

APPROPRIATENESS OF CARE

“Better Care, Made Easier”



Network Meeting
September 30, 2016

Clinical Quality Improvement

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September 30, 2016



Session Overview

- History of Quality Improvement Initiatives in Saskatchewan Healthcare
- Clinical Quality Improvement as an Application of the Scientific Method



Healthcare in Saskatchewan



EXHIBIT ES-1. OVERALL RANKING

COUNTRY RANKINGS

| |
|-----------|
| Top 2* |
| Middle |
| Bottom 2* |



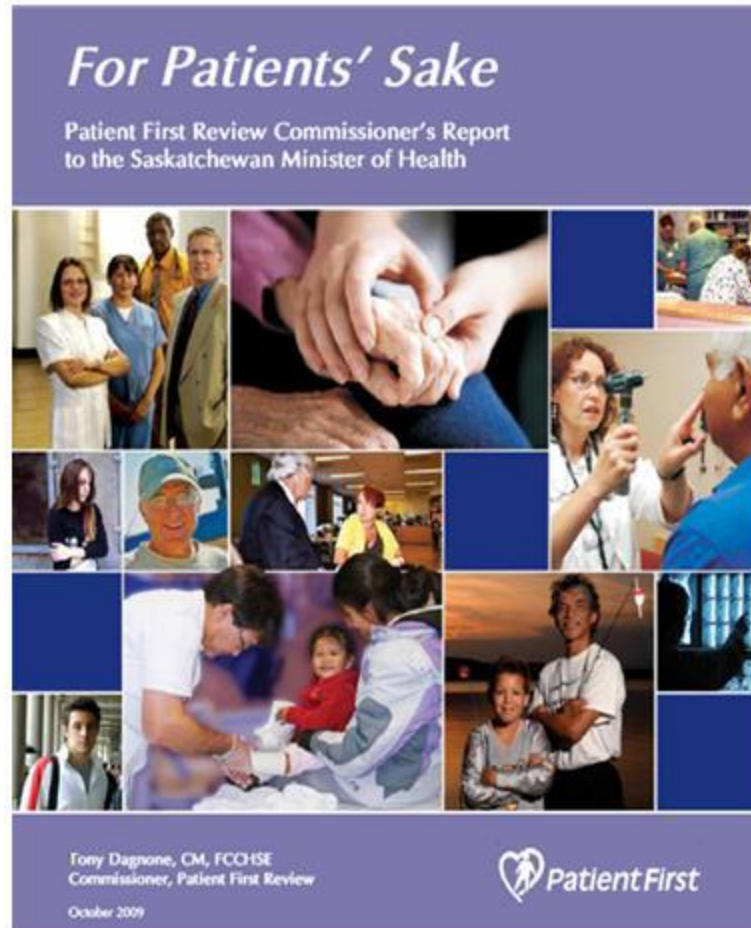
| | AUS | CAN | FRA | GER | NETH | NZ | NOR | SWE | SWIZ | UK | US |
|---|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| OVERALL RANKING (2013) | 4 | 10 | 9 | 5 | 5 | 7 | 7 | 3 | 2 | 1 | 11 |
| Quality Care | 2 | 9 | 8 | 7 | 5 | 4 | 11 | 10 | 3 | 1 | 5 |
| Effective Care | 4 | 7 | 9 | 6 | 5 | 2 | 11 | 10 | 8 | 1 | 3 |
| Safe Care | 3 | 10 | 2 | 6 | 7 | 9 | 11 | 5 | 4 | 1 | 7 |
| Coordinated Care | 4 | 8 | 9 | 10 | 5 | 2 | 7 | 11 | 3 | 1 | 6 |
| Patient-Centered Care | 5 | 8 | 10 | 7 | 3 | 6 | 11 | 9 | 2 | 1 | 4 |
| Access | 8 | 9 | 11 | 2 | 4 | 7 | 6 | 4 | 2 | 1 | 9 |
| Cost-Related Problem | 9 | 5 | 10 | 4 | 8 | 6 | 3 | 1 | 7 | 1 | 11 |
| Timeliness of Care | 6 | 11 | 10 | 4 | 2 | 7 | 8 | 9 | 1 | 3 | 5 |
| Efficiency | 4 | 10 | 8 | 9 | 7 | 3 | 4 | 2 | 6 | 1 | 11 |
| Equity | 5 | 9 | 7 | 4 | 8 | 10 | 6 | 1 | 2 | 2 | 11 |
| Healthy Lives | 4 | 8 | 1 | 7 | 5 | 9 | 6 | 2 | 3 | 10 | 11 |
| Health Expenditures/Capita, 2011** | \$3,800 | \$4,522 | \$4,118 | \$4,495 | \$5,099 | \$3,182 | \$5,669 | \$3,925 | \$5,643 | \$3,405 | \$8,508 |

