

---

# **Strategic Clinical Networks MEDEC/SCN/AIHS June 24, 2015**

**Blair O'Neill MD FRCPC  
Associate Chief Medical Officer-SCNs  
Alberta Health Services  
Professor of Medicine  
University of Alberta**

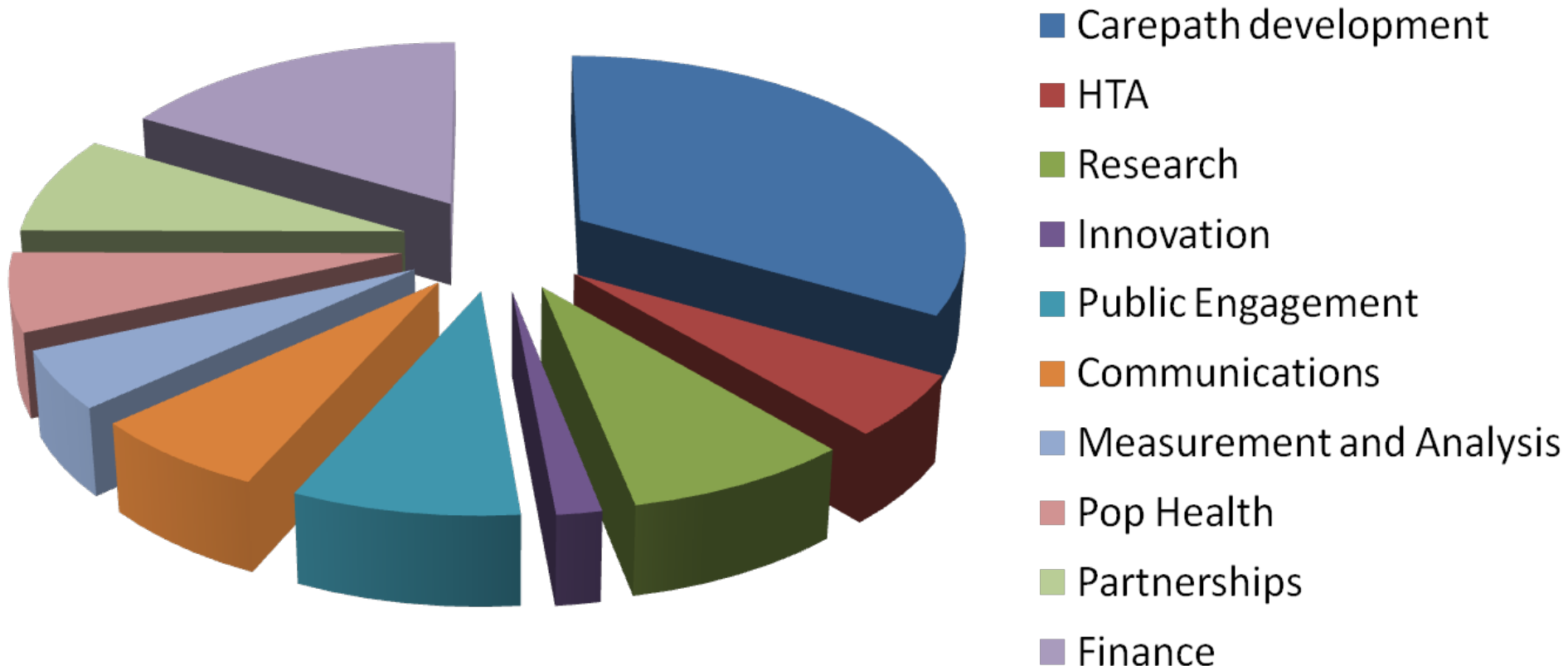
# Strategic Clinical Networks

---

- Engines to transform the health system into a highly performing integrated patient centered ecosystem
- Engines of innovation
- Engines of Health Technology Assessment/ Reassessment
- Engines to cultivate research of relevance that will improve the health and wellness of Albertans
- Engines of quality and its measurement

