### Strategic Clinical Networks™ (SCNs):

#### Summary of Transformational Road Maps (TRMs)

**TABLE OF CONTENTS**

- PRIHS PROGRAM – CONTACT THE SCN ................................................................. 2
- SCN CONTACT DETAILS .................................................................................... 3

### Summary Of SCN Transformational Road Maps

- ADDICTION AND MENTAL HEALTH STRATEGIC CLINICAL NETWORK™ (SCN) ........... 4
- BONE AND JOINT HEALTH SCN ......................................................................... 5
- CANCER CARE SCN .......................................................................................... 6
- CARDIOVASCULAR HEALTH AND STROKE SCN .............................................. 7
- CRITICAL CARE SCN ......................................................................................... 8
- DIABETES, OBESITY AND NUTRITION SCN .................................................. 9
- DIGESTIVE HEALTH SCN ............................................................................... 10
- EMERGENCY SCN ............................................................................................ 11-12
- KIDNEY HEALTH SCN ..................................................................................... 13
- MATERNAL, NEWBORN, CHILD AND YOUTH SCN .......................................... 14
- NEUROSCIENCES, REHABILITATION & VISION SCN ....................................... 15
- POPULATION, PUBLIC & INDIGENOUS HEALTH SCN .................................... 16/17
- PRIMARY HEALTH CARE INTEGRATION NETWORK ....................................... 18
- RESPIRATORY SCN .......................................................................................... 19
- SENIORS HEALTH SCN .................................................................................... 20
- SURGERY SCN ................................................................................................. 21
**SOLUTIONS/IDEAS ARE PITCHED TO SCNS**

Prospective applicants should contact the Scientific Director (SD) or Assistant Scientific Director (ASD) of the appropriate SCN discuss potential solutions/ideas (details provided on page 3). During this initial discussion, the SD/ASD will ascertain if the idea:

- Addresses a priority as outlined in the SCN Transformational Roadmaps;
- Consists of one or more evidence-based solution(s) that can be formulated into an implementation study;
- Can be accomplishable within the timeframe of a PRIHS grant; and
- Has the potential to deliver significant, measurable impact.

Prospective applicants whose solutions align with the above criteria will be asked to complete an intake form by June 15th, 2019.
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Addiction and Mental Health Strategic Clinical Network (AMH SCN) VISION:
Improving Addiction and Mental Health Together

AMH SCN MISSION:
To improve addiction and mental health patient care and health outcomes in Alberta by engaging stakeholders to identify meaningful, evidence based opportunities for transformational change

AMH SCN STRATEGIC DIRECTIONS:
• Improve patients’ and families’ experiences
• Improve the experience & safety of our people
• Improve patient and population health outcomes
• Improve financial health & value for money

PRIORITIES, ACTIONS & QUALITY INDICATORS:

Addiction
Substance Use and Addiction Program
Knowledge of evidence-based pathways for prescribing Opioids is increased

Community Based Naloxone
Access and distribution of Take Home Naloxone Kits to patients is efficient and effective

Virtual Supervised Consumption Sites
Intervention is designed, initiated, and developed in collaboration with community into a service that clients use

Depression
Repetitive Transcranial Magnetic Stimulation
Patients report / demonstrate improved clinical outcomes; rTMS is delivered in accordance to clinical guidelines

Depression Research Priorities
Patient identified and prioritized research questions are subject of research projects in Alberta academic institution

Research Support
The Research Hub
Researchers access Hub for support and collaboration; Researchers seek out and apply for funding opportunities through the Hub

Children & Youth
E-Mental Health
Use of eMH tools in urban, rural, and remote communities; Improved clinical outcomes; Economic benefit of app assessed

Child & Youth Integrated Pathways
Improved care coordination among services for youth across sectors, settings, and ministries

School Mental Health
Provincial agreement on recommendations; Implementation of recommendations

Helping Kids & Youth in Times of Emotional Crisis
Youth and families contribute to improving AMH care in the ED; Increased AMH education for staff

Peer Support
Peer Support Workers are available in the ED for youth and families

HIIS CanREACH
Increased access to CanREACH program by primary care physicians; Assess economic benefit to health system

PRINCIPLES:
• Enhance Patient and Public Health Experience
• Empower People and Communities
Bone & Joint Health
Strategic Clinical Network™

Vision:
Keeping Albertans Moving

Mission:
To build the best bone and joint health care system through empowered citizens and teams guided by evidence and outcome based practices

AHS Vision:
Healthy Albertans. Healthy Communities. Together.

