



FOCUS

2016 | 17 A YEAR IN REVIEW

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The Health Quality Council of Alberta (HQCA) is a provincial agency that pursues opportunities to improve patient safety and health service quality for Albertans.

**We put our focus
squarely where
it should be –
on people.**

MESSAGE from the Chair and CEO



Dr. Tony Fields
Board Chair



Andrew Neuner
Chief Executive Officer

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We believe in starting conversations with the right information, and being transparent about what's happening in the healthcare system. We also believe in providing tools and resources that support health system stakeholder efforts to continuously improve.

This year, the HQCA launched its flagship online tool, called *FOCUS on Emergency Departments*. It provides Albertans with user-friendly information on patient experiences in 16 of our province's busiest emergency departments. FOCUS – which stands for Fostering Open Conversations that Unleash Solutions – is refreshed with updated information four times a year, so people have access to current information about emergency department care in Alberta.

We look forward to capturing other areas of healthcare in this way, as we plan to expand FOCUS, starting with primary healthcare in 2017-18. FOCUS on Healthcare will be a website that serves as an easy, accessible, relevant, and straightforward source of information about Alberta's health system for healthcare decision makers, providers, and Albertans. We believe transparent

and public reporting can lead to quality improvement and a better healthcare system in Alberta.

This year we released the *Home Care Client Experience Survey*. The HQCA has now conducted and reported on experience surveys in all areas of continuing care. As well, we continue to provide physicians with information about their practice to assist them in their improvement efforts. Read about these and our other activities and accomplishments in this report.

The sage advice of our Board of Directors guides our work, and we are grateful for their counsel. This, coupled with the expertise and commitment of our employees and our Patient/Family Safety Advisory Panel, and stakeholders who work collaboratively with us on many projects, helps us maintain focus on putting Albertans first. Their level of dedication and passion about our work day after day is unparalleled.

[Original signed by A.L.A. Fields]

A.L.A (Tony) Fields, CM, MA, MD, FRCPC, FACP
Board Chair

[Original signed by Andrew Neuner]

Andrew Neuner, BHSA, MBA, MA, CHE
Chief Executive Officer



Strategic **FRAMEWORK**

Who we are

The Health Quality Council of Alberta (HQCA) has a legislated mandate to promote and improve patient safety and health service quality on a province-wide basis. Our responsibilities are set forth in the *Health Quality Council of Alberta Act*. Our work is guided by a strategic framework that highlights our vision, mission, and values, and defines four strategic areas of focus. By aligning ongoing and future projects to this strategic framework, we will continue to support our partners in improving health system quality and patient safety for Albertans.

Vision

Excellence in health system quality and patient safety for Albertans

Mission

With our patient and health system partners, continue to improve the quality of Alberta's health system through innovative approaches to measuring and monitoring of performance, identifying opportunities for improvement and supporting implementation of improvement initiatives.

Values

- ▶ Hold patients and the population at the forefront
- ▶ Be informed by evidence
- ▶ Apply an ethical lens
- ▶ Analyze objectively
- ▶ Inform transparently
- ▶ Engage collaboratively

Strategies



► BUILD CAPACITY

Develop knowledge and skills, and inform beliefs, internally and externally to support health system improvement.

- Quality and safety education
- Frameworks and related resources
- Stakeholder engagement
- High-performance and collaborative



► MEASURE TO IMPROVE

Measure, analyze and report on healthcare delivery to drive actionable improvement that enhances the quality of healthcare for Albertans.

- Patient-focused measurement
- Sector or service-focused measurement
- Assessments and studies



► MONITOR THE HEALTH SYSTEM

Monitor and report on health system performance over time and enable comparison where appropriate to inform improvement.

- System level indicator development
- Population level surveys
- Clinical standards monitoring and reporting
- Health system performance reporting



► ENGAGE THE PUBLIC

Bring the voice of Albertans to the HQCA's work.

- HQCA Patient/Family Safety Advisory Panel
- A spectrum of public participation and awareness activities

GOVERNANCE

The Lieutenant Governor in Council appoints the Board of Directors, who represent a diverse group that includes health professionals, business leaders, academic representatives, and members of the public.

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Chair

Dr. (A.L.A) Tony Fields, Edmonton

Board of Directors

Deborah Apps, Calgary
Dr. Robin Cox, Calgary
Douglas Gilpin, Edmonton
Bruce Harries, Edmonton
Marie Owen, Edmonton
Irene Pfeiffer, Calgary

Our deepest thanks go to outgoing board members Georgina Altman and Toby Jenkins for their commitment, leadership and service.

