

Digestive Health Strategic Clinical Network™

Transformational Roadmap 2022-2026



**Alberta Health
Services**

**Inspiring solutions.
Together.**

Digestive Health
Strategic Clinical
Network™

December 7, 2022

About the Digestive Health SCN

The Digestive Health Strategic Clinical Network™ (DHSCN) officially launched on November 18th, 2016. It is comprised of a Leadership Team¹, a Core Committee, and a wide range of multi-disciplinary stakeholders, including patient and family advisors, from across the province with a keen interest in digestive health.

Our Mission:

The Digestive Health SCN innovates and collaborates to create a person-focused, high-quality, and sustainable digestive health system through prevention, research, and best practices.

The scope of our work includes all digestive diseases, all liver diseases, and cancers of the digestive system across the lifespan. Several project teams and working groups are responsible for the implementation and evaluation of projects aligned with the Digestive Health SCN's strategic directions and priorities.

The Scientific Office of the Digestive Health SCN champions and facilitates a comprehensive research agenda addressing the health needs of the population with digestive health concerns, and focuses on supporting research that improves the quality, safety, innovation, and sustainability of Alberta's health system.

This refreshed Transformational Roadmap (TRM) builds upon our original TRM (2017-2021) and was developed through collaborative Core Committee meetings, focus groups held with a variety of stakeholders across the digestive health community, and surveys to provide valuable guidance and input into the direction and activities for the SCN over the next five years.

Our goal: The best digestive health for all Albertans

¹ See page 13 for a list of our DHSCN Team members'

Alberta's Digestive Health Landscape



29,714 in-patient stays for digestive health concerns (2020-21), **8.2%** of all admissions²

32,000 Albertans are estimated to have Inflammatory Bowel Disease (2018) – this number is expected to rise to **50,000** by 2030³

25% of the adult population is affected by Non-Alcoholic Fatty Liver Disease⁴ (NAFLD) - the most common form of liver disease⁴



Many digestive diseases can be effectively managed in the Patient Medical Home with appropriate linkages, supports and resources for primary care providers

9 provincial adult primary care pathways and companion patient pathways and one pediatric primary care pathway have been developed for low-risk digestive health conditions

1032 referrals to gastroenterologists were redirected back to primary care providers for pathway-based care supported by specialist advice (Edmonton and Calgary Zones, April 2021-March 2022)



12.8% (>48,000) fewer endoscopies were performed during the pandemic period (Mar 2020-Mar 2022) compared to pre-pandemic

There is no provincial mechanism to assess wait times for endoscopy and access to gastroenterology specialist care



\$948M per year was spent on hospital, physician and drug costs and lost productivity for Albertans with diseases of the digestive system (2010)⁵

2 AHS Tableau: National Acute Care Discharges and In-Patient Length of Stay

3 2018 IBD Impact Summary (albertahealthservices.ca)

4 Swain MG, et al. Burden of nonalcoholic fatty liver disease in Canada, 2019-2030: a modelling study. CMAJ Open. 2020

5 2017. The Public Health Agency of Canada. The Economic Burden of Illness in Canada, 2010

Development of the TRM

This transformational roadmap was developed through the collaborative effort of a wide network of stakeholders with an interest in improving care and outcomes for people in Alberta with digestive health concerns.