Strategic Goals

Maximize & promote Albertans’ mobility & function

Mend Albertans’ disability from bone & joint disorders and injuries

Mitigate Albertans’ risk for bone & joint injuries and conditions

AHS Goals

Improve patients’ & families’ experiences

Improve patient & population health outcomes

Improve the experience & safety of our people

Improve financial health & value for money

Tactics

Health Promotion & Injury Prevention

Multidisciplinary Clinics & Teams

Centralized Intake & Triage

Pathway Development

Patient Education

Provider Supports & Education

Priorities & Successes

Appropriateness

Accessibility

Acceptability

Successes

Average days in hospital for hip & knee replacement patients reduced to **3.8 days** from 4.7 days (2009 - 2015)

Community-based exercise & education program, Good Life with osteoArthritis: Denmark (GLA:D™), in **13 clinics**

89% (up from 77%) of hip fracture patients reach an Operating Room within **48 hours** of first contact with the system

14,455 Albertans with a signal fracture screened for osteoporosis, **4 Hip fractures prevented** with every 10,000 Albertans in Catch a Break program

Evidence-Based Practice, Research & Analytics

Evaluating shared care models for inflammatory arthritis

Advocating for shared savings approaches

Addressing gaps in knowledge and innovation through collaborative workshops (i.e. stem cells, obesity and OA)

Emerging Priorities

Osteoarthritis (OA) conservative management care path

Innovative funding models for bone and joint care i.e. case rate

Albertan self-management support for OA

Community based partnerships and programming

Transformative Road Map 2017-2020

Revised October 16, 2017
TRANSFORMATIONAL ROADMAP: 2017-2020 AT A GLANCE

VISION
Healthy Albertans. Healthy Communities. Together.

MISSION
Partner with patients, clinicians, administrators, funders and the research community to bring about transformational change across the cancer continuum.

STRATEGIC GOALS 2017-2020

- Develop and implement CLINICAL CARE PATHWAYS to improve health outcomes
- Support initiatives that facilitate appropriate tests and treatments and reduce unnecessary tests and treatments to strengthen APPROPRIATENESS OF CARE
- Engage in RESEARCH AND INNOVATION to advance emerging priorities in cancer care delivery

MAJOR INITIATIVES

- Alberta Rectal Cancer Initiative and Clinical Care Pathway
- Acute Care Utilization for Albertans with Oncological and Non-Oncological Advanced or End Stage Illness
- Provincial Breast Health Initiative
- Provincial Bladder Cancer Pathway
- **All clinical care pathway work exhibits a strong focus on appropriateness of care

MATURITY CAPABILITIES

- Organization & Culture of Innovation and Organizational Transformation
- Planning & Priority Setting
- Program & Project Management
- Performance Management & Measurement
- Evidence-Informed Decision Making
- Stakeholder Engagement & Relationship Management
- Knowledge Management & Translation
- Transformational Leadership
- Innovation
- Strategic Alignment

GUIDING PRINCIPLES

- A strong patient and family partnered care approach is foundational to our work
- Strong collaborations and strategic partnerships are necessary for advancing network activity
- Data and evidence inform strategies and plans to optimize clinical effectiveness and maximize cost effectiveness
Vision
Healthy hearts and brains for all Albertans.

Mission
Supporting the health of Albertans through prevention, collaborative partnerships, research and innovation in cardiovascular health and stroke.

How we will get there:

Leadership Development

Collaborating with Partners in Care

Technology

Information, Data, and Measurement

Education/Knowledge Translation

Communication

Our Priorities
- Scale and sustainability of original Vascular Risk Reduction Initiative (VRR) projects
- Continue to engage new and existing stakeholders to focus on upstream care
- Develop, Implement and Evaluate VRR 2.0 Initiative

Enhancing prevention and integration of health promotion and wellness

Improving the patient journey, health system quality and care

Reducing inequities in care & outcomes

Our Priorities
- Implement Endovascular Reperfusion across Alberta
- Complete a provincial cardiac imaging IT inventory to inform Connect Care requirements
- Build an economic model of stroke & cardiac rehabilitation
- Increase focus on remote monitoring and telehealth
- Standardize EMS treatment of STEMI province-wide

