

Date of Completion: 15/09/16

QUALITY IMPROVEMENT PROJECT COMPLETION DOCUMENT

The description of the EVALUATION OF THE OUTCOMES of the project as they relate to the project AIM statement

This project has completed a small portion of the original aims that were stated in the project charter. The MI-STREAM Clinic was the only clinic that changed their referral process from fax based to email based on the recommendation of this project. The Fracture Clinic has also moved to an email based system however that was of their own accord.

There was a tremendous amount of bureaucratic inertia as several clinics cited that their staff was trained in one method and felt that a new method would only engender mistakes. Other reasoning was that outside referral sources still exclusively used fax and having an email based system for the TWH ED would be a costly duplication of efforts.

Finally while not explicitly made illegal by PHIPA; transmission of personal health information by email is still regarded by the MOH as insecure and ripe for accidental release of information as opposed to facsimile methods.

The MILESTONES set out in the QI Project Charter achieved as follows

Milestones that were achieved were the capturing of data relating to the referral system in respect to patient and clinical call backs. I also created templates of flowcharts for work processes in relation to an email based referral system as well as modifying the MI-STREAM Clinic referral sheet with an email address. Furthermore I secured meetings with the managers of the Fracture Clinic; MI-STREAM Clinic, and General Neurology Clinics.

LESSONS LEARNED/RECOMMENDATIONS for practice and or future projects

The lessons learned from this project would be to set up interviews and meetings with stakeholders much earlier on in the project to ascertain any unforeseen challenges or concerns that they might have while still formulating key parts of the project. This would allow for appropriate changes while the project is still in a more malleable phase and give stakeholders a sense of being a partner in the project. Also it allows for a more proactive ability to address concerns beforehand rather than reacting to criticisms of a mature project.

Plan for DISSEMINATING THE KNOWLEDGE from this project (e.g., presentations, posters, manuscripts)

All materiel and data relating to this project will be available on the UHN Emergency Medicine Research website.