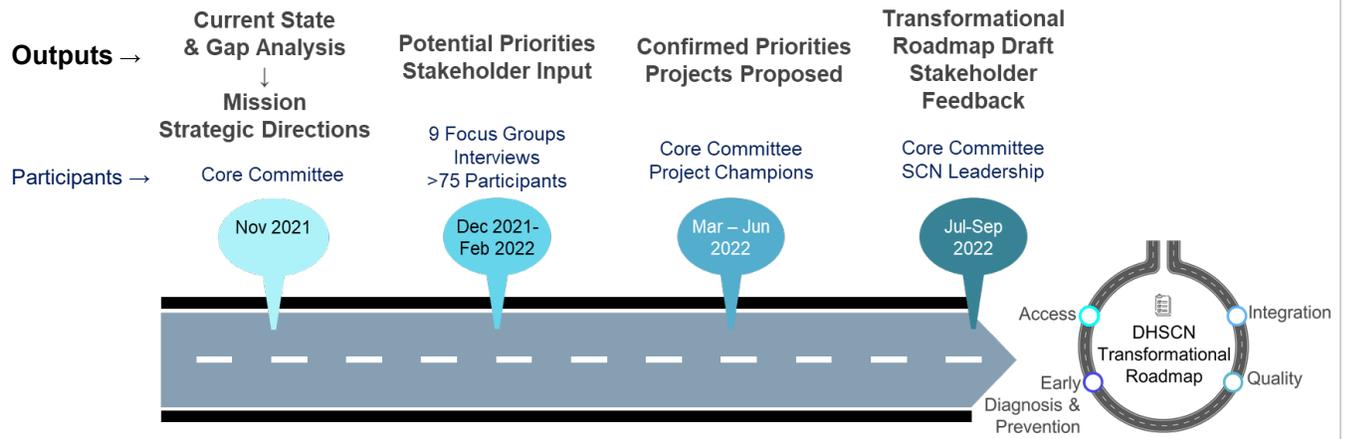


Figure 1: Transformational Roadmap Development

Patient Engagement



Did you know?

The patient advisors of the Digestive Health SCN have created a Public and Patient Engagement Evaluation Tool to aid project leads in describing the role of the patient advisor and matching the role to an advisor's skills and experiences.

The Digestive Health SCN values patient engagement and the role of patient advisors in improving the quality of digestive health care. Patients have been actively involved as partners in the identification of the SCN's priorities and the development of the TRM. The evaluation of the patient experience in endoscopy and primary care pathways has informed future directions for these priority areas. Three cohorts of patients from the digestive health community have completed the Patient and Community Engagement Research program of study and are active contributors to research projects. This lays the foundation for strengthening the patient engagement approach to current and future research in digestive health.

Our Strategic Directions

The DHSCN has four strategic directions which guide our work and enable us to fulfill our goal of the best digestive health for all Albertans:

- Improve access to digestive health care
- Improve integration of digestive health care across the health system
- Deliver high-quality digestive health care
- Enhance early diagnosis and prevention of digestive diseases

Each strategic direction has associated priorities and target outcomes. (See Figure 2) Detailed in this roadmap is what we will do to achieve our goals and how we will know if we are successful.

The Digestive Health SCN has engaged and collaborated with many members of its Core Committee and a larger network to identify, develop and implement projects that are aligned with the strategic directions and priorities outlined in this TRM. Review of proposed initiatives is an ongoing process to create a pipeline of projects over the five-year duration of this plan.

Research and Innovation

The Scientific Office of the Digestive Health SCN works closely with our academic and clinical research partners to develop a shared vision for a research and innovation agenda that addresses the key issues facing digestive healthcare in Alberta. In addition to leading digestive health research programs, the Scientific Office also evaluates proposed innovations and research for alignment with the priorities of the TRM. Aligned proposals are supported through several mechanisms such as Partnership for Research and Innovation in the Health System grants, data access and liberation, support for proposal development, and letters of support for grant applications. More details on the role and impact of the Scientific Office can be found at: [2020-2021 SCN Scientific Office Annual Impact Report - Building and Supporting Resilience within Alberta's Health System \(albertahealthservices.ca\)](#).