Chief Executive Officer Andrew Neuner is an ex-officio member of the Board. The HQCA is also supported by Executive Director Charlene McBrien-Morrison.

The work of the Board is accomplished through the following committees:

► EXECUTIVE COMMITTEE

The Executive Committee is responsible for facilitating effective communication between the Board and administration. The committee liaises with the chief executive officer and provides direction and support for carrying out the objects of the HQCA as set out in the *Health Quality Council of Alberta Act*.

► QUALITY ASSURANCE COMMITTEE

This committee is responsible for carrying out quality assurance activities under section 9 of the *Alberta Evidence Act*.

► AUDIT & FINANCE COMMITTEE

The Audit & Finance Committee's purpose is to monitor the HQCA's financial matters and risk management. It is responsible for presenting the HQCA budget and audited financial statements to the Board for approval and submission to the Ministry of Health.

► EDUCATION COMMITTEE

In support of the effort to realize the HQCA's Vision, this committee strives to continually enhance Board member knowledge and skills articulated in the HQCA's Board competency matrix.

► PATIENT/FAMILY SAFETY ADVISORY PANEL

This advisory panel represents the experiences and perspectives of patients and their families. Through the HQCA, the panel works to improve and promote patient safety principles, concepts and actions in all aspects of Alberta's publicly funded healthcare system.

Activities & ACCOMPLISHMENTS

Find out how we worked over the 2016-17 fiscal year to build capacity, monitor the health system, measure to improve, and engage the public.



Build Capacity

Develop knowledge and skills, and inform beliefs, internally and externally to support health system improvement.

► QUALITY AND SAFETY EDUCATION – Centre For Collaborative Learning & Education

Our Centre for Collaborative Learning & Education enables us to offer quality and safety education and capacity-building opportunities for our stakeholders to develop skills in system improvement. The resources offered can also be used by practitioners for certified and non-certified continuing education credits.

Certificate in Patient Safety and Quality Management

For the seventh year, the HQCA partnered with the University of Calgary's Cumming School of Medicine's Ward of the 21st Century (W21C) to provide a certificate course in patient safety and quality management. The course is designed for healthcare professionals who want to expand their working understanding of concepts in patient safety and quality management. Participants completed a combination of in-person classroom sessions and interactive online sessions that began in September 2016 and concluded with a presentation day in March 2017. Candidates who successfully completed the course received a Certificate in Patient Safety and Quality Management from the University of Calgary's Office of Continuing Medical Education & Professional Development, the HQCA, and W21C.

Investigating and Managing Patient Safety Events

In partnership with the University of Calgary and W21C, the HQCA offers introductory and advanced courses in conducting patient safety reviews and managing patient safety events. This year, the course was held in Edmonton. Completion of both courses and a mentored project earns participants a Certificate in Investigating and Managing Patient Safety Events.

Quality & Patient Safety Education Framework

The HQCA works to develop education resources and tools to support learning for the concepts and topics within the Quality & Patient Safety Education Framework.

With the University of Calgary's Department of Anesthesiology, the HQCA is working to integrate the Quality & Patient Safety Education Framework across the university's five-year postgraduate anesthesiology program. The framework, in development, provides structure for a consistent approach to patient safety and quality education for healthcare providers. A detailed curriculum for years one and two has been created and training sessions with first- and second-year residents has been held. The HQCA is also working with the department to identify individuals to partner with the HQCA for the training going forward.

To build capacity across the province for teamwork competencies, the HQCA explored the establishment of a TeamSTEPPS regional training centre in Alberta. This included attending a master training course. As the Canadian Patient Safety Institute (CPSI) launched a new initiative – Shift to Safety – which includes TeamSTEPPS and supports the Canadian TeamSTEPPS community, the HQCA worked with the CPSI in the early development of the national initiative and this work is continuing. The HQCA is also working with stakeholders in Alberta to help develop a tailored training program.

► FRAMEWORKS AND RELATED RESOURCES

The HQCA's frameworks provide guiding principles that help promote and improve patient safety and health service quality. Frameworks outline a set of principles for healthcare professionals that address specific topic areas.

Simulation-based Mock-up Evaluation Framework

The physical space, equipment, and people within any healthcare environment have a bearing on patient experience. A poorly designed space can inadvertently introduce hazards for both patients and healthcare workers. Many of these can be anticipated and avoided by involving users in the design process of the healthcare space, to help the end product meet their needs. The Simulation-based Mock-up Evaluation Framework, developed by the HQCA in collaboration

Simulation-based Mock-up Evaluation Framework – continued

with experts and health system stakeholders, outlines an approach to collect and analyze data from mock-up healthcare environments from which an improved design process can result.

