Island Health Performance Measures

Patient Concerns Completed



Year to Date Performance

Island Health Target

85.0%

Performance Assessment

Performance Assessment

Yellow

Performance is outside acceptable range; monitor and take action as appropriate.

What do we measure and why?

All health authorities in British Columbia have a Patient Care Quality Office (PCQO) that is mandated to oversee a legislated process for complaints resolution. When a member of the public contacts the PCQO with care concerns, PCQO staff work in collaboration to help identify what type of resolution will work best and then to resolve concerns for patients and families in a way that answers their questions, provides an apology for the experience, and offers follow-up and closure.

BC's Patient Care Quality Review Board Act requires PCQO files to be completed within 40 business days, or a formal request for extension needs to be made. It is important to monitor these dates to ensure that a high percentage of files are being completed within this legislated timeframe. Completing PCQO files in time shows an organizational commitment to supporting patients and families as well as a commitment to organizational quality improvements.

This indicator reports the number of PCQO files completed within 40 business days, as a percentage of the total number of PCQO concerns filed.

What is the target?

Island Health's target for 2019/20 is that 95% or more of PCQO complaints will be completed within 40 days.

How are we doing?

As of September 2019, 85.0% of complaints were completed within 40 days, which does not meet Island Health's target.

The completion rate of PCQO files is impacted by three major factors: the overall volume of concerns; team capacity to review; and, the complexity of the files reported.

While the provincial expectation is that PCQO files are completed within 40 business days, there are situations where the file needs longer than 40 days to ensure thorough reviews are completed. Situations that could require PCQO extensions include being unable to reach the client to discuss their concerns, not being able to schedule a time for all parties to participate in review meetings, and the timeliness of gathering critical information from various areas.

What actions are we taking?

The PCQO has implemented a number of strategies, including hiring additional staff as well as redesigning workflow and reallocating workload among the team. This redesign will allow the team to be nimble and responsive to spikes in volume.

The PCQO is also trying new initiatives to better support clinical partners (including physicians) and in high-volume areas (such as emergency departments). The intent is to engage the right people at the earliest opportunity. These changes have yielded better engagement and a quicker response times.