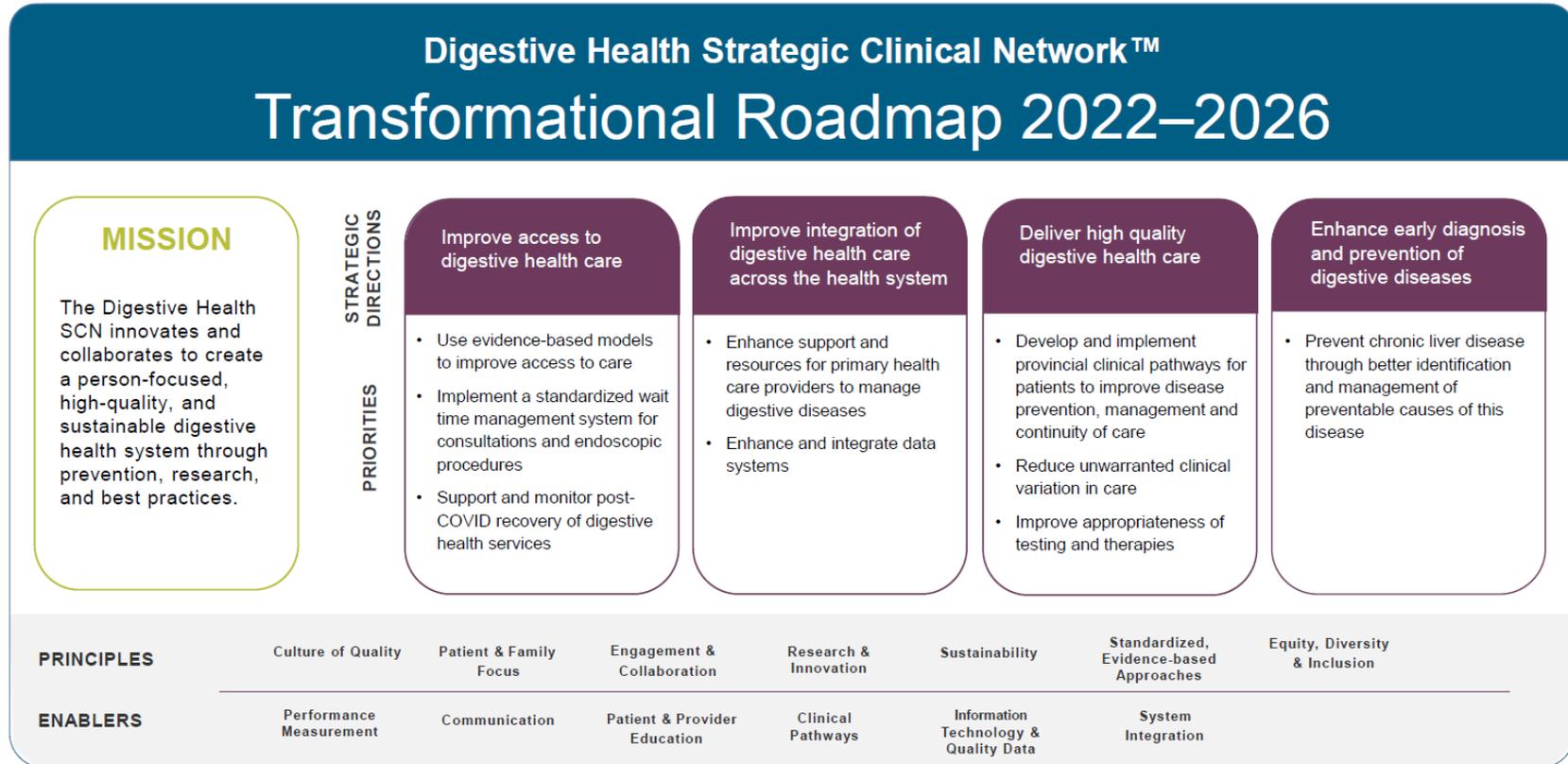


Figure 2: Digestive Health SCN Transformational Road Map – At a Glance

Our Priorities and Expected Outcomes

Strategic Direction: Improve access to digestive health care

Over **48,000** fewer endoscopic procedures were performed in the first 25 months of the COVID-19 pandemic compared to the same time period pre-pandemic

Priorities and Actions

Use evidence-based models to improve access to care

- Explore opportunities to modernize care delivery and determine how best to deliver virtual care, optimizing the patient experience

Implement a standardized wait time management system for endoscopic procedures

- Launch Alberta Coding and Access Targets for Endoscopy (ACATs-E) across Alberta