The HQCA continues to promote the uptake of the Simulation-based Mock-up Evaluation Framework provincially, nationally, and internationally through strategic relationships with organizations involved in healthcare design, conference presentations, and peer-reviewed journal publications.

We are also working to enable healthcare design teams to successfully apply the framework by developing evidence-based guidelines outlining which mock-up fidelity should be used to optimize cost effectiveness and outcomes in the design process. This involved comparing the use of a virtual reality mock-up, a detailed (full scale physical) mock-up, and a simple (tape on the floor) mock-up's ability to produce results which are consistent with a post-occupancy evaluation of a South Health Campus (Calgary) medication room, along with the return on investment from using each mock-up fidelity.

► FRAMEWORKS UNDERWAY

In collaboration with provincial stakeholders and the HQCA's Health Quality Network, the HQCA is developing the following frameworks:

Patient Concerns Management – A Framework for Albertans 2017

This framework is a refresh of the April 2007 Patient Concerns/Complaints Resolution – Provincial Framework. It provides guiding principles, a Patient Concerns Management Model, suggested process steps, and practical assistance to facilitate a consistent approach to patient concerns management and resolution processes throughout the province. The framework can also be used as a tool to assess current practices and policies. The framework was completed in spring 2017.



Provincial framework guiding principles: safer, kinder, positive experience affects patient outcomes

Putting the patient first is at the core of healthcare quality improvement, and Deborah Prowse knows first-hand how important that patient focus can be.

"I came to health advocacy as a result of the circumstances around my mom's healthcare journey. She had some unexpected problems, and the need to follow up on them was my first introduction into health advocacy," says the Alberta Health Advocate.

Deborah has been in her role for 10 years, and through this she is a member of the Health Quality Network (HQN). The HQN and the HQCA determined a need to update the 2007 Patient Concerns Management Framework to reflect current leading practices and regulations in addressing patient care. The four-component model incorporates eight guiding principles, one of which is "Patient and Family Centred."



*Deborah Prowse, Health Advocate
Office of Alberta Health Advocates*

"The framework is very patient-focused," Deborah says, "and the value of the patient experience is woven throughout the process. From the inception, the patient has been at the centre, and the framework reflects principles central to patient-centred care."

She says the framework provides a common way of approaching concerns about patient experience. The next step, then, is how to break silos down throughout the entire healthcare system: "Each organization has its own standards, and this framework can transcend the boundaries of the 29 professions in the system. Our health system reflects physician-focused and hospital-focused systems, so we need to work on how to move together to a patient-centred focus."

"It's all about the caring and the care – a safer, kinder, positive experience affects patient outcomes," she sums up. "Having concerns processes that capture the patient experience are part of quality improvement, allowing the organization or service to continue to learn and be patient-focused."

► FRAMEWORKS UNDERWAY – continued

Healthcare Quality & Safety Management

In 2016-17, the HQCA began developing *Healthcare Quality & Safety Management: A Framework for Alberta*. The document outlines what healthcare providers, managers, and executives need to do to effectively manage quality and safety in the healthcare system. A companion document was also started, *Healthcare Quality and Safety Management: Sample Scenarios*, which describes how to apply the elements described in the framework.

► JUST CULTURE ONLINE TOOLKIT

This online toolkit of resources supports the development and spread of a just culture across Alberta's healthcare system. A just culture is an atmosphere of trust characterized by transparency, fairness, and accountability; it is the foundational building block of a reporting, learning and patient safety culture. The intent is that the toolkit will be used by individuals and organizations that are committed to continuous improvement and patient safety; resources within the toolkit will be designed to help build awareness and foster a just culture in the healthcare system.

► PARTNERING WITH PROVINCIAL AND NATIONAL QUALITY AND SAFETY ORGANIZATIONS

We partner with a number of quality and safety organizations at both the provincial and national levels. This includes assisting with curriculum development, participating in various initiatives, providing support and mentorship specific to healthcare quality and patient safety, and providing ethics advice and counsel.

► HEALTH QUALITY NETWORK

The Health Quality Network (HQN) was formed in 2004 to support knowledge sharing and capability transfer related to leading or best practices throughout the province. Chaired by the HQCA, the HQN met four times in 2016-17. Its current member organizations include: Alberta College of Pharmacists, Alberta Health, Alberta Health Services, Alberta Medical Association, College and Association of Registered Nurses of Alberta, College of Physicians & Surgeons of Alberta, Covenant Health, Office of Alberta Health Advocates, HQCA's Patient/Family Safety Advisory Panel, University of Alberta Faculty of Medicine and Dentistry, and Cumming School of Medicine.

