

# Collecting and Improving Electronic Health Information for Health Services Including Cancer: Work to Date and What's Ahead

Presented by:

Dr. Terrence Sullivan, President and CEO, Cancer Care Ontario

Presented to:

Longwoods Breakfast with the Chiefs Session

Date: Tuesday, December 15, 2009

# Recent News Media on eHealth...

CTV OTTAWA

**No value for \$1B on eHealth, Ont. auditor finds**

Updated: Wed Oct. 07 2009 16:57:41

CTV.ca News Staff

THE GLOBE AND MAIL

MEDICAL RECORDS FAIL CHECKUP

Nov 4, 2009 ... Ms. Fraser's audit did not mention the scandal over untendered contracts that recently engulfed **eHealth Ontario**, but she did raise questions ...



**EHealth medical records: Do they improve care?**

December 7, 2009 11:36 AM |

By *POV*



MONDAY, DECEMBER 7, 2009 • TORONTO STAR • GT9  
**GREATER TORONTO**

**10,000 patients' data a click away**

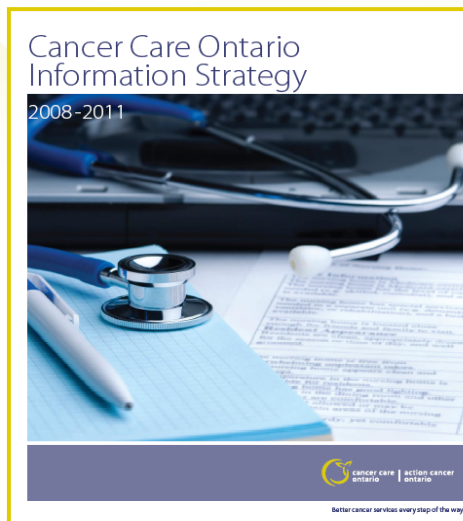
THE CANADIAN PRESS 

**Ontario's eHealth wasted \$1 billion**

By Keith Leslie - THE CANADIAN PRESS



# 2008-2011 Ontario Cancer Plan and Information Strategy



## SIX GOAL

- 1 Reduce the incidence of cancer
- 2 Reduce the impact of cancer through effective screening & early detection
- 3 Ensure timely access to effective diagnosis and high quality cancer care
- 4 Improve the patient experience across continuum
- 5 Improve the performance of cancer system
- 6 Strengthen translation of research into improvements in cancer control

Ensures CCO has the information systems and technology to meet the goals of the Ontario Cancer Plan, and to continue to drive quality, accountability, and innovation in the rapidly changing cancer system environment.

- Transform cancer care using IM/IT and eHealth
- Build out the cancer health system
- Enable the Regional Cancer Programs
- Accelerate change through innovation
- Strengthen the organization

# Key Core Competencies

- Active clinician engagement & administrative alignment
- Performance measurement & management cycle
- Development & adoption of standards & guidelines
- Research & surveillance
- Public reporting & transparency in performance

AND

- Successful deployment of IM/IT solutions to support the transformation of cancer care & access to care which serves to support our other competencies



# *Active use of Health Information to Drive Disease Prevention/Management, Quality and Access*

- Disease Surveillance
- System planning (Ontario Cancer Plan 2008-2011)
- Program management and performance improvement
- Access and quality improvement (linking data and \$\$\$)
- Public Reporting  
(Ontario Cancer Plan Progress Report 2008-2009)
- Research (cancer imaging, health services research, population studies and experimental therapeutics)