Support and monitor post-pandemic recovery of digestive health services

- Support the Provincial Endoscopy Operations Committee in its Recovery and Renewal Plan

Target Outcomes

Over time, reduced endoscopy wait times and reduced unwarranted variation

Improved patient experience

Increase in proportion of endoscopies occurring within clinically acceptable wait times

The pandemic-related backlog is eliminated

Strategic Direction: Improve integration of digestive health care across the health system

Referral demands for gastroenterology (GI) consultation and endoscopy exceed capacity; consequently, **wait times are lengthy and growing**

Priorities and Actions

Enhance support and resources for primary care providers and patients to manage digestive diseases

- Collaborate with primary and specialty care to co-design and implement new primary care pathways and patient pathways for adult and pediatric GI conditions
- Integrate GI primary care supports, such as specialist advice, with the Provincial Pathways Unit
- Support development of Central Access and Triage programs to improve access and prioritization of referrals

Enhance and integrate data systems

- Identify relevant data sources, integrate data systems, and provide meaningful analytic products to enhance decision making

Target Outcomes

Increased number and utilization of pathways

Increased number of referrals averted for pathway-related conditions

Improved patient experience

Central Access and Triage in place provincially

Data systems and reports are available that are reliable, timely, and actionable

Strategic Direction: Deliver high quality digestive health care

37% increase in the annual number of endoscopy procedures, and a **32%** increase in the rate of utilization (2010-2019)

Priorities and Actions

Develop and implement provincial clinical pathways for patients to improve disease prevention, management, and continuity of care

- Develop, implement, and evaluate adult and pediatric pathways for celiac disease and other digestive health conditions

Improve appropriateness of testing and therapies

- Create, implement, and evaluate a system of measurement of endoscopy quality that meets the needs of Alberta's endoscopy services (both adult and pediatric)

- Design and implement interventions to reduce the number of low-yield endoscopic procedures (gastroscopies and colonoscopies)

Reduce unwarranted clinical variation in care

- Develop, implement, and evaluate evidence-based strategies to reduce the proportion of non-malignant polyps that are removed surgically instead of endoscopically

Target Outcomes

Reduced variation in care
Improved outcomes for pathway associated conditions

All endoscopy sites participate in a provincial system of quality measurement

Reduction in low-yield endoscopies

Reduction in unnecessary procedures, healthcare utilization, and costs

Strategic Direction: Enhance early diagnosis and prevention of digestive diseases

The most common forms of liver disease - viral hepatitis, non-alcoholic fatty liver disease, and liver cancer – are **all on the rise**

Priorities and Actions

Prevent Chronic Liver Disease through better identification and management of preventable causes of this disease

- Develop, implement, and evaluate a provincial model for community-based risk stratification for non-alcoholic fatty liver disease (NAFLD)
- Support implementation and evaluation of a pharmacist-led model for screening and treatment of Hepatitis-C virus (HCV), focused on vulnerable populations
- Support the development, implementation, and evaluation of an alcohol-related liver disease (ArLD) pathway

Target Outcomes

Increase in the number of patients who are appropriately risk-stratified in the community for suspected NAFLD

Increase in proportion of HCV positive population who complete treatment

Appropriate risk stratification for patients at risk of ArLD

Our Principles

Our guiding principles provide the foundation for our work and are the basis for establishing and achieving our strategic directions.

Patient and family focus



- From conception through to implementation and evaluation, our initiatives will be centered on the needs, priorities, and experiences of patients and their families. We recognize that we can only focus on these needs by involving patient advisors throughout the process.

Engagement and collaboration



- We will engage the broader digestive health community across the care continuum and age spectrum. We will seek input along an initiative's cycle and collaborate with a variety of stakeholders, including operations, researchers, government, other SCNs, and patients and families.

Culture of quality



- We will foster a culture of quality improvement, based on the six dimensions of quality (as defined by the Health Quality Council of Alberta), to achieve safe, effective, patient-centred, timely, efficient, and equitable digestive healthcare.

