

Alberta's Strategic Clinical Networks™

SCNs are engines of innovation, proven to facilitate change and improve outcomes and performance across Alberta's health system. SCNs work provincially to drive health innovation and integrated, patient-centred solutions that span health sectors and disciplines. SCNs partner with frontline clinicians to mobilize evidence and data into care, optimize quality and deliver maximum value and impact to the people of Alberta.

Bone and Joint Health ▶ Hip & Knee Pathway

Patient outcomes*

- ✓ Reduced pain
- ✓ Improved function and mobility
- ✓ Improved quality of life

System performance

- ✓ Reduced length of stay in hospital
- ✓ Fewer surgeries require blood transfusions
- ✓ Reduced readmissions

Cumulative savings to date

\$259 Million

*Outcomes evaluated over 12-months. Pathway operationalized provincially to all Alberta surgical facilities performing arthroplasty surgery (hip & knee replacements).



Cancer ▶ Provincial Cancer Diagnosis Pathways

Patient outcomes

- ✓ Earlier cancer diagnosis
- ✓ Improved health outcomes (mortality, morbidity, disease progression)
- ✓ Improved patient supports, satisfaction and experience

System performance

- ✓ Expedited access to treatment and information
- ✓ Reduced wait time for confirmed cancer diagnosis from 19 to 6 days
- ✓ Improved care coordination
- ✓ Reduced length of stay in hospital and ICU*

Cumulative savings (2015-19)*

\$7.3 Million

Pathways for many cancer types (breast, lung, prostate cancer, head & neck, colorectal cancer, lymphoma) implemented or under development.
*Resulting from same-day mastectomies and improved post-operative care for head & neck cancer patients.



Cardiovascular Health & Stroke ▶ Stroke Action Plan

Patient outcomes

- ✓ Reduced disability and 28% reduction in patients requiring long-term care
- ✓ Clinically significant improvements in functional abilities
- ✓ Improved quality of life

System performance

- ✓ Reduced length of stay in hospital
- ✓ Shorter door-to-needle times
- ✓ Improved access to high-quality stroke care and rehabilitation for Albertans living in rural & remote areas

Cumulative savings (2015-19)*

\$17 Million

*Based on gross savings per patient of \$2,479 and estimated 18,466 hospital bed days avoided.



Critical Care ▶ Provincial ICU Delirium Initiative

Patient outcomes

- ✓ Fewer cases of ICU delirium; 10% decrease in number of days patients experience delirium
- ✓ Improved recovery
- ✓ Reduced risk of long-term impacts on patient function and quality of life

System performance

- ✓ Reduced length of stay in hospital and ICU
- ✓ Improved quality of care, reduced variation
- ✓ Provincial standards that support clinical care teams in identifying and preventing delirium and managing pain and sedation in ICUs

Cumulative savings (2017-19)*

\$5.2 Million

*Based on gross savings per patient of \$7,618 and estimated 1,306 hospital bed days avoided.



Diabetes, Obesity & Nutrition ▶ Foot Care Pathway

Patient outcomes

- ✓ Decrease in diabetic foot ulcers and lower limb amputations
- ✓ Improved mobility and quality of life

System performance

- ✓ Improved access to screening & treatment, leading to earlier detection and prevention of foot ulcers
- ✓ Reduced variation; higher quality screening for at-risk Albertans aligned with best practice
- ✓ Fewer urgent cases and less-extensive surgeries

Estimated savings (2017-18)*

\$4 Million

*Based on hospital bed days avoided for 816 patients; total bed days for amputations reduced by 45% to 56% in zones implemented the pathway.



Seniors Health ▶ Appropriate Use of Antipsychotics

Patient outcomes

- ✓ Fewer strokes (major or minor) among residents of long-term care facilities
- ✓ Improved quality of life; families report residents are more alert, independent, communicative and happy

System performance

- ✓ Reduced use of antipsychotic medications
- ✓ Improved quality of care (e.g., increased use of client-specific care plans and dementia-friendly approaches to manage responsive behaviours such as agitation/anxiety)

Cumulative savings (2013-19)*

\$5.3 Million

*Based on estimated 3,770 hospital bed days avoided owing to strokes and TIAs prevented by the intervention and cost per event.