Notes: * Includes ties. ** Expenditures shown in \$US PPP (purchasing power parity); Australian \$ data are from 2010.

Source: Calculated by The Commonwealth Fund based on 2011 International Health Policy Survey of Sicker Adults; 2012 International Health Policy Survey of Primary Care Physicians; 2013 International Health Policy Survey; Commonwealth Fund National Scorecard 2011; World Health Organization; and Organization for Economic Cooperation and Development, OECD Health Data, 2013 (Paris: OECD, Nov. 2013).



Patient First Review





Quality Improvement Initiatives

**SOONER
SAFER
SMARTER**

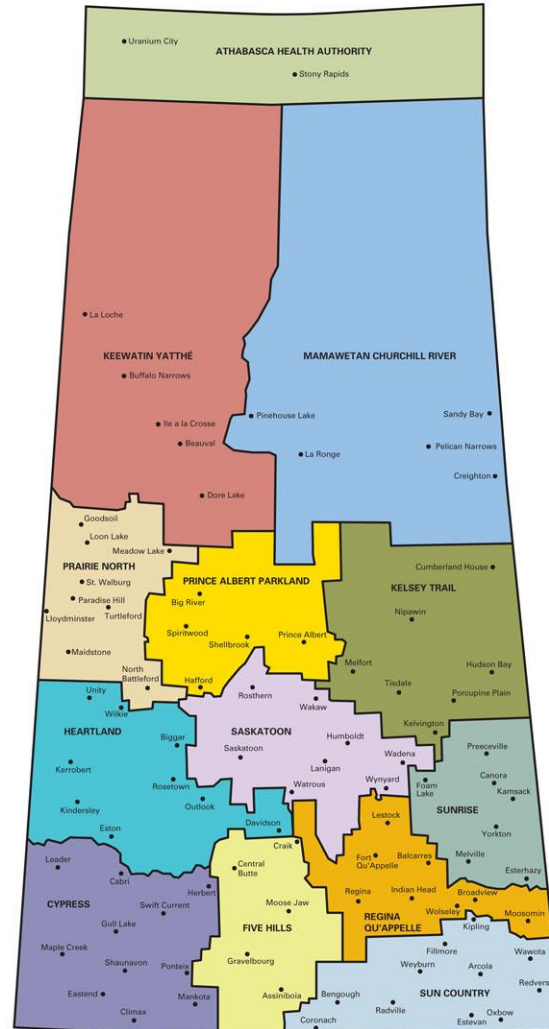


**Saskatchewan
Surgical Initiative**
putting the Patient First



Releasing Time to Care™

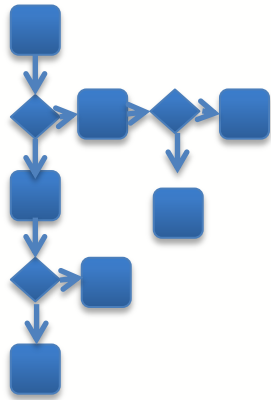
Saskatchewan Health Care Management System