# Principles for Data Collection

1

**All data must have a clear purpose and use (for clinicians, local and system-wide administrators and/or patients)**

2

**Information requirements driven by business – clinicians, administrators, scientists**

3

**Collect once, use many times**

4

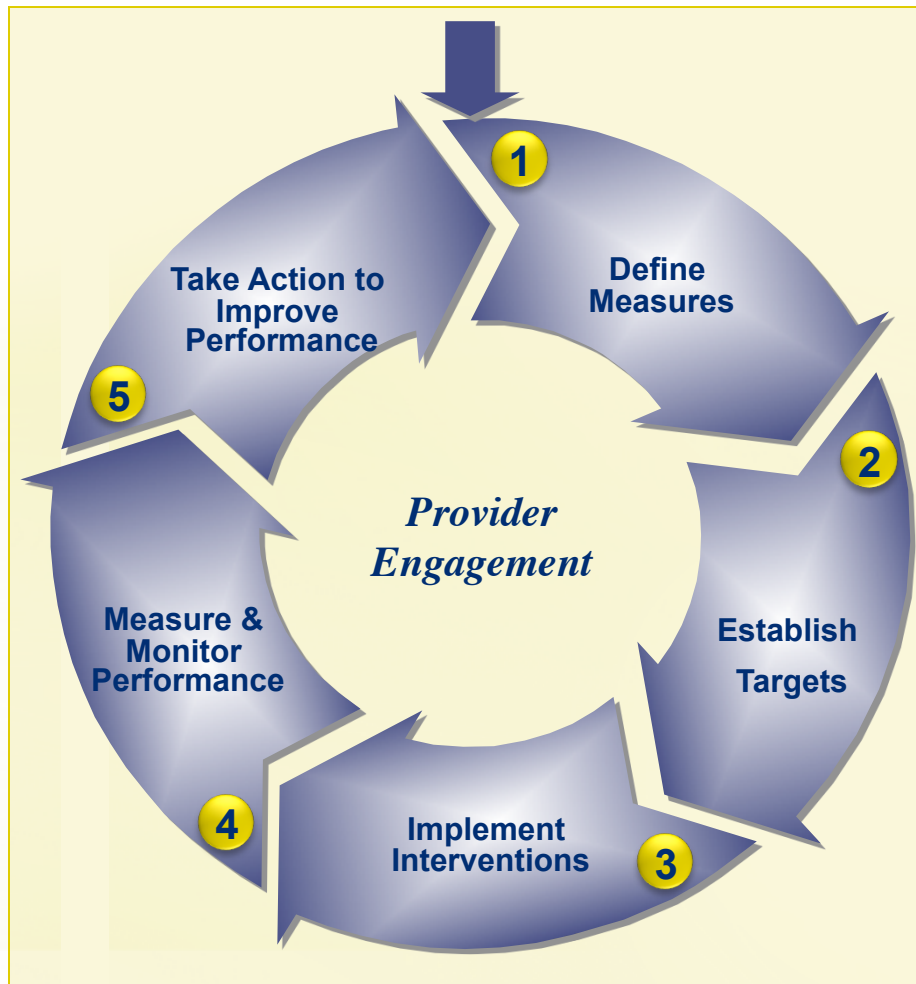
**Balance quality and utility**

5

**Wherever possible, integrate information collection into clinical processes**

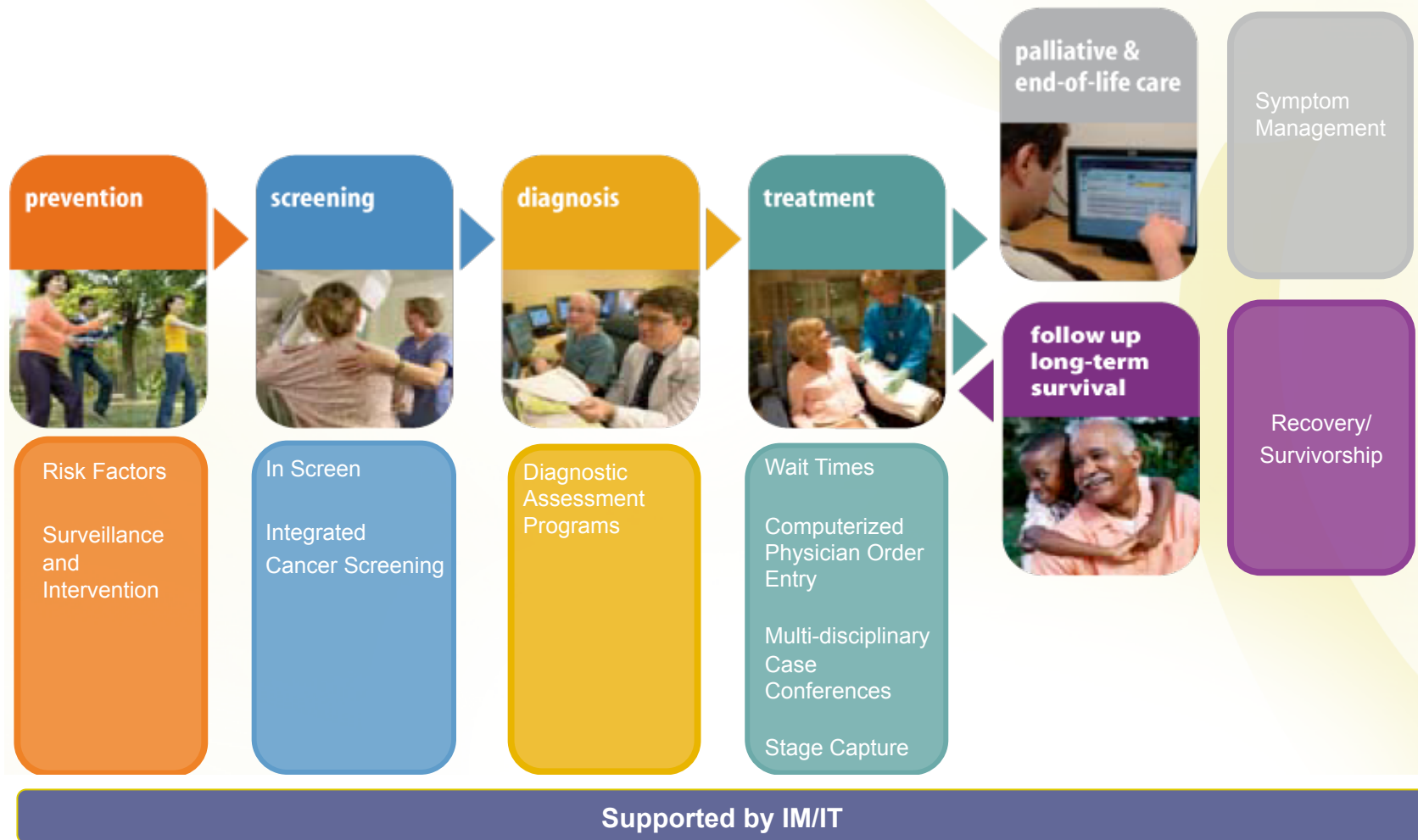
# Clinically Driven From Data to Information to Action

## Set Goals



- 1 DEFINE MEASURES
- 2 ESTABLISH TARGETS
- 3 IMPLEMENT INTERVENTIONS
- 4 MEASURE & MONITOR PERFORMANCE
- 5 TAKE ACTION TO IMPROVE PERFORMANCE

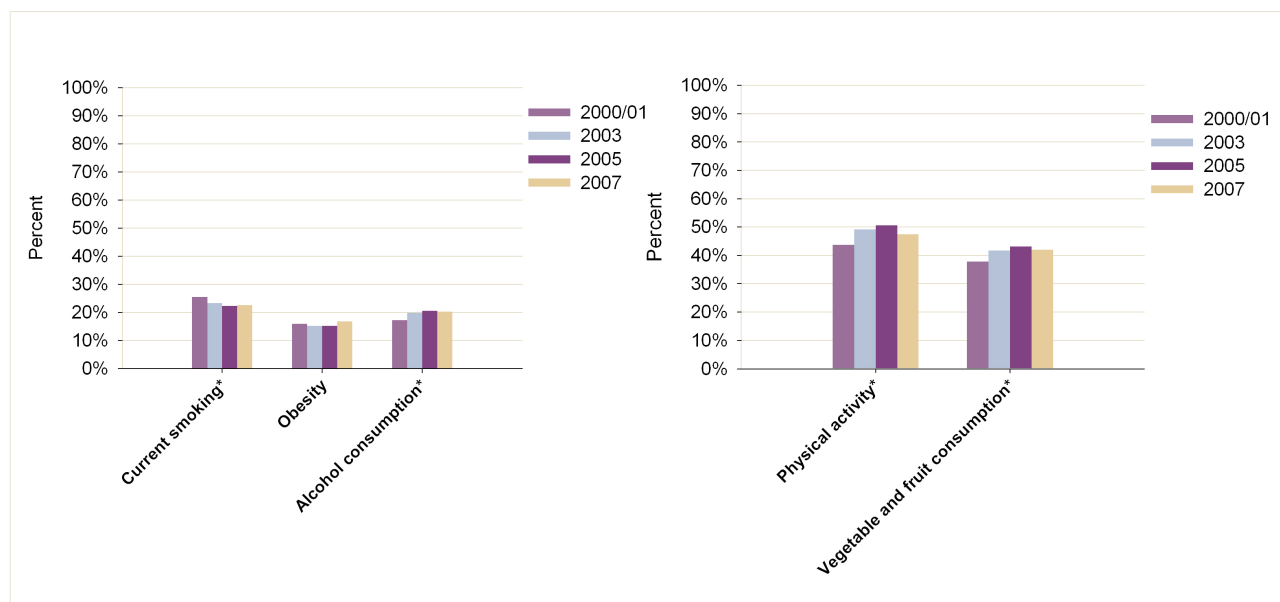
# CCO's disease pathway management approach



# Prevention: Risk Factors

## Selected Modifiable Cancer Risk Factors

Percentages of Ontario adults self-reporting selected modifiable cancer risk factors, Ontario, by year



**Report date:** February, 2009

**Data source:** Statistics Canada (Canadian Community Health Survey 2000/01, 2003, 2005, 2007)

**Notes:** Rates are age-standardized to the 2001 Canadian population

\*2007 significantly different from 2000/01

Current smoking: daily or occasional smoker (aged 20+) who smoked at least 100 cigarettes in lifetime and at least 1 cigarette in the past 30 days