# CORE intended to function like a 'Business Unit' *with specific leads of roles/functions – supported by staff*

## SCN Core Group





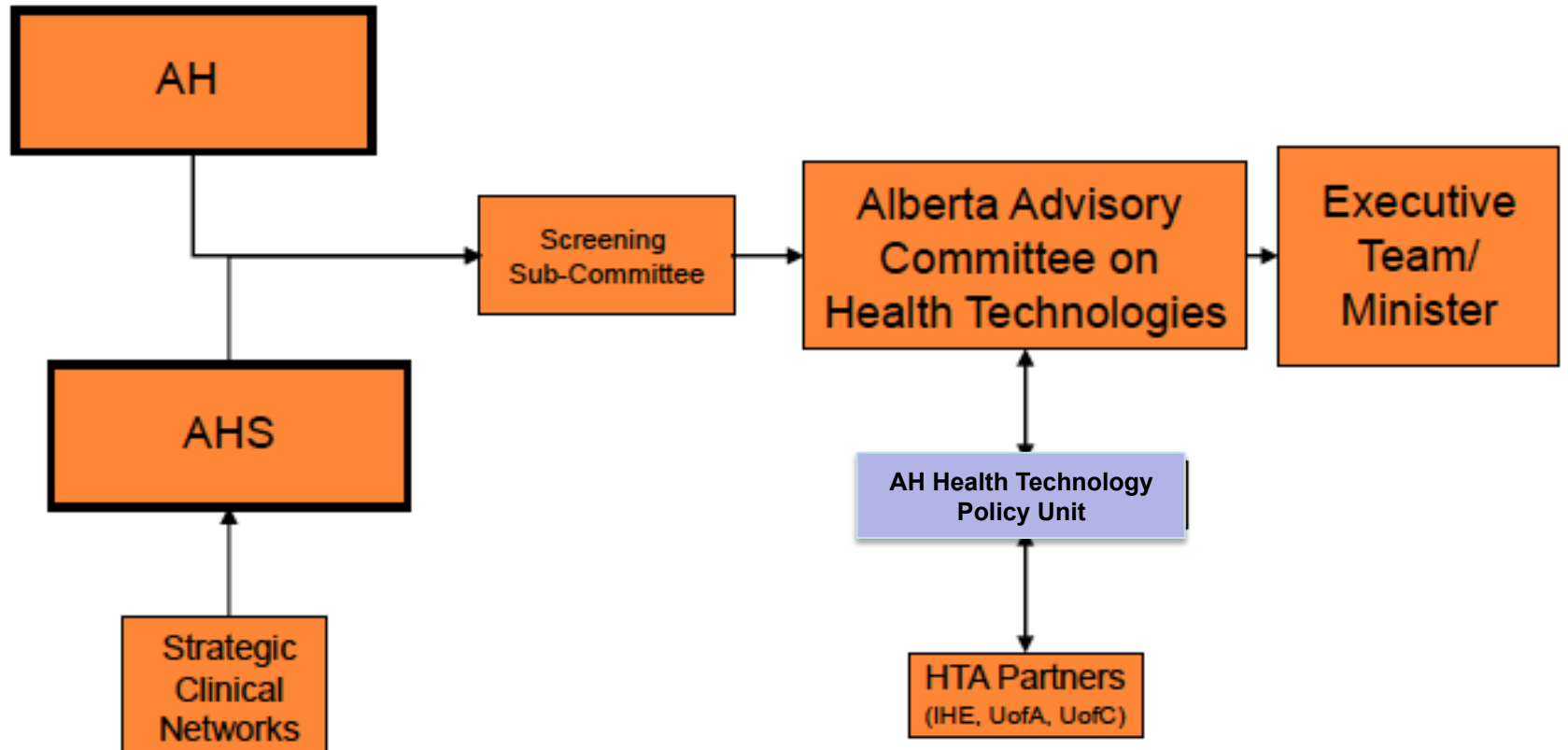
# SCNs – June 2015

2012 - 2016/17 (under consideration)

---

1. Diabetes, Obesity and Nutrition - SCN
2. Seniors Health - SCN
3. Bone & Joint Health - SCN
4. Cardiovascular Health and Stroke - SCN
5. Cancer - SCN
6. Addiction & Mental Health - SCN
7. Emergency - SCN
8. Critical Care - SCN
9. Surgery – SCN
10. Respiratory Health – SCN
11. Maternal, Newborn, Child & Youth Health
12. Population, Aboriginal & Public Health – 3<sup>rd</sup> Q 2015
13. Primary Health Care – 3<sup>rd</sup> Q 2015
14. Kidney – 3<sup>rd</sup> Q 2015
15. Gastrointestinal
16. Neurosciences & Vision

# AH Technology Decision Process



Assessing System Needs

Assessing Technology and Policy Development

Decision/Implementation

# Health Technology Accelerators

## RESEARCH & INNOVATIONS INTO CARE



## SPARC Goals, Challenges and Project Framework

**SPARC Goals** – three broad areas of focus that were arrived at collaboratively following examination of strategic documents from each of the partners

**SPARC Goal:** Partnered Solutions & Entrepreneurial Community Development

**SPARC Goal:** Integrated Primary Health Care & Appropriate Care in the Community

**SPARC Goal:** Health System Human Capacity Building

**SPARC Challenges** – specific health system problem

High Acute Care Costs

Inequities in First Nations Populations.

High Incidence of MS

Quality of Aging and Burden of End-of-Life Care

Cost & Health Status of Vulnerable Populations

Increasing Demand, High Facility Cost & Non Patient Centric Approach to Cancer Care

**SPARC Project** – proposed body of work with clearly articulated goals, scope, outcomes, and timeline

Project 1

Project 2

Project 3

Project 4

Project 5

# **Role of Strategic Clinical Networks**

---

- In a zero sum game environment:
  - Evidence based Clinical Input into new technologies
  - Evidence based Reassessment of low value technologies to make room for new innovation
  - Provide framework to follow new technology to confirm/define its value in health care



# Needs in Areas under SCN Spheres of Care

SCN	Need
ALL	Learning Patient Management Systems (not siloed) Smart Apps at the Front Line Point of Care eClinical Decision Support, measurement and reporting/feedback Value Added Industry Partners
Addictions/Mental Health	Better Patient /Family Support
BJ	Better PatientJourney IS linked to AB Bone & Joint Institute Better Arthroplasty devices
Cancer	Personalized Treatment
CVH&S	Percutaneous Valves Myocardial Regeneration Better bioabsorbable scaffolds Better longer lasting pacing devices Less expensive and portable brain imaging Better Endovascular Devices Robotic Stroke PhysioRx/SLP

# Needs in Areas under SCN Spheres of Care

SCN	Need
Diabetes, Obesity, Nutrition	Foot Ulcer prevention and care Promote Healthier Lifestyles across social strata
Critical Care	Better predictive algorithms- for patients and ICU capacity
Seniors	Promote Healthier Lifestyles Healthier Aging At Home
Surgery	Better OR Info Systems/Synaptic Reporting Better Value / Outcomes from Robotics
Multiple SCNs	Collaborative Care across geographies (supporting better collegial critical care, obstetrical, surgical, stroke etc. care) Supply Chain Tracking

# QUESTIONS

---

- **Comments?**
- **Observations?**

