

Information Management News

Health Results Team for Information Management (HRT-IM)

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“We have had a lot of success so far in starting to build capacity and capability for change. I am very proud to be leading this effort.”

Steini Brown, Lead, Health Results Team, Information Management

IN THIS ISSUE OF *INFORMATION Management News*, you will find out more about two major upcoming initiatives led by the Health Results Team for Information Management (HRT-IM): the development of the first health system scorecard and the establishment of Local Data Management Partnerships.

Not only do these two initiatives represent a major step forward, they epitomize what the Health Results Team stands for: innovation and collaboration.

The scorecard, slated for completion in the fall, will provide the means to measure the quality, value and sustainability of the health system. The development of the scorecard is based on the identification of strategic health system goals through strategy mapping.

The strategy map and scorecard are the foundation for all our performance measurement initiatives, which are designed to drive further performance improvement.

Together, they represent the first step towards the ultimate goal of aligning strategic objectives and measures in all sectors of the health system.

Local Data Management Partnerships will provide the much-needed structure to support data management throughout the province. By leveraging strengths and local expertise, they will help improve Ontario’s data quality.

These are major accomplishments that would not have been possible without all the hard work and invaluable input of hundreds of individuals, inside the Ministry of

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Health and Long-Term Care (MOHLTC) and in the field, from practitioners to system managers.

We have had a lot of success so far in starting to build capacity and capability for change. I am very proud to be leading this effort.

My team and I are looking forward, this fall, to sharing these and other successes with our health system stakeholders during our first round of stakeholder consultation sessions. We welcome the opportunity to solicit your input regarding some key deliverables for the Information Management Strategy.

Best regards,

Adalsteinn D. Brown

The Big Picture: Mapping Health System Strategies for Measurement

TO STRIVE TOWARDS CONTINUOUS improvement of the health system, we first need to know what we are trying to achieve.

Working collaboratively with its health system partners, both internal and external to the MOHLTC, the HRT-IM is leveraging innovative processes, like strategy mapping, to help determine what should be measured for performance improvement.

Strategy maps are tools that can help to make the link between performance measures and strategic goals explicit.

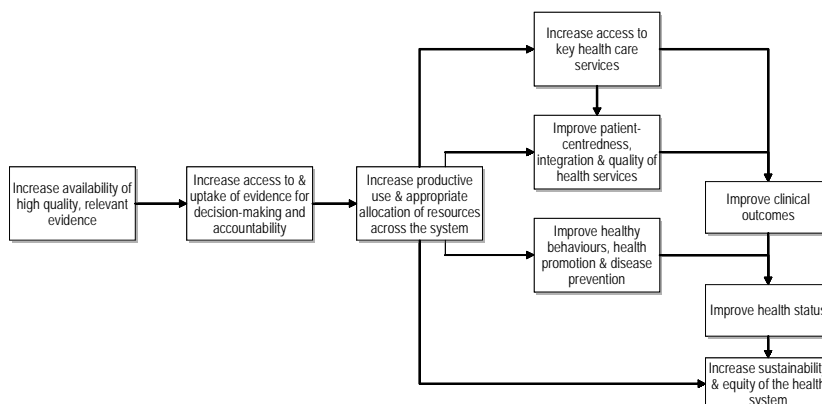
When Cancer Care Ontario (CCO) adopted a new performance management philosophy in 2004, an integral part of the organization's transition to its new role was the development of a strategy map where five strategic objectives for Ontario's cancer system were formally articulated.

The map resulted in the identification of 36 system-level indicators that are now being routinely used to measure and manage the performance of Ontario's cancer system.

"The strategy map gave us the system-level focus that we needed to measure and monitor the performance of Ontario's cancer system," says Helen Angus, Director of Corporate Planning for the CCO.

"It has been extremely helpful to us, not only in measuring our progress, but in assessing our business strategies and organizing them towards system improvement." The health system strategy map drafted by the HRT-IM and its

Strategy Map for the Health System Scorecard



partners articulates nine strategic goals to be measured in the health system (see the above pictorial representation).

"The map has given us the big picture framework to monitor and measure the performance of the health system as a whole," says Jeremy Veillard, who is leading the performance measurement related initiatives for the HRT-IM.