► PROVIDING EXPERTISE ON MEDICAL ASSISTANCE IN DYING

In a joint position supported by AHS and the HQCA, the HQCA provided advisory medical, ethics, education and policy services for operational preparedness of AHS and provincial collaborators for medical assistance in dying.



Measure to Improve

Measure, analyze and report on healthcare delivery to drive actionable improvement that enhances the quality of healthcare for Albertans.

► PATIENT-FOCUSED MEASUREMENT

Supportive living family and resident experience surveys

In 2016-17, the HQCA began and completed data collection for its second supportive living family and resident surveys. The results assist supportive living facilities to identify areas of success and opportunities for improvement. A mail and web-based survey was used for family members and an in-person or mail-in survey was used for residents. There was an increase in the number of facilities that participated in the surveys as compared to the 2013-14 survey cycle. The overall response rate for the family survey was 63 per cent and 59 per cent for the resident survey. The site-level and provincial reports were published in July 2017.

Home care client experience survey

The *Alberta Home Care Client Experience Survey* was conducted in collaboration with Alberta Health Services and Alberta Health to help identify areas for improvement and highlight areas of success in home care. The purpose was to capture the experiences of and obtain feedback from seniors aged 65-plus receiving long-term supportive and maintenance care. Combined, this group represents the largest group of home care clients. This is the first survey conducted by the HQCA in the home care services sector and provides a baseline measurement that can be used for ongoing benchmarking and monitoring. The provincial response rate was 64 per cent, meaning 7,171 home care clients responded to the survey about their experiences with professional and personal home care services. The provincial report and provider-level reports were published in September 2016.



Home care survey causes shift in client service to emphasize relationship building

"People want to stay in their homes, and we service providers need to be more creative and caring in providing our services, to help them be as independent as possible for the longest period of time," says Sylvie Beauchamp. She's the vice president of operations at CBI Home Health, which provides community health services across Alberta.

"We strongly believe in continuous quality improvement, and part of that process is to hold ourselves to a high standard," she says. CBI has always conducted its own surveys – but Sylvie says getting results from the HQCA's first *Alberta Home Care Client Experience Survey* provided CBI with a much-needed external lens to its services.

"Our biggest takeaway from the survey was in how we improve ourselves in relation to person- and family-centred care, and patient safety. These relational types of measures caused us to revisit our client service from intake to discharge," she says, "with the goal of engaging with the client in their care at every touchpoint – that's the piece we're working on now."

The survey results sparked a desire at CBI to expand its quality and safety committee to include clients and families. "It's not as easy as it would be in a residential setting to involve those people," Sylvie acknowledges, "but we're working on it."

In terms of the survey overall, "We scored fairly well but there's always room for improvement," she says. "The survey results will inform our work province-wide. We now ask ourselves, 'Are we just doing a task or are we building a relationship?'"

"We're going above and beyond – to ask if there's anything else, to get that glass of water – being more proactive in providing better service."





Sylvie Beauchamp, Vice President Operations, CBI Home Health – Alberta

► PATIENT-FOCUSED MEASUREMENT – continued

Long term care family experience survey

In 2016-17, the HQCA initiated the process to begin conducting a survey with family members of residents, or those who are currently most involved in the resident's care, in long-term care facilities throughout Alberta. The data collection took place from April to September 2017. This will be the fourth such survey since 2007 in long term care. The information will help us learn more about the quality and safety of care and services at long-term care facilities across Alberta.

Primary care patient experience survey

This year the HQCA expanded its pilot primary care patient experience survey, started in 2015-16, to include 36 additional participating primary care physicians, resulting in 1,999 patients surveyed. Two survey modalities were tested – text message and email. Each physician who participated in the pilot test will receive a summary report about their patients' experiences. Additionally, cognitive testing interviews with patients were conducted, in collaboration with the University of Calgary's Department of Family Medicine. These interviews led to major questionnaire revisions for the third phase of this pilot, which was conducted over the summer of 2017.

Emergency department patient experience survey

The HQCA continues to randomly sample patients who have recently visited Alberta's 16 busiest urban and regional emergency departments. This brief telephone survey asks patients about their experiences with care during their visit to the emergency department. As of March 31, 2017, there were 16,315 Albertans surveyed about their experiences. Results are reported quarterly through the HQCA's online tool, the *FOCUS on Emergency Departments* website.

EQ-5D

The HQCA continues to support the use of EQ-5D, a patient-reported outcome measure (PROM) that captures five dimensions of health-related quality of life: mobility, self-care, usual activities, pain/discomfort, and anxiety/depression. We collaborated with the EuroQuol Foundation, the University of Alberta, and Alberta Health Services to establish a research and support unit (APERSU) at the University of Alberta. Through this work, we also support the education and training of graduate-level students at the University of Alberta.