Strategic Pillars

Building on these Foundations:

Patient and Family Centred Care
Effective Engagement
Building a Culture of Quality

Sustainability
Research
Culture of Innovation

For more information, please contact the CvHS SCN™ at: Cardiovascularhealthstroke.scn@ahs.ca
### Critical Care Strategic Clinical Network Transformational Road Map

#### Strategic Directions:

- **System Transformation**
- **Appropriateness**
- **Research and Innovation**
- **Informed Decision Making**
- **Building CCSCN Identity**

#### Collaborative/Virtual Teams

- **Provincial ICU**
- **Transitions in Care**

#### Analytics

- **Adoption and De-Adoption of Best Practices in Critical Care**

#### Implementation Science

- **Sepsis Management**
- **Oxygen**
- **PEPTIC Study**

### Healthy Albertans. Healthy Communities. Together.

The best care for critically ill Albertans through innovation and collaboration.

- **Core Committee**
- **Adult & Pediatric Ops**
- **TRM Refresh**
- **Community Networking**

#### Support sustainment of delirium best practices
- Co-design approach to identify and address most pressing problems in transitions in care (TiC)
- Co-design a provincial framework and strategies to improve transitions in care from ICU to Ward / Medical Home and Provider to Provider
- Collaborate with CIHR TIC Team Grant group
- Embed implementation science in all initiatives

#### Spread and scale appropriate use of albumin to all ICUs and higher users in all acute care settings
- Partner with Physician Learning Program (PLP) to identify factors contributing to and develop strategies to reduce use of low-value transfusions
- Leverage albumin & PLP projects to increase appropriate use of other blood products and reduce low value blood draws in ICU
- Advance a Living Knowledge Translation Agenda within adult and pediatric critical care to collaboratively identify and action additional priority projects

#### Complete data analysis of Sepsis Management project
- Evaluate comparative effectiveness and cost-effectiveness of liberal (usual care) vs. conservative oxygen use in ICU
- Evaluate comparative effectiveness of two drug therapies for stress ulcer prophylaxis in ICU patients
- Continue to normalize research as part of everyday clinical practice so patients, families & staff identify & contribute to research
- Foster CCSCN collaborative clinical trials
- Build capacity through Commissioned Research to leverage into larger team grant initiatives

#### Lead improved knowledge and uptake of existing analytics resources available in eCritical
- Facilitate needs of the Critical Care Connect Care Area Council to evolve provincial recommendations for tools, pathways and measures being built into Connect Care
- Inform and leverage Connect Care functionality to support best practice and appropriateness initiatives

#### Continue rotation of Core Committee meeting locations
- Evaluate Core Committee meetings and address gaps in membership
- Evaluate adult and pediatric operations sub committees
- Enhance role and visibility of pediatrics in CCSCN
- Co-design refreshed TRM to plot where we are going in the next 3 years
- Evolve communications plan to support TRM and build network identity
- Update web presence
- Plan and host annual CCSCN community events (eg Café Scientifique, Town Halls, etc.)
Diabetes, Obesity & Nutrition
Strategic Clinical Network

All Albertans have access to services and supports that optimize their nutritional status, prevent or reduce the risk of diabetes, obesity, and malnutrition, and enable those living with these chronic diseases to be healthy and well.

Improve patients’ & families’ experiences
Improve financial health & value for money
Improve patient & population health outcomes
Improve the safety & experience of our people

Alberta Today

Diabetes
300,000 (7.5%) Albertans have diabetes
(Up 60% since 2000)
33% of patients with diabetes experience hypoglycemia in the hospital
70% of non-traumatic lower limb amputations are caused by diabetes
85% of these amputations are preventable

Obesity
2.5 million (60%) of Albertans are overweight or obese
3x risk for diabetes, high blood pressure, & CHF
2x risk for arthritis & sleep apnea
Obesity is the leading cause of loss of life & costs the healthcare system $4.5 billion per year

Malnutrition
51% of seniors in homecare/supported living & 31% of seniors in the community are malnourished
1 in 5 malnourished patients are readmitted to the hospital within 1-month of discharge

Strategic Domains

Prevent the onset & progression of Diabetes, Obesity, & Malnutrition
Empower patients & providers to better manage Diabetes, Obesity, & Malnutrition to live well & long
Transform the Health Care System through Research, Surveillance & Partnerships