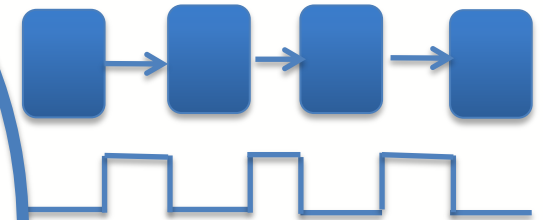


Building a Rapid-Learning System in Saskatchewan Health Care

WHAT
(Design)



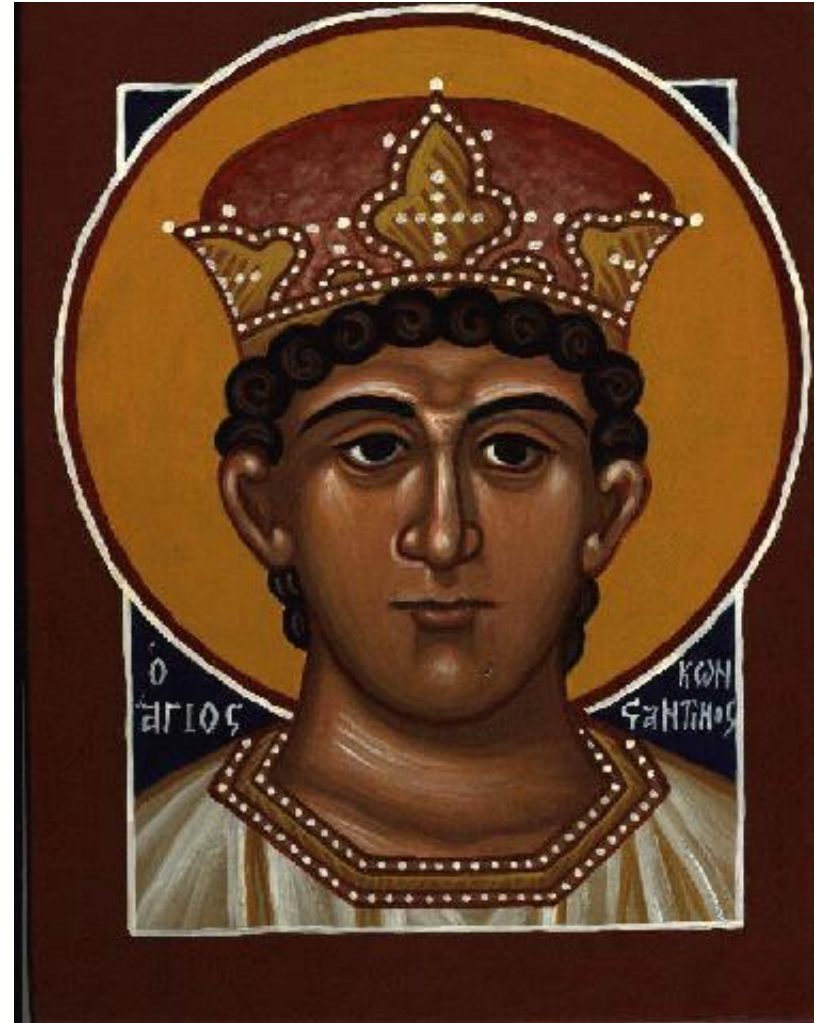
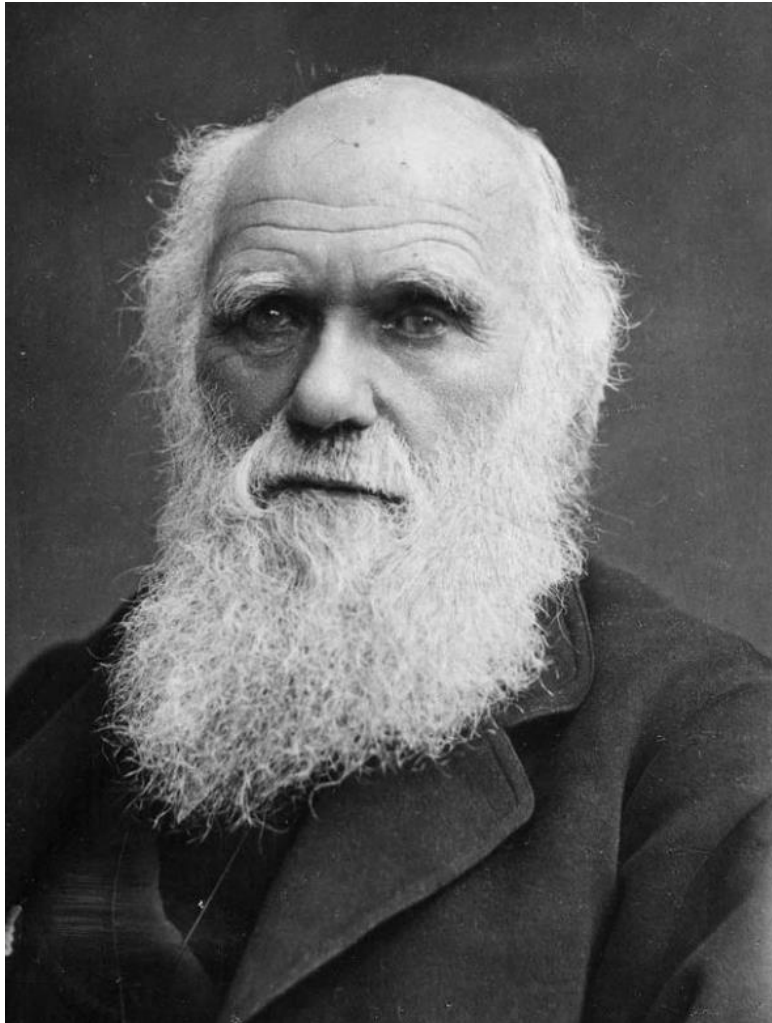
HOW
(Process)







