Objective 4: Implement the Alberta Surgical Initiative and reduce CT and MRI wait times.

Alberta faces ongoing challenges with increasing surgery wait times. The COVID-19 pandemic required AHS to postpone surgeries in order to protect acute care capacity and workforce resources needed to respond to increasing demand related to the pandemic. To address lengthy wait times, AHS and Alberta Health have partnered to develop the Alberta Surgical Initiative (ASI) to improve access to surgical care. The goal of the ASI is to ensure that all Albertans receive scheduled surgeries within clinically-appropriate timeframes through the implementation of strategies across the patient journey that shape demand, manage capacity and optimize processes. In 2020-21, to address surgical backlogs created by the COVID-19 pandemic, AHS partnered with Alberta Health to implement strategies to increase surgical volumes.

PERFORMANCE RESULTS SUMMARY



Percentage of Scheduled Cataract Surgeries Performed Within CIHI Benchmark*

This measure monitors the percentage of scheduled cataract surgeries performed within the Canadian Institute for Health Information's (CIHI) benchmark of 112 days. The **higher the percentage the better**, as it demonstrates more procedures are being completed within clinically recommended timeframes. As of Q2YTD, the percentage of cataract surgeries completed within 112 days (64.0%) improved by 85 per cent compared to the same period last year (34.6%)**.



Percentage of Scheduled Hip Surgeries Performed Within CIHI Benchmark*

This measure monitors the percentage of scheduled hip surgeries performed within the Canadian Institute for Health Information's (CIHI) benchmark of 182 days. The **higher the percentage the better**, as it demonstrates more procedures are being completed within clinically recommended timeframes. As of Q2YTD, the percentage of hip surgeries completed within 182 days (59.1%) improved by 21 per cent compared to the same period last year (48.9%)**.



Percentage of Scheduled Knee Surgeries Performed Within CIHI Benchmark*

This measure monitors the percentage of scheduled knee surgeries performed within the Canadian Institute for Health Information's (CIHI) benchmark of 182 days. The **higher the percentage the better**, as it demonstrates more procedures are being completed within clinically recommended timeframes. As of Q2YTD, the percentage of knee surgeries completed within 182 days (49.1%) improved by 26 per cent compared to the same period last year (38.9%)**.

*Note: The wait time interval used for comparison with the benchmark is the time a patient is assessed by a specialist as medically, physically able and willing to receive surgery to the date the surgery is performed.

**Note: Due to the evolving COVID-19 pandemic, results are not directly comparable between Q2 2021-22 and Q2 2020-21.

ACTIONS AND ACHIEVEMENTS

In June 2020, AHS developed the Surgical Recovery Plan which outlined targeted activity and wait list goals, supported by ASI strategies, aimed at accelerating activity and improving efficiency. AHS continues to progress initiatives outlined in the plan with a focus on returning to the pre-pandemic surgical state.

- By the end of Q1, a level of wait time stabilization had been achieved. A number of factors contributed to this achievement, including surgical recovery activities and utilization of focused surgical slowdowns applied at local levels during pandemic surges in Waves 2 and 3, as opposed to regional or provincial decreases. These measures allowed for
- continued, and in some cases elevated, rates of surgical completions at sites less impacted by local or regional outbreaks.
- Effective September 15, 2021, all Zones were required to activate the highest level surge response plans to maximize ICU capacity. As a result, surgical prioritization limited access to emergent and urgent surgical cases.

In an effort to mitigate surgical delays, AHS is implementing strategies to address system barriers. For example, AHS continues to triage surgical cancer cases using the Cancer Surgery Pandemic Protocol. Weekly

reviews of scheduled surgery waitlists are completed based on the Alberta Coding Access Targets for Surgery (ACATS). ACATS is a standardized coding system to help prioritize scheduled surgeries offered at facilities throughout the province, depending on a patient's diagnosis and level of urgency.

ASI initiative implementation has been significantly impacted by service slowdowns caused by the COVID-19 pandemic. AHS continues to focus on advancing the ASI by managing capacity and optimizing processes.

- Despite the pandemic, progress on ASI strategies to reduce wait times and improve the patient journey have continued. All projects within ASI are active and progressing where feasible.
- The AHS Specialty Access Bundle is a consolidation of ASI projects related to improving patient safety, experience and flow between primary care, specialty care and back. The bundle will leverage progress made by existing programs and coordinate the implementation of several projects, including central access and triage, an electronic referral solution, provincial pathway unit, and a provincially-aligned model for non-urgent telephone and electronic specialist advice. Work has been initiated on codesign with Orthopedics, Ophthalmology and Urology in Edmonton and Calgary Zones. Progress has been impacted by the COVID-19 pandemic.
- AHS is working towards increasing surgical volumes while maintaining quality standards by maximizing surgical volumes in chartered surgical facilities (CSF) which provide a cost-effective solution to system capacity barriers.
 - To support pandemic mitigation efforts, contracts with current CSF vendors have been expanded and four new CSF contracts were issued for completion of day surgeries to provide additional short-term surgical capacity within the healthcare system.
 - Long-term plans are underway to expand the volumes of surgeries completed in CSFs through competitive request for proposal (RFP) processes with a focus on ophthalmology and orthopedics. RFPs were released in Q1 and Q2 respectively. Contract finalization is ongoing, with additional volumes being initiated in the upcoming fiscal year.

