

Area of Focus - Increase Overall Access to Community Mental Health and Addiction (MHA) Services | Timely | Priority Indicator

	Last Year		This Year	
Indicator #3	24.80	20	25.10	20
Emergency department visit as first point of contact for mental health and addictions–related care (Cambridge North Dumfries OHT)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)
OHT Population: Mental Health & Addictions				

Change Idea #1 **Implemented** **Not Implemented**

We plan to pilot a clinic co-located at Cambridge Memorial Hospital (CMH) to offer quick access for mental health and addictions related care, focusing on individuals visiting the emergency department for low-acuity concerns, targeting CTAS levels 4 & 5.

Process measure

- (1) Number of unique patients accessing CND OHT C-MAC pilot clinic

Target for process measure

- (1) 100 unique patients

Lessons Learned

We piloted a very successful clinic co-located at Cambridge Memorial Hospital. In an 8-week period, we were able to serve 123 unique patients and had 451 patient encounters.

Area of Focus - Increase Overall Access to Community Mental Health and Addiction (MHA) Services | Timely | Custom Indicator

	Last Year		This Year	
Indicator #2	12.70	11	11	NA
Average number of patients per month with 4 or more ED visits for MH care in past 365 days (Cambridge North Dumfries OHT)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)
OHT Population: Mental Health & Addictions				

Change Idea #1 Implemented Not Implemented

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Lessons Learned

We piloted a very successful clinic co-located at Cambridge Memorial Hospital. In an 8-week period, we were able to serve 123 unique patients and had 451 patient encounters.

Area of Focus- Improving Overall Access to Care in the Most Appropriate Setting | Efficient | Priority Indicator

	Last Year		This Year	
Indicator #1	24.20	17	23.30	20
Alternate level of care days expressed as a percentage of all inpatient days in the same period (Cambridge North Dumfries OHT)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)
OHT Population: Frail and Medically Complex				

Change Idea #1 Implemented Not Implemented

We will implement frailty screening to support upstream intervention and optimize patient experience.

Process measure

- (1) Number of patients identified as at risk for frailty, (2) Number of patients screened for frailty, (3) Number of patients identified as frail

Target for process measure

- (1) 150, (2) 150, (3) 40

Lessons Learned

We continue to refine our frailty screening program and hope to launch this work in April 2024.

Area of Focus- Increase Overall Access to Preventative Care | Effective | Priority Indicator

	Last Year		This Year	
Indicator #6				
Percentage of screen-eligible people who are up to date with Pap tests (Cambridge North Dumfries OHT)	56.70	60	59.60	72
	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)

Change Idea #1 Implemented Not Implemented

We will host walk-in pap clinics across Cambridge and North Dumfries to encourage screening.

Process measure

- - Number of paps performed/number of unique patients - Number of patients without a primary care provider - Percentage of patients satisfied with care they received at the pap clinic

Target for process measure

- - By the end of FY 2023/2024, we hope to screen 150 people

Lessons Learned

We were able to implement a series of pop-up pap clinics in 2023/2024 but uptake was slow. We will continue to increase awareness of the pop up clinic and look for ways to continue this work.

Change Idea #2 Implemented Not Implemented

Increase awareness of primary care providers' performance on this preventative care indicator.

Process measure

- (1) number of primary care providers engaged per quarter

Target for process measure

- (1) 10 primary care providers in Cambridge and North Dumfries

Lessons Learned

We continue to work with the Waterloo Wellington Regional Cancer Program on an awareness campaign and hope to further this work in FY 2024/2025.

Indicator #5	Last Year		This Year	
	Percentage of screen-eligible people who are up to date with mammograms (Cambridge North Dumfries OHT)	60.70 Performance (2023/24)	65 Target (2023/24)	61.20 Performance (2024/25)

Change Idea #1 Implemented Not Implemented

Increase awareness of primary care providers' performance on this preventative care indicator.

Process measure

- (1) number of primary care providers engaged per quarter

Target for process measure

- (1) 10 primary care providers in Cambridge and North Dumfries

Lessons Learned

We continue to work with the Waterloo Wellington Regional Cancer Program on an awareness campaign and hope to further this work in FY 2024/2025.

Indicator #4	Last Year		This Year	
	Percentage of screen-eligible people who are up to date with colorectal tests (Cambridge North Dumfries OHT)	63.60 Performance (2023/24)	65 Target (2023/24)	63.60 Performance (2024/25)

Change Idea #1 Implemented Not Implemented

Increase awareness of primary care providers' performance on this preventative care indicator.

Process measure

- (1) number of primary care providers engaged per quarter

Target for process measure

- (1) 10 primary care providers in Cambridge and North Dumfries

Lessons Learned

We continue to work with the Waterloo Wellington Regional Cancer Program on an awareness campaign and hope to further this work in FY 2024/2025.