



# Innovations in Primary Care: Quality Improvement

Primary Care Day Conference, Nov 2024

Olajumoke Ibanga, MD

TOPIC:



Enhancing  
Periodic Health  
Checks  
(PHC) for  
Adults with  
Intellectual and  
Developmental  
Disabilities  
(IDD)

# PROJECT DETAILS

**Location:** Western Medical Clinic, Brandon, MB

**Timeline:** June 2024 till date

## **Team Members:**

*Ola Ibanga - Resident/QI project co-lead. Paru Surenderan - Resident/QI project co-lead.*

*Jacob Yuriy - Resident/QI project co-lead. Sandi Levandoski - WMC CEO/COO.*

*WMC Physicians (multiple). WMC receptionists and office assistants (multiple)*

# PROJECT GOAL

To improve the quality, frequency, and effectiveness of periodic health checks for adults (> 18 years) with intellectual and developmental disabilities, leading to:

- Better health outcomes,
- Increased patient satisfaction and
- Improved care team experience



# Why is it important to primary care?

*Adults with IDD are a heterogeneous group of patients and have health conditions and factors affecting their health that can vary in kind, manifestation, severity, or complexity from those of others in the community.*

***They require approaches to care and interventions that are adapted to their needs***

# Health Checks: What's the evidence?

1

Health Checks are an evidence-based intervention for adults with developmental disabilities (Randomized controlled trial level evidence).

2

Health Checks are a high-yield intervention and have been shown to increase rates of screening maneuvers and identification of previously unrecognized factors and disease

3

Health checks are a recommended intervention of the Canadian Consensus Guidelines for Adults with Developmental Disabilities 2018 .

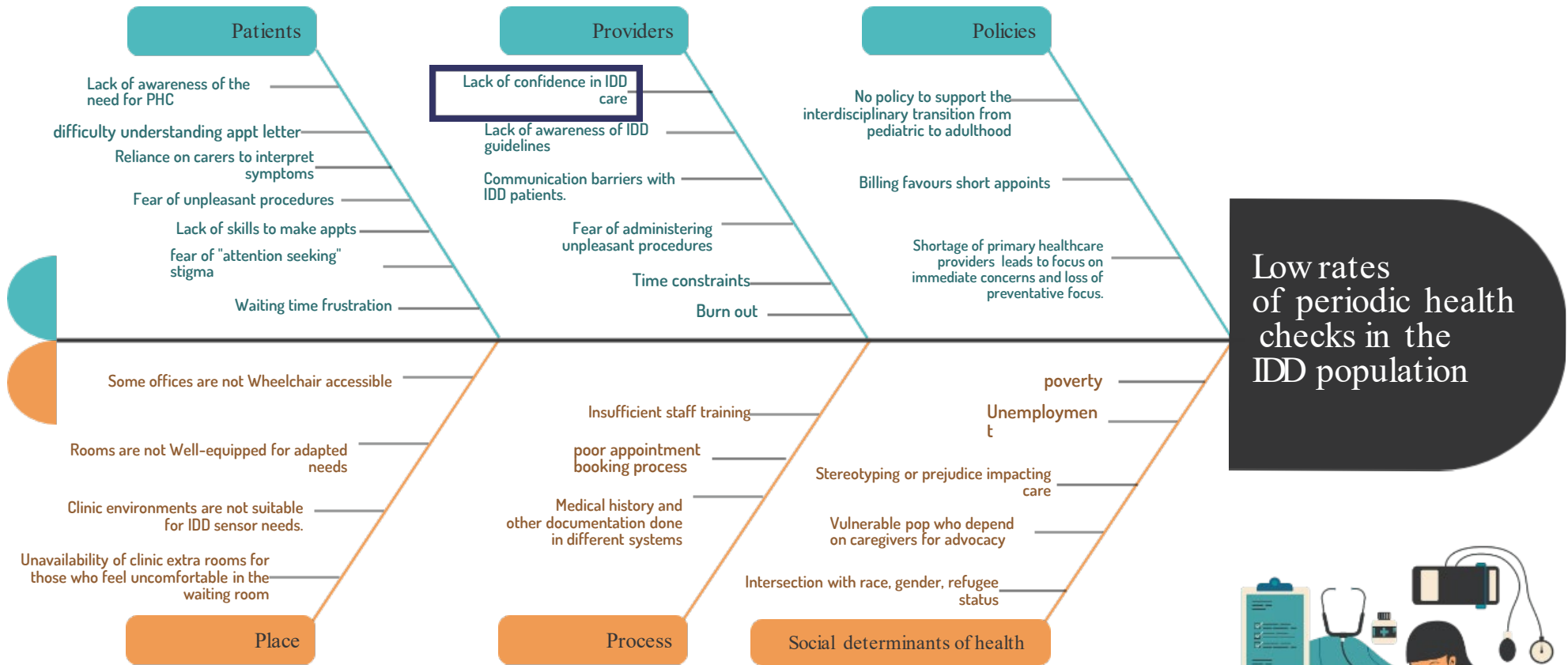
# “Did you know?”