Standardized, evidence-based approaches



- We will endeavor to minimize provincial variations in practice; ensuring practice is based on current scientific knowledge and best available evidence, while considering local context and the needs and preferences of patients and families.

Sustainability



- We are committed to optimal use of limited healthcare resources to drive a sustainable system of digestive healthcare based on quality.

Research and Innovation



- We will foster and support research in the digestive health community by supporting knowledge creation and translation. We will champion a culture of innovation, where innovation is defined as any evidence-informed, value-added service, device, technology, or care model.

Equity, diversity and inclusion



- We will promote equitable access, inclusion, and fairness in the distribution, quality, production, and control of healthcare resources for all communities and Albertans, while considering the diverse populations we serve through our work.

Our Enablers

Our enablers are the elements we need to focus on as an SCN to achieve success in our strategic directions.

Information technology and quality data

- Quality outcomes and improvement will be achieved by using information technology to measure and record reliable, provincially consistent data that we will use to drive change and monitor impact.

Patient and provider education

- Evidence-based provincially consistent patient education, knowledge translation, and multidisciplinary provider education strategies will be employed to support uptake of all SCN initiatives.

Clinical pathways

- We will design, implement, and evaluate clinical pathways consisting of evidence-informed, patient-centred interdisciplinary care to help patients affected by digestive diseases achieve optimal health outcomes.

Performance Measurement

- Performance measurement, based on reliable provincially consistent data, is required to improve the quality of decisions made regarding priorities for digestive healthcare improvement, the evaluation of improvement initiatives, and the sustainability of positive outcomes.

Communication

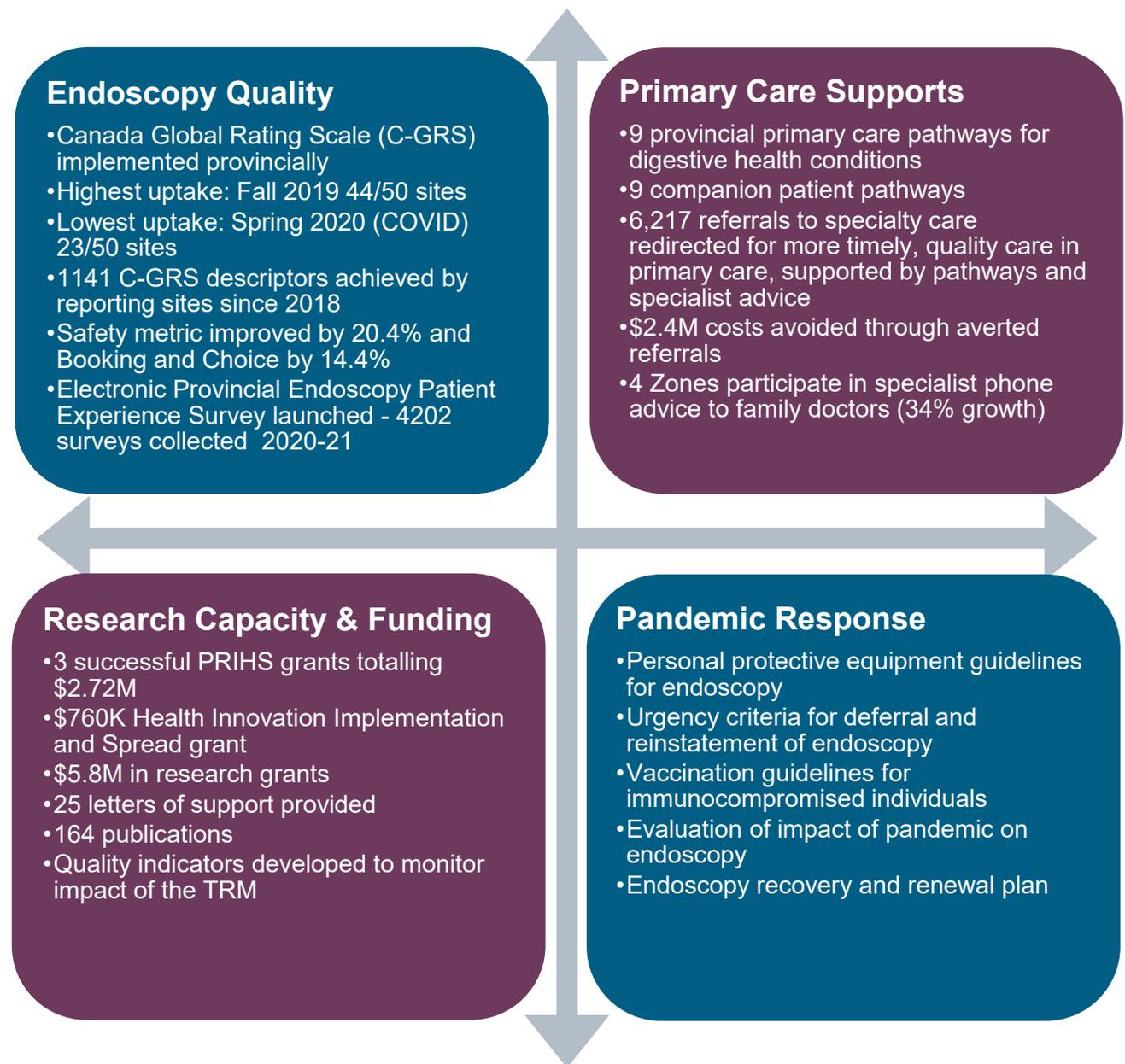
- Our initiatives will optimize communication between providers and between patients and providers, to ensure information is accessible throughout the patient's journey, and thereby improve the delivery and integration of digestive healthcare and health outcomes.