Priorities

Standardize diabetic foot care
Create a diabetes surveillance system
Improve glycemic management of people with diabetes in hospitals
Develop bariatric friendly care hospital guidelines & standards
Implement a new community model of care for obesity management
Develop a malnutrition strategy with AHS Nutrition & Food Services
Study the impacts of malnutrition & barriers to a healthy diet
Partner with: SCNs & PCNs, Patient & Family Advisors, Researchers, Policy Makers, Industry

Alberta Tomorrow

Diabetic foot care screening rates will increase in primary care
Patient satisfaction & experience in hospitals will improve
More malnourished seniors will be identified & treated across care settings
Higher satisfaction & better experience for patients with diabetes & obesity in hospitals
Length of Stay in hospitals will be reduced for patients on insulin & patients with obesity
Prevalence of diabetic foot ulcers & lower limb amputations will decrease
Hospital staff injuries will decrease
Digestive Health Strategic Clinical Network
Transformational Roadmap Summary

DH SCN VISION
The best digestive health for all Albertans

DH SCN MISSION
Innovate and collaborate to create a person-focused, high quality digestive health system through prevention, research, and best practices

STRATEGIC GOALS
- Integrate Primary/Specialty Care Approaches to Digestive Diseases & Improve Access
- Deliver High Quality, Standardized Digestive Healthcare
- Provide Clinically Appropriate & Efficient Care
- Prevent Digestive Diseases

PRIORITIES
- Implement and monitor a complete, standardized provincial referral process and use innovative models to improve access to care
- Develop and implement provincial clinical pathways for patients to improve disease prevention, management and continuity of care
- Improve appropriateness of testing and therapies
- Prevent chronic liver disease through better identification and management of preventable causes of this disease
- Decrease incidence of C. difficile in acute care facilities

PRINCIPLES
- Patient & Family Focus
- Engagement & Collaboration
- Culture of Quality
- Standardized, Evidence-based Approaches
- Sustainability
- Research & Innovation
- Healthcare Equity

ENABLERS
- Information Technology & Quality Data
- Patient & Provider Education
- Clinical Pathways
- Performance Measurement
- Communication

Transformational Road Map 2017-2021
Revised February 20, 2018
Our guiding principles

The ESCN is a group of healthcare professionals, patient and family advisors working together across the province to improve emergency services using evidence-informed care in Alberta.

Our work is guided by the following principles:

- Patient-centred care
- Innovation
- Communication
- Accountability
- Responsibility

Patient engagement

The ESCN recognize patients, family and public engagement as the foundation for improving health care quality and how we deliver emergency care. The ESCN believes patient engagement means patients, families and health providers actively collaborating to improve care of Albertans in the emergency department (ED). This includes the many ways that health providers work with patients and families to understand their needs, and respond to them.

The ESCN in partnership with our patient advisors and PACER will continue to engage in a variety of different ways including:

- Focus groups with patients living with addictions and patients with mental health conditions
- Focus groups with individuals where English is not the primary Language.
- A visit to the ED can be stressful; developing educational materials with the “voice of the patient” front and centre will assist in improving communications
- Social media strategies and conducting surveys to reach the younger generation.
- General public focus groups to test and evaluate the use of Information Design to improve communications
- Research in partnership with First Nations organizations to improve their experience in the ED

The many volunteer hours dedicated by our Patient and Family Advisors, in addition to the contributions of our many subject matter experts, have influenced our decisions and contributed greatly to the success of our network.

John Brick
Patient & Family Advisor
Emergency Strategic Clinical Network

As a patient advisor I have the opportunity to share patient experiences, insights and make recommendations across a broad range of care areas with experienced frontline staff. Our mutual goal is to collaboratively create recommendations for staff and patient-care improvements that are effective and efficient to support a sustainable and accountable healthcare system for Albertans.

Gloria Wilkinson
Patient & Family Advisor
Emergency Strategic Clinical Network

I am excited to have recently joined the ESCN. I plan to bring a number of perspectives to the table which I will demonstrate through my years of experiences e.g. Registered Nurse in ED or post-op surgery and in various roles as a patient advisor. And of course both my husband and I have both been patients.