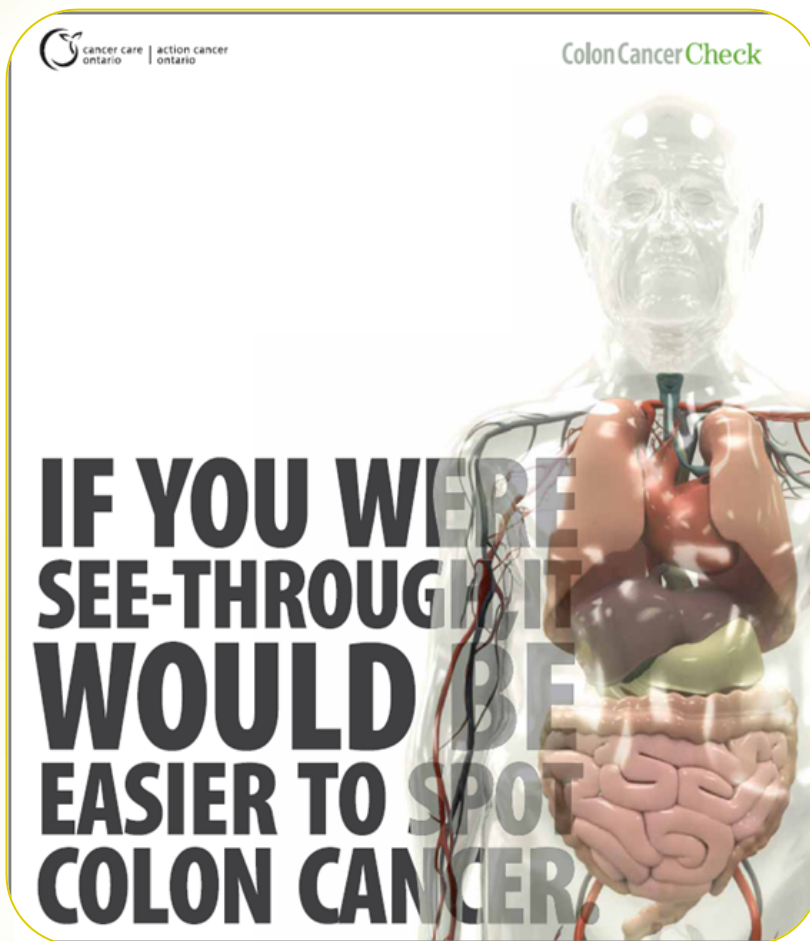
Obesity (aged 18+): Body Mass Index of 30 or greater. Body Mass Index (BMI) = weight in kilograms/(height in metres) square. Excludes pregnant and lactating women.

Alcohol consumption (aged 19+): proportion who do not follow the CAMH low-risk drinking guidelines: abstinence or < or equal to 2 drinks per day, and < or equal to 14 drinks for men or < or equal to 9 for women per week.

Vegetable and fruit consumption(aged 18+) > or equal to 5 times a day

Physical activity (aged 18+): average daily energy expenditure in leisure activities over the past 3 months > or equal to 1.5 kcal/kg/day

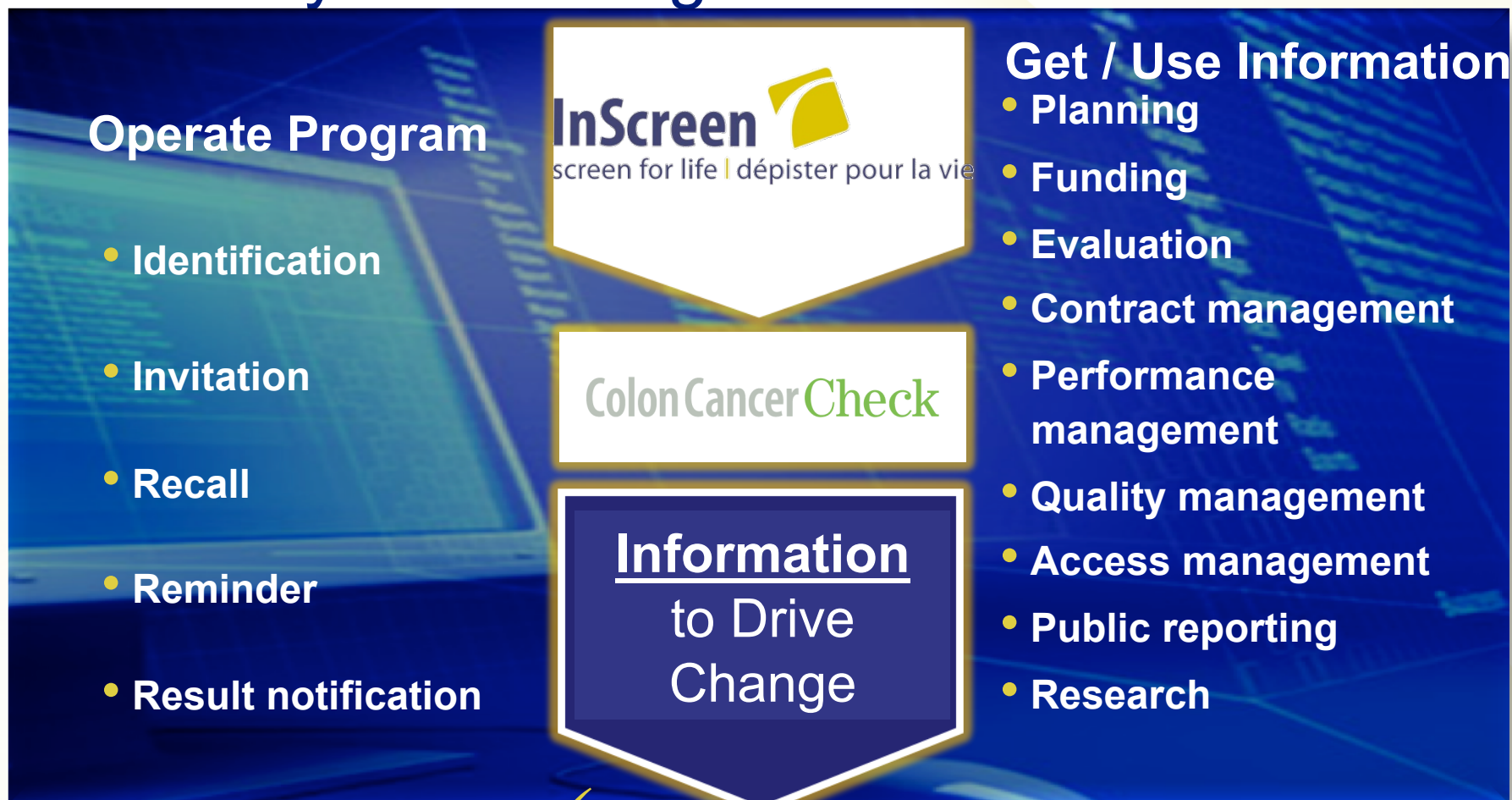
CSQI 2009



# Increasing screening rates for colorectal cancer



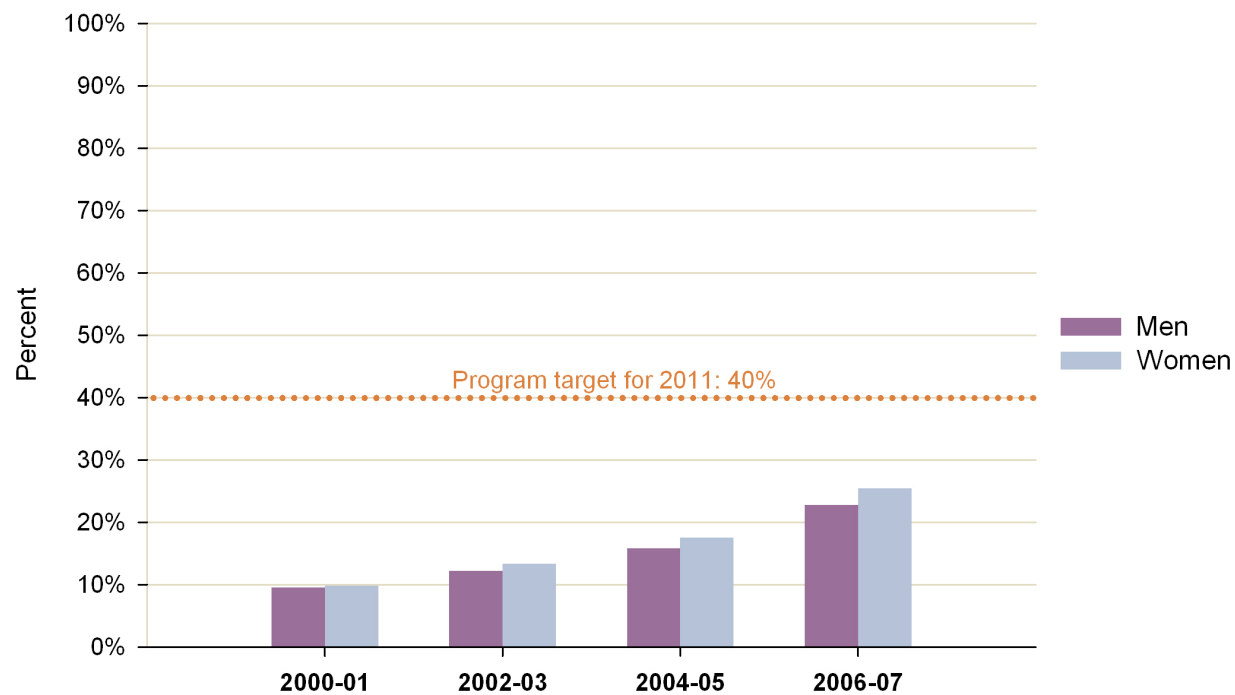
# Colon Cancer Check is using information to drive system change



