

*HEALTH*  
*QUALITY*  
C O U N C I L



# Alignment: A way out of Indicator Chaos?

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# Alignment

- Different perspectives/meanings depending on your objectives and role
- Researcher – standardization/comparability
- Senior leader/governor – accountability/strategy
- Care manager in “4South” - supports care/improvement

# Top down *and* Bottom up

## Top Down

- Strategic focus – an organizing framework
- Prioritization of resource allocation
- “Pulling together” for shared goals – if strategy connected all the way down to daily work

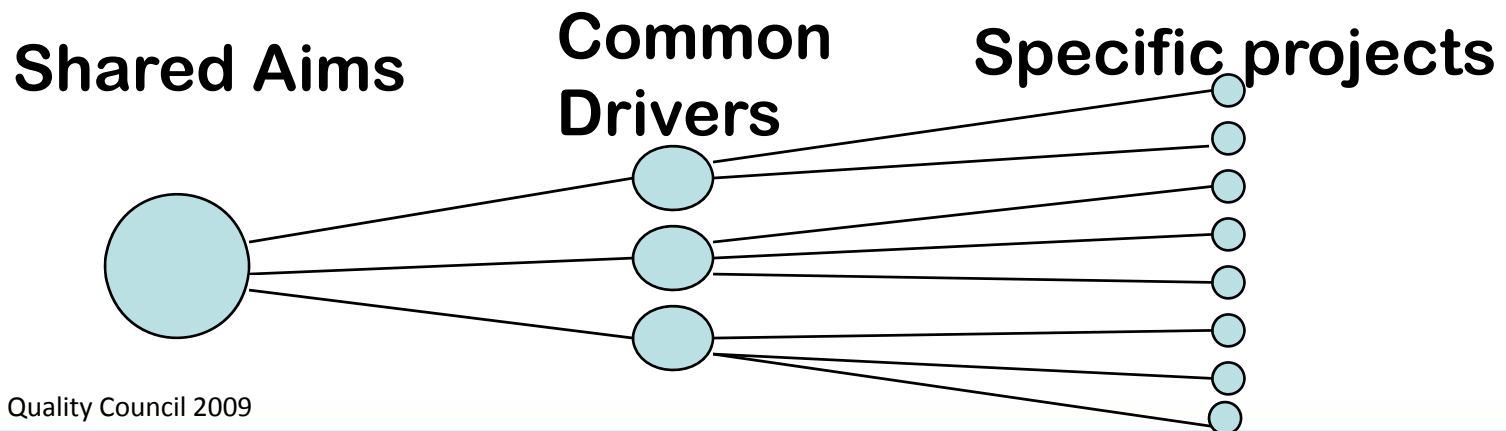
## Bottom Up

- Relevance to core/daily business (delivery of care)
- Starts from the source of all data
- Essential to the daily work of improvement

# Opportunities for Alignment

## Top Down

- How many separate strategies do we need in a publicly funded health care system?
- What are the shared priorities across health care organizations and systems? Could we share macro-level measures of shared priorities?



