



Our Mission:

“Bringing patients, clinicians, administrators and policymakers together to advance surgical care in Alberta”

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Provincial Breast Health Initiative Update

As part of a multi-year strategy, the Cancer Strategic Clinical Network™ is aiming to support the Alberta breast health community in improving care across the continuum for women at risk of or with breast cancer in Alberta. The mandate and support for 2016-2017 is focused on improving (1) the process for getting women with suspicious breast lesions to definitive diagnosis and management plan with an appropriate care provider; (2) implementing major breast cancer surgery as a day surgery procedure with appropriate outpatient supports.

Breast health experts and patients from across Alberta were invited to participate in a provincial breast health end-to-end pathway meeting hosted by the Cancer SCN™ last fall. This included Alberta clinicians who deliver breast health / cancer care in the areas of Primary Care, Screening, Genetics, Radiology, Oncology, Surgery, Pathology, Palliative and End of Life Care; Patient Education and Navigation; and patients with lived experience in Breast Cancer. Clinicians and

patients came from urban and rural areas and were active participants in identifying current state and gaps in service locally and provincially. Integral to the work is the development of a strategy to measure, audit and provide important feedback to clinical teams and administrators to ensure ongoing quality improvement. Work is underway to develop this measurement framework and to collect local data on current breast cancer day surgery rates and timelines for diagnostic work-up of suspicious breast lesions.

The Cancer SCN™ is now supporting assembly of local teams to begin implementation planning of pathways that will deliver high value breast health / cancer care.

For further information about this work and the Cancer Strategic Clinical Network™, please contact angela.estey@ahs.ca.



Surgery Strategic
Clinical Network™

Alberta Trauma Services Update

The Alberta Trauma Services 2014 Annual Report has recently been released! This provincial report is the result of countless hours of collecting trauma data from five tertiary level 1 and 2 urban trauma centers and five regional level 3 trauma centers. In addition to the data collection, we have included an update on some of the recent changes with our provincial trauma system and provincial initiatives we are currently engaged in that are designed to improve the delivery of trauma care to all Albertans- Trauma Quality Improvement Program (TQIP) through the American College of Surgeons (ACS) and Trauma Distinction Accreditation through Accreditation Canada.

The Level 1 and 2 adult centers and in Edmonton (University of Alberta Hospital and Royal Alexandra Hospital) and Calgary (Foothills Medical Centre) have been submitting their trauma data sets to the ACS since January 2016 and are anticipating their first benchmarking report in fall 2017. This will then assist with these sites collaborating to improve their site delivery of care by participating in a Learning Collaborative facilitated by the Surgical Strategic Clinical Network (SSCN).

Alberta Trauma Services (ATS) is beginning the work for the Trauma Distinction program as a provincial trauma system. Supported by the AHS Accreditation department, each Level 1-3 adult and pediatric trauma center within Alberta will demonstrate their compliance with trauma specific site and system standards along with showcasing the amazing care being delivered to injured Albertans.

If you are interested in reviewing the annual report or have questions regarding any other ATS initiatives, please contact Christine Vis at chris.vis@ahs.ca.

Clinical Knowledge and Content Management Update: Surgical Procedure Catalogue and Provincial Standardization For Surgery

Clinical Knowledge and Content Management (CKCM) Services, in collaboration with the Surgery SCN Clinical Informatics Committee, is working towards provincial standardization of the surgery procedure catalogue. This catalogue is used for booking and scheduling elective, urgent and emergency procedures. Preference card selection, equipment/ inventory requirements and statistical value are additional considerations when developing a procedure catalogue. Standardized catalogues reflect consistent nomenclature across services allowing for increased quality analytics and a better patient experience.

Of the approximately 24,000 procedures identified, approximately 3000 have been reviewed and standardized. For example, in the thoracic area, over 389 procedures were identified and are now consolidated to 132 standardized procedures. In the upcoming months, the procedure names will be brought to zone operations for feedback and input.

Recommendations, including definitions of standardized time fields for the operative record, will be presented to the Surgery SCN. Once finalized, this content can be adopted in current applications and the [AHS Provincial CIS](#).

Moving toward data-level standardization enables quality analytics, measurements, and appropriate resource use. This ensures we are comparing data appropriately. Without agreed upon standards, codes, terms and definitions often vary from site to site.

Surgery SCN Staffing Changes



Dr. Jonathan White, Senior Medical Director

Dr. White graduated from the Queen's University of Belfast in 1993 and trained as a surgeon in Northern Ireland before moving to Calgary for Surgical Oncology fellowship training in 2004. He has practiced as a general surgeon at the Royal Alexandra Hospital for over 10 years, and holds the rank of Professor of Surgery at the University of Alberta. He and his wife Paula became Canadian citizens in 2012.

He holds a PhD in Surgery from the Queen's University of Belfast and an MSc in Medical Education from the University of

Calgary. In 2014, he became the first surgeon ever selected as a 3M National Teaching Fellow. He has given over 200 presentations at national and international meetings and is the co-creator of the 'Surgery 101' podcast which has been downloaded more than 3,500,000 times in over 250 countries. His interests are in transformational leadership, change management and innovation in clinical service delivery.

Sanja Schreiber, Acting Assistant Scientific Director

We are pleased to announce the recruitment of Dr. Sanja Schreiber to the position of assistant scientific director (ASD) for the Surgery SCN. Sanja is a researcher and a kinesiologist. She holds a PhD in Rehabilitation Science (University of Alberta), MSc. in Sports Medicine and Kinesiotherapy (University of Novi Sad, Serbia), and a Post-doctorate in Health Outcomes Research (Alberta Research Centre for Health Evidence (ARCHE), University of Alberta). Sanja joins our group after being a Research Associate with the AHS Collaborative Orthopedic Research program. In this capacity she provided scientific guidance to orthopedic surgeons, fellows and students. Sanja brings rich expertise in clinical trials, research methods and design, knowledge synthesis and knowledge translation.



