Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 12, 2026

Community Care
City of Kawartha Lakes

Ontario Health

OVERVIEW

Community Care City of Kawartha Lakes Community Health Centre remains deeply committed to advancing equitable, patient-centred care. Over the past year, we have made meaningful progress in improving access to primary care for individuals who are unattached and experiencing vulnerability or complex social needs.

A key focus has been strengthening pathways that connect these individuals to care. By working closely with community partners and providing direct access to our application process, we have created a streamlined intake pathway that prioritizes people facing social complexity, unmet health needs, and barriers related to the social determinants of health. Through strong collaboration with the Kawartha Lakes Haliburton Ontario Health Team, local Family Health Teams, Ross Memorial Hospital, the John Howard Society, A Place Called Home, and the City of Kawartha Lakes and Haliburton Housing Services, we have expanded our reach and ensured clients can access both essential community supports and primary care at the CHC.

We have also continued to modernize how clients access services. The implementation of the Ocean digital platform has improved referral coordination while also expanding options for online appointment booking and the use of eConsults to support timely access to clinical advice and care. In addition, our group intake processes have been enhanced to include clearer education and explanation for new clients, helping them better understand CHC services while also strengthening our ability to collect meaningful sociodemographic information. This work supports more responsive care planning and ensures we are better able to understand and address the needs of the populations we serve.

Together, these efforts—including streamlined referrals, digital access tools, and improved intake processes—have contributed to steady improvements in access to care, with attachment rates increasing from 67.7% in Q3 of 2024/25 to 70.6% at the same time this year. As we move into the next QIP cycle, we remain committed to building on this momentum and strengthening a system that is accessible, inclusive, and grounded in community partnership.

ACCESS AND FLOW

Our Community Health Centre continues to strengthen access and system flow by implementing strategies that reduce administrative burden, enhance efficiency, and ensure that clients receive the right care in the right place at the right time. Over the past year, we have focused on optimizing internal processes to support timely access to primary care and to help individuals remain safely in the community, reducing the need for emergency department visits or hospital admissions.

A key advancement has been the adoption of Heidi AI Scribe, which has significantly decreased documentation time for providers and allowed more clinical capacity to be directed toward patient care. We have also redesigned our nursing schedule to better align provider availability with patient needs, supporting smoother daily flow and more responsive care. In addition, we have achieved 100% provider participation in the use of eConsults, enabling faster access to specialist advice and helping many clients receive appropriate care without requiring external referrals or unnecessary travel.

To further streamline access, we expanded our use of the Ocean platform for online appointment booking and intake, enabling faster triage and more efficient attachment of new clients. This digital approach supports both clinical and administrative teams by reducing manual processes and improving the quality and completeness of information received. We have also implemented consistent “fit-in” appointment spots within each provider’s schedule, allowing for more timely responses to urgent or emerging needs and helping reduce reliance on external services.

While these improvements have strengthened access, our data shows a slight decrease in the perception that clients are able to obtain timely appointments when needed, declining from 80.83% to 77.54%. In response, we are committed to implementing a structured Plan-Do-Study-Act (PDSA) approach to increase the availability of same-day and next-day appointments. This quality improvement work is being undertaken in collaboration with the Kawartha Lakes Haliburton Ontario Health Team and Centre for Effective Practice (CEP) as part of a broader initiative with our Interprofessional Primary Care Team (IPCT) partners.

These efforts reflect our continued commitment to evidence-based practices that promote continuity, timely access, and coordinated community-based care. As we move forward, we remain focused on strengthening system flow, improving the patient experience, and ensuring that individuals across our region can access comprehensive, high-quality care when they need it most.

EQUITY AND INDIGENOUS HEALTH

Our Community Health Centre is committed to advancing health equity and supporting improved outcomes for populations who

experience disproportionate barriers to care. Over the past year, we have strengthened our efforts by expanding staff education, deepening community partnerships, and enhancing access for groups facing social and structural inequities. All staff have been provided with opportunities to increase their knowledge of Indigenous health through Ontario Health's e-learning modules, supporting a stronger understanding of culturally safe practices and the historical and ongoing impacts of colonization. While our community has a relatively small Indigenous population, we maintain active collaboration with the Peterborough Community Health Centre, which serves as a key resource for Indigenous-specific supports and guidance.

