

Contents:

Message from
the Chair

Surgical Patient
Registry Piloted
in Moose Jaw

New Patient
Assessment
Process
Developed for
Saskatchewan

Clinical
Services
Subcommittee
Established

Registry Office
Manager
Appointed

On the Horizon

For More
Information

Message from the Chair

With this edition of the E-News, I am pleased to report significant progress on Saskatchewan Surgical Care Network (SSCN) initiatives such as the surgical access Web site, the Surgical Patient Registry and the development of a new process for assessing surgical patient need.

The SSCN is an advisory body of physicians, health care providers, provincial regulatory agency members, health training organization representatives and health system administrators, appointed by Minister of Health, John T. Nilson, Q.C. to oversee improvements to Saskatchewan's surgical care system as described in the Action Plan for Saskatchewan Health Care.

On January 14th, 2003, the SSCN was pleased to participate in the launch of the SSCN Surgical Web site and announcement of Surgical Care Co-ordinators in Regina and Saskatoon. Since then, visitors to the Web site (www.sasksurgery.ca) have been averaging over 100 per day while the Surgical Care Co-ordinators have been receiving approximately 25 inquiries per day.

These surgical care system initiatives are the first of several that will be implemented this calendar year.

Following completion of the Surgical Patient Registry pilot in Five Hills Health Region, and consultations with specialists regarding development of a new patient assessment process to support the Registry, we will be moving into the implementation phase of each of these projects.

Province-wide rollout of the new assessment process is slated to begin in May while the Registry implementation is scheduled to commence in July.

No other province has stepped forward with such a comprehensive set of strategies intended to improve surgical care systems and ensure fair and timely access to surgery. Once again, Saskatchewan is leading health care system innovations across the country.

*Peter Glynn, Ph.D.
Chair, Saskatchewan Surgical Care Network*

Surgical Patient Registry Piloted in Moose Jaw

The Saskatchewan Surgical Patient Registry is now a reality for people having surgery within the Five Hills Health Region.

Regional administrators, staff, physicians and patients are currently participating in an initiative that is testing the Patient Registry's business processes, policies, procedures and patient assessment process.

As outlined in the *Action Plan for Saskatchewan Health Care*, the SSCN is guiding the development of a province-wide computerized Surgical Patient Registry that will track all patients needing surgery in the province. Regional Health Authorities (RHAs), physicians, and Saskatchewan Health will use information from the Patient Registry to make informed decisions regarding wait list issues and capacity requirements.

The Registry, along with a new assessment process, will help to ensure that surgical patients in Saskatchewan on the wait list have their procedures completed in a timely manner, according to need.

The Five Hills Health Region Registry initiative includes surgical services such as general surgery, dental surgery, obstetrics and gynaecology, orthopaedics and urology.

Surgeons in each specialty are using a draft set of standardized patient assessment questions to determine the level of need (urgency) for each patient requiring a surgical procedure. Each clinical assessment generates a score which, along with other booking information and verification of consent, is entered onto the Patient Registry.

This Registry initiative will soon produce reports that will allow the administrators and physicians to understand, with greater precision, the number of people waiting for surgery in the Region and the relative urgency of each patient.

“The Registry will be a very useful tool to help us continue to manage our health system resources effectively,” said Trent Truscott, Nurse Manager - Operating Room/Recovery Room, Five Hills Health Region. “In the long-term it will help to ensure timely access to surgery for our patients.”

“While there are a few small process issues that need to be addressed, I am happy with the prioritization tool for general surgery. It is applicable for a good range of cases,” said Dr. George Miller, General Surgeon, Five Hills Health Region.”

“Clearly, patients will be ordered according to need and not according to some other factor such as available O.R. time for a particular surgeon. This is a big step in moving toward a system where patients get the surgery they need when they need it.”

In Brief – Five Hills Surgical Patient Registry Pilot

- Pilot project was initiated January 13, 2003.
- All surgeons are completing the following documentation for each patient requiring surgery:
 - booking form;
 - patient assessment tool; and,
 - patient consent form.
- Patients currently waiting for surgery have had clinical prioritization tools completed.
- An interim database is capturing patient information.

Implementation of the Surgical Patient Registry province-wide is planned to begin in July 2003.

New Patient Assessment Process Developed for the Province

The SSCN, Regional Health Authorities, and specialists across the province are just a few months away from implementing a new method of ensuring consistent assessment of patients needing surgery across the province.

The SSCN and Saskatchewan Health, with the advice of a wide range of surgical specialists in the province, have been working together to establish a new assessment process that includes:

- 1) a common understanding of the “urgency” of specific surgical procedures performed in the province; and,
- 2) a common method of determining patients’ relative need for those procedures.

