

Alberta Doctors' Digest

What are patients and the data telling us?

Dr. Eddy Lang has been studying health care data for years – and believes there's never been a more important time to measure quality and experiences in Alberta.

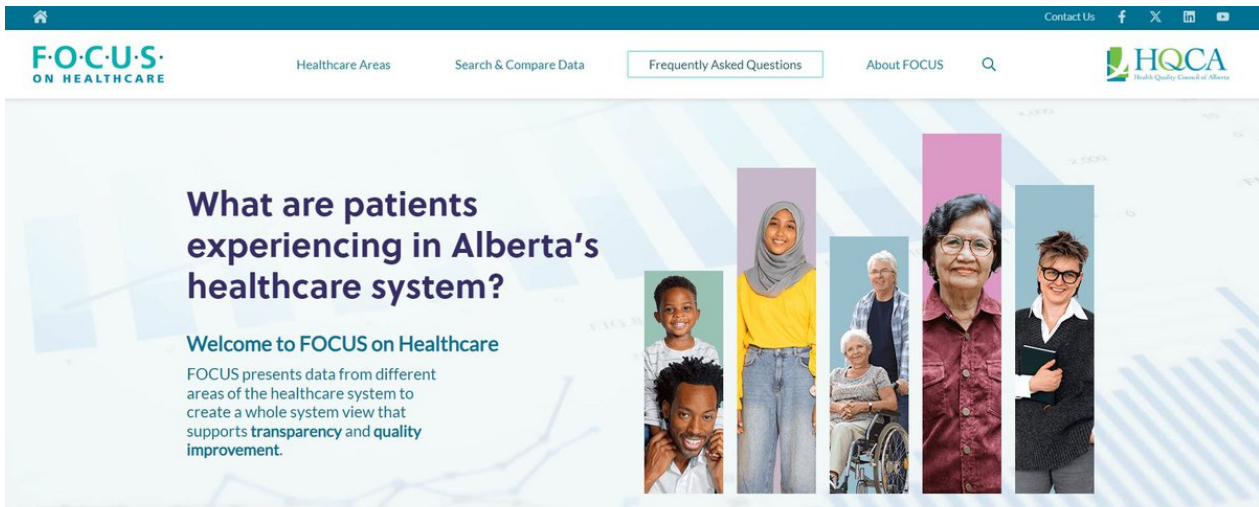
Coordination and integration across the health care system could be tested in the coming months as the new provincial health care organizations get set up, says Dr. Lang, professor for Emergency Medicine, Cumming School of Medicine, University of Calgary.

“I hope the transition ahead in health care will be a very data-driven and evidence-focused approach,” he says. “It would allow for better accountability, transparency and trust if the relevant data, targets and objectives are laid out clearly – and we can all see how, in fact, the system is doing.”

In his role with the university, Dr. Lang says he refers to many health care measurement dashboards to support his work. One of his favourites is the Health Quality Council of Alberta's (HQCA) [FOCUS on Healthcare website](#).

“Whenever I share FOCUS with national or international audiences, people are amazed at the wealth of data, the comprehensiveness of it, the transparency and the fact that it's all publicly available,” says Dr. Lang. He notes that every time he visits the FOCUS site, he learns something new or discovers a question he'd like to see answered.

“There's always this sense the sky is falling, and emergency departments are getting busier and busier. But the visit volume data on the FOCUS website would not really suggest that is the case,” he says. “But then there are some measures like ‘left the ED without being seen’ and ‘the time it takes for admitted patients to get a room’ that show considerable variability from one hospital to another. And we need to be asking why these differences exist.”



FOCUS on Healthcare home page

FOCUS on Healthcare

The HQCA's [FOCUS on Healthcare website](#) has been reporting on Alberta health care since 2017.

Today, the site reports the most recent years of data and hundreds of thousands of data points on primary care, emergency departments, hospital care, home care and continuing care homes. Many of the measures are updated quarterly.