► SECTOR OR SERVICE-FOCUSED MEASUREMENT

Primary care

The HQCA continued to collaborate with primary care stakeholders across the province in various ongoing measurement initiatives. We have developed a collaborative, scalable, and sustainable measurement program that primary care physicians can use to inform proactive improvements to positively affect patient care.

Physician panel identification and maintenance

We continued to work to refine a process that physicians can use to identify and maintain their patient panel list. Now called a Continuity Dataset, this work includes a robust panel identification and maintenance process by providing primary care providers with information about estimated or validated panel lists that they can use in their paneling activities.

Model care planning process

The HQCA developed a general clinical pathway for care planning in primary care in Alberta in collaboration with Alberta Medical Association's Toward Optimized Practice (TOP), which included the development of a model care planning process. Based on this work, a collaborative initiative was also established between TOP, AHS, primary care physicians, and the HQCA to focus on improving chronic disease management care planning in primary care. The model and pathway will be a central component of this initiative.



Patient-centric approach to care planning in primary healthcare promotes continuity, relationships

Meet “Mary,” a 60-something woman with Type 2 diabetes and high cholesterol. She doesn’t drive. She’s lonely. And unless Mary finds a way to reach out to her family physician, she may not get the care she needs.

Albertans like Mary with complex health issues can be especially at risk of health complications – and there are known benefits to having a proactive plan of care in place to manage those risks. “With a systematic plan to support chronic disease management in primary care, we are able to focus on patient priorities,” says Arvelle Balon-Lyon.

Arvelle is director of the Alberta Medical Association’s Toward Optimized Practice (TOP), and an RN by background. She tells how the HQCA and an innovator physician group developed a Model Care Planning Process that is the blueprint for developing patient care plans: “The HQCA really got the work started almost two years ago when they met with a group of family physicians who wanted to consider further improvements to the care they and their colleagues provide to patients with complex health needs.

“They wanted to think about patients holistically, not defining a patient solely by their medical needs. They felt that care planning with patients with complex health needs is a key enabler in promoting continuity between primary care teams and patients.”

The goal of the Model Care Planning Process is to support a patient-centric approach to care planning that considers the patient’s values, beliefs and preferences. While all patients benefit from a collaborative care planning process, it is particularly important for patients with complex health needs – and a good place to start.

The model will be used as a central piece of the PaCT (Patients Collaborating with Teams) initiative, a collaborative initiative between AMA, Alberta Health Services, and the HQCA.





Arvelle Balon-Lyon, Director, Toward Optimized Practice, Alberta Medical Association

Primary care – continued

Primary healthcare panel reports

Since 2012, the HQCA has been providing primary healthcare panel reports to family physicians, upon request, across the province. This year we expanded our production of panel reports and for the first time, invited every family physician in Alberta to submit a request for an individualized report. These reports can be used to support and inform program planning, panel management, quality improvement, and policy development. The use of the reports is supported through presentations and webinars to assist physicians in understanding and using the reports.

The HQCA also recognized the need to improve the reports. Through additional grant funding provided by Alberta Health, the HQCA is working with them and a committee of physicians and other primary care stakeholders to review the current report. Their review includes: the measures reported, how the information is organized and presented to increase uptake and usability, and how to standardize these measures across the province.

► ASSESSMENTS AND STUDIES

Status report on recommendations from the 2013 Continuity of Patient Care Study

In 2015, Alberta Health requested the HQCA provide an assessment of progress made toward implementation of the recommendations from our *2013 Continuity of Patient Care Study*, and to provide insight into bringing the recommendations to a conclusion. This followup review, *Improving Continuity of Care: Key Opportunities and a Status Report on Recommendations from the 2013 Continuity of Patient Care Study*, was provided to Alberta Health and published in summer 2016.

The findings from this assessment identified key opportunities to advance the recommendations from the 2013 report. These related to the following topics:

- Provincial clinical information system (CIS)
- Electronic referral system
- Personal health portal
- Clinical test results management
- Provider registry
- Practice standards



Radiologists' focus on continuity of care influences improvements to healthcare services

Radiologists recognize they have an important role to play in continuity of care for patients in Alberta's healthcare system, says Dr. Rob Davies, president of the Alberta Society of Radiologists. Alberta's 400 or so radiologists conduct six to seven million diagnostic imaging studies per year in our province – and Dr. Davies says this significant reach places radiologists in a position of leadership.