Advanced diagnostic imaging tests, such as CT scans and MRIs, have dramatically changed the way patients are diagnosed and treated. In Alberta, wait times for outpatients referred for a CT or MRI scan are longer than clinically-approved guidelines.

- AHS is working on several appropriateness projects aimed at reducing low-value imaging, in alignment with best practice clinical recommendations.
 - Some sites in Edmonton Zone are preparing to implement a new work flow aimed at reducing the number of shoulder MRIs for surgical decision-making. Work flow evaluation and monitoring will be completed before spreading to additional sites.
 - Edmonton Zone is also preparing to implement improvements to reduce the number of knee MRIs in patients aged 55 and older with known Osteoarthritis in Q3. Implementation in other zones will follow.
 - Early improvement work is underway in the areas of CT utilization for mild traumatic brain injury and pulmonary embolism, diagnostic imaging during and after cancer treatment, and CT scans for dementia diagnosis.
- AHS continues to progress work outlined in the CT/MRI Implementation Plan which aims to reduce imaging wait times. For example, baseline data is being collected to better understand equipment use and performance. Targets will be developed to ensure optimal use of resources. Work is also underway on expanding processes and technology to offer patients a next-available appointment matching the appropriate clinical category. This work is enabled through the Connect Care system which has experienced implementation delays due to the COVID-19 pandemic.

PERCENTAGE OF SCHEDULED CATARACT SURGERIES PERFORMED WITHIN CIHI **BENCHMARK**

Measure Definition:

The percentage of scheduled cataract surgeries performed within clinically recommended timeframes, using the Canadian Institute for Health Information (CIHI) benchmark of 112 days. The wait time interval used for comparison with the benchmark is the time a patient is assessed by a specialist as medically, physically able and willing to receive surgery to the date the surgery is performed.

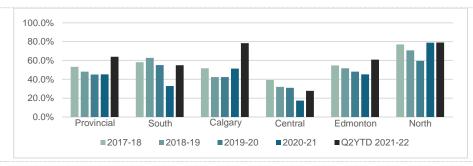
Why It's Important:

AHS is committed to ensuring that all Albertans receive timely access to sustainable surgical services without compromising safety and quality. Performing surgeries within recommended timeframes support improved health outcomes and patient satisfaction. The higher the percentage the better, as it demonstrates more procedures are being completed within clinically recommended timeframes.

Performance Summary:

64.0% Provincial Q2YTD 2021-22

Trend: (Compared to the same period last year)



Most Recent National Comparison (2020):

Using a similar definition, Alberta ranked 6th among ten provinces for the highest percentage of cataract surgeries meeting the pan-Canadian benchmark of 16 weeks (AB = 34%; Canada = 45%; Best Performing Province = 53% (BC, QU, NB) (CIHI, Apr-Sep 2020)).

Percentage of Cataract Surgeries Performed within CIHI Benchmarks (112 Days) - Trend

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Zone	2017-18	2018-19	2019-20	2020-21	Q1YTD 2020-21	Q2YTD 2020-21	Q1YTD 2021-22	Q2YTD 2021-22	Improvement Trend	
Provincial	53.3%	48.2%	45.1%	45.3%	32.0%	34.6%	61.5%	64.0%	⇧	
South Zone	58.2%	62.8%	55.1%	32.9%	19.4%	20.4%	55.6%	54.9%	仓	
Calgary Zone	51.7%	42.4%	42.4%	51.3%	35.0%	38.8%	76.1%	78.3%	⇧	
Central Zone	39.4%	32.1%	30.9%	17.3%	13.1%	15.3%	26.7%	27.8%	仓	
Edmonton Zone	54.7%	51.7%	48.2%	45.3%	33.6%	35.1%	59.1%	60.9%	⇧	
North Zone	77.0%	70.7%	59.5%	79.0%	62.5%	64.4%	85.0%	79.0%	⇧	

Total Cataract Surgeries Performed

Zone	2017-18	2018-19	2019-20	2020-21	Q1YTD 2020-21	Q2YTD 2020-21	Q1YTD 2021-22	Q2YTD 2021-22
Provincial	24,393	24,824	27,370	27,342	3,984	10,424	8,030	14,431
South Zone	1,811	1,891	1,832	1,910	294	734	602	943
Calgary Zone	8,605	8,584	10,843	11,272	1,770	4,167	2,672	5,296
Central Zone	2,779	2,812	2,692	2,825	428	1,080	970	1,575
Edmonton Zone	9,944	10,116	10,997	10,304	1,356	4,053	3,493	6,098
North Zone	1,254	1,421	1,006	1,031	136	390	293	519

Source: Data extracted from hospital operation room data: PICIS, VAX, Meditech, the Alberta Wait Times Reporting (AWTR) website, and Surgical Facilities Contracts (Bill 11) database, as of October 29, 2021.

- Data includes elective and scheduled cases for first eyes only
- Data includes surgeries performed within Alberta Health Services (including faith-based sites) and at contracted surgical facilities. Surgical volumes and wait times were impacted by COVID-19 in 2020-21 and 2021-22.