



Only provincial and zone results available and reported on following pages.

**Objective 11: Improve efficiencies through implementation of operational and clinical best practices while maintaining or improving quality and safety.**

**WHY THIS IS IMPORTANT**

AHS is supporting strategies to improve efficiencies related to clinical effectiveness and appropriateness of care, operational best practice and working with partners to support service delivery. AHS is making the most effective use of finite resources while continuing to focus on quality of care.

**AHS PERFORMANCE MEASURE**

*Nursing Units Achieving Best Practice Targets* is defined as the percentage of nursing units at the 16 busiest sites meeting Operational Best Practice (OBP) labour targets.

**UNDERSTANDING THE MEASURE**

Operational Best Practice is one of the ways we can reduce costs, while maintaining or improving care to ensure a sustainable future. This initiative began more than a year ago and initially is focusing on the 16 largest hospitals in Alberta, clinical support services and corporate services.

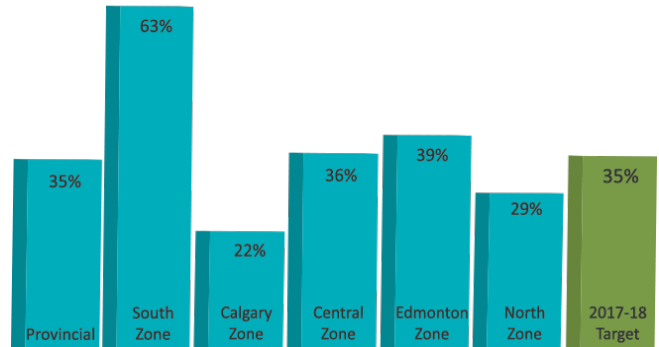
Using comparative data from across the county, AHS has developed OBP targets for all nursing inpatient units. These targets are designed to achieve more equitable service delivery across the province with the measure used to monitor leadership’s ability to meet the targets and reduce variations in the cost of delivering high quality services at AHS’ sites.

A higher percentage means more efficiencies have been achieved across AHS.

**HOW WE ARE DOING**

Provincially, Q2 results met the 2017-18 target of 35%. While not all zones and sites are achieving the provincial target, 38% are meeting or exceeding the 2017-18 target in Q2.

**Nursing Units Achieving Best Practice Targets**  
Quarterly Comparison: ★ Target Achieved



Source: AHS Finance Statistical General Ledger (STAT GL)

**WHAT WE ARE DOING**

In addition to initiatives related to Operational Best Practice, AHS is also engaged in many other strategies to help improve efficiencies across the organization. The following are examples of some of this work.

The Clinical Appropriateness Steering/ Advisory Committee was approved and started meeting to manage clinically appropriate initiatives that will enhance patient care and contribute cost savings to AHS.

The Clinical Appropriateness initiative is multi-faceted, and requires leadership and support from a number of program areas, including AHS Clinical Support Services, AHS Quality and Healthcare Improvement, Strategic Clinical Networks, clinical operations, and physicians. Strong partnership and collaboration with primary care providers, the Alberta Medical Association (AMA) and other external groups will be necessary for the Clinical Appropriateness initiative to be successful.

## AHS Q2 2017-18 Performance Report

A list of over 60 initiatives has been developed, with an estimated savings of \$10M. Initiatives are prioritized as “short, medium and long term” and will be implemented accordingly. Examples of initiatives underway and early results include:

- Q2 target was met as AHS saw a 16% decrease in CT lumber spine exams performed in Q2 compared to the same period last year. In Q2 YTD 2016-17, there was 1.38 exams per 1,000 residents. In Q2 YTD 2017-18, there was 1.16 exams per 1,000 residents. A lower value demonstrates improved efficiencies.
- Work continues on implementing a streamlined *Low Molecular Weight Heparin (LMWH)* formulary based on clinician engagement and contracting process. LMWH is a class of anticoagulant medications. They are used in the prevention of blood clots and treatment of venous thromboembolism and myocardial infarction.
- As of September 2017, we have seen a reduction in MRIs for chronic knee pain of 3.5%.
- Transition to a new brand of atropine prefilled syringes, which are more cost effective, for use primarily in patient codes and urgent procedures. The new syringes have different concentration, which requires staff awareness when the change is made. In working with key stakeholders, it was determined the switch could be made safely with educational support.
- AHS has implemented criteria for icatibant, a drug used to treat swelling attacks in people with hereditary angioedema (a disorder resulting in severe swelling of the body). The updated criteria has resulted in significantly lower usage of icatibant.

Additional initiatives to reduce inappropriate variation and apply consistent clinical standards are found in Objective #5.

The following Q2 updates are provided on planning activities underway with Alberta Health:

- The goal of *Zone Health Care Planning* is to develop a population health driven strategic plan. Initiatives identified will support quality, accessible care in the community and a sustainable health system, reduce the reliance on acute care and enhance care in the community. Engagement sessions were held in Calgary and Central Zones for community initiatives and acute care streams. Both zones are on track to meet submission timelines.
- Service and access guidelines develop consistent principles for healthcare planning that supports equitable access to services across the province. Subject matter experts have been engaged to assist with the development of guidelines for basic medical/ surgical (initial rural focus), emergency health and primary care services.
- Provincial Interventional Cardiac Service Plan identifies the need for cardiac services in a coordinated and evidence-based approach. A needs assessment and options analysis overview are currently being completed.