(from the Atlas on the Primary Care of Adults with DD, 2013, unless otherwise noted.)

- Compared to the general population, adults with DD were more likely to have preventable hospitalizations
- A confidential inquiry into deaths of people with DD in England concluded that 37% were potentially avoidable through PHC.
- A Health Check adapted to the needs of adults with DD has shown: 6.6 fold increase in detection of vision impairment, 30-fold increase in hearing testing, Increase in immunization rates, health screening and new disease prevention. ( Lennox et al., 2007, 2011, 2012 )



# Enhancing periodic Health Checks for Adults (>18 years old) with Intellectual and Developmental Disabilities (IDD)





# Critical Success Factors

**Awareness:** Waiting room and office posters/pamphlets were critical in ensuring staff and the public were aware of the project and their role in enhancing care for the IDD population

**Data-driven decision-making:** Collected and analyzed survey data from staff to identify needs, trends, and areas for improvement.

**Training and Education:** Provided comprehensive training and resources for healthcare providers and Medical Office Assistants on the specific needs of individuals with IDD, including communication techniques and disability awareness

**Customized Health Check Protocols:** Developed health check protocols adapted to the unique needs and challenges adults with IDD encounter.

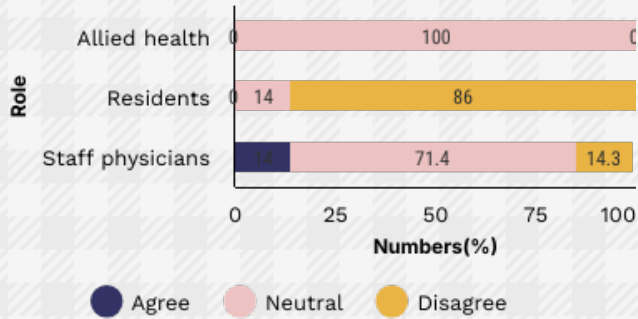
**Teamwork:** There were regular team meetings, collaborative problem-solving, and clear communication channels among team members

**Feedback Mechanism:** Established a continuous informal feedback loop with healthcare providers to gauge the effectiveness of IDD health check tools and protocols.

