



Medicine

Hospital Medicine, Kidney Health, Respiratory Health

Email

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Key Partners

Hospital Medicine, Kidney Health, and Respiratory
Health Care Providers and Clinical Operations
Primary Care Providers

Academic Institutions
Regulatory and Accreditation Organizations
Provincial, National and Community Organizations

Major milestones and achievements, 2023-2024

The Medicine Strategic Clinical Network (MSCN) brings several clinical communities together that practice in acute care and ambulatory care settings to advance innovation and health system improvement on a provincial scale.



Medicine SCN Cross-Cutting Projects

Provincial Medicine Services Plan aims to optimize service delivery and efficiency

Working with partners from Alberta Health and AHS, the Medicine SCN has been creating a provincial plan that will inform long-term planning for medicine services in Alberta. The plan will establish key outcomes and priority actions with the goal to achieve high-quality, provincially standardized, and efficient care for medicine patients in hospital settings. The initial phase will involve an evidence review on approaches to patient acuity and resource intensity. Building on the available evidence, the plan aims to identify what kinds of patients are seen in hospital, and how to best care for them to ensure patients receive the right level of care. Scoping and planning work was completed over the past year, with the approach presented to, and endorsed by, the System Capacity Committee and the Clinical Operations Executive Committee.

A provincial approach for Point of Care Ultrasonography (POCUS)

POCUS is an ultrasound exam performed at the bedside. It assists healthcare providers in answering specific clinical questions and supports effective, efficient patient care by providing immediate results. This initiative focuses on developing a provincial approach for the safe, effective use of POCUS for clinical assessments and providing bedside procedural guidance for its use on adult patients under the care of general internal medicine and respiratory.

Key accomplishments include development of provincial best practice recommendations and online, interactive resources for ultrasound-guided bedside procedures. These are foundational steps to reducing clinical variation and improving diagnostic accuracy and patient safety. Next steps are to promote the consistent standard of care when clinicians use POCUS in a variety of clinical settings and to develop quality indicators and a Connect Care dashboard to capture relevant data for program evaluation, monitoring, and quality improvement.



Hospital Medicine

Optimizing the management of Staphylococcus aureus Bacteremia (SAB) (OPTIMUS-SAB)

Infections caused by SAB are common in hospital settings and associated with significant morbidity and mortality. This infection can be challenging to treat and can benefit from comprehensive and collaborative management.

OPTIMUS-SAB is a PRIHS 7-funded initiative that aims to standardize the quality of SAB care across all Alberta hospitals. A newly established care pathway—deployed through Connect Care—uses an automated notification system for SAB-positive blood cultures for all adult patients admitted to an acute care facility. A centralized SAB care team, consisting of a clinical coordinator and rotating infectious disease specialist, receives these notifications, review the patient's chart via Connect Care, and then contacts the attending team to suggest management recommendations according to an evidence-based care bundle. This approach ensures frontline healthcare teams are able to consult with an infectious disease specialist and patients with an SAB infection are readily triaged. It also supports earlier intervention, maximizing the potential benefit to patients.



Kidney Health

Successful implementation of a patient-centered approach to dialysis care

The Incremental Dialysis Program is a collaboration between Alberta Kidney Care and the Medicine SCN to improve patient outcomes and quality of life while safely increasing system capacity. New chronic outpatient hemodialysis (HD) starts are assessed and eligible patients receive dialysis 2x/week and titrate up to 3x/week as indicated. Highlights from the final program evaluation:

- ▶ More than 90 patients are on incremental dialysis on any given day across Alberta (~400 runs “saved” per month).
- ▶ Monthly, the program created space for approximately +24 patients, 3x/week across Alberta.
- ▶ The most common benefits mentioned by interview participants were decreased treatment burden and increased quality of life.
- ▶ There were no significant differences in health outcomes between incremental and conventional HD patients.
- ▶ Incremental HD appears to be safe for patients.
- ▶ The program received a Health Quality Council of Alberta 2024 Patient Experience Award, and the program is now in the sustainability phase with Alberta Kidney Care North and South.



Respiratory Health

Prudent use of oxygen for adults in acute care

Prudent Use of Oxygen is a provincial initiative to improve evidence-based oxygen therapy for adult inpatients. While early and routine use of oxygen in hospitals has been common practice, it is not always helpful and too much can sometimes be harmful. Through a multi-component, co-designed intervention—including evidence-based oxygen orders in Connect Care, huddle and handover communication strategies, and an online toolkit—healthcare providers are encouraged to wean adult inpatients off oxygen therapy based on target saturation (SpO2) ranges tailored to the patient’s presentation.

Early evaluation at the pilot site indicates that the initiative is easy to adopt and sustain and has led to a decrease in hospital length of stay (0.4 to 1.4 days) for patients on oxygen therapy; associated decrease in hospitalization-related costs; fewer discharge delays; and improvements in nursing confidence and patient comfort.

MEDICINE SCN

Publications & Grants



58

Peer-reviewed Publications



Engagement

37

Presentations & Workshops

Outcomes and Impact

Reduced hospital length of stay by 0.4 to 1.4 days for patients experiencing prudent use of oxygen therapy



\$17.4M

Research Grants



259

Research Members

100+

audit & feedback reports disseminated to physicians

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