HQCA Health System Improvement Lead Maz Rahman says FOCUS is intended to inform system-level improvement discussions. "We believe FOCUS can help government, leaders in health care, and communities understand where the health care system is achieving overall goals and objectives, where things work well and where there are opportunities for improvements," says Rahman. "We also know that patients, families and all Albertans are consistently looking for transparency on how the health care system is measuring up."

Medgine Mathurin, chair of the HQCA's Patient and Family Advisory Committee, says FOCUS brings clarity and an increased understanding about health care in Alberta – and that's especially welcome during this period of change.

"People frequently talk about wait times, especially in the ER, so it's nice to have an objective source of information we can trust to show what's happening both regionally and province-wide," she says. "I also think about the resident satisfaction surveys that are regularly done across continuing care. This data is incredibly helpful for families who have loved ones in these facilities as well as others who are considering a particular care centre."

What's next?

Maintaining and continually evolving the FOCUS on Healthcare website to meet the ever-increasing health care measurement needs in Alberta is an ongoing priority for the HQCA, which has a legislated mandate to promote and improve health service quality, patient safety, and person-centred care.

The current roadmap for future development of FOCUS includes adding measures on cancer care, palliative and end-of-life care, patient safety in hospitals, population health and the patient journey across health care areas.

“As we balance future growth and our regular maintenance, we’re constantly asking questions,” says Darren Mazzei, Lead, Health Economics at the HQCA and a co-lead on the FOCUS on Healthcare website. “Are we reporting the right things? How do we help the health care delivery organizations move from measurement to improvement? Do our measures provide value? How do patient experience measures complement the administrative data we report? And how do we simplify complex subject matter so it’s meaningful and relevant to everyone.”

Mazzei says these questions are invariably answered through the HQCA’s rigorous engagement strategy that involves health care leadership, professionals, academics, and patient and family representatives from across the province.

The wisdom of many

Dr. Eric Wasylenko, a retired palliative care physician who has been deeply involved in end-of-life clinical practice, policy and program development for almost 30 years across Canada, applauds this inclusive and methodical approach to health care measurement.

“Including clinical and system experts as well as patients and families who have their own unique lived experience and expertise in the process instills confidence in what the HQCA is measuring and reporting on,” says Dr. Wasylenko, who has contributed his expertise to recent discussions on palliative and end-of-life measurement for FOCUS.

Dr. Wasylenko says he appreciates the constructive conversation the HQCA facilitates about the relevance of measures, the availability of data, and what topics or issues in health care may require new or different ways to measure.

In many instances, the HQCA consults on hundreds of possible measures for a health care area on FOCUS before finalizing a considerably smaller list of the most meaningful set of indicators with input throughout the engagement process.

“Getting measurement right helps system leaders, clinicians and funders make better decisions about care delivery and apportion scarce resources where they will provide ideal benefit,” Dr. Wasylenko says. “It also helps patients make the best decisions possible about how they might access care.”

For Dr. Lang, the value of getting measurement right now and in the days ahead is simple. “As the saying goes: ‘You can’t improve what you can’t measure.’ And you can’t really know how your system is performing, nor can you change it, without data and good measurement.”

Which health care measures get the most visits on the FOCUS website?*

1. Admission to hospital from the emergency department (ED care)
2. Hospital occupancy (Hospital care)
3. Patient time to see an emergency doctor (ED care)
4. Patient completion of screening tests (Primary health care)
5. Emergency department volumes (ED care)
6. EMS response time for life-threatening events (ED care)
7. EMS response time for life-threatening events (Continuing care)
8. Family doctor visit after a hospital stay for selected chronic conditions (Primary healthcare)
9. Placement into preferred living option (Continuing care)
10. Placement within 30 days (Continuing care)

**FOCUS on Healthcare, between Jan. 1 – Aug. 1, 2024*

For more information:

Visit the FOCS on [Healthcare website today](#) to see what's available.

Banner image: Medgine Mathurin, chair of the HQCA's Patient and Family Advisory Committee, checks out FOCUS on Healthcare website.