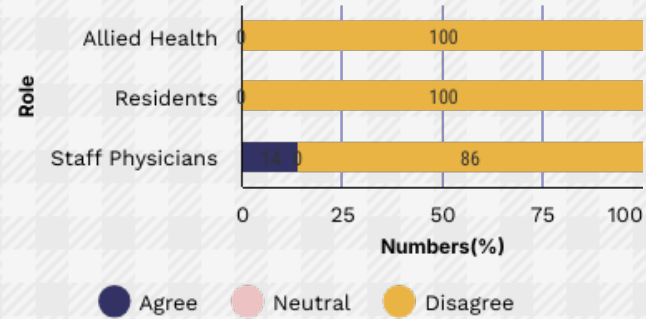
# STAFF SURVEY

## Enhancing periodic Health Checks for Adults (>18 years old) with Intellectual and Developmental Disabilities (IDD)

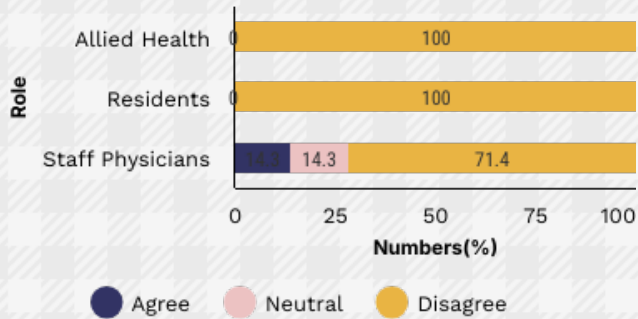
Total number of individuals who took part in the survey = 15. (Staff physicians=7, Residents=7, Allied health professionals =1)  
 All reported caring for a patient with IDD in the last two years except one resident doctor.



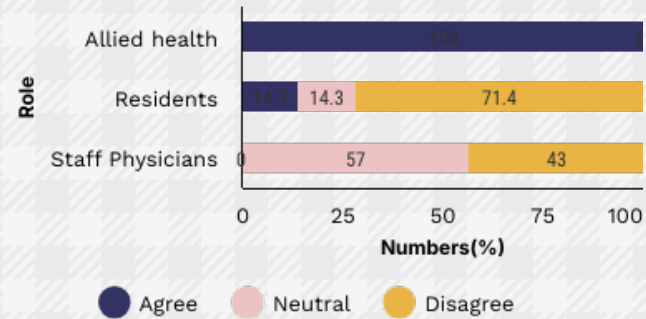
**Knowledge about care issues and comorbidities in those with IDD**



**Awareness of the CCG on the primary care of adults with IDD**



**Familiar with community resources for people with IDD**



**Not frustrated when caring for a patient with IDD**

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## LET US KNOW!

Western Medical Clinic wants to provide the best primary care to people with intellectual and developmental disabilities. (IDD)

### WHAT IS AN IDD

Intellectual disability or delay  
Developmental disability or delay  
Down Syndrome  
Autism Spectrum Disorder  
Cerebral Palsy  
Fetal Alcohol Syndrome  
Williams Syndrome  
Fragile X Syndrome  
Prader-Willi Syndrome  
Smith-Magenis Syndrome  
Asperger's Syndrome  
Rett Syndrome  
Tuberous sclerosis  
Other chromosomal conditions

### WHAT CAN I DO?

If you, a loved one, or a client you know or are accompanying have an IDD, ask your doctor about "periodic health checks."

If you have any questions, please ask your doctor!



## Hi, I am Julian

I am 25 years old. I belong to many clubs and enjoy having lots of friends. I love my life.

"At the doctor, I have a hard time explaining what's wrong when I'm alone and that's why I take my Mom or Dad with me."

GET TO KNOW ME



I am more than my disability.

## Systems Review in Primary Care for People with IDD

**Ends:**

- Thyroid: higher incidence in DD
- DM2: increased rates in Down Syndrome
- Low testosterone: increased prevalence

**Neuro:** Increased prevalence of seizure activity.

**Vision:**

- Check annually in office
- Optometrist 5 yrs if <45

**Hearing:**

- Whisper Test in office
- Check 50/renovise concerns
- Audiogram 5, 5 years if >45

**Dentals:**

- Check dentition in office
- \*Common trigger for behavior change

**Cardiac:**

- Screen earlier
- Prevalence of CVD

**GI:**

- Screen for GERD, constipation, PUD - annually and if behaviour
- Hi Pylori if symptomatic or if living in group homes, unless Hi Pylori 3-5 yrs

**Sexuality:**

- Assess fertility and genetic risks
- Discuss masturbation, contraception, menses
- Higher likelihood/history of abuse

**Cancer Screening:**

- Cervical pap (if sexually active/remember detail)
- Breast: annual breast screening
- Testicular: testicular exam
- Colon: rectal exam > 45 years, colon cancer > 50 years