My varied background leads me to believe that the experienced advisors are the lynchpin to bring the patient-first philosophy to full fruition. This update to the ESCN TRM is the perfect place to provide that input.
Emergency SCN 2019-2022

ESCN strategic direction: Respond to the needs of our patient population

ESCN priority: Patient experience in Emergency Departments (ED) and Urgent Care Centres (UCC)

Objective
To improve patient’s and families’ experiences in EDs/UCC by improving patient communication, timely patient access and quality patient care.

Focus areas
- All Albertans presenting to the ED
- Staff
- Indigenous populations
- Addiction and mental health
- Pediatric and youth population

Actions: we will
- Ensure the voice of the patient is heard
- Use HQUA patient experience data as a baseline
- Partner with U of A Information Design, Human Factors and Operations to develop a roadmap to improve communications with various social media venues
- Engage with frontline staff
- Use CIHR-funded peer reviewed grant to guide ESCN actions

Expected outcomes
- Decrease stigma around addiction and mental health
- Improve communication in ED using information design strategies
- Joint pathway development as admitting criteria with Addiction & Mental Health population (AM-HEC SCN)
- Improve patient experience in ED/UCC
- Common approach to PREMP/PROMP for all ED/UCC within AHS
- Awareness of the acknowledgment of land for indigenous communities

ESCN strategic direction: Research & innovation

ESCN priority: Integrate research for better implementation/improvement

Objective
To build emergency research capacity. To advance and disseminate research knowledge. To engage and build partnerships for research and innovation.

Actions: we will
- Build capacity: Mentoring, Developing emergency medicine research skills
- Provision of research resources
- Fostering a research culture
- Advance and disseminate research knowledge:
  - Engage in high-quality research studies
  - Obtain research funding
  - Publications, conference presentations, journal articles dissemination
  - Engage and build partnerships for research and innovation:
    - Engage Research Advisory Board (RAD)
    - Build ESCN research community
    - Cross-SCN collaboration
    - Collaboration with national and international Emergency Medicine research programs

Expected outcomes
- Research projects completed, tech-ESCN and Pan-SCN
- Students and members trained in Emergency Medicine research skills
- Rigorous projects financially supported
- Scholarly manuscripts published
- Researchers engaged in Emergency Medicine research

ESCN strategic direction: Partner as problem solvers and innovators

ESCN priority: Opioid crisis

Objective
To support a culture of harm reduction and to help Opioid Use Disorder (OUD) patients by reducing deaths, overdoses and other health and social challenges that arise from substance use and addictions.

Actions: we will
- Establish a provincially coordinated buprenorphine/rhizocine (Suboxone) Opioid Agonist Treatment (OAT) strategy for patients presenting to EDs & UCCs with OUDs in Alberta. This will include patient pathways and sustainable transitions to community and primary healthcare providers and services

Expected outcomes
- Develop OAT program in ED/UCC including:
  - CKCM pathway development for acute/chronic pain management
  - Education materials for both patient and healthcare provider
  - Implement and sustain an approved model
  - Integrate with other opioid crisis response initiatives provincially
  - Transitions into community services
  - Inform implementations of research based evidence to community and primary healthcare providers and services

ESCN strategic direction: Enhance emergency medicine workforce

ESCN priority: Improved educational opportunities

Connect care
EMS offload
Staff violence in the workplace

Objective
The ESCN will maintain a strong working relationship with Connect Care to ensure an appropriate design, build and roll implementation of Connect Care to all EDs/UCC. The ESCN will partner with EMs to create standardized definitions and linkages between EMS and AHS emergency/UCC NACRS data set.

Actions: we will
- Participate as active members of the Emergency and EMS Area Council for Connect Care CKCM

Expected outcomes
- Develop OAT program in ED/UCC including:
  - ESCN will participate in the review of EPIC content to ensure evidence based, best practice provincial alignment across 103 EDs and UCCs
  - Scholarly and standardizations workflows with a focus on patient care
  - Engagement in the design, build, testing, training and implementation of Connect Care as an ED/UCC representation
  - Increased opportunity for standardization of skill performance of nursing staff
  - Provincial support, build and commit to CKCM development for future EPIC build
  - Detailed process map developed between EMS and ED/UCC with standardized provincial definitions to assist with EMS offload reporting

Expected outcomes
- Develop OAT program in ED/UCC including:
  - ESCN will participate in the review of EPIC content to ensure evidence based, best practice provincial alignment across 103 EDs and UCCs
  - Scholarly manuscripts published
  - Researchers engaged in Emergency Medicine research

AHS GOAL
1. Improve patients’ and families’ experiences

AHS GOAL
2. Improve patient and population health outcomes

AHS GOAL
3. Improve the experience & safety of our people

AHS GOAL
4. Improve financial health & value for money

54
Vision
Optimal kidney health for all Albertans.

Mission
Through innovation, partnerships and use of best evidence, we will optimize prevention, early identification and management of kidney health across all ages and stages of kidney disease.