Developing Standardized Procedures and Urgency

Currently, the definitions of surgical procedures vary from Region to Region. In addition, there is often a lack of consensus as to how quickly individual procedures should be performed.

To address these issues, the SSCN and Saskatchewan Health, in close consultation with specialists across the province, have developed a draft list of standardized surgical procedure names and associated “clinical urgency ranges.”

These ranges describe the level of urgency for specific procedures. For example, cancer procedures are always considered urgent and are recommended to be performed within 3 weeks.

In contrast, the need for removal of gall bladders can vary greatly. Currently, the suggested timeframe for this procedure is anywhere from within 24 hours to 6 months or more, depending on the clinical symptoms displayed by the patient.

Standardizing procedures with associated urgency is the first aspect of ensuring consistency and fairness for patients who require surgical procedures.

Determining Patient Need within the Procedure’s Timeframe

Individual patients who require the same procedure will often have different levels of need for surgery.

The second aspect of the prioritization process involves the use of a set of patient assessment questions that standardize the way in which physicians will determine individual patient need.

These questions bring consistency to the factors that physicians, in consultation with patients, will consider in determining the level of need for each patient. Some of the factors include the patient’s level of pain, potential for the condition to worsen, and the ability to work.

Patients with a more urgent need for surgery will receive a higher score and a higher priority within the timeframes for that procedure.

“Our goal is to ensure fair and timely access to surgical services in the province. This new prioritization process is the key to ensuring fairness in the system. For the first time in Saskatchewan patients in all corners of the province will be assessed in the same way, with those in higher need receiving higher priority,” said Peter Glynn, Chair of the SSCN.

“The SSCN is grateful for all of the thoughtful advice received to date from Saskatchewan specialists and we look forward to the implementation of a new prioritization process across the province.”

Consultations regarding the patient assessment process continued into March 2003. Education sessions for Health Regions and physicians are occurring in April and May 2003.

In Brief – Patient Assessment Process Development

- A working group developed a methodology for approaching the prioritization process initiative.
- Using this methodology, consultants began working with surgeons to develop clinical tools to help with consistently assessing patients’ level of need for surgery and fairly ranking them on the waiting list.
- Throughout fall of 2002, consultation meetings were held with groups of physicians from each specialty to develop the standard procedure lists, urgency ranges for each procedure, and patient assessment tools for each specialty.
- The three surgical tools developed by the Western Canadian Waiting List Project (general surgery, cataract surgery and hip/knee surgery tools) were discussed during these consultations, and will be used as designed for the appropriate specialties. The general surgery tool was used as the template for specialties where no other tool was available. For patients requiring cardiac surgery, physicians will use the assessment tool developed by the Cardiac Care Network of Ontario.
- A December 17, 2002 letter from a subcommittee of the SSCN to all specialists in the province requested feedback on the draft procedure lists, clinical acuity ranges and patient assessment tools.

- Responses from the specialists were analysed and considered. In addition, the groups of physicians from each specialty who volunteered to assist in the development/adaptation were consulted on the feedback received.

Patient Assessment process - Next Steps

- An evaluation process to validate and refine the patient assessment tools will be developed to ensure they are as effective as possible.

The province-wide implementation of the tools will begin in May 2003.

Clinical Services Subcommittee Established

The SSCN has recently established a Clinical Services Subcommittee to focus on issues regarding provision of surgical services in the province. The Subcommittee is comprised of various surgical specialists, senior administration representatives from the Health Regions and Saskatchewan Health.

One of the priority initiatives for the Subcommittee, chaired by Dr. Rob Weiler, is the development of recommended target and maximum wait times for surgical procedures. These timeframes will specify how long patients could expect to wait for their procedures.

Recommendations regarding the timeframes will be coming forward fall 2003.

Registry Office Manager Appointed

The SSCN is pleased to announce the appointment of Trent Truscott as Manager of a new Surgical Patient Registry Office.

Truscott will be responsible for the management of day to day operations of the province's Surgical Patient Registry and will act as liaison between Health Regions and Saskatchewan Health in addressing policy and process issues.

Truscott became a nurse in 1989, and has held a variety of management and supervisory positions since 1994. Most recently he led the Surgical Patient Registry Pilot initiative in Five Hills Health Region.

The Registry office will be located with the Saskatchewan Health Information Network (SHIN) offices at 360 - 10 Research Drive, Regina.

On the Horizon

- Implementation of surgical patient assessment processes -- spring and summer 2003.
- Province-wide implementation of Surgical Patient Registry -- summer and fall 2003.
- Recommended target and maximum timeframes -- developed by fall 2003.

For More Information

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Or

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