



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 is focusing on the 16 largest hospitals in Alberta, including clinical support services and corporate services.

Using comparative data from across the county, AHS has developed OBP targets for 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.

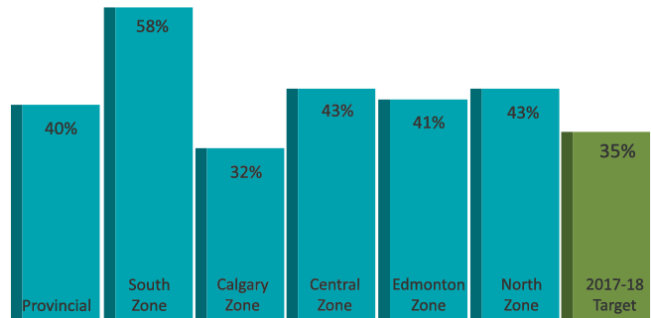
A higher percentage means more efficiencies have been achieved across AHS.

### HOW WE ARE DOING

Provincially, Q3 results met the 2017-18 target of 35%. While not all zones and sites are achieving the provincial target, most are meeting or exceeding this target.

### Nursing Units Achieving Best Practice Targets

Quarterly Comparison: ★ Target Achieved



Source: AHS Finance Statistical General Ledger (STAT GL)

### WHAT WE ARE DOING

Achieving results from operational best practice initiatives will be critical to AHS’ financial health and sustainability. With Phase 3 of planning completed, action plans have been prepared for acute care, clinical support services, and corporate services. Monitoring reports are continuing to be developed. For Q3, operational areas were asked to provide an update on the progress towards implementation of identified initiatives.

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 **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.

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.

To reduce unnecessary diagnostic testing, AHS has developed over 60 initiatives, with an estimated savings of \$10M. Many of these initiatives are being undertaken as part of AHS' commitment to the Choosing Wisely Canada campaign. Initiatives are prioritized as "short, medium and long term" and will be implemented accordingly. Examples of initiatives underway and early results include:

- Q3 target was met as AHS saw a 14% decrease in CT lumbar spine exams performed in Q3 compared to the same period last year. In Q3 year-to-date 2016-17, there was 1.32 exams per 1,000 residents. In Q3 year-to-date 2017-18, there was 1.13 exams per 1,000 residents. A lower value demonstrates improved efficiencies and reducing unnecessary diagnostic testing.
- Work continues on implementing a streamlined Low Molecular Weight Heparin (LMWH) formulary which is a class of anticoagulant medications used in the prevention of blood clots and treatment of venous thromboembolism and myocardial infarction.
- South and Calgary Zones began implementation of LMWH dose rounding and are achieving targets. Central Zone plans to implement in March 2018. Dose rounding reduces drug waste and promotes safe administration as the majority of doses are provided in a pre-filled syringe.
- As of end December 2017, we have seen a reduction in MRIs for chronic knee pain of 2.4%.
- Transition to a new brand of atropine in prefilled syringes are more cost effective and are primarily used in patient codes and urgent procedures.
- AHS has implemented criteria for icatibant, a drug used to treat swelling attacks affecting airways 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 under Objective #5.

In December 2017, the Government of Alberta announced a new provincial laboratory services entity that will ultimately help improve the quality and timeliness of

care for Albertans. Transition planning for this consolidation is progressing. Preliminary discussions underway with AHS leadership and Alberta Health to determine an interim governance structure and next steps. The consolidation of lab services across the province into an AHS wholly-owned subsidiary will leverage existing infrastructure, accounting systems and corporate services, while optimizing innovation in laboratory diagnostics to accommodate growing demands.

Q3 updates on planning activities underway with Alberta Health include:

- Through joint Alberta Health-AHS agreement, the service and access guidelines initiative is on pause due to competing initiatives that require significant clinical and administrative engagement and input (e.g. Connect Care, Enhancing Care in the Community and PCN Governance).
- Provincial Interventional Cardiac Service (ICS) Plan identifies the need for cardiac services in a coordinated and evidence-based approach. A needs assessment and options analysis overview were submitted for review, and expert review of assumptions/conclusions and methodological approach in key areas was conducted. Consultations with the ICS Oversight committees are scheduled in Q4 in preparation for final documents.

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.

- The Central Zone Healthcare Plan has been approved by the AHS Executive Leadership Team. The plan is being submitted to the AHS Board for approval and formal submission to Alberta Health.
- The Calgary Zone Healthcare Plan is on track to meet deadlines. Community initiatives have been confirmed through extensive engagement; acute care priorities were identified and are currently being confirmed with acute care departments.