Strategic Directions & Priorities

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<th>Strategic Directions</th>
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| 1 Reduce the risk of acute kidney injury and chronic kidney disease through prevention, early identification, and management | a. Increase early identification of kidney disease and its risk factors in high risk populations (e.g., Indigenous peoples and those with diabetes), including risk stratification, and timely referral to appropriate service(s).  
  b. Identify those at high risk of acute kidney injury and develop strategies to reduce the risk.  
  c. Collaborate with other SCNs on strategies to prevent kidney disease and address underlying common modifiable chronic disease risk factors. |
| 2 Improve management, coordination of care and outcomes for patients with kidney disease | a. Increase use of evidence-informed therapies that delay progression of kidney and associated vascular diseases.  
  b. Reduce variability in identification and management of glomerulonephritis (GN).  
  c. Improve appropriate utilization and integration of health care services for people living with kidney disease. |
| 3 Optimize informed choice and outcomes for those living with end stage kidney disease | a. Increase uptake of home dialysis.  
  b. Increase access to and improve patients’ experiences with pre- and post-transplant care; and increase the rate of kidney transplantation.  
  c. Improve the lives and well-being of patients living with end-stage kidney disease.  
  d. Improve transitions in care as patients start renal replacement therapy or change from one treatment approach to another. |
MNCY SCN priorities:

A. Develop, implement, and evaluate innovative approaches to support obstetrical care and access for rural, and/or marginalized populations in Alberta.

B. Develop, implement, and evaluate innovative approaches in care for Indigenous mothers, newborns, children and youth in Alberta.

C. Innovations to improve the care of Medically Complex Children and/or children with neurodevelopmental disorders in Alberta.

D. Innovations to improve the transition of children with chronic diseases from adolescent to adult care in Alberta.

E. Develop, implement, and evaluate innovative approaches to optimize regional facility support for pediatric capacity in Alberta.

F. Develop, implement, and evaluate innovative approaches in care for and prevention of substance use in pregnancy and implications for the newborn in Alberta.

G. Develop, implement, and evaluate innovative Mental Health services for adolescents and young adults in Alberta.

H. Develop, implement, and evaluate provincial pathways or other innovative approaches to care in Alberta:
   • pregnancy planning or preconception health
   • pregnancy, antenatal, prenatal health and care
   • intrapartum care
   • postpartum and newborn care
   • neonatal intensive care
   • child health
Neurosciences, Rehabilitation & Vision SCN

This newly launched SCN is currently developing their Transformational Road Map. Please contact the SCN Senior Provincial Director and Senior Medical Director with solutions and ideas relevant to these areas of health.
Population, Public and Indigenous Health Strategic Clinical Network™

Population and Public Health Core Committee

**ENABLERS**
- Data & Information
- Collaboration & Partnerships
- Pan-SCN Collaboration
- Changing the Conversation in Alberta
- Resources for Committed Action

**PRINCIPLES**
- Engagement with Albertans and Their Communities
- Moving Upstream
- Health Equity
- Innovative Evidence-informed Action
- Sustainability

**MISSION**
Drive innovation that creates opportunities and conditions for all people in Alberta to reach their full health potential.

**VISION**
Healthy Albertans. Healthy Communities. Together.

**FOCUS AREAS & STRATEGIC GOALS**

**Strengthen Community Action**
Communities and intersectoral partners take action to improve health outcomes and reduce inequities.

- Population health and its determinants are measured routinely, and findings are translated with communities to set priorities and monitor progress.
- Pathways to healthy communities are developed and promoted.
- Communities’ capacity to create healthy communities is supported and enhanced.

**Reorient Health Services**
Shared responsibility for promoting health and well-being is firmly embedded across health services.