"We're often the connector between primary care and escalation to specialist care, based on the results we generate and the action we take," he explains. "This is a responsibility we take seriously."

Continuity of care is vitally important to the welfare of patients and to the effective functioning of Alberta's healthcare services. A single tragic patient experience that resonated with the experiences of many, prompted the HQCA's *2013 Continuity of Patient Care Study*, and some important initiatives have come out of the HQCA's followup report, released in 2016.

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Of the report's six recommendations, the overarching need for a closed loop system of verification and communication is where Dr. Davies sees promising movement: a provider registry that better connects healthcare providers will help the timely delivery of critical test results, and is underway thanks in part to the HQCA's efforts.

"This report was also the catalyst to establish clear guidelines about when radiologists should be enabled to order the next test or make a clinical referral themselves. Taking care of the patient is paramount," he says.

"The report was meaningful in how it applied such a thorough system-based analysis of a patient's journey through the healthcare system," Dr. Davies says. "Family personalization of an issue, coupled with HQCA's sophistication of analysis and influence upon other stakeholders, really highlighted issues within the system affecting patients. Making the patient journey relatable was key to making system-wide improvements."

*Dr. Rob Davies, President
Alberta Society of Radiologists*

► ASSESSMENTS AND STUDIES - continued

Physician-Assisted Death Public Survey

At the request of Alberta Health, the HQCA analyzed the results of the Government of Alberta's *Physician-Assisted Death Public Survey* to inform the development of medical assistance in dying (MAiD) legislation in Alberta. A total of 15,231 responses that included 7,787 open-ended responses were received and analyzed by our team and reported to Alberta Health.

Laboratory services

In May 2016, at the request of the Minister of Health, the HQCA presented the report, *Moving Ahead on Transformation of Laboratory Services in Alberta*. In response, the Minister directed that a project team be established under a Steering Committee of senior officials. They were to work on a provincial plan for integrated laboratory services in Alberta that included direction for one laboratory information system for the province; planning for new laboratory infrastructure to meet the urgent needs in Edmonton; and ensuring that the process include a robust stakeholder engagement process to inform the development of the plan.

The HQCA was directed to develop the provincial plan. The plan was presented to the Steering Committee in January 2017.



Monitor the health system

Monitor and report on health system performance over time and enable comparison where appropriate to inform improvement.

► HEALTH SYSTEM PERFORMANCE REPORTING

FOCUS on Healthcare online reporting initiative

Through a collaborative and iterative process with health system stakeholders, the HQCA identifies, develops, and reports publicly on key patient experience, economic (cost-effectiveness), and clinical indicators that support its mandate to monitor and report on health service quality and patient safety. This work underpins our FOCUS on Healthcare initiative (Fostering Open Conversations that Unleash Solutions). *FOCUS on Emergency Departments*, an online reporting tool, was the HQCA's first foray into this initiative. The next area of the healthcare system to be added to the website is *FOCUS on Primary Healthcare*, and this project commenced in March 2017 with a Patient Consultation Day and the establishment of a Stakeholder Advisory Committee.

FOCUS on Emergency Departments

The HQCA launched *FOCUS on Emergency Departments*, a new interactive online tool, in January 2017 to provide public information about the 16 busiest emergency departments in Alberta. The key measures were determined through robust stakeholder consultation to ensure they were meaningful and informative to healthcare providers, administrators and the public. The interactive charts provide users with insight into what's happening over time and to allow for the comparison of similar emergency departments. *FOCUS on Emergency Departments* was the first tool of its kind published by the HQCA and was designed to give healthcare providers, decision-makers and the public the information they need to have important conversations about emergency department care and services. These conversations can lead to quality improvement and a better healthcare system for Alberta. In the first six months there have been almost 40,000 visits to the website, and a more formal evaluation is planned for the coming year.



Website helps Albertans understand what's happening at emergency departments across the province

Information is powerful — and the HQCA now puts key emergency department information in the hands of Albertans, including patients, those providing emergency care, and healthcare administrators. The HQCA launched *FOCUS on Emergency Departments* – a one-of-a-kind online reporting tool – as a resource for reliable information on 18 measures of what patients experience in Alberta's 16 busiest emergency departments.

According to Dr. Brian Holroyd, senior medical director AHS Emergency Strategic Clinical Network and a practising emergency physician in Edmonton, *FOCUS on Emergency Departments* paves the way for important conversations: "The information it provides is a valuable resource that contributes clarity and openness to the healthcare system, because all touchpoints of the system can use the information to provide best care."

Dr. Holroyd believes the result of the HQCA's collaboration with AHS – using common language including the same data definitions, and translating data from technical to plain language – provides the benefit of offering the same data and information to the public as it does to the people making decisions, and to those providing care.

