

# Pre-Budget Submission: Canadian Foundation for Healthcare Improvement

Spreading Healthcare Innovations

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Canadian Foundation for Healthcare Improvement

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# **EXECUTIVE SUMMARY**

The Canadian Foundation for Healthcare Improvement (CFHI) appreciates the opportunity to contribute to the House of Commons Finance Committee's pre-budget consultations. CFHI's work aligns with the Committee's focus on health and innovation.

# **Funding Proposal**

In Budget 2015, the Canadian Foundation for Healthcare Improvement (CFHI) is seeking renewed federal investment of \$10 million annually over five years. CFHI's endowment will be fully depleted by 2016; a decision on funding is essential in 2015.

#### **Top Five Reasons to Reinvest in CFHI**

- 1. Proven track record of improving patient care
- 2. Saves healthcare dollars
- 3. Spreads best practices across jurisdictions
- 4. Supports federal populations, including First Nations and veterans
- 5. Works across the country, including Quebec

#### **Overview**

The Canadian Foundation for Healthcare Improvement (CFHI) is a not-for-profit organization, funded by the Government of Canada, that helps health systems deliver better healthcare more efficiently. With a \$10 million annual budget, CFHI helps develop, implement and spread healthcare delivery innovations that could save provincial-territorial healthcare budgets over \$1 billion annually.

#### Canada's Healthcare Challenges

Steady growth in health spending combined with mediocre results in international comparisons of quality, access and safety are driving governments in Canada to focus on improvement and innovation in healthcare. However, smaller jurisdictions and regions often lack robust improvement capacity and there are few mechanisms to support collaboration across jurisdictions.

#### CFHI's Programming Solutions

CFHI helps healthcare organizations across the country work together to implement innovations that improve patient care and outcomes while saving healthcare dollars. These programs support collaboration among different jurisdictions, organizations and professions, which is highly innovative in Canada's health sector. Currently, CFHI is supporting 99 improvement projects across 10 provinces and one territory.

#### Results, not Reports

Independent analyses have demonstrated that:

- Five CFHI-supported innovations could generate more than \$1 billion in annual savings if implemented across 50% of Canadian healthcare systems.
- Six CFHI-supported projects have avoided more healthcare costs than CFHI's entire budget from 2006 to 2013.

# **PRE-BUDGET SUBMISSION**

# **Funding Proposal**

The Canadian Foundation for Healthcare Improvement (CFHI) is seeking renewed federal investment in Budget 2015 to sustain its work beyond its initial funding. A \$10 million annual investment from 2015-16 to 2019-20 would allow CFHI to continue supporting healthcare improvement at current levels—and achieve a similar impact—while greater funding would allow the organization to increase its support for the spread of innovations.

In the absence of renewed funding, the Foundation's endowment will be fully depleted by 2016; 2015 would be the final year of full operation. A decision on funding renewal is essential in 2015.

#### **Overview**

A not-for-profit organization funded by the Government of Canada, CFHI is dedicated to accelerating healthcare improvement and transformation for Canadians. With a \$10 million annual budget, CFHI helps develop, implement and spread innovations that could save healthcare budgets over \$1 billion annually.<sup>1</sup>

CFHI helps health systems deliver better healthcare more efficiently. Working with partners that include leading hospitals, long term care facilities, health regions, provincial-territorial health ministries and provincial agencies such as quality councils, CFHI plays a unique, pan-Canadian role in supporting healthcare delivery innovation, helping teams from different jurisdictions work together on common improvement priorities and providing opportunities for delivery systems across provinces and territories to share and implement innovations. This collaboration among organizations and across provincial boundaries is truly innovative within Canadian healthcare.

Three goals guide CFHI's work:

- Healthcare Efficiency
- Patient- and Family-Centred Care
- Coordinated Healthcare

Through its funding for CFHI, the federal government maximizes its considerable investment in healthcare. Many CFHI programs are cost-shared, which leverages federal funding. The Foundation works with a national network of healthcare improvement leaders from every corner of the country including Quebec. This consensus-based approach is respectful of provincial-territorial jurisdiction.