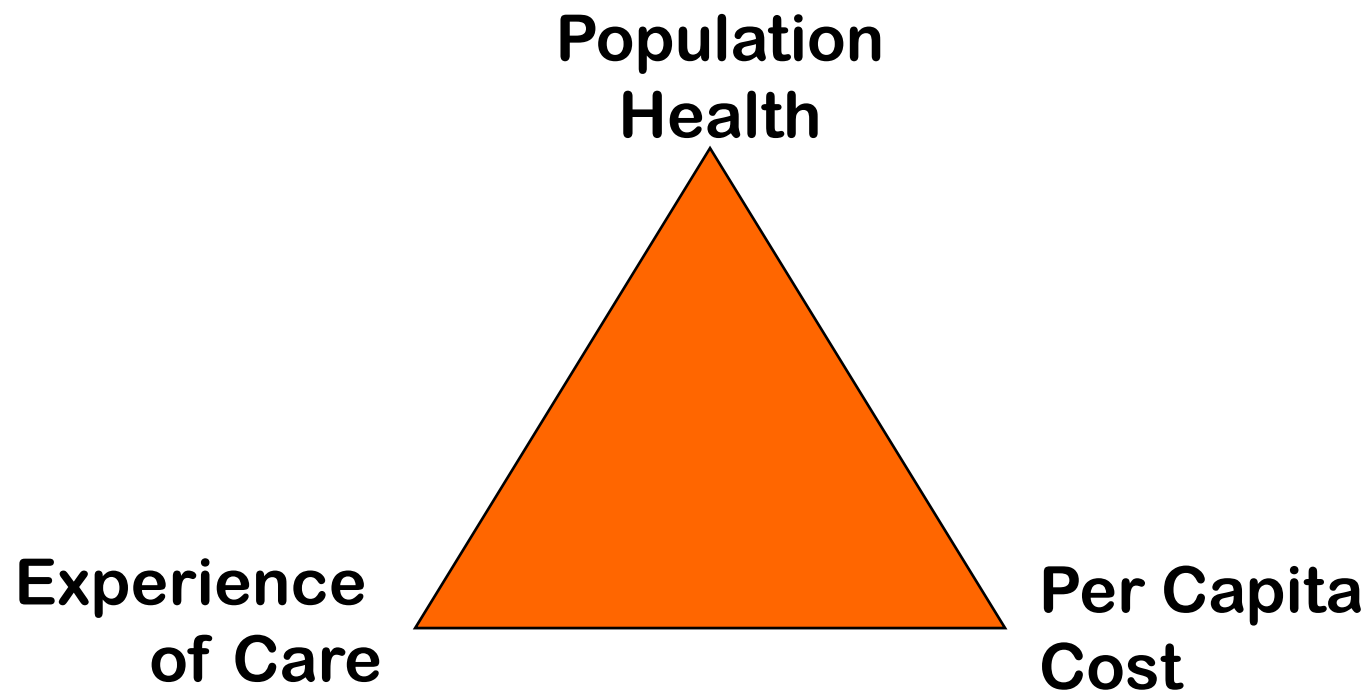
# Opportunities for Alignment

## Bottom Up

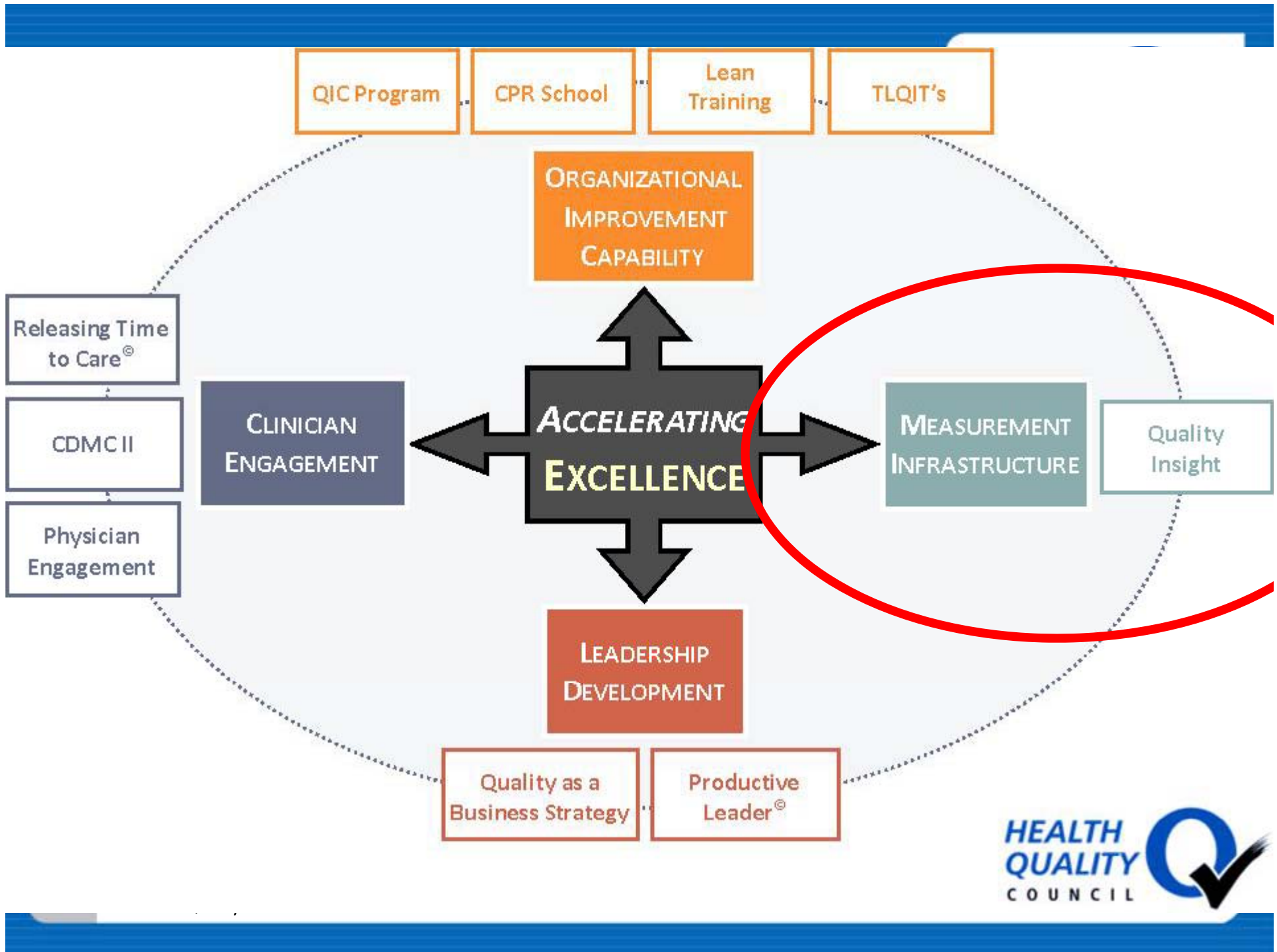
- Does every microsystem need to re-invent measurement?
- Prioritize the facilitation of shared learning to accelerate the process of building measurement from the bottom-up
  - Improvement collaboratives; joint measurement initiatives; indicator/measurement clearinghouse...