"The HQCA accomplished two unique aspects with FOCUS," he says. "The website translates some of the operational data into information the average person can understand and interpret, and it communicates the patient experience in the emergency department. It's detailed and accurate – but not medical-speak."

The tool allows viewers to have a look into the system that provides emergency care, plus guidance if they want a more detailed dive into the information, and also provides context into what the information means. "The depth, background, and context of information – not just the data – is quite impressive," says Dr. Holroyd.





*Dr. Brian Holroyd, Senior Medical Director, AHS Emergency Strategic Clinical Network and a practising emergency physician in Edmonton;
Professor, Department of Emergency Medicine, Faculty of Medicine & Dentistry at the University of Alberta*

► HEALTH SYSTEM PERFORMANCE REPORTING – continued

Relationship, information and management continuity

The HQCA conducted an in-depth study to understand the conceptualization and measurement of continuity of care by determining the factors that influence both seamless and fragmented patient journeys. The report, published in August 2016, presents both the qualitative and quantitative results of this in-depth study. The findings from this study have informed other HQCA initiatives, such as: *Improving Continuity of Care: Key Opportunities and a Status Report on Recommendations from the 2015 Continuity of Patient Care Study* and primary healthcare measurement activities. The HQCA continues to promote the report's findings through speaking opportunities and peer-reviewed journals.

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Engage the public

Bring the voice of Albertans to the HQCA's work.

Patient/Family Safety Advisory Panel

The HQCA's Patient/Family Safety Advisory Panel leverages the experiences and perspectives of patients and their families to improve and promote patient safety in Alberta's health system. The panel continues to provide valuable input to the HQCA's strategic direction and business plan. Panel members also provide the patient/family perspective to numerous initiatives both internal and external to the HQCA. These include:

- Participating in the HQCA Board's strategic retreat
- Participating in the Canadian Patient Safety Institute's patient engagement action team
- Presenting at the AHS Quality Summit and at the Accelerating Primary Care Conference
- Partnering with the HQCA on the HQCA Patient Experience Awards Program
- Providing input into patient brochures and the questionnaire on Medical Assistance in Dying (MAiD)
- Providing a patient perspective on HQCA patient experience survey questions



Participation on Patient/Family Safety Advisory Panel allows family voice to be heard

Geralyn L'Heureux's curiosity led her to join the HQCA's Patient/Family Safety Advisory Panel in 2013 after she saw an ad in her local newspaper. With family members in various stages and age groups of care, she believed her participation on the panel could make a difference in the services they received.

"I thought my lone little voice wasn't going to make much of a difference," she says, "but joining the panel has allowed me to have a strong voice."

By speaking on behalf of patients and their families, including her own, Geralyn and her fellow panel members advise the HQCA on patient safety and quality issues from a citizen, patient, and family perspective. Their insights, gained from personal experiences with various healthcare situations, inform the HQCA about effective ways to promote safety principles, concepts and actions in the healthcare system.



"We on the panel are representatives for all Albertans," emphasizes Geralyn, "not just our own little soapbox. Each person on the panel represents about 400,000 Albertans. And the feedback we provide from our own experience and from our network brings that patient voice to light."

The 12 panel members come from a variety of backgrounds and geographic areas around the province. Each has a wealth of experience with Alberta's healthcare system, offering that personal perspective to help improve the patient experience of every Albertan.

"The HQCA is very forward-thinking in its approach with the panel – they try to walk the talk. This panel is not a PR exercise. We are regarded highly by the HQCA board, the staff accommodate what we need, and our opinion is taken to heart," Geralyn says.

*Geralyn L'Heureux,
Patient/Family Safety Advisory Panel*

Patient Experience Awards

In 2016 the HQCA and its Patient/Family Safety Advisory Panel established the inaugural Patient Experience Awards program to recognize initiatives in Alberta that are making a positive impact on the patient experience. From nearly 50 initiatives submitted that focused on improving overall healthcare experiences, four teams were selected to receive awards based on their demonstration of incorporating the patient voice in the planning, implementation, and evaluation of an initiative that was focused on improving the patient experience in their care setting. The award recipients were:

- Community Paramedic In-Home Blood Transfusion Program from AHS EMS - Calgary Zone Community Paramedic Program
- FibroFOCUS: A Comprehensive Multidisciplinary Fibromyalgia Treatment Program at the Calgary Chronic Pain Centre
- Peer Support Neuroscience with the Foothills Medical Centre Neuroscience Peer Support Programs
- Stroke Support Team (Medicine Hat & Area) serving Medicine Hat Regional Hospital and the community

These groups presented on their initiatives in a public webcast hosted by the HQCA and were awarded \$2,500 each to go toward a patient safety and quality improvement education opportunity.

