

# Co-Designing Health Improvements



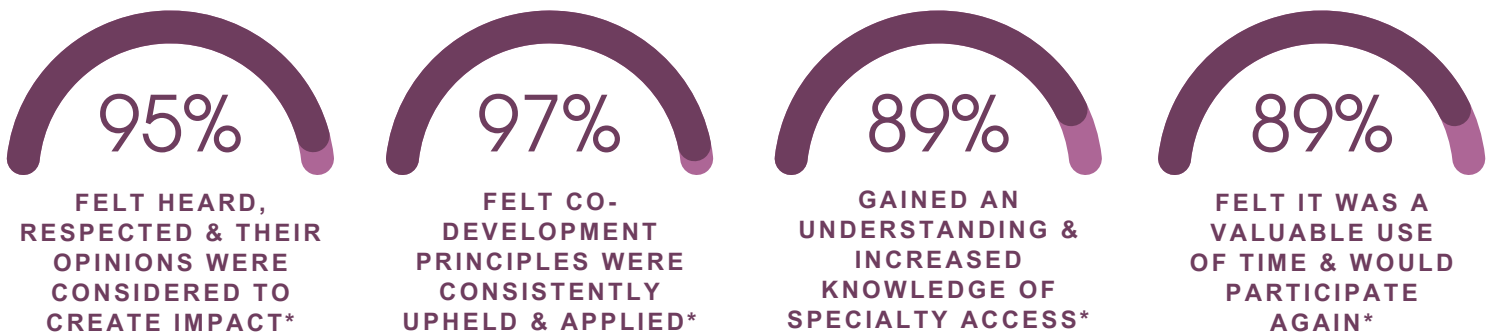
The Alberta Surgical Initiative (ASI) Specialty Access team is focused on improving the patient's surgical journey from the time patients seek care from their family doctor, to when they are referred to a specialist, to their surgery and rehabilitation.

As part of achieving its mission, Specialty Access is committed to implementing provincial solutions co-designed with primary care, specialty care and patients.

## Goals of In-Person Co-Design

- Shared commitment to improving patient experience for access to specialty care
- Build relationships with and between primary care, specialty care and patients
- Rapidly design first drafts of referral, clinical and patient pathways

## Participant Experience



\*Of co-design day survey respondents that participated in the most recent in-person co-design opportunity.

## Feedback & Thoughts

“Very impressed by active participation by surgeons and primary care, the co-design process worked very well. Also, the facilitators were great, they made a complex process run very smoothly! Well done!”

“It is great to have primary care physician representation. I wish there were more. As a specialist, I don't know the challenges they face and it was refreshing to hear.”

“Really enjoyed working in person with the specialists and the other family doctors. Very collaborative, collegial and engaging. Some topics got sticky but the facilitators moved it along.”

# Co-Designing Health Improvements



On October 26 and 27, 2023, the Alberta Surgical Initiative (ASI) Specialty Access team hosted in-person co-design sessions for Neurosurgery, Oral and Maxillofacial Surgery, Otolaryngology Head and Neck Surgery, and Plastic Surgery.

## Co-Design Day Objectives

- Connect on provincial referral processes to initiate central access and intake
- Draft clinical and patient pathway for the prioritized condition
- Develop a plan to deliver non urgent advice across Alberta

## Accomplishments

### Neurosurgery

- Completed draft referral pathway and referral form.
- Specialty decided a clinical pathway for primary care was not needed.
- Currently providing electronic advice in Calgary.
  - Amenable to the idea of expanding provision of advice with a preference for electronic.

### Oral and Maxillofacial Surgery

- Reasons for referral approximately 80% complete as initial discussions regarding mandatory information completed.
- Temporomandibular Joints (TMJ) dysfunction selected for clinical and patient pathway, with initial draft of clinical pathway algorithm completed.
- Currently not providing telephone or electronic advice but are open to offering both.

### Otolaryngology - Head and Neck Surgery

- Reasons for referral approximately 80% complete.
- Sinusitis selected for clinical and patient pathway and initial draft of clinical pathway algorithm completed.
- Currently providing telephone advice in urban zones and electronic advice across the province.
  - Amenable to the idea of adding in rural zone for telephone advice, pending capacity and roster discussions.

### Plastic Surgery

- Completed draft reasons for referral, with 50% completion of mandatory information identified; Completed draft referral form.
- Carpal Tunnel Syndrome selected for clinical and patient pathway and initial draft of clinical pathway algorithm completed.
- Currently providing telephone advice in Edmonton Zone.
  - Amenable to the idea of expanding provision of advice, pending discussions on workflow related to multiple modalities, Connect Care integration and capacity discussions.

Following the session in October, participants were asked to take the draft materials and processes, socialize them with their peers and solicit feedback. Follow-up virtual meetings will be scheduled to finalize the work.

## Participants



6 Patient Family Advisors



18 Primary Care Physicians



22 Specialty Care Physicians

\*All zones represented.