- ✓ More Screening
- ✓ Better Screening
- ✓ Increased support for Primary Care

## Colorectal Cancer Screening (FOBT) Participation

Biennial fecal occult blood test (FOBT) participation (ages 50-74), 2000-2007, by sex



**Report date:** March, 2009

**Data source:** OHIP, Statistics Canada

**Prepared by:** ICES

**Notes:** Rates are standardized to the 1991 Canadian population

CSQI 2009

# Diagnostic Assessment Program

## Diagnostic Processes (DP)

- Create central access point for all lung & CRC diagnosis and staging in province
- Work with regions to develop DPs that are:
  - tailored to regional needs
  - built around PEBC guidelines & validated clinical pathways
  - built to capture quality indicators

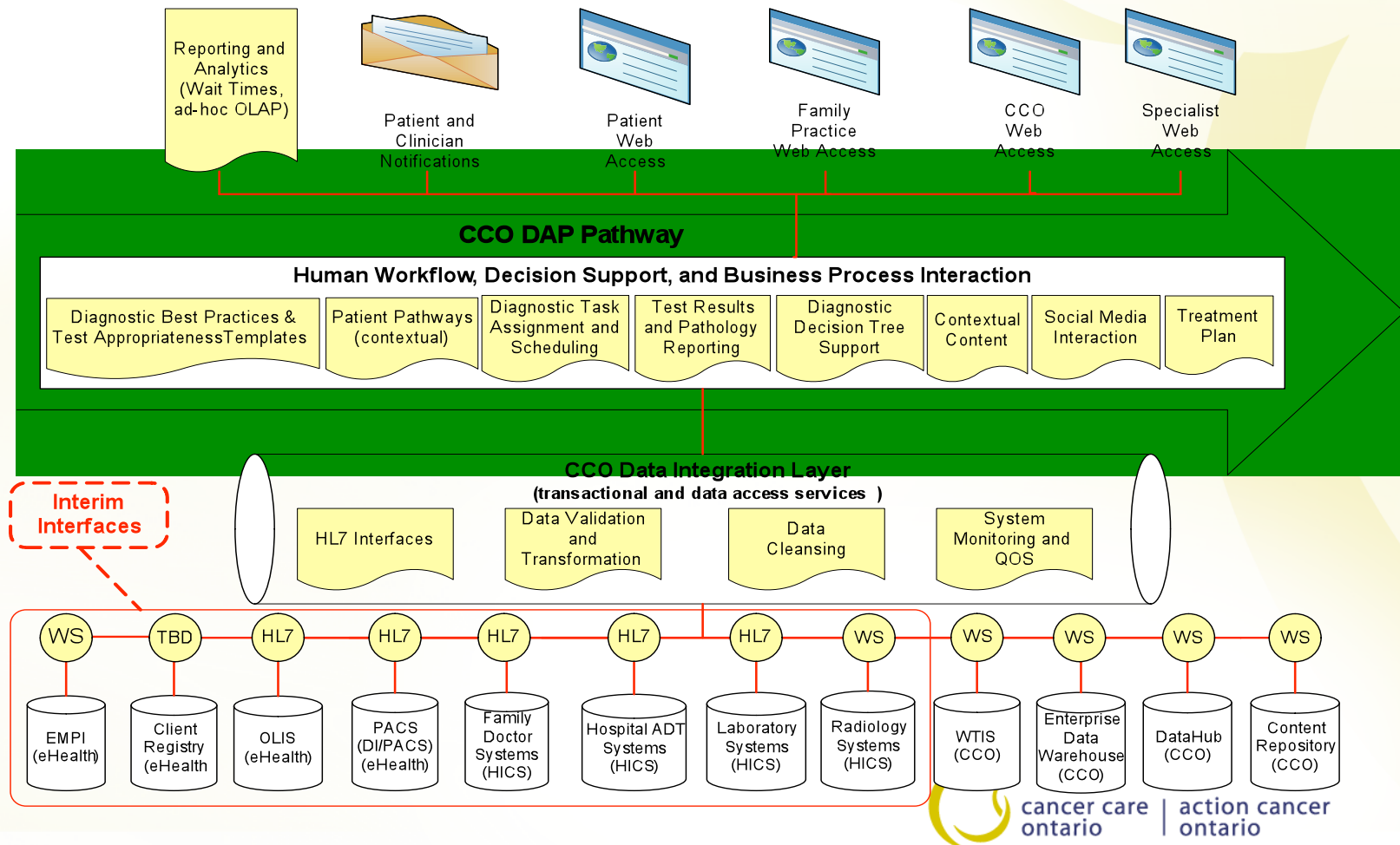
## Wait Time

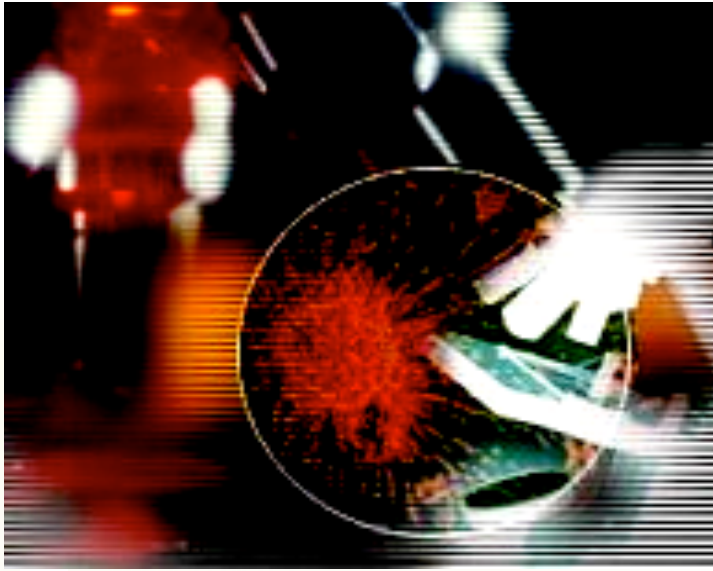
- Define & validate beginning and end of diagnostic phase
- Identify quality indicators to assist with tracking and measuring of wait time data and best practices
- Create structure/process to capture diagnostic wait time indicators
- Develop priorities in diagnostic testing

## Electronic Pathway Solution

- Develop an electronic navigation and workflow tool to assist family doctors, patients and diagnosticians:
  - Understand and navigate the diagnostic journey
  - Connect to same content management systems for review of test results, scheduling and next steps
  - Assist family doctors with patient management
  - Reduce wait times, testing overlap and patient anxiety
  - Provide access to relevant community and psychosocial supports