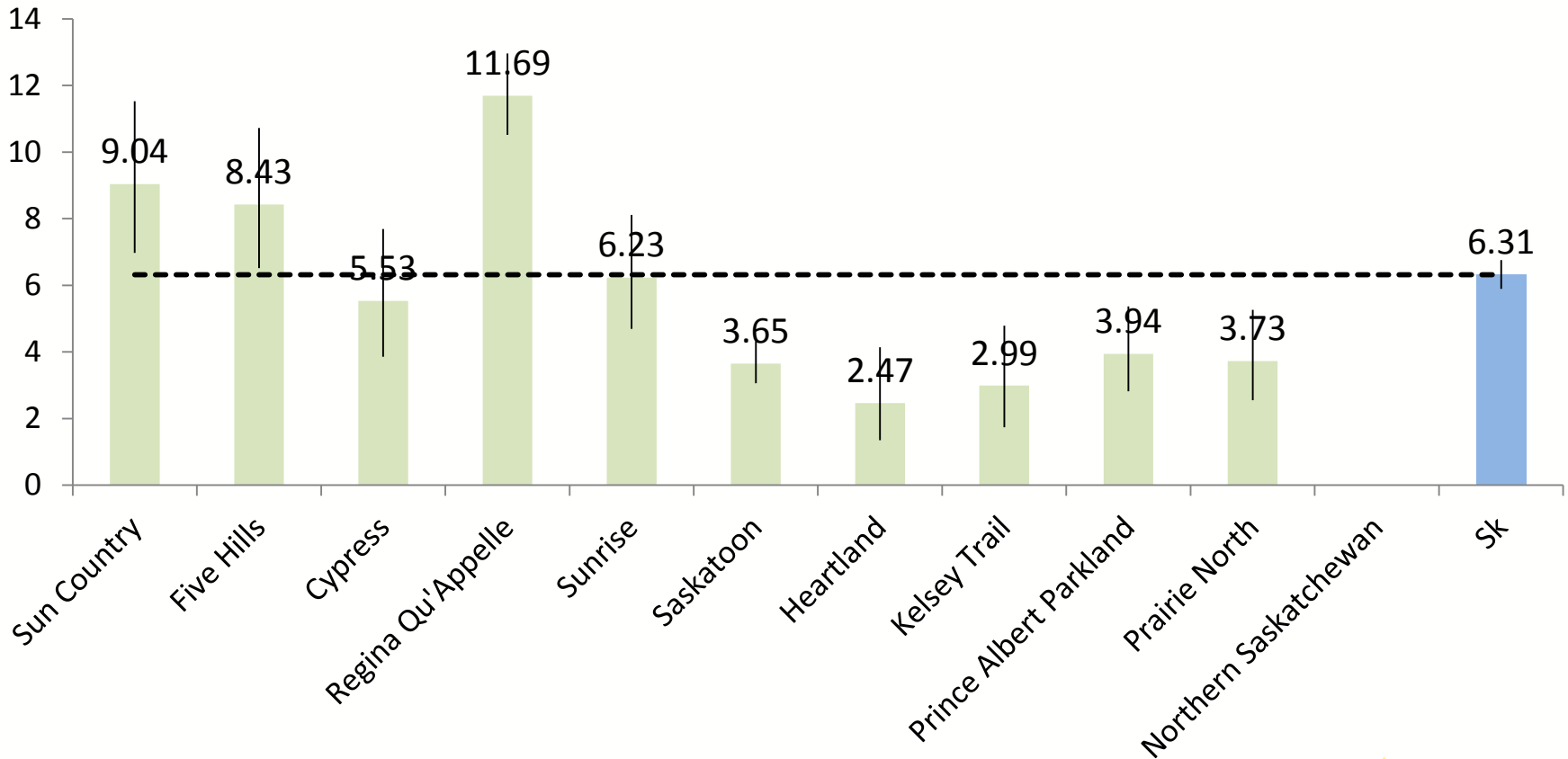
Variation – Friend or Foe





Example of Saskatchewan Variation

Excision Radical, Prostate
Rate per 10,000 population
5-year average (2008/09 -2012/13)





Variation & Inappropriate Care

Choosing Wisely Canada Examples:

- Treated blocked leg arteries, when you need a procedure and when you don't
- Imaging for low back pain, when you need them and when you don't
- Pre-Operative Tests for Surgery, when you need them and when you don't
- Low risk prostate cancer, don't rush to get treatment



To improve quality

- Eliminate inappropriate variation
(process steps)
- Adopt and adapt shared baselines and document continuous improvement
(outcomes)





Linking Appropriateness with Clinical Quality Improvement

Appropriateness is:

***The right care provided by the right providers,
to the right patient, in the right place, at the
right time, resulting in optimal quality care.***