# Canada's Healthcare Challenges

In Canada and around the world, health expenditures have been rising at a rate faster than the GDP. From 1999 to 2009, real per capita public-sector health spending in Canada increased at an average rate of 4.1% per year, compared with GDP growth of 1.5% over the same period.

<sup>1</sup> RiskAnalytica for CFHI, 2013 Available upon request

Despite increases in federal transfers, healthcare expenditure ranges from 31% to 47% of provincial budgets. Yet, Canada consistently ranks near the middle of the pack or lower on a variety of quality measures in international comparative analyses among developed countries. More than 16 million Canadians have a chronic disease and nine million Canadians have a 'high-impact, high-prevalence' chronic illness.<sup>2</sup> Canada's health systems must adapt to the challenges posed by an aging population with multiple chronic conditions.

To contain rising costs, provide more appropriate care and enhance quality, provincial and territorial governments are increasingly focusing on healthcare improvement—improving patient care and health outcomes while lowering costs. However, there is significant variation in the capacity of health systems across the country to undertake quality improvement work.

Provinces and territories are also working together through the Council of the Federation Health Care Innovation Working Group, which is focusing on pharmaceutical drugs, appropriateness of care and seniors care. Working with CFHI, a team from the Ontario Ministry of Health and Long-Term Care developed a definition of appropriateness that helped the province determine which health services add value for patients. This definition was used by the Working Group to identify three Canadawide priorities for diagnostic imaging appropriateness and using guidelines, health ministries across Canada are working to increase the appropriate use of these scans.

The federal government is also showing leadership by forming the Advisory Panel on Healthcare Innovation focusing on sustainability, quality and accessibility. The panel will identify the five most promising areas of innovation and ways the federal government could support them.

The de-centralized nature of healthcare delivery in Canada creates opportunities for the generation of innovations as provinces, territories and health regions develop new approaches to addressing healthcare needs. However, innovations often remain as pilot projects because it is difficult for provincial-territorial governments and delivery organizations to work together across jurisdictions; consequently, best practices are not scaled-up or spread.

# CFHI's Programming Solutions

"Across Canada there are many innovative ways of improving patient care, but too often they aren't shared or used across the country. Through funding for organizations like the Canadian Foundation for Healthcare Improvement, our Government is supporting partnerships that spread these promising practices across health regions, provinces, territories and eventually the entire country."

#### Hon. Rona Ambrose, Minister of Health

CFHI's programs respond to Canada's healthcare challenges by helping healthcare organizations across the country work together to implement innovations that improve patient care and outcomes while saving healthcare dollars. These programs support collaboration among different jurisdictions, organizations and professions. Currently, CFHI is supporting 99 improvement projects across 10 provinces and one territory through these programs and more:

<sup>2 &</sup>lt;u>http://www.cfhi-fcass.ca/Libraries/Commissioned\_Research\_Reports/</u> EScanTransformationLessons-EN.sflb.ashx

#### Spreading Healthcare Innovations Initiative

CFHI is addressing the perennial problem of one-off, site-specific innovations by supporting the spread of new and better practices. This 'spread' initiative brings together teams from healthcare delivery organizations across the country to tackle pressing healthcare challenges. CFHI is providing seed funding (of approximately \$50,000 per team) and programming support to help teams adapt and implement better practices already tested in at least one site. The first two collaboratives focus on:

- a. Reducing Antipsychotic Medication Use in Long Term Care Approximately one in three Canadians living in a long term care home is on antipsychotic medication without having been diagnosed with psychosis.<sup>3</sup> Fifteen teams representing nearly 60 long term care facilities from seven provinces and one territory will adapt and implement an approach that reduced by 27% the number of residents on antipsychotic medication among a cohort in the Winnipeg Regional Health Authority. The approach consists of person-centred, non-pharmacological approaches including music therapy to manage challenging behaviours associated with dementia.
- b. INSPIRED Approaches to COPD: Improving Care and Creating Value Chronic Obstructive Pulmonary Disease (COPD) is the fourth leading cause of death in Canada and a major driver of hospital visits. In Nova Scotia, CFHI's Clinical Improvement Advisor, Dr. Graeme Rocker, developed an approach to better meet the needs of COPD patients and their caregivers through self-management education, psychosocial/spiritual care support and advance care (end-of-life) planning. The program has reduced emergency room visits, hospital admissions and days in hospital of COPD patients at the Queen Elizabeth II Health Sciences Centre in Halifax by more than 60%. The reduction in hospital stays translates into an annual savings of \$900,000, more than three times the annual operating costs of the program. Fifteen teams from nine provinces are working with CFHI to implement INSPIRED approaches to COPD care.

