MEDICINE
Hospital Medicine, Kidney Health, Respiratory Health

Contact

Leadership Team

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Key Partners

Academic Institutions

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

Primary Care Providers

Provincial, National and Community Organizations

Regulatory and Accreditation Organizations

"The Medicine Strategic Clinical Network embodies a safe environment where we, as patient partners, feel valued and respected for our insights and direction regarding patient centered care".

Patient & Family Advisory Council co-Chairs on behalf of PFAC members, Medicine SCN

Major initiatives and achievements, 2022-2023

The Medicine SCN (MSCN), which launched in April 2020, builds on past achievements in kidney and respiratory health, while extending its scope and relationships to hospital medicine. Bringing these communities together as one network enables us to advance common priorities, undertake cross-cutting projects, tackle complex, multidisciplinary challenges, and accelerate innovation and health system improvements on a provincial scale.

Medicine SCN Cross-Cutting Projects

Acute Care Bundle Improvement (ACBI)

ACBI is a provincially coordinated quality improvement (QI) project that integrates eight provincial, evidence-based QI initiatives: CoACT Collaborative Care, Elder-Friendly Care, Enhanced Recovery After Surgery, Home to Hospital to Home, Pressure Injury Prevention, as well as condition-specific tools in Connect Care, including the Cirrhosis order set and Heart Failure and Chronic Obstructive Pulmonary Disease (COPD) care paths. Learn more

Implementation of ACBI is underway at Alberta's 14 largest acute care sites, with a focus on optimizing expected discharge date, patient mobility, transitions in care, and uptake of condition-specific clinical pathways and care paths. Along with other key partners, the Medicine SCN is supporting AHS operations with site implementation, facilitating physician engagement—including identification of site champions and understanding and addressing physicians' barriers and facilitators to implementation—integration of clinical elements to support a single implementation approach, and developing the provincial evaluation framework and plan.

ACBI is about getting evidence into practice and applying practices efficiently and consistently to **improve quality of care and patient outcomes**. It streamlines processes and workflows, simplifies and standardizes admissions, daily care routines, discharge and transition steps care providers perform with every patient, while standardizing and optimizing patient care. The rollout includes key outcome and performance metrics that sites can use to track their progress.

Provincial Medicine Load Levelling Plan

Prepared by the Provincial Medicine Load Levelling Advisory Group, with leadership and support from the Medicine SCN

At times, Medicine services can encounter unpredictable spikes in demand. Often this is related to an emergency response (e.g., wildfire, flood, outbreak of illness) or seasonal fluctuations. Response to the demand for inpatient services is normally managed on a site or zone basis. However, occasionally it may be necessary to request support outside of zone-based operational processes through Provincial Load Levelling. When enacted, Provincial Load Levelling involves patients being transferred across zonal boundaries to level demand across multiple locations. This avoids sites operating over-capacity, and enables clinicians to provide the best possible care to the greatest number of patients.

The Provincial Medicine Load Levelling Plan outlines specific triggers and actions that would be required to manage patient flow safely during times of exceptional capacity challenges that go beyond zonal boundaries. Having a single provincial health system in Alberta helps enable rapid response and deployment of this plan should the need arrive.

Hospital Medicine

Know Your Data pilot successfully completed

Know Your Data aims to improve outcomes and data literacy by providing individualized physician and team level data, along with feedback discussions. A pilot project was completed at four sites to assess the feasibility of this approach. Dashboards were circulated to 100 hospitalists and internal medicine physicians during the pilot. 39% of physicians engaged with their dashboards, and 49% of physicians participated in Reflective Practice Review follow-up discussions.

Providers reported high levels of satisfaction with the dashboards and felt safe discussing individual and team key performance indicators to make improvements in practice. The pilot demonstrated the feasibility of Know Your Data in engaging physicians in data relevant to their practice and driving quality improvement efforts. Read summary report

Kidney Health

Successfully implementing a patient-centered approach to hemodialysis care

The successful implementation of the Incremental Dialysis Program was a collaborative effort between Alberta Kidney Care and the Medicine SCN to improve patient outcomes and quality of life while safely increasing system capacity. Eligible patients were new chronic outpatient hemodialysis starts, who began with a dialysis prescription of two times a week and titrated up to three times a week as indicated. The intervention consisted of assessment criteria, processes and supporting education. Preliminary outcomes to date:

- 60+ patients are on incremental dialysis on any given day across Alberta (~250 runs "saved" per month)
- 64% of new chronic outpatient starts were assessed for incremental hemodialysis; 53% of those were deemed eligible
- 85% of staff were satisfied with the implementation
- Incremental hemodialysis patients report higher quality of life, and this appears to be sustained over time

Respiratory Health

Partnerships for Research and Innovation in the Health System (PRIHS) 7

The PRIHS 7 (Digital Health) competition was designed to support the spread and scale of effective, digital and data-enabled technologies that can transform models of care and improve patient outcomes, quality of care, and value. The Respiratory Health Section was fortunate to support two successful PRIHS 7 proposals:

- Adoption and enhancement of a care pathway for children with medical complexity: an implementation evaluation project for tracheostomy in pediatrics. Principal Investigators: Drs. Maria Castro Codesal (University of Alberta), Michael van Manen (University of Alberta), Karen Kam (University of Calgary)
- Use of telemonitoring to reduce adverse events for hospitalized patients on high flow oxygen in Alberta. Principal Investigator: Dr. Alim Hirji (University of Alberta)

The Respiratory Health section will continue to support and partner on the implementation and evaluation of these projects throughout their 3-year funding period (2023-2026).

Other quality and outcome improvements

The Medicine SCN is committed to using high-quality evidence and leveraging Alberta's rich health data assets to support a learning health system. Examples of this include:

- Compiling and disseminating audit and feedback reports to all provincial nephrologists
- Building and maintaining Tableau dashboards on quality indicators for Hospital Medicine Services as well as dashboards on provincial surveillance and quality indicators for those with COPD and Asthma

Work has also begun on two other PRIHS 7 projects the Medicine SCN is supporting:

- OPTIMUS-SAB: This project aims to optimize the management of *Staphylococcus aureus Bacteremia* across Alberta
- UPTAKE: Using Personalized risk and digital tools to guide Transitions following Acute Kidney Events. This project involves using computer decision support and remote monitoring to reduce acute care hospitalization

MEDICINE		
Grants and Publications	**Engagement**	**Outcomes and Impact**
39 Peer-reviewed Publications	85 Presentations	$70K in Seed Grants Awarded for Hospital Medicine and Respiratory Health Research
$14.1M Research Grants	261 Research Members	100+ Audit & Feedback reports disseminated to physicians

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