Our equity work also focuses on improving access for individuals who are unhoused, precariously housed, or living with mental health and substance use challenges. We continue to prioritize flexible, low-barrier care options and outreach approaches that meet people where they are. As our region grows and becomes more diverse, we have strengthened partnerships with the New Canadians Centre and the Kawartha Lakes and Haliburton Integrated Immigrant Services Association to better support newcomers and refugees who may face linguistic, cultural, or systemic barriers to care.

These efforts reflect our commitment to creating a more inclusive, responsive, and equitable health system. Looking ahead, we will continue to build on these foundations by engaging with community partners, expanding staff training, and ensuring that our programs and services remain accessible and culturally safe for all individuals in our region.

PATIENT/CLIENT/RESIDENT EXPERIENCE

Our organization uses patient and client experience data as a key driver of continuous quality improvement. Feedback gathered through experience surveys, along with input from client engagement opportunities and operational data, helps us identify where access, communication, and care coordination can be strengthened.

Recent survey results indicated a slight decline in the perception of timely access to care, decreasing from 80.83% to 77.54%. In response, we are incorporating this feedback directly into our quality improvement planning. Using a structured Plan-Do-Study-Act (PDSA) approach, we are working to increase the availability of same-day and next-day appointments. This work is being undertaken in collaboration with the Kawartha Lakes Haliburton Ontario Health Team and the Centre for Effective Practice (CEP) as part of a broader quality improvement initiative with our Interprofessional Primary Care Team (IPCT) partners. By analyzing scheduling patterns, appointment demand, and patient feedback, we aim to improve timely access while maintaining continuity of care.

Client feedback has also informed enhancements to our group intake processes. By providing clearer education and explanation for new clients during intake, we are improving understanding of available services while strengthening the collection of sociodemographic information. Over the past year, the proportion of our ongoing primary care clients with sociodemographic data recorded increased by 7.23%, rising from 68.23% last year. This improved data collection allows our team to better understand the populations we serve and more effectively identify and address barriers related to the social determinants of health.

Together, these efforts ensure that client experience data and population insights remain central to our quality improvement work, guiding practical changes that strengthen access, coordination, health equity, and patient-centred care.

PROVIDER EXPERIENCE

Our Community Health Centre continues to invest in recruitment, retention, and workplace culture through initiatives that strengthen staff well-being, foster connection, and support a positive organizational environment. Over the past year, we have implemented spring and fall team education and team-building days, creating dedicated opportunities for staff to learn, collaborate, and build relationships outside of daily clinical responsibilities. These events have contributed to a more cohesive and supportive workplace culture.

To enhance recruitment and retention, we have introduced a rural incentive within our physician compensation model, helping us remain competitive and attract providers committed to serving our community. We have also adopted Heidi AI Scribe to reduce administrative burden and documentation time, allowing clinicians to focus more fully on patient care and improving overall job satisfaction.

Our commitment to staff appreciation is reflected in several meaningful initiatives led by senior leadership. This year, the leadership team hosted a summer BBQ where they personally served staff as a gesture of gratitude. They also organized and served a Holiday dinner for all team members, reinforcing a culture of recognition, respect, and shared celebration. These events have been well-received and have strengthened the sense of community within the organization.

Additionally, our staff-driven recognition program allows any team member to acknowledge colleagues for exceptional contributions or moments that reflect our organizational values. Together, these initiatives support a workplace grounded in appreciation, collaboration, and professional fulfillment, helping ensure a stable and engaged workforce capable of meeting the evolving needs of our community.

SAFETY

Our Community Health Centre is committed to fostering a responsive and resilient safety culture that goes beyond measuring the absence of harm. We continue to shift our focus toward proactive, real-time safety monitoring by emphasizing learning, preparedness, and system-level awareness. While we follow best practices for all clinical procedures, we recognize that incidents can occur. For example, a recent change in the manufacturing and packaging of a childhood immunization resulted in a dose where only the diluent was administered. This event prompted an immediate organizational response, including enhanced staff education, strengthened communication processes, and reinforced documentation practices both on packaging and within the client chart. This approach reflects our commitment to learning from near misses and using them to build safer, more resilient systems.