**Immunizations:**

- Influenza
- Shingles pneumonia (if at risk)
- HPV (if at risk)
- hep A/B

**Weights/Height/BMI:**

- Treat obesity
- Use waist circumference if non-ambulatory

**MKS:**

- higher prevalence of Scoliosis, Contractures, spasticity, Osteoporosis
- Assess risk at all ages
- Consider BMD at earlier age
- Refer to OT/PT/Physiatry

**Sexual Health:**

- Higher prevalence of STI/STD

### Common causes for Behaviour Change:

Pain/discomfort/infection/dental, GI etc./environmental stressor/change, loss/grief

Adapted from Sullivan et al. (2011) Primary Care of Adults with Developmental Disabilities, Can Fam Physician 37, 541-53.

### We have created the following template in Accuro:

IDD local specialty services  
- This is for standard referral services available for the IDD population in the community.

IDD health review  
- This is a macro created for the health check appointment.

Preparing for My Health Care Visit  
- A form to be filled out by the patient/caregiver before the appointment.

Summary of My Health Care Visit  
- This is a form to be filled out with the patient after the appointment.

IDD systemic review and commonly missed diagnosis  
- This is for your personal use/reference

Western medical clinic QI project by Drs (Olá Ibanga, Surendran and Yuri),  
For further inquiries, feel free to contact haimide15@my.mantoba.ca

## PERIODIC HEALTH CHECKS FOR ADULTS WITH IDD

The annual health check is one of the single most important investments in the primary healthcare of people with intellectual and developmental disabilities (Wainstley 2011)

Although we encourage you to look into the various reflections for IDD, online generally include the following:

- 1) Originated before the individual attains 25 and 22
- 2) Are likely to be finding it difficult and 3) affect some of major life activity, such as personal care, language skills, learning abilities, the capacity to be independently as an adult, or any other prescribed activity.

## Health Checks: What's the evidence?

#1. Health Checks are an evidence based intervention for adults with developmental disabilities (Randomized controlled trial level evidence).

#2. Health Checks are a high yield intervention and have been shown to increase rates of screening, interventions and identification of previously unrecognized factors and disease.

#3. Health Checks are a recommended intervention of the Canadian Consensus Guidelines for Adults with Developmental Disabilities (2015).

### Did you know...

From the Atlas on the Primary Care of Adults with Developmental Disabilities, 2013, unless otherwise noted.

...Compared to the general population, adults with DD were more likely to have preventable hospitalizations

A health check adapted to the needs of adults with DD has shown:

- 6.6 fold increase in detection of vision impairment
- 20 fold increase in hearing change
- increase in dental utilization
- increase in women's health screening
- increase in the female American Cancer et al., 2007, 2011, 2012

## Tips for periodic health checks:

#1. Consider "DD" as a diagnosis on the selection for all patients in that category.

#2. Don't count on getting through all the health check functions in one appointment. Identify and separate:

- the current concerns
- the chronic disease management and
- the preventive functions of the Health Check. Ensure hearing or screening take up as part of the tasks over multiple MD visits.

#3. You can save the Acuro provider named "DD Health review" for the periodic health check.

#4. Encourage caregivers or substitute decision makers to attend appointments, can persons/caregiver complete "PREPARING FOR MY HEALTH CARE VISIT" in Advance and access to internet communication.

### IMPORTANT!

Please complete the "SUMMARY OF MY HEALTH CARE VISIT" form in Accuro with patients so that they and their caregivers can have a summary of their appointments.

#5. Adjust communication to meet the needs of people with DD

- All Allow extra time to communicate effectively.
- Be clear change in behaviour as a form of communication.
- Do Think that of common conditions in persons with DD (e.g., constipation, dental pain, vision loss, social or environmental change) as a source of symptoms or behaviour change and.
- Recognize that serious illnesses may present in atypical ways.

#6. Proactively screen, recognizing the current low rates of preventive services.