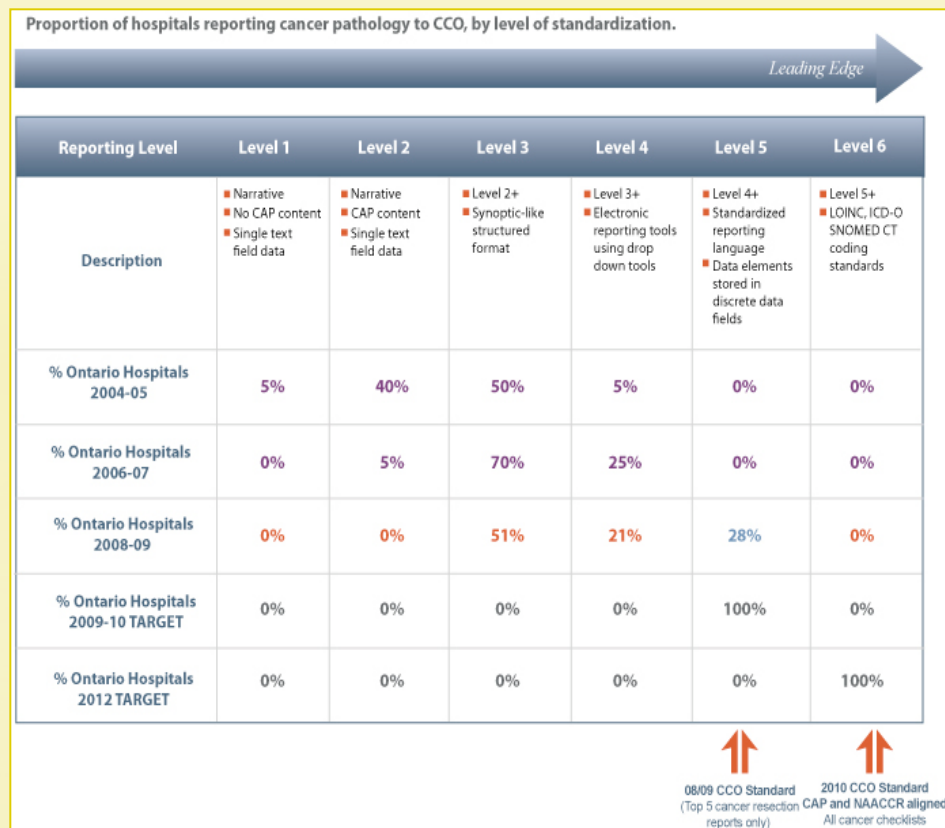
# DAP Electronic Pathway Solution – An Early Conceptual Architecture





# Improving the quality and completeness of cancer stage data collection and cancer pathology reporting

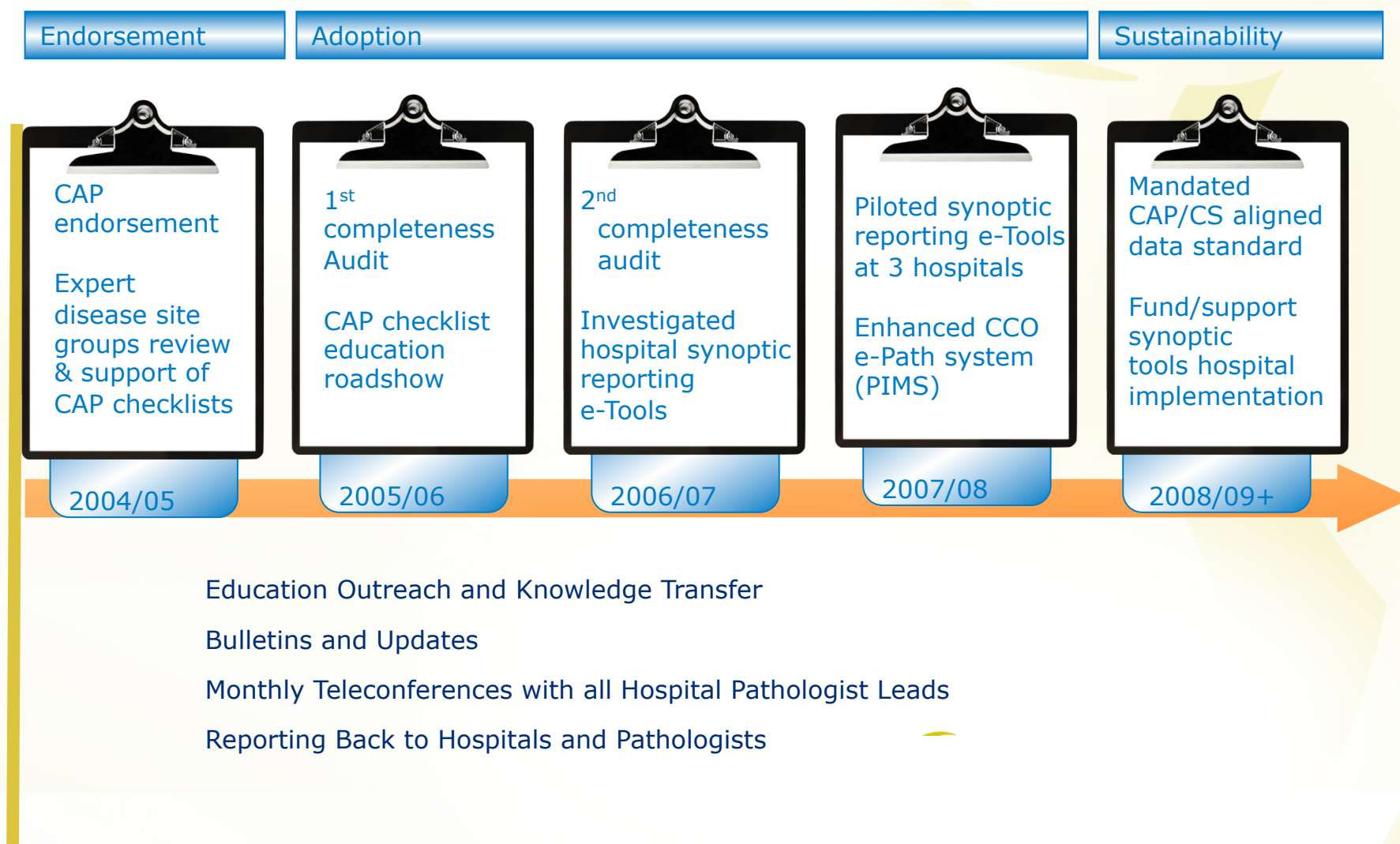
# Pathology Information Management System (PIMS) – Automates Cancer Pathology Reporting to Improve Data Timeliness, Completeness and Quality



\*Breast, Colorectal, Lung, Prostate & Endometrium

- Pathology reports for five\* common cancers submitted electronically in standardized, synoptic format
- Almost all cancer is diagnosed through the combined efforts of surgeons & pathologists
- The thorough & clear recording of their findings ensures timely diagnosis, prognosis & best treatment choices for patients