With Sanja in place as the ASD, we are now positioned to again have a Summer Studentship Research award competition, and our Seed Grant completion for 2017. Sanja will be following up with the previous successful candidates from 2016 for a progress report, which we hope to highlight in our next Surgery SCN™ Newsletter.

The IHE SCN Open Innovation Platform

Identifying and solving complex health care challenges together

We are pleased to announce that [Alberta Innovates](#) and [Alberta Health](#) are partnering with the [Institute of Health Economics](#) (IHE), [Alberta Health Services](#) and the [Strategic Clinical Networks™](#) (SCN) on the [IHE SCN Open Innovation Platform](#).

Alberta Innovates and Alberta Health support the Platform as a key resource to enable the ongoing identification of unmet clinical need/quality improvement opportunities within the Alberta health care delivery system.

Alberta Innovates, in particular, views the Platform as a tool to support their ability to strategically co-identify and co-develop high-value initiatives; and under Alberta Innovates leadership the partners are exploring the possibility of developing a funding stream that will consider promising, high value, implementable projects that are identified with this approach.

Further details will follow regarding priority areas, criteria, review process, the level of Platform engagement required, as well as the possible funding amounts available, **but your current thoughts and ideas on unmet clinical need/quality improvement opportunities, including specific project ideas, are encouraged to be shared on the Platform at this time.**

- You can learn more about the Platform by [clicking here to view a video](#).
- New community members can [register and join the Platform](#).
- If you have previously registered you can [log in and access the Platform](#).



Surgery Pharmacists Community of Practice (CoP)

The AHS Surgery Pharmacists Community of Practice (CoP) started in 2013 as a structured and supported network of surgery pharmacists to provide opportunities for knowledge and experiential sharing across 4 large urban hospitals in Edmonton. The initial rationale for this CoP was that it was identified that pharmacists in surgery practice often encountered many barriers to practice development such as less structured practice environment, different or lower pharmacist resource allocation compared to medicine or critical care practice, and isolated or highly diverse clinical practices. Pharmacists were invited to participate in 1 hour monthly online discussions that were facilitated by pharmacy clinical leadership. A variety of topics were discussed during the first year of the program and meetings were well attended with mainly positive direct informal feedback. With increasing attendance and advertising through word of mouth, the group's membership has expanded to include pharmacists from across the province and the creation of a shared internal website for collection and access to pertinent resources. Feedback and evaluation has also lead to changes in format and delivery of meetings to include presentations by learner pharmacists in surgery, practice spotlight presentations by various pharmacists across the province to increase awareness of different practices, journal club presentations and sharing of information from the Surgery SCN meetings. The next stage of the CoP includes examining sustainability of the monthly meetings and possible mechanism for research and quality improvement initiatives.

aCATS Update

As this primary phase of aCATS nears completion, we celebrate the work that has been done since this project's implementation in 2012. What started as a project to understand how we currently measure scheduled surgical services in Alberta has become a standardized measurement system implemented permanently across Alberta Health Services.

Thank you to all of you, who initiated this project, provided input and submitted feedback. Your engagement with this work has been invaluable and integral to build a diagnosis-based measurement system for surgery.

aCATS Matures.....to ACATS!

With the inclusion of Paediatric codes (pCATS) into the aCATS Code set, a name change has been approved and we are now **ACATS** - Alberta Coding Access Targets for Surgery. The website, associated documents and OR Information System reports will be updated to reflect the new name by September of 2017.

ACATS Expansion

Although ACATS Leads are moving to operations to support the current state of ACATS and optimize within the zone, we look forward to continually expanding this work into other areas of health care. We are excited to be expanding ACATS coding into other areas:

- Urgent and Emergent (~ 30% of the surgery in the province)
- GI and Endoscopy (~ 110,000 procedures per year)
- Pediatric
- Transplant
- Clinical pathways (Bariatric, ERAS)

For the future of reporting, we are working with Analytics, formerly DIMR, to aggregate wait time data into a provincial data repository with enhanced reporting for surgeons, clinical leadership and Alberta Health.

We are also working on the redesign (simplified) of the provincial Surgery Booking Request form to better align with the booking processes across the province.

We hope this expansion continues to help providers, operations and patients work together to build a world-class surgery measurement and reporting system.

ERAS Alberta

ERAS Alberta is taking a leadership position on the national stage along with the Canadian Patient Safety Institute (CPSI) to work towards developing a Pan-Canadian strategy to enhance recovery for surgery patients. The initial meeting with CPSI was held immediately following the **ERAS Alberta Symposium 2017** and a core group of clinicians and researchers have begun developing a plan. The objective will be to **consolidate and develop** evidence based guidelines for best surgical care spanning the trajectory from diagnosis to recovery, **share** tools to support knowledge dissemination and implementation and to create capacity

for evaluation and quality improvement in surgical care safety nationally. Drs. Leah Gramlich and Gregg Nelson are leading this work and developing partnerships with clinicians, researchers, patients and SPOR **[Spotlight on Patient-Oriented Research]** units across the country and with industry. CIHR **[Canadian Institutes of Health Research]** grant will be sought at the appropriate time.



Interested in sharing a story in our newsletter? Please contact Stacey.litvinchuk@ahs.ca

MORE INFORMATION: We will keep you posted on the work of our Surgery SCN™. If you wish to learn more, or become more involved, please contact: jill.robort@ahs.ca or stacey.litvinchuk@ahs.ca