#7. Other accommodations, particularly for individuals with physical disabilities, e.g., signifier door signs, transfer boards, bridges or ramps to ensure wheelchair access, etc.). Consider offering patients a Sensory Box if required.

#8. Use a show tell-do approach. Show the patient the information or procedure you will do, allowing them to touch/trace it, describe it, practice, and act on the procedure.

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## Preparing for My Health Care Visit

TO BE FILLED OUT BEFORE GOING TO THE VISIT BY MYSELF AND THE PERSON SUPPORTING ME

### 1. Appointment Information

My Name

Name of person supporting me

Relationship of the person named above to me

#### Appointment type

- Family Doctor     Walk in Clinic     Other (e.g., dentist, eye doctor, specialist, X-ray, etc.)  
 Hospital Visit     Emergency Room Visit

#### Things to bring with me

- Manitoba Health card     Any medications I need to bring with me  
 Comfort items (e.g., snacks, books, games, etc.)

### 2. Why am I going to the appointment?

EXAMPLES: Feeling sick, got hurt, I need a check-up, something hurts in my body (illness, injury), need more medication, medication changes or concerns, stress with family or friends, need forms filled out, etc.

### 3. Things you can do to help me communicate - (mark an 'X' next to the things that help)

#### Appointment type

- Speak slowly     Repeat things     Let my caregiver explain  
 Use Pictures     Write it down     Use simple language

My biggest fear about seeing Doctors and Nurses is:

If I'm in pain, I show it by:

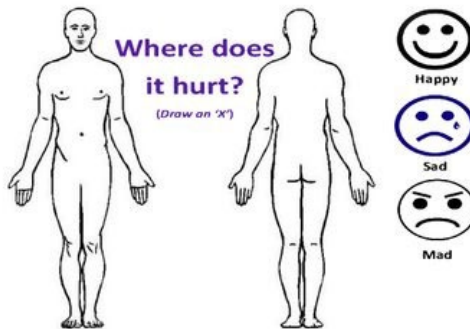
If I get upset, I show it by:

The best way to help me if I get upset is to:

If you have to do a medical procedure (e.g., needle, x-ray), these things might help:

### 4. Have any of these been bothering me in the last week (or longer)?

Health Concern	Is there a problem?	What is the issue?
Pain	<input type="checkbox"/>	
Eating	<input type="checkbox"/>	
Bathroom or toileting	<input type="checkbox"/>	
Energy or tired or sleep	<input type="checkbox"/>	
Emotions or feelings	<input type="checkbox"/>	
Relationships	<input type="checkbox"/>	
Sexual health	<input type="checkbox"/>	
Other (eg., falls, hearing, vision)	<input type="checkbox"/>	
Medication	<input type="checkbox"/>	



## Summary of my Health Care Visit

FILL OUT WITH A HEALTH CARE PROVIDER, OR HAVE A COPY OF THEIR NOTE SENT OR GIVEN TO YOU

### 1. Appointment Information

What did we talk about and do?

Next steps (Things like tests or exams I need to do like X-ray or blood work, appointments to see a different doctor or health professional, need to come back to see the doctor I saw today, things I or the people supporting me can do to be healthier at home)

### 2. Medications. Were there any changes to my medications? Yes No

#### New Medications (if any)

Medication Name	Why do I need to take this medication?
1. <input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>
3. <input type="text"/>	<input type="text"/>

### 3. Things to remember to do before I leave

Don't forget to:

- Make sure this page is completed  
 Schedule any upcoming appointments with the front desk    Appointment date:   
 If there is a referral, make sure I know whether I need to call to follow up    Referral:

Doctors Name:

Date:

## After my Health Care Visit

Fill out after the visit with the person supporting me

Comments about the visit:

Thank you for helping me get better. Be kind to me. What could you do differently next time?



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# Lessons Learned:

## **1. The Power of Awareness:**

- Improved awareness among healthcare providers has resulted in more appointment bookings for primary care, which has led to better patient care.
- Public awareness campaigns resulted in higher engagement from patients and caregivers.

