



SURGERY

Contact

[Leadership team](#)

surgery.scn@ahs.ca

[ERAS Leadership](#)

[Evidence Decision Support Program](#)

Key Partners

[Enhanced Recovery After Surgery \(ERAS\) International](#)

[National Surgery Quality Improvement Program \(NSQIP\)](#)

"The Surgery SCN is proud to be inclusive to the Advisor community at all levels of functions of the SCN... Involving Advisors is an integral component in ensuring our services are in alignment with our community needs."

David Chakravorty,
Provincial Lead, National
Surgical Quality Improvement
Program

Major initiatives and achievements, 2022-2023

Recognizing the need to strengthen our health care system in the post-COVID era, the Surgery SCN (SSCN) has been challenged to find innovative ways to improve access to and quality of surgical care to Albertans. This has required that we foster new partnerships to implement, evaluate and sustain novel pathways, care delivery models and quality improvement frameworks. Our work continues to be guided by the [SSCN Transformational Roadmap](#), which was updated this year, and includes four strategic objectives.

Improving access to integrated surgical care

Reducing wait times & improving data capture, including patient and provider experience

Reducing surgical wait times remains the top priority for the provincial government and AHS leadership and on which the Surgery SCN is expected to deliver in an efficient and timely manner. While the Government of Alberta has expanded funding to increase the volume of surgeries in chartered surgical facilities, our team is focused on improving the overall efficiency of referral from primary care to specialist care through a several interventions, referred to as the Specialty Access Bundle (SAB).



The five elements of the SAB are: (1) Facilitated Access to Specialist Care (FAST); (2) provincial pathways; (3) telephone advice; (4) electronic referral solutions; (5) pre-/post-community support. All bundle components are progressing; the most impactful initiative to date has been the staggered implementation of FAST in multiple surgical specialties across the province. FAST is a central intake and distribution program for referrals to surgeons that aims to simplify and standardized the referral experience and find the shortest wait lists for patients. As part of the FAST program, a robust system has been implemented to capture and aggregate relevant data and report on the impact of these initiatives on wait times. [Learn more](#)

Alongside quantitative evaluation of the FAST program on wait times, using dashboards created in partnership with the Surgical Analytics team, the SSCN has gathered data on patient and provider experience with FAST using an innovative online platform, Sensemaker®. Preliminary results of the patient and provider experience on the FAST model of patient referral from primary care to surgeons have been published and distributed to AHS leadership.

Supporting equitable access through the Rural Surgical & Obstetrical Networks of Alberta

The Rural Surgical and Obstetrical Networks of Alberta (RSONA) is an important initiative to improve access to surgical care in rural Alberta. In the past year, the SSCN worked alongside a number of stakeholders to complete and publish a white paper on RSONA that outlined six major operational streams and was seen as a viable strategy to improve training and access to surgical and obstetrical care in rural communities. AHS has provided funding and approval to advance this work. Since then, a steering committee has formed and is currently working on three of the operational streams: formalizing a residency program in Enhanced Surgical Skills (ESS) and Obstetrical Surgical Skills (OSS), a coaching program, and a robust continuous medical education program for ESS and OSS physicians in Alberta.

Obtaining funding to rollout a provincial prehabilitation program

Another important approach to improving access, by decreasing healthcare utilization, is through prehabilitation. Prehabilitation is any pre-surgical intervention aimed at enhancing a patient's

preoperative condition with the goal of improving postoperative outcomes. The SSCN's co-SD, Dr. Rachel Khadaroo, worked closely with the Prehabilitation Working Group on project development, vision, engagement, economic assessment, and presentations, which resulted in provincial funding for scale and spread as a new AHS program with dedicated services.

Provincial operationalization of prehabilitation will help shift from passively waiting for surgery to proactively preparing for surgery. This will help reduce complications and length of stay in hospital, ultimately improving access for patients on surgical wait lists. Collaboration with experts and partners across Alberta continues to inform a comprehensive, integrated model of service delivery.

Providing safe, high-quality surgical care

Another focus for the SSCN over the past year has been reducing surgical site infection (SSI) by 20% province-wide. To execute this work with AHS Surgical Quality Improvement Leads, Dr. Wynne Leung, Dr. Rob Stiegelmar and David Chakravorty, Provincial Lead, National Surgical Quality Improvement Program (NSQIP), competed four provincial Interdisciplinary Learning Collaboratives that brought together academic researchers, healthcare leaders and frontline staff.

The SSCN has also supported CIHR-funded work to re-invigorate the Surgical Safety Checklist in Alberta Hospitals. The work, led and supported by Dr. Mary Brindle and members of the SCN, has resulted in publications that describe how these tools can be successfully [implemented](#) and [modified](#), and a [toolkit](#) that is being used to redevelop the checklist at the Peter Lougheed Hospital, Vascular Surgery Unit with the goal to expand to other units and sites.

Using analytics and evidence to guide decisions

Evaluating a digital health tool to monitor and manage chronic post-surgical pain

With digital health at the forefront of health innovation incentives and public policy debates, the SSCN, in collaboration with the AHS Provincial Clinical Excellence portfolio, was successful in securing funding from the CanHealth Network (\$250 K) and Ontario Bioscience Innovation (\$175K) to test the implementation of a digital app for surgical and chronic pain patients.

Phase 1 of the study is complete and the evaluation showed that the Manage My Pain (MMP) app is both feasible to implement and acceptable to patients and providers. Implementation would require clinical staff to add patient onboarding and orientation activities to their daily workload and make time to review patient-reported data when preparing for a clinical visit. Phase 2 of the study, which aims to measure the impact of the MMP app on health outcomes, health service utilization, and costs when used within pain clinics in Alberta, is nearing completion, and we expect to publish the results in early 2024.

Dr. Sanjay Beesoon (SSCN Assistant Scientific Director) and Dr. Nivez Rasic (University of Calgary) are also co-leading a Health Canada grant-funded study focused on reducing long-term opioid use in surgical patients through more effective management of chronic post-surgical pain (CPSP). The goal is to develop evidence-based screening tools that identify patients at risk of developing CPSP, improve order sets guiding the use of pain relief medications for inpatients, and evaluate whether the MMP app can improve pain-related outcomes in surgical patients. [Learn more](#)

Impacts on health and care

Together with its clinical and research partners, the SSCN continues to advance knowledge and implement practice changes that:

- ▶ Increase access to surgical consultation and treatment and reduce wait times for elective surgeries
- ▶ Improve quality and safety of surgical care and provide data to better track surgical demand, utilization and performance
- ▶ Support appropriate use of surgical resources, optimize efficiency, and improve coordination across care providers
- ▶ Improve outcomes, safety, value and patient/family experience for Albertans who need surgical care

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Grants and Publications			Engagement		Outcomes and Impact
	82		54	<p>Obtained funding to implement Prehabilitation and Rural Surgical and Obstetrical Networks of Alberta.</p> <p>These programs are expected to improve access to surgical care by:</p> <ul style="list-style-type: none"> ✓ reducing complications & length of stay in hospital ✓ improving access to training, surgical and obstetrics care in rural Alberta 	
Peer-reviewed Publications	Workshops & Presentations				
	\$2.5M		300		
Research Grants	Research Members				

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