The map was also the starting point in the development of a major milestone for the government's Health Results Team: the first health system scorecard.

"The map provided the foundation for the selection of a core set of quality performance indicators for the scorecard," says Veillard. "It was a way to ensure that our indicators measure progress over time against specific and widely recognized goals for the health system."

The first health system scorecard will enable the measurement, tracking and reporting of provincial health system strategies. It is designed to drive future performance measurement activities in a system that strives for better outcomes. In the 1990s, when the United States' Veterans Health Administration (VHA) transformed itself into a high-

quality, performance-oriented health care delivery network, it also relied on a clear vision and a core set of strategic goals to drive the selection of key performance indicators and, subsequently, performance reporting.

The link to strategy made the alignment of accountability mechanisms and performance measures possible, and contributed to changing the VHA into a high-performing organization, which nowadays is regarded as a benchmark organization in health care.

Next, the HRT-IM will work with its partners to align current sector-specific scorecards with the system scorecard to make Ontario's multitude of performance indicators both relevant and useful. New scorecards will also be developed for unaddressed sectors.

Ultimately, this will enable a better focus on what we are trying to achieve, and fuel continuous improvement of the health system. ■

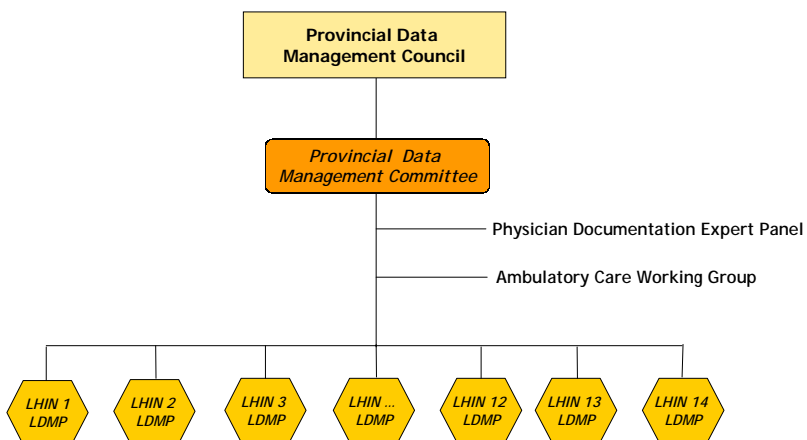
The Power of Partnerships: Mobilizing Locally for Data Quality

A MOVE IS AFOOT IN ONTARIO TO resolve chronic problems with data quality and timeliness. The HRT-IM is spearheading the establishment of a new partnership model to manage information locally. The model is based on mutual cooperation among health care providers, health information practitioners, Local Health Integration Networks (LHINs), government agencies, and health information associations.

The new model will see the creation, over the next two years, of partnerships throughout Ontario that are aligned with LHINs. "The great thing about this," says Helen Whittome, who is leading this initiative for the HRT-IM, "is that it empowers the field and makes the best use of scarce resources."

The proposed model is partly informed by the experience of other jurisdictions where data quality committees are responsible for consolidating, coordinating and standardizing local data

Proposed model for the new Local Data Management Partnerships (LDMP)



management functions through best practices, guidelines, standards and tools. Committees are already in place in eight other provinces.

To confirm the need for a similar model in Ontario, the team held a session with key stakeholders in June and surveyed all hospital health record departments on a number of topics ranging from coding practices, chart management and completion, to certification and education.

"The response we received was tremendous (96%)," says Whittome. "Preliminary results demonstrate that this is something that is needed and wanted by health information management practitioners."

"I am really quite excited that this is being looked at on a broader provincial scale," says Sandra Odorico, Interim Manager Health Records and Privacy at Cambridge Memorial Hospital, who took part in the survey. "Both myself and my CFO would be delighted to be a part of, and to contribute to this initiative."