System Integration

- We will support an integrated system of digestive health care to provide seamless, coordinated care for patients and their families, leading to better patient transitions in care and health outcomes.

Our Progress

As we look into the future, we build on a foundation of successful projects and initiatives. Over the past five years, the Digestive Health SCN has had an impact in several areas including endoscopy quality, primary care pathways and supports, funded research initiatives, and pandemic response support.



Moving Forward

Building on the significant progress and achievements realized through our last TRM, we will continue to pursue innovative solutions to improve access to care, integrate across the continuum of care, enhance quality of care, and facilitate early diagnosis and prevention for individuals with digestive health concerns. These strategic directions align with the Alberta Health Services priorities and are relevant for our patients and families, operational and academic partners, and front-line providers.

The changing healthcare landscape and the far-reaching impact of the pandemic serve as an impetus to continue to improve the ways in which we care for our patients, manage our resources, and achieve the best possible outcomes for patients, families, and the health system. We cannot do this alone. To be successful, we must continue to collaborate with champions across the health system, work closely with our operational partners, patients and their families and implement at a stage and pace that is feasible and considers the ongoing strain on our providers and the system. We look forward to working with our partners to co-design, execute and evaluate the priorities outlined in this TRM and achieve our target outcomes.

As we move forward over the next five years, we will continue to be guided by our goal of the best digestive health for all Albertans.



Our Team

SENIOR MEDICAL DIRECTOR
Dr. Sander Veldhuyzen van Zanten

SENIOR PROVINCIAL DIRECTOR
Louise Morrin

SCIENTIFIC DIRECTOR
Dr. Steven Heitman

EXECUTIVE DIRECTOR
Christopher Burnie (Interim)

ASSISTANT SCIENTIFIC DIRECTOR
Dr. Susan Jelinski

SPECIAL PROJECTS
Leanne Reeb

MANAGER
Malanie Greenaway

SENIOR CONSULTANTS
Carmen Oilund
Mina Sisodiya

ALBERTA CODING AND ACCESS TARGETS – ENDOSCOPY LEADS
Jessica McLarty
Georgia Tabler
Christina Wildeman

ANALYSTS
Nianping Hu
Christy Sarmiento

ADMINISTRATIVE SUPPORT
Arlene Providence
Latasha Mugford
Marita Furtado