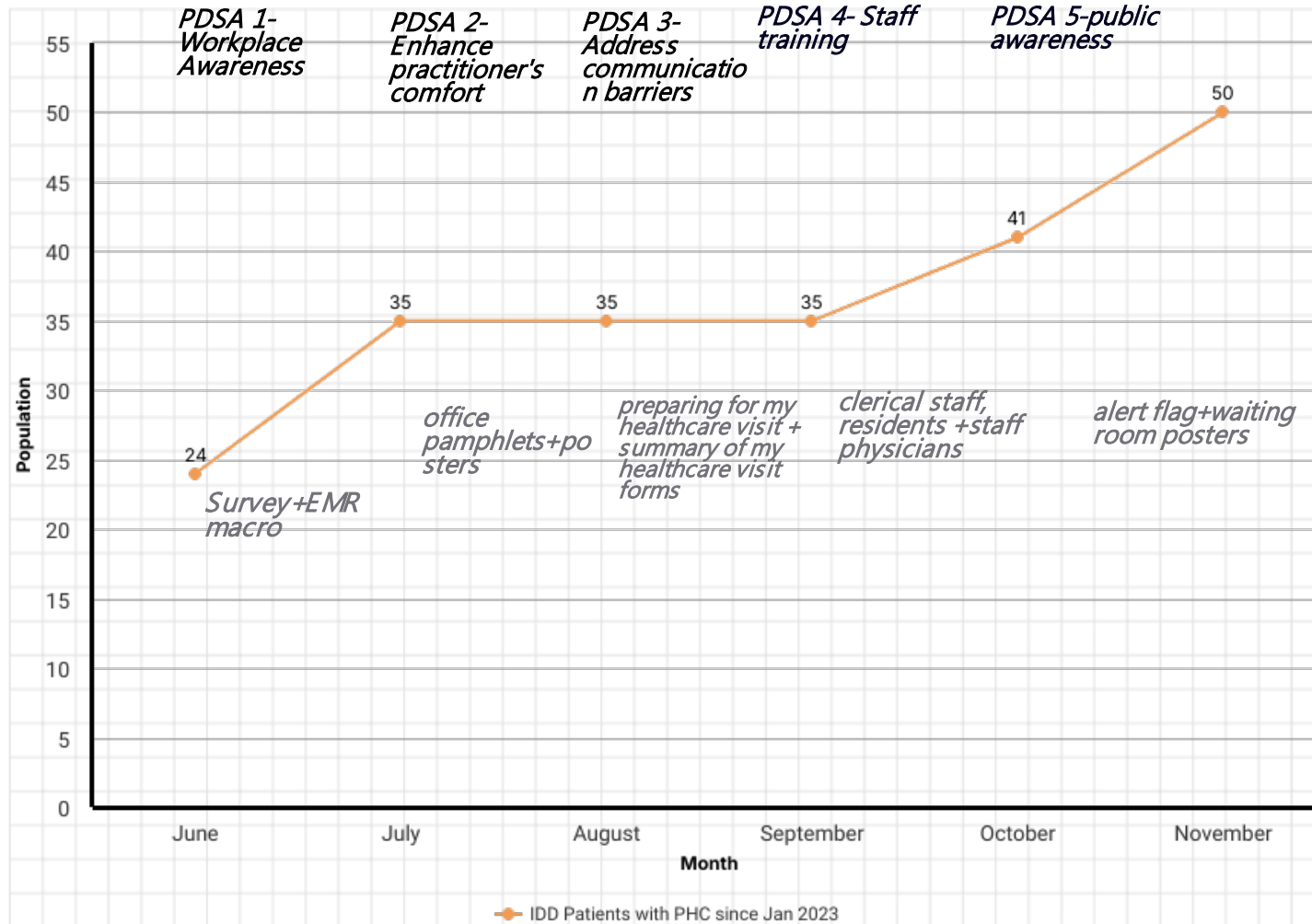
**2. The power of Education:** continuous education and support for healthcare providers helped enhance practitioners' comfort in caring for the IDD population.