The plan will be to roll out our own made-in-Ontario model in four phases, starting in December '05 and ending in March '07. "We are aiming to have the Council itself in place as early as this fall," says Whittome. ■

Open Call to All Hospitals – RFPs for Case Costing

THE MINISTRY OF HEALTH AND LONG-TERM CARE (MOHLTC) IS NOW ACCEPTING REQUESTS FOR PROPOSALS (RFPs) from hospitals who are interested in participating in the Ontario Case Costing Initiative (OCCI). Case costing data is invaluable to the MOHLTC in planning and funding services and to health care providers for clinical and financial management. This is why increasing the number of case costing hospitals in Ontario is part of the HRT-IM's efforts to produce better data.

As announced in March at the Case Costing Conference, the MOHLTC will be providing incentive funding* to assist facilities through the implementation phase. Additional consideration is also being given to organizations that contemplate case costing partnerships within their Local Health Integration Network (LHIN), or other innovative partnerships. This could include the sharing of resources, systems or other innovative ideas.

For more information and to obtain an application form, please contact Christina Hoy, MOHLTC's Finance and Information Management Branch, at 416-327-7305 or in writing at Christina.hoy@moh.gov.on.ca. ■

*Only those facilities selected by the MOHLTC to continue through the OCCI milestone process will be eligible for incentive funding.

Achieving Successful System Redesign

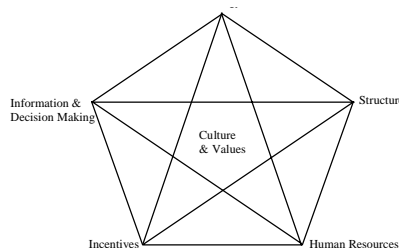
AS THE SANDRA ROTMAN CHAIR IN Health Sector strategy at the University of Toronto and the University Health Network, Dr. Brian R. Golden is well known for his contributions to the health care sector and his unique strategic approach to system redesign.

On May 31, Golden shared some of his knowledge and expertise on change management strategies with the HRT-IM's Internal Action Group. Golden's presentation focused on how organizations or systems can successfully change through the following process:

1. *Determining the Desired State* – develop vision
2. *Assessing the Readiness for Change* – identify supports and blockers, skills
3. *Building Desire and Capabilities for Change* – create incentives, allocate resources, produce an action plan
4. *Achieving Organizational Redesign* – through the Star Model using strategy, structure, human resources, incentives and information & decision making, culture & values
5. *Stabilizing New Behaviours* – continued performance monitoring, showcase successes

According to Golden, the fourth step – the Star Model – is a key tool for health system redesign.

The Star Model



“These are the components that an organization or system can leverage for diagnosing performance management problems at all levels, and to implement fundamental changes.”

Golden used the Veterans Health Administration (VHA) example to illustrate the achievement of successful system redesign through the Star Model.

Prior to 1995, the VHA were well-known for their low-quality, difficult-to-access, high-cost care. “They were a centralized, hierarchical, inwardly focused organization with reams of rigid policies and procedures,” said Golden.

“There was no standardization among the different facilities, and medical centres were competing against each other. Not surprisingly, staff morale was low.”

In 1994, Dr. Ken Kizer was appointed to lead this organization into a sustainable future. Kizer proceeded to systematically redesign the VHA, and in doing so addressed all levers of the star.

He changed the organizational structure by implementing 22 Veteran Integrated Service Networks (VISNs) which consisted of medical centres, clinics, nursing homes and counseling facilities. He changed the decision support

capacity by appointing a head for each VISN, who was clearly responsible and accountable for the performance of the network. He implemented a performance measurement system that rewarded the VISNs based on performance outcomes.

In that way, metrics were used not only as an incentive/motivational tool, but also to allocate resources on the basis of performance.

“Once the VHA started to reveal outcomes, performance improved,” said Golden. “Client health records were implemented, and within three years, they started to generate revenue.”

Other results achieved included:

- A 24% increase in the number of patients treated (700,000)
- 350,000 (36%) fewer admissions per year
- 302 new community-based outpatient clinics

To find out more about the Star Model and the VHA experience, read “Aligning the Stars: Using Systems Thinking to (Re) Design Canadian Healthcare” (Healthcare Quarterly, Vol. 7 No. 4). ■

Contact Us

Write to us with your comments or questions at HRTIM@moh.gov.on.ca, or to be added to our mailing list for the *Information Management News*.

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