We have also improved physical safety and accessibility within our building by installing additional accessible door-opening buttons, ensuring safer movement for clients and staff. Our organization maintains a strong emphasis on incident monitoring, with

structured processes for tracking, reviewing, and intervening as needed. These discussions are a standing item on our Quality Management Committee agenda, ensuring continuous oversight and timely action.

Annual education and regular in-services provide ongoing opportunities for staff to raise questions, identify risks, and participate in collaborative problem-solving. We remain aligned with Accreditation Canada Standards for Infection Prevention and Control and Medication Management, and we work closely with Public Health to support safety measures for both clients and staff. Through these efforts, we continue to strengthen a culture of vigilance, adaptability, and continuous improvement.

PALLIATIVE CARE

Our Community Health Centre integrates palliative care throughout the illness trajectory by emphasizing person-centred planning, coordinated interdisciplinary support, and care that prioritizes quality of life for patients and their families. We have a unique opportunity and benefit of in-house Hospice services and its Palliative Care Community Team (PCCT), patients benefit from nurse navigators, counsellors, and structured grief and bereavement supports, ensuring alignment with Quality Statements related to emotional, psychosocial, and spiritual care. This collaboration also supports ongoing discussions about preferred settings of care and end-of-life wishes, helping patients remain at home whenever possible.

Three key activities demonstrate our commitment to high-quality palliative care. First, our providers work closely with PCCT nurse navigators to develop individualized, person-centred care plans that reflect patient goals, values, and cultural considerations. This fulfills Quality Statement 5 by ensuring shared decision-making across the care team. Second, our integration with Hospice services enables seamless access to grief and bereavement supports, including counselling and support groups for families and care partners. Third, our clinicians—most of whom have completed LEAP training—collaborate with the community's on-call palliative physicians to provide timely symptom management and care closer to home, consistent with Quality Statement 11.

Our organization also benefits from the presence of a Clinical Coach for Palliative Care, who provides education, case support, and opportunities for continuous improvement. Feedback from patients, families, and Hospice partners is used to refine care plans and strengthen communication processes. Together, these efforts ensure that individuals with life-limiting illnesses receive compassionate, coordinated, and culturally responsive care throughout their journey.

POPULATION HEALTH MANAGEMENT

Our Community Health Centre applies population health–management principles by working collaboratively with partners across the Kawartha Lakes Haliburton Ontario Health Team (KLH OHT) to understand and respond to the evolving health and social needs of our community. With several recent physician retirements contributing to a growing unattached patient population, our organization has relied on shared community data to identify priority groups and co-design solutions that improve access to primary care. Using this data, we submitted two expressions of interest for funding to support the attachment of unattached patients, reflecting the first step of population

identification outlined in the RISE framework.

The KLH OHT has played a central role in gathering and integrating data from Ross Memorial Hospital, City of Kawartha Lakes Paramedic Services, and the City of Kawartha Lakes and Haliburton Housing Corporation. This collective information provides a clearer picture of population needs, service gaps, and patterns of health-system use. We also draw on paramedic outreach data—though limited—to better understand who we are connecting with, what services they require, and how our partnerships can support them more effectively.

This data often intersects with information from Victim Services, Parole and Court Support, Mental Health Outreach, and A Place Called Home, helping us identify individuals with complex social and health needs who benefit from coordinated, person-centred care. These partnerships allow us to design more proactive and equitable approaches to care, ensuring that interventions are informed by real-time community insights and aligned with the broader goals of population health management.

CONTACT INFORMATION/DESIGNATED LEAD

Melinda Jayne Gilmour, Director of Clinical Services
mgilmour@ccckl.ca
705-324-7323 Ext. 463

SIGN-OFF

It is recommended that the following individuals review and sign-off on your organization's Quality Improvement Plan (where applicable):

I have reviewed and approved our organization's Quality Improvement Plan on

_____

_____
Board Chair

_____
Quality Committee Chair or delegate

_____
Executive Director/Administrative Lead

_____
Other leadership as appropriate

_____