# Opportunities for Alignment

- Bottom up *and* Top Down



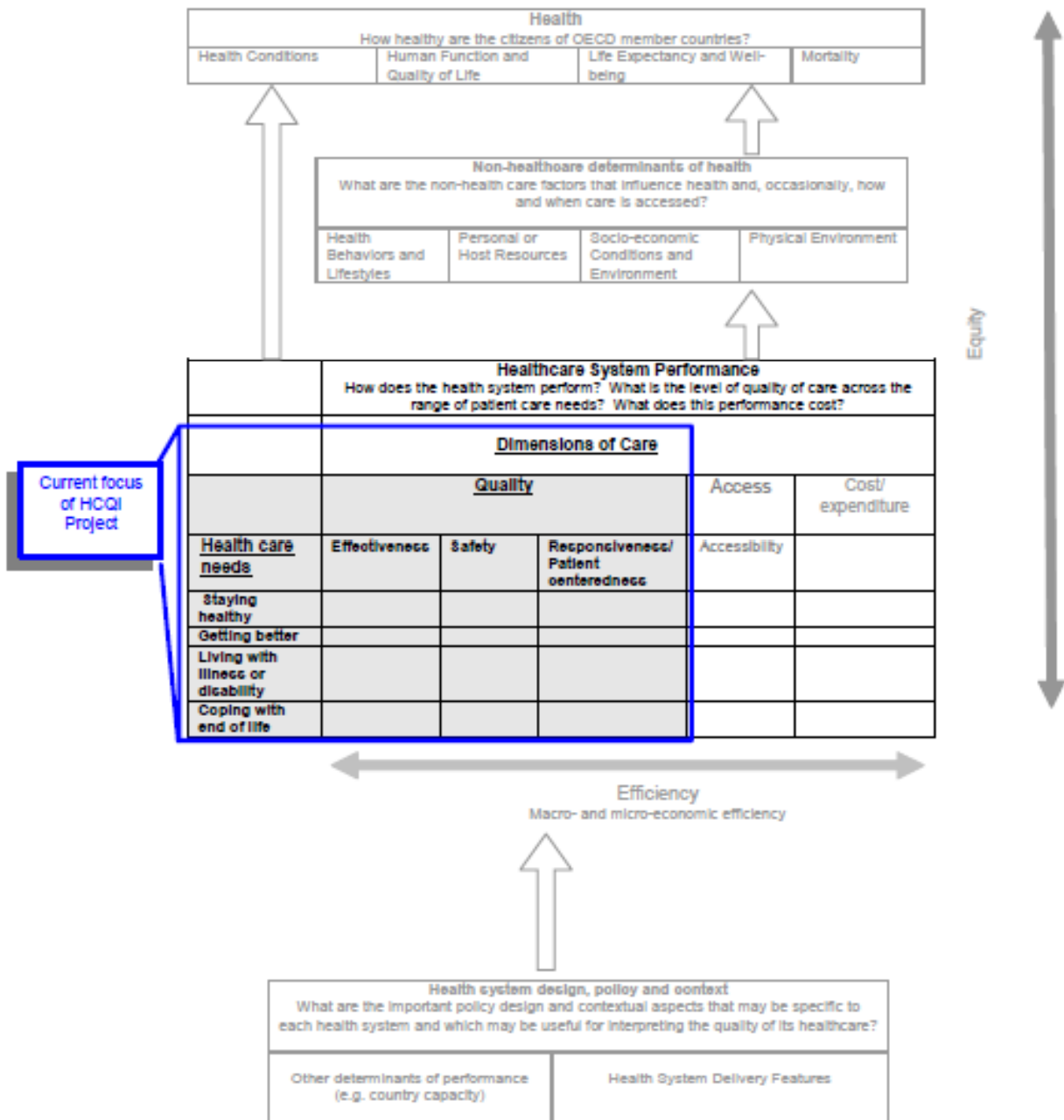
Berwick DM, Nolan TW, Whittington J. The Triple Aim: Care, health, and cost. *Health Affairs*. 2008 May/June;27(3):759-769.



