Believing in the power of information

The HQCA’s legislation mandates that we measure, monitor and assess health service quality.

Transparency: fosters trust among the public and the healthcare system. Healthcare is important to all Albertans. Knowledge can start the conversations that need to happen, and when necessary, lead to improvements.

Information: a reliable tool for healthcare providers and patients alike, to understand how these emergency departments are performing.

Uniquely Albertan: This type of health system information reporting in Canada currently happens predominantly at the national level, but not with this specific provincial lens.

How did we get here?

Over 18 months the HQCA engaged with emergency department stakeholders from Alberta Health, AHS, Covenant Health, AMA, academia, and patients to determine which measures would be most helpful from a quality improvement perspective.

The Triple Aim Framework and an input, throughput, output logic model guided the design.

Focus groups with patients and with front-line providers helped to identify which measures would be appropriate and useful for public reporting.

User comprehension of the data was important so three phases of usability testing were conducted. Redesign led to increased comprehension.

Two data dictionaries were created, one with public friendly explanations, and the other with precise definitions that meet expectations of technical experts.

Emergency departments are often seen as the “canary in the coal mine” about what’s happening in the broader healthcare system.

Provides an unprecedented amount of information about the 16 busiest emergency departments in Alberta from the last five years.

A single measure doesn’t provide a picture of what’s happening in the entire healthcare system. That’s why we provide 18 measures for emergency care. By looking at these measure together, conversations can be started as to what may be happening and why.

The information is grouped into peer groupings so that “like” hospitals can be compared and trends can be analyzed. It doesn’t make sense to compare hospitals where patient populations are different.

What’s next?

- Data to be updated regularly, each quarter
- Evaluation of the measures from stakeholders input and from the website feedback button
- We have started our next FOCUS area – Primary Healthcare