

# Project Charter

## Project Details

Region/Agency:	Southern Health-Santé Sud	Facility:	Quick Care Clinic
Project Name:	Connecting the Docs	Project Sponsor:	Deb Taillefer
Project Start:	December 7, 2012	Project Lead:	Shawna Moodie/Scott Noble
Team Members:	Kristi J, Karen I, Jacqueline K, Natalie D, Christa C, Chantal G, Pat D		

## Problem Statement / Opportunity

The unclear process in finding a primary care provider (PCP) results in patients unattached to a PCP because of personal choice, lack of communication, location/geography, problems & issues recruiting/retaining PCPs, lack of knowledge/resources, population boom and duplication of services. This results in a lack of comprehensive person-centred care, as well as frustrated patients and providers. This project's initial focus will be on patients of the Quick Care Clinic in Steinbach.

## Background / Context

Southern Health-Santé Sud has a fast growing population and access to services is critical to quality care. This project is addressing the issue of "unattached" patients (those without a primary care provider or PCP) by linking these residents to available providers in the region. There are physicians in the region who have the ability to take on new patients and community members who do not have a provider, but want one (6,186 in the East as of the August 2012 CCHS report). Linking patients with providers will support the Primary Care Network (PCN) and Advanced Access initiatives and will assist in meeting the province's goal of connecting everyone who wants a PCP with one by 2015.

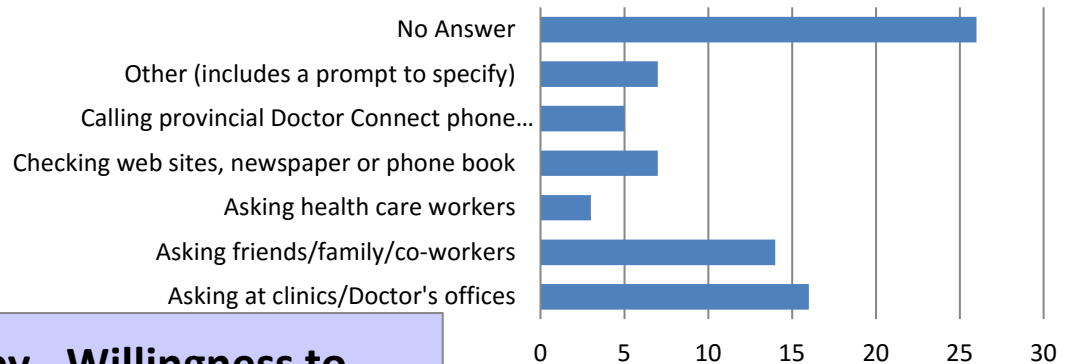
## Current State Analysis and Measures

### Steinbach: Willing To Travel

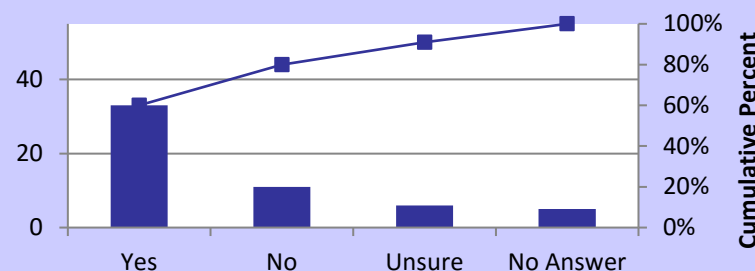
Average - 18 min, 6.7 Km  
 Mode (Time) - 30 min  
 # No response: 9 (36%)  
 # No travel: 7 (28%)

Total Steinbach Responses: 25  
 46% of total surveys returned for Steinbach (25 of 54)

### What Survey Respondents Tried When Seeking Provider



### Pareto: Survey - Willingness to Travel for Care



What Methods Tried

### "Other" Communities: Willing To Travel

Average - 37 min, 22 Km Mode (Time) - 20-30 min  
 # No response: 3 (11%)  
 # No travel: 1 (4%)  
 Total "Other Community" Responses: 27  
 50% of total surveys returned for communities outside of Steinbach (27 of 54 surveys)

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## Aim Statement (Future State)

Communicate the required information on the Manitoba Health Family Doctor Finder program to 100% of clients presenting to the Quick Care Clinic (QCC) and identifying themselves as seeking a family physician. Increase contacts to the Family Doctor Finder contact centre and regional Primary Care Connector from the QCC catchment area to begin the process of connecting residents to an available provider.

## Improvement Ideas Discussed

- Create an algorithm to assist staff in connecting patients to the Doctor Connect program
- Develop a satisfaction survey to obtain information about the customer experience going through the connection process
- Work with the regional Primary Care Connector to develop training and education package/plan, ensuring it is compatible with the Manitoba Health communication

## PDSA Cycle Implementation Plan

Scott works with Karen (team member and Primary Care Network Lead) and Robin (regional Primary Care Connector) to develop an algorithm.

Scott, Shawna, Karen and Robin to work on an education package that complements the Manitoba Health material.

Shawna to work with Susan and Kathy (Health Information/PHIA) to develop the satisfaction survey; the survey to allow tracking each respondent through the process to get the cycle times while maintaining privacy.

## Control and Follow-up Plan

Education package was implemented with the help of the regional Primary Care Connector. A survey was conducted at the Quick Care Clinic in Steinbach to evaluate the effectiveness from September to December 2014, yielding 20 survey responses, which was not a statistically valid sample. Supplemental data was sought from the Family Doctor Finder (FDF) hotline referencing the code for clinic referral. The FDF data showed an increase from 2 calls/month prior to roll out, to an average of 4.4 calls/month after roll out. This indicates an increase based on the education. Feedback from the survey was overall positive, with challenges based on the time from call to the hotline to referral to a provider (no providers accepting in the region at this time).

## Insights

This project was fraught with challenges. The lessons learned include seeking Green Belt projects that fit the DMAIC model, rather than trying to invent a process, which would be better suited for a Design For Six Sigma model. In addition, the reliance on a program controlled entirely outside of the region meant that the project had significant delays. Future projects will ensure that the process is owned by Southern Health-Santé Sud. The attachment rate and project/FDF results will need to be evaluated in future population stats.

## Project Timeline

Project Start	Define	Measure	Analyze	Improve	Control	Project End
Dec 7, 2012	Jan 15, 2013	Feb 12, 2013	May 28, 2013	May 28, 2013	Mar 13, 2015	Mar 13, 2015