# Implementing CAP reporting standard in Ontario has engaged pathologists across the province



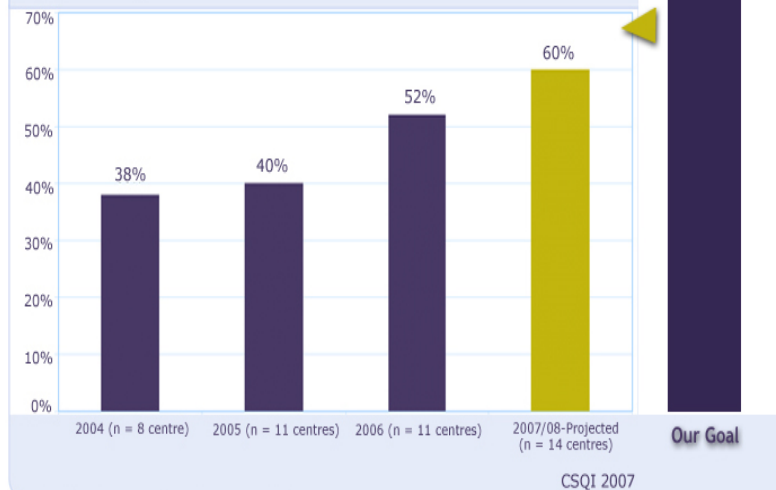


# Increasing safety for Ontario's chemotherapy patients

# Systemic Treatment Computerized Physician Order Entry (ST CPOE) system: Improving patient safety

## Use of Best Practice Drug Ordering Technology

Percent of Systemic Therapy Treatments Ordered Using Computerized Physician Order Entry (CPOE/OPIS)



Source: Cancer Care Ontario, New Drug Funding Program, Microstrategy

Notes:

1. While 3 new sites began implementation of CCO's CPOE/OPIS system in 2005, the full benefits of that implementation, including an increase in the percentage of chemotherapy drugs ordered on the system, were not realized until 2006.

Helps prevent approximately 8,500 drug errors, 750 hospitalizations, 500 physician office visits annually

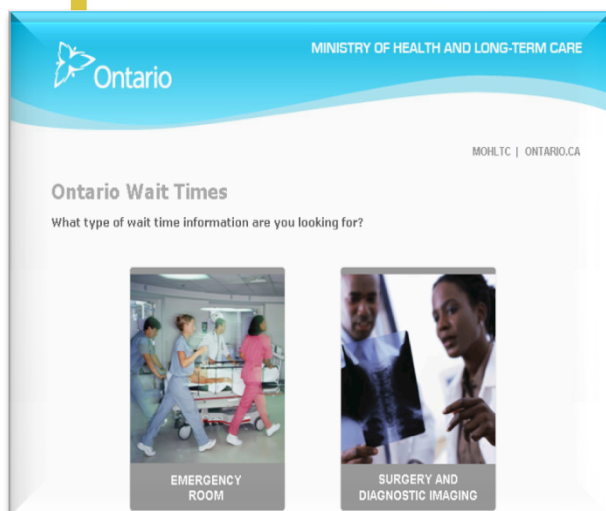
- Reduces prescription errors, offers clinical decision support to medical oncologists through the Oncology Patient Information System (OPIS) 2005 – CCO's ST CPOE system
- Our current successes
  - Used by more than 1,000 physicians, 750 nurses and 250 pharmacists serving 50,000 Ontario patients
  - 100% physician adoption rate (where deployed)
  - 250,000 orders placed annually through OPIS 2005 system



# Reducing Wait Times for Surgery and MRI/CT Scans in Ontario

# Wait Times Information System (WTIS): Public, Clinicians and Administration using information to make decisions

Information at the patient's fingertips



[www.ontariowaittimes.com](http://www.ontariowaittimes.com)

Consumer view of information  
Increased accountability

Transparency in wait times  
reporting

Simple steps for  
public to know waits  
in their area and  
adjacent areas

**Health Care Services**

This website shows the most currently available information about wait times in Ontario, including a breakdown by hospital. To search for specific health services, begin your search by selecting a service below and then clicking the Next Step button.

**Next Step**

Select a service area:

- GENERAL SURGERY
- CANCER SURGERY
- CARDIAC
- OPHTHALMOLOGY
- ORTHODONTICS
- DIAGNOSTIC SERVICES

Click on information about a service to continue your search.

**Procedure**

Select a procedure and click the Next Step button to continue your search.

**Step 1 of 4** **Step 2 of 4** **Step 3 of 4** **Step 4 of 4** **BACK** **NEXT STEP**

Select a procedure:

- Bone, Joint and Muscle Cancers
- Breast Cancer
- Eye Cancers
- Gastrointestinal Cancers (e.g. Esophagus, colon and stomach cancers)
- Gynecological Cancers (e.g. Bladder cancers)
- Head and Neck Cancers (Excluding brain)
- Liver and Pancreatic Cancers
- Lung Cancers
- Neurological Cancers (e.g. Brain and central nervous system)
- Prostate Cancers
- Thyroid and Endocrine

**Time Spent in Emergency Room Search Selection**

Select a search type to show your results:

**Find By MAP LOCATION** **Find By POSTAL CODE** **Find By LOCATION NAME** **Find By HOSPITAL NAME**

\*Please note that the ER information on this site is not real-time information and should not be used to assess the time you may spend in the ER. For more information, please visit [www.ontariowaittimes.com/understanding-wait-times](http://www.ontariowaittimes.com/understanding-wait-times).

If you experience any issues, please contact us at [waittimes@ontario.ca](mailto:waittimes@ontario.ca).

**Find by Postal Code**

Enter your postal code and the distance to search from it for hospitals in your area. Then click the Next Step button to show your results.

**Step 1 of 4** **Step 2 of 4** **Step 3 of 4** **Step 4 of 4** **BACK** **NEXT STEP**

Enter a Postal code: M5G 2L7 and search within a distance of: 10 km 15 km

If your search returns no results, your search measure and try again.  
\* enter a valid Ontario postal code.

**Search Results**

To better understand the data on this website, how it was calculated and its limitations, please read the [Understanding Wait Times](#) Section.

**View shortest wait times in the province for this service**

**Aug-Sep-Oct09**

| Hospital Name                                               | Approximate distance (km) | LHIN            | Wait time (days) |
|-------------------------------------------------------------|---------------------------|-----------------|------------------|
| <b>CANCER SURGERY</b>                                       |                           |                 |                  |
| <b>Neurological Cancers</b>                                 |                           |                 | 84 days          |
| <b>Provincial Target</b>                                    |                           |                 |                  |
| <b>Neurological Cancers</b>                                 |                           |                 | 59               |
| <b>Provincial Wait Time</b>                                 |                           |                 |                  |
| Sunnybrook Health Sciences Centre ** Special note (Toronto) | 7                         | Toronto Central | 25               |
| St. Michael's Hospital (Toronto)                            | 2                         | Toronto Central | 57               |
| Baycrest Centre for Geriatric Care (Toronto)                | 9                         | Toronto Central | NR/NS            |
| Bridgepoint Hospital (Toronto)                              | 3                         | Toronto Central | NR/NS            |
| Runnymede Healthcare Centre (Toronto)                       | 1                         | Toronto Central | NR/NS            |
| Salvation Army Toronto Grace Hospital (Toronto)             | 2                         | Toronto Central | NR/NS            |

# The Wait Time Information System Was Built

Wait Time Information System

Home | News | Public Reports | CPSO Search | Support | Terms and Conditions | Logout Selected profile: OGH - Dr. Cedric F...

