

Access and Flow | Efficient | Custom Indicator

Indicator #1	Last Year		This Year		
	% active patients rostered (Marathon FHT)	77.20 Performance (2024/25)	83 Target (2024/25)	76.80 Performance (2025/26)	-- Percentage Improvement (2025/26)

Change Idea #1 Implemented Not Implemented In Progress

Launch an enrollment drive

Process measure

- Number of Q200A billed per month.

Target for process measure

- There will be 70 enrollments per month for each of March and April of 2024, while the enrolment campaign is underway.

Lessons Learned

The enrollment drive involved using various forms of media to make patients aware of the importance of enrollment and how to enroll with MFHT. While this effort resulted in an uptick in enrollments, its lack of specificity made the drive inefficient: the majority of patients contacting the clinic to enroll were in fact already rostered which was not an effective use of limited administrative HR. Subsequent to the media blitz, a text reminder was sent to all active but not rostered patients with reminder consents to encourage them to enroll. The text included the link to the online fillable enrollment form. This also contributed to an uptick in enrollments. Efforts were also made to encourage front reception to focus on enrollment of patients as they presented to the clinic. This was the most effective in terms of specificity and number of enrolments per month. Unfortunately, after reaching a peak of 78.6% of active patients enrolled, enrollment declined over time due to lack of continuity and shortages in front reception and administrative human resources.

Change Idea #2 Implemented Not Implemented In Progress

Update new patient process to ensure enrollment at time of first contact

Process measure

- 1. % of new patients per week with enrolment form completed at time of first appointment.

Target for process measure

- 1. 75% of new patients per week with enrolment form completed at time of first appointment by December 2024

Lessons Learned

This was not implemented due to lack of continuity and shortages in front reception and administrative human resources.

Change Idea #3 Implemented Not Implemented In Progress

Reach out to patients listed as "active" with no appointments in the past 5 years to establish current status (moved, active, inactive) and facilitate rostering or de-roster as required

Process measure

- 1. % of active patients with no appointment in the past 5 years that MFHT has attempted to contact.

Target for process measure

- 1. MFHT will attempt to contact 100% of active patients with no appointment in the past 5 years by September 2024.

Lessons Learned

This was not implemented due to lack of continuity and shortages in front reception and administrative human resources.

Comment

This measure will be included in the 2025/26 QIP. Potential IT solutions are being explored to help reduce administrative burden. It is also hoped that administrative HR will stabilize in 2025/26.

Indicator #2 % patients with an email address in demographic section of EMR (Marathon FHT)	Last Year		This Year		
	43.00	60	42.20	--	NA
	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 Implemented Not Implemented In Progress

Create and implement an updated process for obtaining emails and email consents when patients present to the clinic.

Process measure

- 1. Number of emails with email consents added to the EMR per month at time of patient appointment

Target for process measure

- 1. 30 emails with email consents added to the EMR per month at time of patient appointment by December 2024.

Lessons Learned

Throughout 2024/25 MFHT has experienced shortages and inconsistency in administrative HR making progress challenging.

Change Idea #2 Implemented Not Implemented In Progress

Contact patients via email to have email confirmed and email consent completed

Process measure

- 1. Number of email consents completed in response to mass email.

Target for process measure

- 1. 100 email consents completed in response to mass email.

Lessons Learned

The new email consent has been completed but has not yet been converted into a format that can be completed and submitted online. This was to be part of a patient portal, but is on hold as the MFHT EMR is being reviewed to determine if it will be changed or undergo a major update.

Comment

This measure will be replaced in 2025/26 with % patients with email consents in the chart, as many of the current emails are not useful since they are not accompanied by an email consent.

	Last Year		This Year		
Indicator #3	45.00	65	67.80	--	NA
% staff and providers with completed job detail manuals (Marathon FHT)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 Implemented Not Implemented In Progress

Review staff and provider positions to determine tasks/duties for which a job detail would be required.

Process measure

- Number of staff/providers for whom tasks/duties reviewed for need of job details.

Target for process measure

- Tasks/duties of 2 provider/staff members reviewed per month by mid-September 2024.

Lessons Learned

This idea has been partially completed, for staff/providers that are able to do so given the HR challenges in 2024/25.

Change Idea #2 Implemented Not Implemented In Progress

Implement job detail manual completion timeline for staff/providers

Process measure

- 1. % of job details manuals in progress. 2. % of job details manuals completed

Target for process measure

- 1. 100% of job details manuals in progress by March 15, 2025. 2. 65% of job details manuals completed by March 15, 2025

Lessons Learned

This idea has been partially completed, for staff/providers that are able to do so given the HR challenges in 2024/25.

Comment

This measure will be included in the 2025/26 QIP. It is hoped that staff and provider HR will stabilize in 2025/26 enabling more job detail manuals to be completed.

Safety | Effective | Custom Indicator

	Last Year		This Year		
Indicator #4	67.00	75	64.50	--	NA
Percentage of patients with allergy field in the EMR populated (Marathon FHT)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 Implemented Not Implemented In Progress

Complete a "catch-up" project to contact patients to acquire missing allergy information.

Process measure

- 1. % of patients with a populated allergy field

Target for process measure

- 1. 72% of patients having the allergy field populated by September 2024, 75% by December 31 2024.

Lessons Learned

Throughout 2024/25 MFHT has experienced shortages and inconsistency in administrative HR making progress challenging.

Change Idea #2 Implemented Not Implemented In Progress

Review and update the new patient process

Process measure

- 1. % of new patients having allergy field updated in chart within a month of their first appointment.

Target for process measure

- 1. 50% of new patients having allergy field updated in chart within a month of their first appointment by October 2024, 70% by December 2024.

Lessons Learned

Throughout 2024/25 MFHT has experienced shortages and inconsistency in administrative HR making progress challenging.

Change Idea #3 Implemented Not Implemented In Progress

Review and improve process for determining and updating allergy information when patients present at the clinic.

Process measure

- 1. % of patients seen in the previous month having the allergy field populated.

Target for process measure

- 1. 72% of patients seen in the previous month having the allergy field populated by September 2024, 75% by December 31 2024.

Lessons Learned

Throughout 2024/25 MFHT has experienced shortages and inconsistency in administrative HR making progress challenging.

Comment

This measure will be included in the 2025/26 QIP. Potential IT solutions are being explored to help reduce the administrative burden involved. It is also hoped that administrative HR will stabilize in 2025/26.