Clinical Quality improvement is an Application of the Scientific Method



**KEEP
CALM
AND USE THE
SCIENTIFIC
METHOD**



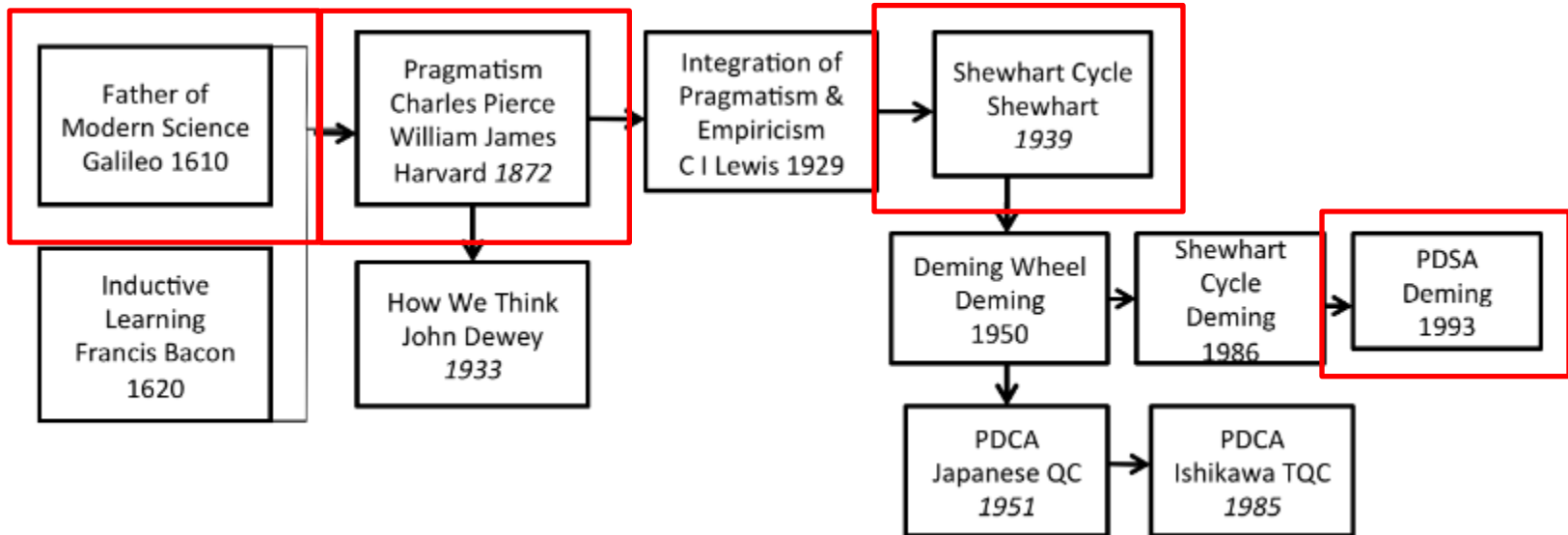
Scientific Method

1. The recognition of a problem and formulation of a hypothesis,
2. The collection of data through observation and experiment
3. The analysis of naturally observed data
4. The reformulation and modification of the hypothesis.



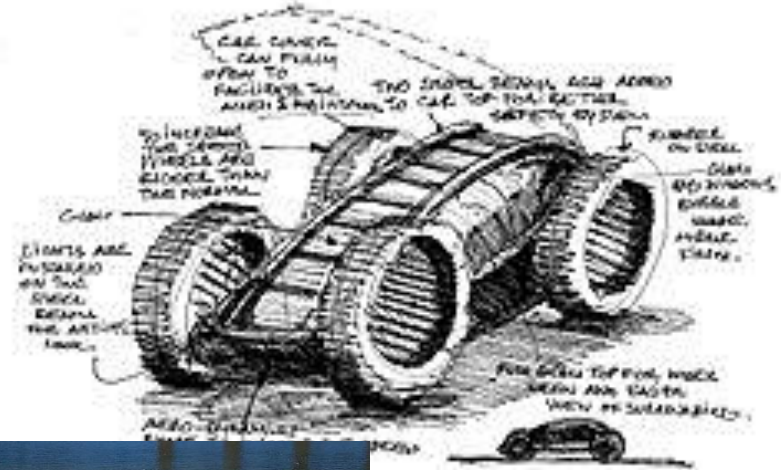


Evolution of the Scientific Method and the PDSA Cycle





Appropriateness (Clinical QI) and LEAN (Process Improvement)







The Practice of Medicine and Clinical Quality Improvement

- To **track** the treatments they give to their patients
- And the **outcomes** they achieve
- Reflect on how we can do better to **improve** treatments and outcomes for future patients



Appropriateness of Care Work