**Home**

[Patient Search](#)  
[Waitlist Search](#)  
[Reports & Extracts](#)  
[Priority Assessment Tools](#)

**My Waitlist Entries** All Surgery/Service Approaching Access Target

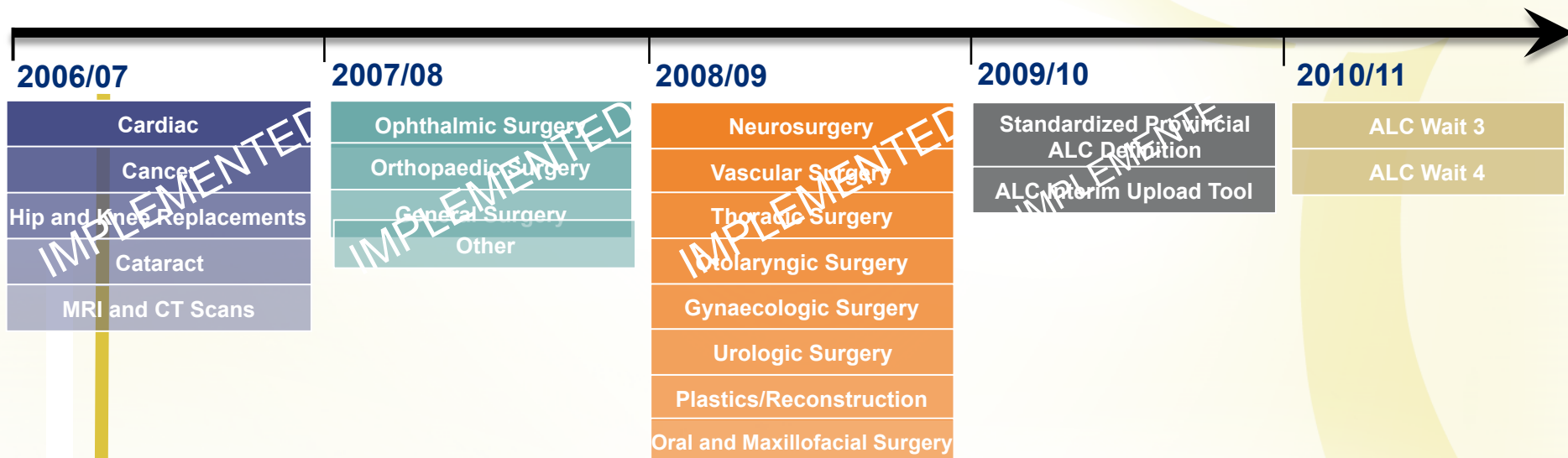
| Patient Name                             | Service                                                           | Site                    | Healthcare Professional       | Priority | Status | Access Target (Days) | Total Wait (Days) | Variance (Days) | NA |
|------------------------------------------|-------------------------------------------------------------------|-------------------------|-------------------------------|----------|--------|----------------------|-------------------|-----------------|----|
| <a href="#">Todd, Lucas Patrick</a>      | <a href="#">Oncology Procedures - Skin - Melanoma, Diagnostic</a> | East Community Hospital | Lejeune, Cedric Felix (34567) | 2        | Open   | 14                   | 20 52             | (6) 8)          |    |
| <a href="#">Boysen, Avery</a>            | <a href="#">Oncology Procedures - Skin - Melanoma, Diagnostic</a> | East Community Hospital | Lejeune, Cedric Felix (34567) | 2        | Open   | 14                   |                   |                 |    |
| <a href="#">Mayberry, Tristan Liam</a>   | <a href="#">Oncology Procedures - Skin - Melanoma, Diagnostic</a> | East Community Hospital | Lejeune, Cedric Felix (34567) | 2        | Open   | 14                   |                   |                 |    |
| <a href="#">Alinger, Cameron Ben</a>     | <a href="#">Oncology Procedures - Skin - Melanoma, Diagnostic</a> | East Community Hospital | Lejeune, Cedric Felix (34567) | 2        | Open   | 14                   |                   |                 |    |
| <a href="#">Horkan, Brooke Jada</a>      | <a href="#">Oncology Procedures - Skin - Melanoma, Diagnostic</a> | East Community Hospital | Lejeune, Cedric Felix (34567) | 2        | Open   | 14                   |                   |                 |    |
| <a href="#">Atcock, Sebastian Julian</a> | <a href="#">Oncology Procedures - Skin - Melanoma, Diagnostic</a> | East Community Hospital | Lejeune, Cedric Felix (34567) | 2        | Open   | 14                   |                   |                 |    |
| <a href="#">Sturm, Connor Mason</a>      | <a href="#">Oncology Procedures - Skin - Melanoma, Diagnostic</a> | East Community Hospital | Lejeune, Cedric Felix (34567) | 2        | Open   | 14                   |                   |                 |    |
| <a href="#">Ehler, Gavin Xavier</a>      | <a href="#">Oncology Procedures - Skin - Melanoma, Diagnostic</a> | East Community Hospital | Lejeune, Cedric Felix (34567) | 2        | Open   | 14                   | 1 31              | (1) 7)          |    |
| <a href="#">Looney, Mia</a>              | <a href="#">Oncology Procedures -</a>                             | East Community          | Lejeune, Cedric               |          |        |                      |                   |                 |    |

Surgeons can now see how many patients are waiting & take action to ensure they are being treated in a timely manner

# Seeing the Results in Lower Wait Times

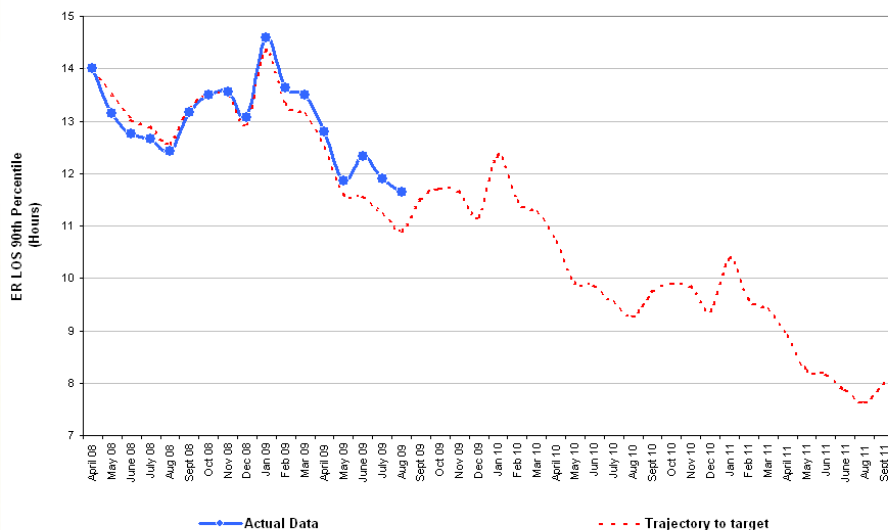
| 90 Percent Completed Within     |                                 |                                |                         |                                       |                      |                   |  |  |
|---------------------------------|---------------------------------|--------------------------------|-------------------------|---------------------------------------|----------------------|-------------------|--|--|
| Service                         | Baseline<br>(Days) <sup>1</sup> | Current<br>(Days)<br>(Oct. 09) | Access Target<br>(Days) | Percentage Completed<br>Within Target | Current vs. Baseline |                   |  |  |
|                                 |                                 |                                |                         |                                       | Net change (Days)    | Percentage change |  |  |
| General Surgery                 | 121                             | 113                            | 182                     | 97%                                   | -8                   | -6.6              |  |  |
| Cancer Surgery                  | 81                              | 63                             | 84                      | 95%                                   | -18                  | -22.2             |  |  |
| Angiography <sup>2</sup>        | 56                              | 30                             | –                       | –                                     | -26                  | -46.4             |  |  |
| Angioplasty <sup>2</sup>        | 28                              | 20                             | –                       | –                                     | -8                   | -28.6             |  |  |
| Bypass Surgery <sup>2</sup>     | 49                              | 58                             | 182                     | 100%                                  | 9                    | 18.4              |  |  |
| Ophthalmic Surgery <sup>3</sup> | 130                             | 118                            | 84-182                  | 98%                                   | -12                  | -9.2              |  |  |
| Cataract Surgery                | 311                             | 116                            | 182                     | 99%                                   | -195                 | -62.7             |  |  |
| Other ophthalmic surgery        | 114                             | 134                            | 84-182                  | 90%                                   | 20                   | 17.5              |  |  |
| Orthopaedic surgery             | 190                             | 178                            | 182                     | 91%                                   | -12                  | -6.3              |  |  |
| Hip replacement                 | 351                             | 166                            | 182                     | 93%                                   | -185                 | -52.7             |  |  |
| Knee replacement                | 440                             | 178                            | 182                     | 91%                                   | -262                 | -59.5             |  |  |
| Other orthopaedic surgery       | 175                             | 181                            | 182                     | 90%                                   | 6                    | 3.4               |  |  |
| MRI                             | 120                             | 115                            | 28                      | 41%                                   | -5                   | -4.2              |  |  |
| CT                              | 81                              | 43                             | 28                      | 81%                                   | -38                  | -46.9             |  |  |