Change Day Alberta

Change Day is an initiative centred around the idea that one act can lead to improvement in care for patients, clients, residents, families, and the system. The HQCA, in collaboration with Health Quality Network members, co-sponsored the first Change Day Alberta which invited Albertans to pledge to change their health or the healthcare system – and more than 6,000 made a pledge. Pledges ranged from taking the stairs rather than the elevator; to a doctor shadowing a nurse for a day; to ensuring an introduction of name and positions was always given to patients. To complete the campaign, 75 Change Day celebrations occurred across the province on April 4, 2016.





Stroke Support Team, Medicine Hat & Area, Patient Experience Award recipient, 2016



Patient Experience Award recipients make their prize money go further

30

Spend just five minutes with Shayne Berndt and you'll see her commitment to helping people recover from strokes so they can go back to the activities they love – be it golf or simply a walk around the block. She and her Medicine Hat and Area Stroke Support Team were honoured in 2016 for their commitment to best practice and dedication to returning Albertans to health after stroke.

The team was one of four to receive an inaugural Patient Experience Award in 2016 for their work on the Stroke Early Supported Discharge program. The program was established to promote timely access to intensive rehabilitation within the community and to reduce hospital length of stay. And the team has turned their \$2,500 award into an opportunity for several of their counterparts across the province.

They used their prize money to host a workshop for other rehab specialists. Shayne's team of 10 had their registration fees paid out of the money, and the rest of the funds paid for a speaker who specializes in physiotherapy and rehab. This decision to share their prize money makes it "bigger than it was," says Shayne, and helps spread the word among therapists that developing client-driven care plans can enhance recovery.

She and her team are evangelists for prompt post-stroke therapy – and lots of it. "Best practice is up to three hours per day of therapy after a stroke," explains Shayne. "The more you can immerse patients in therapy, the more likely the brain is to develop new pathways."

This commitment to early supported discharge benefits the individual patient, their family, and every Albertan.

Focus by the **NUMBERS**

Year ended March 31, 2017



16,315

EMERGENCY DEPARTMENT PATIENTS SURVEYED ABOUT THEIR EXPERIENCE IN ALBERTA'S 16 BUSIEST EMERGENCY DEPARTMENTS



48

PATIENT EXPERIENCE AWARD APPLICATIONS DEMONSTRATED COMMITMENT TO IMPROVING THE PATIENT EXPERIENCE



1,381

PRIMARY HEALTHCARE PANEL REPORTS PROVIDED TO PHYSICIANS, PRIMARY CARE NETWORKS, OR CLINICS



32,291

PAGEVIEWS ON THE FOCUS ON EMERGENCY DEPARTMENTS WEBSITE SINCE JANUARY 31 LAUNCH TO MARCH 31, 2017

7,171

HOME CARE CLIENTS RESPONDED TO ALBERTA HOME CARE CLIENT EXPERIENCE SURVEY

70

RECOGNIZED AS ONE OF ALBERTA'S TOP 70 EMPLOYERS FOR 2017

HEALTH QUALITY COUNCIL OF ALBERTA

Statement of **OPERATIONS**

Year ended March 31

	2017		2016
	BUDGET	ACTUAL	ACTUAL
	(in thousands)		
REVENUES			
Government transfers			
Alberta Health - operating grant	\$ 6,611	\$ 6,946	\$ 6,611
Investment income	10	6	9
Other revenue	77	43	26
	6,698	6,995	6,646
EXPENSES			
Administration	2,552	2,688	2,838
Survey, measure and monitor initiatives	2,686	2,289	2,257
Patient safety initiatives	1,245	1,186	1,038
Quality initiatives	857	734	707
Communication	409	391	402
Ministerial assessment/study	–	239	109
	7,749	7,527	7,351
Annual operating surplus (deficit)	(1,051)	(532)	(705)
Accumulated operating surplus, beginning of year		1,890	2,595
Accumulated operating surplus, end of year	\$	\$ 1,358	\$ 1,890

For our complete financial statements, including all accompanying notes and schedules, see the HQCA's *2016-17 Annual Report* on our website www.hqca.ca.

The background is a complex, abstract composition of overlapping geometric shapes. It features large, semi-transparent teal circles and triangles, as well as solid light green rectangular and triangular blocks. The shapes are arranged in a way that creates a sense of depth and movement, with some elements appearing to be layered on top of others. The overall color palette is a mix of teal, light green, and white.

**We focus
on putting
Albertans
first.**



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