

Digestive Health Strategic Clinical Network™

What is the Digestive Health Strategic Clinical Network?

The Digestive Health Strategic Clinical Network (DHSCN) is a collaborative team of physicians, front-line health care workers, researchers, administrators, patients, community organizations, and others committed to improving and informing the care of patients with digestive diseases. The scope of the DHSCN includes all digestive diseases, all liver diseases, and cancers of the digestive system across the lifespan.

Why was the Digestive Health SCN created?

The DHSCN was created to improve care and outcomes of patients with digestive diseases, across the continuum of care, from prevention of disease to diagnosis and early management, and from chronic disease management to end of life care. Networks are effective mechanisms to ensure collaboration and joint decision making, and are a proven model for uptake of best practices to reduce variation and improve quality of care. SCNs lead and own 'bottom-up' innovation and improvement initiatives established through the exploration of evidence and practices at the local, national, and international levels.

Who's involved?

The DHSCN is a group of passionate and knowledgeable people from across Alberta who find new and innovative ways of delivering care to provide better quality, better outcomes, and better value for every Albertan. The DHSCN is intended as a vehicle for wide membership, where front line staff from across care settings and community groups can contribute as members in several ways - on the core committee, working groups, research partnerships, and/or by learning about the work of the SCN through information sharing activities. The DHSCN will collaborate with all zones, provincial programs, other SCNs and relevant stakeholders to identify and implement initiatives that will improve outcomes and accountability.

Who are Core Committee members?

The Core Committee of the DHSCN consists of over 40 physicians, front-line health care workers, researchers, administrators, patients, and other stakeholders. Members have been selected from across the digestive diseases community of interest to enable broad representation from key stakeholders. The core committee sets priorities, directs plans and stimulates activities of the network and actively works with identified network members across the province. Patients and community partners are engaged in the SCN as expert groups and as equal SCN members.



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What work is under way?

The DHSCN is leading a number of key initiatives that align with its strategic goals and priorities:

- **Endoscopy quality:** The DHSCN has a strong focus on improving the quality of endoscopy procedures through a range of initiatives:
 - *Canada-Global Rating Scale (C-GRS):* A partnership with the Alberta Colorectal Cancer Screening Program, this initiative focuses on province-wide implementation of the C-GRS. The C-GRS is a standardized quality improvement tool that allows endoscopy programs to assess quality along 12 dimensions, focused on the quality of the procedure and the patient experience; and then implement targeted improvement strategies.
 - *Provincial Endoscopy Patient Experience Survey (PEPES):* PEPES is an electronic survey that is offered annually to patients to gather feedback on their experiences with endoscopic procedures. Results are compiled and sent to each unit for quality improvement purposes.
 - *Alberta Coding Access Targets (ACATS):* ACATS is a wait list management initiative that has been successfully implemented for surgical procedures and is now being adopted for endoscopy procedures. ACATS uses standardized codes to document referral indications, establish wait time targets, and prioritize patients based on their indication. This project will support urgency-based booking and dramatically improve the availability of data on endoscopy procedures and wait times, and will support future quality improvement initiatives.
 - *Health Evidence Review (HER):* The DHSCN is working together with Alberta Health and the Institute of Health Economics on an evidence review to identify opportunities to improve the appropriateness of endoscopy procedures and determine the most effective implementation strategies for work that aims to reduce low-yield procedures.
- **Primary Care Supports-GI:** This grant-funded initiative aims to spread pathways and specialty advice services to primary care providers across Alberta. These “primary care supports” build capacity in the Patient Medical Home, enabling primary care providers to deliver quality, evidence-based care for patients with low-risk digestive health conditions. This reduces specialty care referrals for these patients, and improves their patient experience, while also improving access to specialty care for patients with higher risk conditions.
- **Pediatric pathways:** Building on the success of adult primary care pathways, the DHSCN has engaged stakeholders to develop primary care pathways focused on care of pediatric patients.
- **Celiac Disease:** The initial stages of this project involve analyzing baseline data about celiac disease, and surveying primary care providers to understand their knowledge of diagnosis and management of celiac disease. Data and survey findings will inform the focus of future quality improvement work.

How to get involved

If you are interested in becoming involved with the DHSCN, contact us at digestivehealth.scn@ahs.ca.