goals.	Physicians are given opportunities to provide input into health authority's goals and priorities.
19% agree (-3% from 2022)	33% (16/48) agree/strongly agree
Senior leaders' decision-making is transparent to physicians.	Has participating in PQI Level 3 training given you any insight into how senior leaders in your health authority make decisions?
13% agree (-2% from 2022)	52% (25/48) report that they have more insight

Next steps

- Present findings to QIWG, SHARCs, regional QI Steering Committees
- □ Share written summary report with key partners
- Work with partners to improve survey (i.e., timing, accessibility)
- Deploy survey in Fall 2024 for current cohorts
- □ Collect data regularly over time