# "I used to feel so alone with my illness. Now people check on me and I know there's someone I can call if I'm having a problem. I would feel so isolated, frustrated and apprehensive without this support."

**INSPIRED** patient

#### Partnering with Patients and Families for Quality Improvement

CFHI is supporting 22 teams from healthcare organizations in six provinces and one territory to partner with patients and families on quality improvement initiatives. Patients and family members have a seat at the table, with each team including patient and family advisors as core team members. Projects focus on a variety of topics: implementing better bedside handoffs between nurses during shift changes; improving self-management of chronic conditions, such as diabetes and hypertension; and ensuring better transitions in care from hospital to home for patients following a hip fracture.

CFHI's experience supporting 17 Patient Engagement Projects (PEP) in 2010-13 has demonstrated the tremendous potential of patient and family engagement to improve access, coordination and appropriateness. One PEP at McGill University Health Centre partnered patients with front-line staff in redesigning care. The project has evolved to include more than 1,500 nurses and other healthcare providers, resulting in a 20% improvement in patient experience of care and a 60% reduction in medication transcription errors.

<sup>3 &</sup>lt;u>http://ourhealthsystem.ca/#!/indicators/008/potentially-inappropriate-medication-in-long-term-care</u>

# Northern, Rural or Remote Collaboration

This three year partnership links health regions in British Columbia, Alberta, Saskatchewan, Manitoba, and Newfoundland and Labrador so they can work together to improve primary care and mental health services in northern, rural and remote communities.

#### Atlantic Healthcare Collaboration

This collaboration brings together all 17 health regions across the four Atlantic provinces to improve care for patients with chronic diseases, such as diabetes, COPD and mental illness.

# Results, not Reports

CFHI is able to demonstrate results because we work directly with leading delivery organizations, such as hospitals and health regions. A recent analysis has demonstrated that if just five of the innovations CFHI supported were implemented across 50% of the healthcare system in Canada, they could generate more than \$1 billion in annual savings.<sup>4</sup>

A benefit-cost analysis, completed as part of a corporate evaluation in 2014, shows that just six CFHIsupported projects have avoided more healthcare costs than CFHI's entire budget from 2006 to 2013.<sup>5</sup>

# Most Effective CFHI-Supported Innovations

- 1. **Identifying and providing more appropriate care to frequent users of healthcare services** (Quebec): Lowered emergency room (ER) visits and hospitalizations by three-quarters; could save \$22.5 million nationally.
- 2. Home kidney dialysis (Manitoba): A 23% boost saved the province \$3.2 million annually.
- 3. Tool to identify which procedures/tests don't add value (Ontario): \$39 million in savings from changes to the way two tests are ordered.
- 4. **Tool to assess long term care residents and avoid ER visits** (Ontario): Halved the number of long term care residents transferred to the ER.
- 5. Telephone line for easy access to specialist advice (B.C.): Dramatic drops to ER and specialist visits.
- 6. **Personalized care rather than medication for dementia patients** (Manitoba): One quarter of residents removed from medication without negative impact.
- 7. **Redesigning ERs to improve efficiency** (Alberta): Median wait times for initial assessment dropped by one-fifth.
- 8. Care pathways for patients with deep vein thrombosis (Nova Scotia): Rave reviews from patients and providers.

<sup>4</sup> RiskAnalytica for CFHI, 2013 Available upon request

<sup>5</sup> KPMG, 2014 Available upon request