# Quality Insight

*Measuring. Learning. Improving Health Care Together.*

- HQC-sponsored, stakeholder co-developed, health care measurement and reporting program for Saskatchewan
- Quality Insight Working Group
  - Regional Health Authorities, Sask Cancer Agency, Ministry of Health (member and Sr Leadership sponsor from each)
  - Topic-specific Sub-groups – topic focused expertise
- Quality Insight Report – annual, late fall
- Quality Insight on the Web



# OECD Health System Performance Measurement Conceptual Model

Source: Arah, O, Westert GP, Hurst J, Klazinga, NS. A Conceptual Framework for the OECD Health Care Quality Indicators. *International Journal for Quality in Health Care*. 2005 (submitted).

## Dimensions of Quality

### Effectiveness

Are we achieving desirable results and outcomes?

### Safety

Are we avoiding adverse events?

### Responsiveness

Are we meeting citizens expectations?

Health Care Needs

Staying Healthy

Efforts to maintain health

Getting Better

Efforts to restore health

Living with Illness or Disability

Efforts to help patients manage their conditions

Coping with End-of-Life

Efforts to help patients cope with end-of-life

	Effectiveness	Safety	Responsiveness
Health Care Needs	Are we achieving desirable results and outcomes?	Are we avoiding adverse events?	Are we meeting citizens expectations?
Staying Healthy Efforts to maintain health	Are our prevention and promotion efforts achieving desirable results and contributing to positive outcomes?		
Getting Better Efforts to restore health			
Living with Illness or Disability Efforts to help patients manage their conditions			
Coping with End-of-Life Efforts to help patients cope with end-of-life			

### Efficiency

Are we distributing resources in a manner that yields maximum benefits and results?

### Equity

Are we distributing health care and its benefits fairly amongst our citizens?

# Quality Measurement Framework & Health System Levels

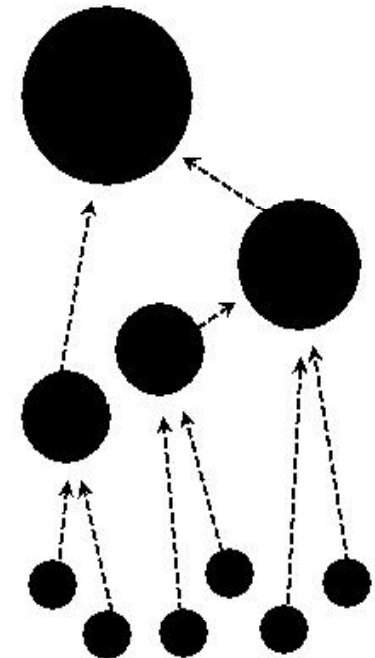


## Health System Level

Macrosystem

Mesosystem

Microsystem





# Quality Insight

*Measuring. Learning. Improving Health Care Together.*

## Introducing the Quality Insight measurement and reporting program



What is the state of health care quality in Saskatchewan?

Evidence and examples from elsewhere tell us that to adequately understand the current state of health care quality, assess the impact of improvement efforts, and determine whether we are holding the gains, Saskatchewan needs a program of continuous measurement and reporting. Such a program must also provide health system stakeholders with information on quality in ways that are most useful and meaningful to them.

The inaugural Quality Insight report serves as a starting point toward providing this comprehensive picture of the quality of care in Saskatchewan. This first iteration provides baseline information from the 5-year period spanning 2001/02 to 2005/06. The HQC envisions the development of this new measurement and reporting program to be a dynamic process involving collaboration with our stakeholders—to ensure that the program and its products meet the needs of those charged with managing and improving health care in Saskatchewan (i.e., health care leaders and decision-makers) and adapts to changing needs over time. It is our hope that the report will encourage consensus-building about the "what" and "how" of measuring health care quality in our province. Over the next year, we will be working with an advisory group consisting of provincial and regional-level decision-makers, as well as those involved in quality measurement, to revise and improve the design and content of the report. We encourage and welcome input into this process.

[Quality Insight report, 2008](#) (PDF, 92 pages)

[Quality Insight 2008 detailed data tables and figures for all indicators](#)

[A short note on statistical comparison methodology](#) (PDF)

[Technical Appendix](#) (PDF, 119 pages)

[News release](#)



### Health Clips

From the latest bulletin on innovation in health services

- "Pushin' Paper" - Lean for Service, Office and Technical Environments

- Bedside doctor

### Secure Forum Access

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# Other Alignment Initiatives

- **Patient experience surveying**
  - Health Quality Councils and orgs leading patient experience surveying in 4 provinces in discussion about alignment on common core measurement
  - Link with Accreditation Canada's Positive Client Experience ROP
- **Patient safety indicators**
  - CIHI, AHQC, HQC-SK collaborating on methodology (also linked to international patient safety indicators initiative)

**We need much more collaboration and coordination of measurement efforts – provincially and nationally- around shared priorities for improvement**