- Alberta Health Services adopts a “Promoting Health” strategy.
- Health services address unjust and avoidable differences in health outcomes within and between populations.
- Social and preventative factors are identified routinely, addressed compassionately and follow-up is coordinated seamlessly with community partners.
Vision

_Healthy Albertans. Healthy Communities. Together._

Mission

*To improve the health and wellness of Indigenous peoples by:*

- Engaging Indigenous peoples as equal partners in their own health, wellness and care at the individual, family and community level.
- Exploring, identifying and embedding equitable, holistic and culturally safe health practices.
- Acknowledging and addressing health inequities rooted in the determinants of health.

Strategic Goals

**Truth and Reconciliation**

_To implement the Truth and Reconciliation Commission of Canada Calls to Action through respectful engagement with Indigenous Peoples_

**Transform Health Services and Systems**

*To close the gap in health status between Indigenous and non-Indigenous peoples*

**Address the Determinants of Indigenous People’s Health**

*To reduce health inequities rooted in the determinants of health*

Enablers

Addressing Racism / Two-eyed Seeing / Participatory Research and Innovation / Pan SCN Approach / Education and Knowledge Translation Engagement / Funding, Resources and Technology / Collaboration and Partnerships / Ethical Space / Community Data and Information
Primary Health Care Integration Network

What Are We About?

Keeping Albertans well in their communities – on their terms

Our Aims:

- Find and share leading practices to achieve integration across Alberta
- Collaboratively seek solutions for current integration problems
- Accelerate spread and scale of initiatives in order to achieve significant system improvement
- Advance innovation to create the health neighborhood

Our Approach:

- Person and family-centred
- Population health oriented
- Responsive to local issues
- Partnership approach to system re-design
- Accelerate sustainable and scalable solutions
- Grounded in evidence

Our Areas of Focus:

Keeping Care in the Community
Facilitating collaboration between stakeholders to ensure Albertans receive the personalized care and supports that will help them better manage their health in their own community.

Linking to Specialist & Back
Supporting links between Primary and Specialty Care to aid patients in getting the right advice in a timely fashion, through improving access and exploring alternative ways to meet demand

Home to Hospital to Home Transitions
Supporting the development of patient-centred practices when Albertans go from home to hospital and back home again by aligning Acute Care, Primary Care and other providers around creating seamless care defined by patient needs.

System Foundations for Integration
Creating system enablers to support integrated clinical areas of focus through Person Centred Practices, Leadership & Community Mobilization, Science and Communications & Learning.

#PHCIN
Respiratory Health Strategic Clinical Network
Transformational Roadmap Summary

**Provincial Standards**
- Accessible standardized lung testing results
- Oxygen therapy in acute care
- Sleep testing standards
- Sleep technician competencies

**Success**
Creation of inaugural Home Sleep Apnea Testing standards and update of Polysomnography standards for Alberta

**Quality Improvement**
- Minimized use of nebulized therapy
- Safer use of portable oxygen during transfers within acute care

**Success**
Removal of pre-filled water bottles from practice resulting in no new oxygen flow issues in the Report & Learning System and provincial cost savings of $8,000 per month

**Prevention & Early Detection**
- Pharmacy screening for signs of airway damage
- Pre-surgical tobacco cessation
- Lung testing recommendations

**Clinical Pathways Towards Integration**
- Adult asthma in community care
- COPD Clinical Pathway
- Alberta primary care pathway for childhood asthma
- Post discharge care bundle for patients with COPD
- Integrated model of care for Sleep Disordered Breathing

**Success**
- Launch of Alberta Childhood Asthma Pathway at 105 provincial sites, resulting in increased and safer use of appropriate medications
- Reduction in median length of stay by one day at COPD Admissions pilot site

**Science & Innovation**
- Respiratory health research prioritization
- Improved clinical information access
- Understanding the burden of respiratory diseases
- Clinical research & innovation support

**Success**
Co-development of Alberta respiratory research priorities with patients and clinicians

**Measurement & Evaluation**
- Consistent data definitions & cohorts
- Develop evidence-based content for Clinical information systems
- Subject matter experts in building the Provincial Clinical Information System

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Transformational Roadmap 2018-2021
Revised February 12, 2019
Seniors Health Strategic Clinical Network

To make improvements to healthcare services and practices that enable Alberta’s seniors to optimize their health, well-being and independence.