**3. The Power of Technology Integration:** leveraging digital tools and health information systems facilitated data collection and analysis, enabling data-driven decision-making.

## **4. The Power of One-on-one Interaction with Staff:**

- Face-to-face meetings fostered stronger relationships and increased staff engagement
- Direct communication allowed for immediate clarification, feedback and problem-solving

# IDD adults (>18 years) with Periodic Health Checks (PHC)



Residents' QI project at the Western Medical Clinic

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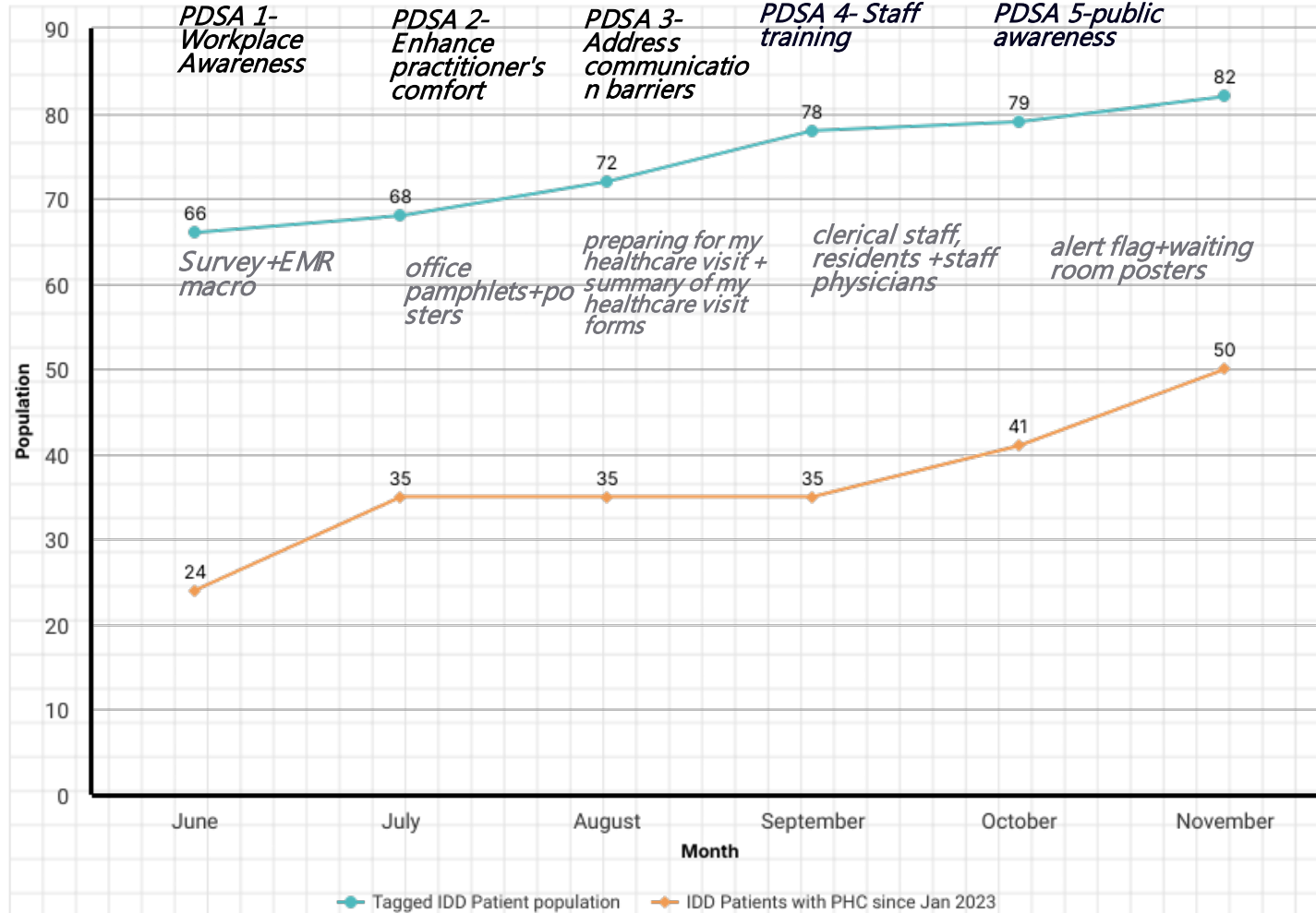
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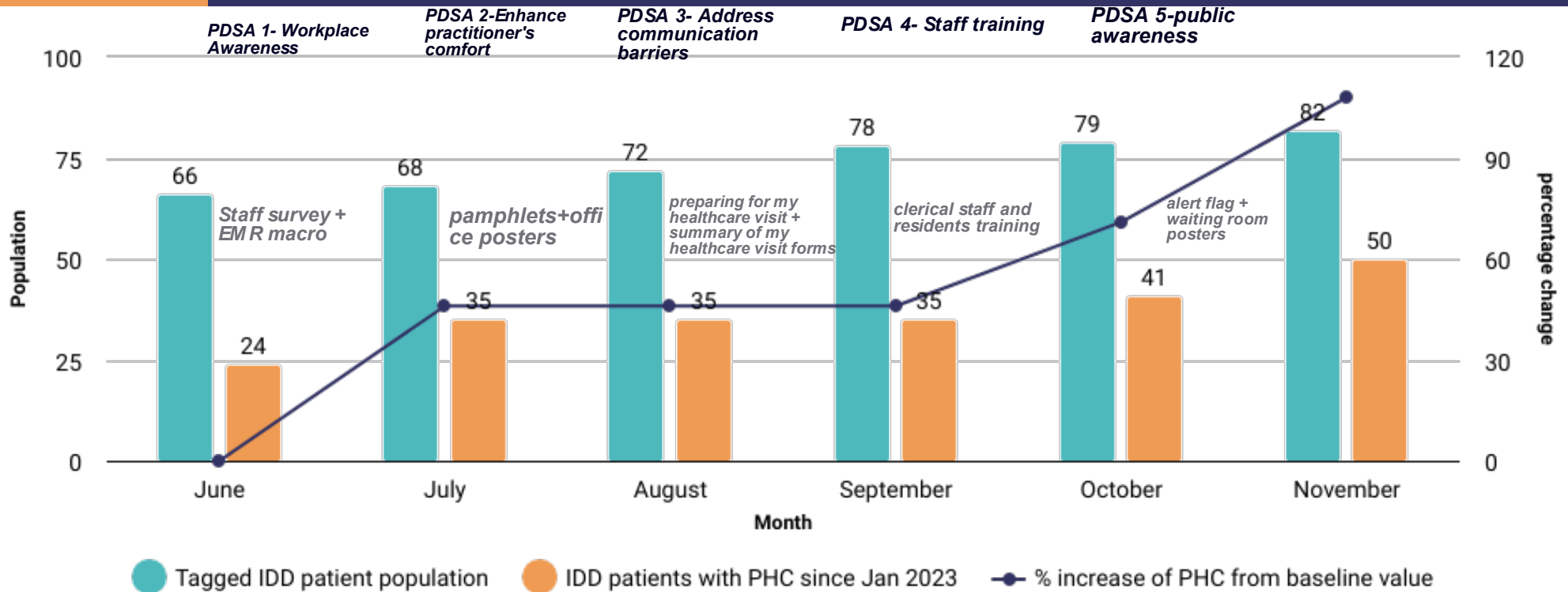
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# REFERENCES AND ACKNOWLEDGEMENTS

- Primary care of adults with IDD 2018 canadian consensus guidelines
- Primary Care Tools - DDPCP Surrey Place, U of T
- Implementing Health Checks for Adults with Developmental Disabilities: A Toolkit for Primary Care Providers, CAMH 2016
- Team members- Dr. Yuriy, Dr. Surenderan, Ms. Levandoski
- Western Medical Clinic Staff
- QI lead director: Carrie Mccallum
- Program site director- Dr. Joanne C. Maier



Stronger Together, Better  
Together.

THANK YOU



# Contact for More Information:

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