Digestive Health ▶ Primary Care Pathways

Patient outcomes*

- ✓ Faster access to screening and treatment from the most appropriate provider (i.e., primary care for low-acuity patients and specialist care for those with more urgent conditions)

System performance

- ✓ Improved health service utilization (efficiency and appropriateness)
- ✓ Improved value (6,217 non-urgent GI referrals avoided)
- ✓ Expanded supports for primary care providers (pathways, speciality advice)

Cumulative savings (2019-22)*

\$2.4 Million

*Over 3-year project term. Implementation continuing to expand provincially (e.g., same-day telephone advice available in 4/5 zones).



Emergency ▶ Long-Term Care (LTC) to Emergency Department (ED) Pathway

Patient outcomes*

- ✓ Access to enhanced on-site medical care in the community (LTC)
- ✓ Improved patient safety (i.e., reduced risk of falls, infections, delirium and functional decline)
- ✓ Earlier identification and management of acute medical issues at LTC facilities

System performance

- ✓ Significantly reduced hospital transfer and admission rates
- ✓ Improved health service utilization (care in most appropriate setting, use of centralized telephone advice and community paramedics)
- ✓ Reduced strain on ED resources and capacity

*Project involved 40 LTC sites across Alberta. Further study recommended to address barriers prior to further scale and spread.



Maternal & Newborn Health ▶ Family Integrated Care

Patient outcomes

- ✓ Improved weight gain, higher breastfeeding rates, stabilized breathing and heart rate for preterm infants
- ✓ Improved experience for parents (reduced stress, anxiety, symptoms of post-partum depression increased confidence)

System performance

- ✓ Reduced length of stay in hospital neonatal intensive care
- ✓ Fewer emergency department visits (26% reduction) and hospital readmissions (37% reduction) within 7 days of discharge
- ✓ Improved quality of care, reduced variation

Cumulative savings (2020-22)*

\$2.1 Million

*Based on gross savings from reduced NICU length of stay.



Medicine ▶ Acute Care Bundle Improvement (ACBI)

Patient outcomes

Aims to improve patient experience by providing:

- ✓ consistent, standardized care aligned with best practices
- ✓ coordinated, safer continuity of care as patient transitions to/from hospital to primary care or continuing care
- ✓ fewer days in hospital and readmissions

System performance

Aims to reduce length of stay, readmissions and variation by

- ✓ streamlining care processes and workflows to reflect best practice and reduce duplication for frontline providers
- ✓ supporting clinical teams with coordinated, integrated care
- ✓ sharing data, linking to key metrics

*Provincial implementation underway at Alberta's 14 largest acute care facilities (customized approach aligned with Connect Care and tailored to local context, in partnership with site operations and frontline teams).



Neurosciences, Rehabilitation ▶ Spinal Cord Injury

Patient outcomes

Aims to improve patient care, outcomes and experience by:

- ✓ improving safety for SCI patients with diverse & complex needs
- ✓ improving mental health supports, blood pressure and pain management
- ✓ preventing pressure injuries
- ✓ improving bladder, bowel & spasticity management

System performance

Aims to improve quality of care and reduce practice variation in acute care & inpatient rehab facilities across Alberta by:

- ✓ standardizing care protocols and aligning with best practice
- ✓ improving care transitions
- ✓ building standardized care plans into Connect Care
- ✓ better understanding the needs of SCI patients and families

Surgery ▶ Enhanced Recovery After Surgery (ERAS)

Patient outcomes

- ✓ Fewer surgical complications
- ✓ Faster recovery, earlier mobilization and improved nutrition status
- ✓ Improved patient experience and satisfaction

System performance

- ✓ Reduced length of stay in hospital by 1-2 days
- ✓ Fewer complications and readmissions
- ✓ Improved quality of care; significant clinical improvements
- ✓ Net reduction in system cost per surgical case

Cumulative savings (2013-19)*

\$22.8 Million

*Based exclusively on patients undergoing colorectal surgery (2013-19) or gynecological oncology surgery (2016-19). Estimated 15,702 hospital days avoided.