**AHS GOALS**
- Improve patients’ & families’ experiences
- Improve patient & population health outcomes
- Improve the experience & safety of our people
- Improve financial health & value for money

**PILLARS**
- Research & Innovation
- Communication
- Engagement
- Quality Improvement & Measurement

**PLATFORMS**
- Aging Brain Care
- Frailty, Resilience, Aging-well: Late-life Transitions Initiative
- Anticipating an Aging Alberta

**ACTIVITIES**

**Appropriate Prescribing for Seniors in Alberta**
- Appropriate Use of Anti-psychotics (AUA) in LTC – sustainability
- AUA in Supportive Living
- Appropriate Prescribing and Medication Use Strategy Among Older Albertans

**Elder Friendly Care (EFC) in Acute Care in Alberta**
- Acute Care – Provincial
- Provincial EFC Strategy
- Provincial EFC (Delirium) Toolkit

**Advancing Dementia Diagnosis & Management in Alberta**
- Primary Health Care Integrated Geriatric Services Initiative
- Alberta Dementia Research Futures
- Dementia resources for primary healthcare providers and the public
- Community Grants to support innovations in dementia care
- Pain and Depressive Mood Quality Improvement Project

**SUCCESSES**

**Appropriate Use of Anti-psychotics (AUA) in LTC (170 facilities)**
- In 2017, just 17% of Alberta’s long-term care residents are using anti-psychotic medications, compared to the national average of 21.7%. That’s down from 36% since 2012.
- Alberta continues to lead on AUA publicly reported quality indicator.
- Ongoing support from 1 Practice Lead.
- Families and staff have noted “they are waking up”.

**AUA in Supportive Living (179 facilities)**
- AUA in Supportive Living (179 facilities). Antipsychotic use has declined from 20% to 17% since 2017.

**Acute Care – Provincial**
- Acute Care sites implemented strategies to enhance the inpatient care of older Albertans.

**Acute Care – EFC (Delirium) Toolkit**
- A toolkit of resources has been developed to support engagement of acute care sites from across the province.

**PRIHS Grants**
- 3 Grants have been awarded.
- Provincial EFC Strategy.
- Being developed.

**Alberta Dementia Research Strategy**
- The advancing Dementia Research Futures is near completion.
- 6 Primary Care Networks and 9 communities engaged in the PHC IGSI.
- Dementia resources for primary healthcare providers and the public.
- Dementia Advice line available as of September 2015.
- New dementia resources are available online for use by the public and by clinicians.
- Community Grants to support innovation in dementia care.
- 8 Grants awarded for Community Innovation Grant for People Impacted by Dementia.
2018-2021 TRANSFORMATIONAL ROADMAP

The Alberta Surgery Plan Summary

OUR VISION:
Healthy Albertans. Healthy Communities. Together.

OUR MISSION:
To improve surgical care provided to Albertans.

CENTRAL FRAMEWORK: THE PATIENT’S JOURNEY

Healthy Albertan

Transition & Recovery

Patient

Surgical Treatment

Assessment for Surgery

STRATEGIC OBJECTIVE 1
We will improve access to integrated surgical care

Initiatives:
• Bring together a multi-disciplinary Working Group on Access to Surgical Care
• Publish a white paper on the issue of access
• Gather more data on access to surgical care
• Share our findings with patients and the public
• Develop and implement projects to test methods for improving access

STRATEGIC OBJECTIVE 2
We will provide safe, high-quality surgical care

Initiatives:
• Bring together a multi-disciplinary Working Group on Surgical Safety and Quality
• Increase the use of ERAS and other care pathways
• Increase the implementation of active surgical quality programs such as NSQIP at all hospitals
• Enhance the use of the Safe Surgery Checklist
• Increase the use of patient-reported outcome data

STRATEGIC OBJECTIVE 3
We will build a strong surgical community

Initiatives:
• Conduct regular SCN visits to each hospital
• Convene an annual Provincial Surgical Summit starting in fall 2018
• Review the operation of our Core Committee
• Develop strategies on engagement and communication and research

STRATEGIC OBJECTIVE 4
We will use analytics and evidence to guide decisions

Initiatives:
• Bring together a multi-disciplinary Working Group on Surgical Analytics
• Develop a unified surgical data strategy and analytical framework
• Work with AHS Analytics to create a provincial surgical data repository accessible to our community
• Develop the concept of a "surgical scorecard"

Revised January 18, 2018