# Wait Time Information System- continuing to expand beyond cancer

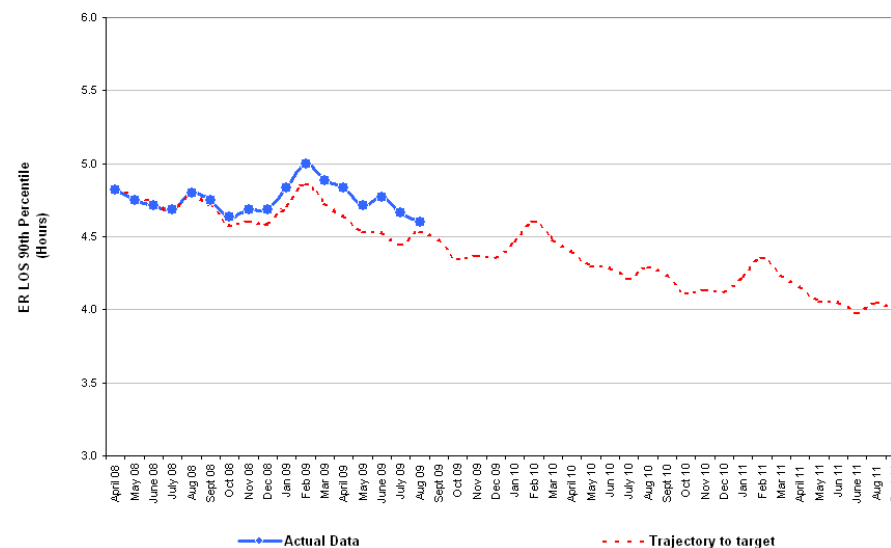


# Actual ER LOS Trend vs. Trajectory to Target

Time spent in the ER for Patients with complex conditions



Time spent in the ER for Patients with minor and uncomplicated conditions



- In August 2009, for Low Acuity patients, the gap between actual ER LOS (4.6 hours) and the trajectory to target (4.5 hours) is only 0.1 hours.
- ER LOS for High Acuity patients decreased in August 2009; however, it is still not on the trajectory target point of 10.9 hours.
- Typical seasonal peaks are during winter months; seasonal lows are summer months.
  - We expect to see a decrease for next month based on seasonal trend

# The importance of quality indicators: a call to action (CUAJ Editorial)

**EDITORIAL CUAJ • December 2009 • Volume 3, Issue 6 © 2009 Canadian Urological Association**

This topic (USE OF QUALITY INDICATORS), triggered in part by a recent Cancer Care Ontario

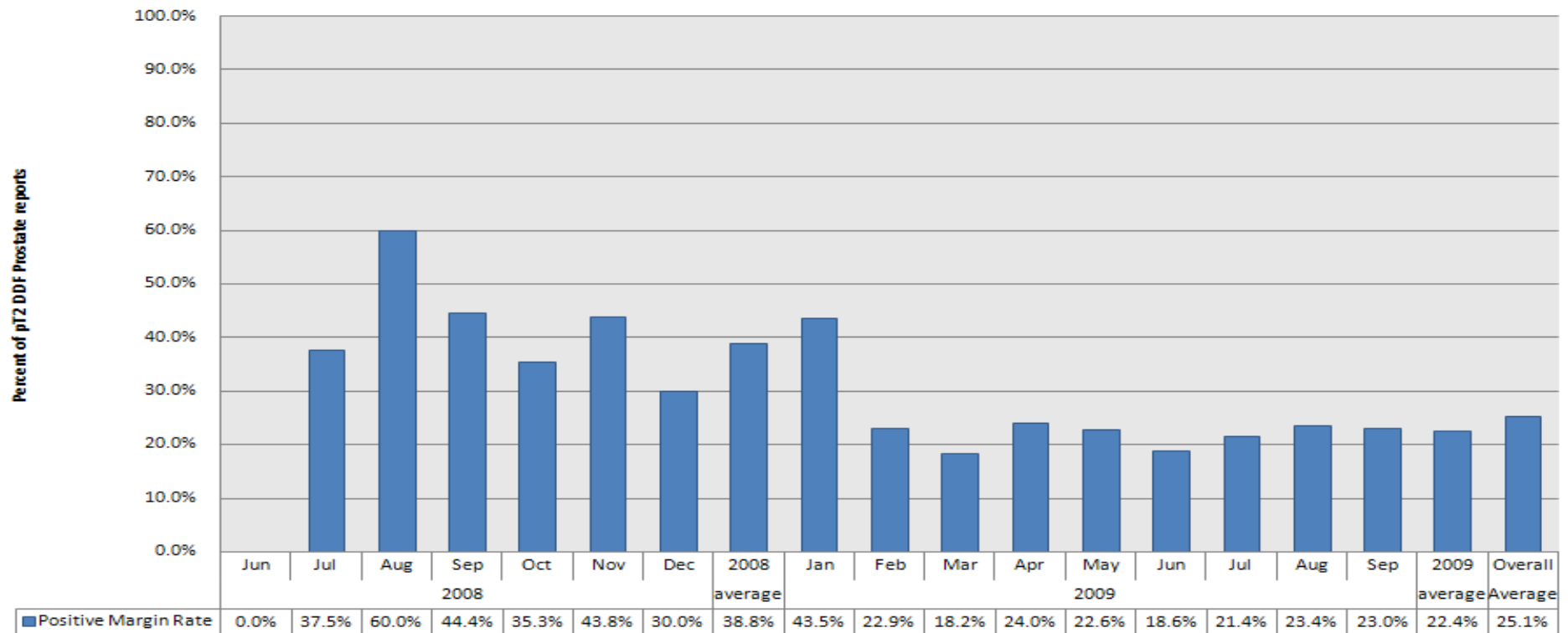
(CCO) report of positive margin rates in radical prostatectomies, was of profound interest at the January 2009 Issues & Controversies in Prostate Care (ICPC) conference, an annual educational program for Canadian physicians involved in the care of patients with prostate diseases. Similar to the successful quality-improvement initiatives by CCO in colorectal and ovarian cancer surgery, the hope was that by identifying any inconsistencies across health regions in the number and measurable outcomes of radical prostatectomies as compared against “accepted or reasonable standards,” the quality of surgeries and their oncologic and functional outcomes could be improved.

GUIDELINE FOUND AT: <http://www.cancercare.on.ca/pdf/pebc17-3f.pdf>

# Prostate Margin Rate Audit

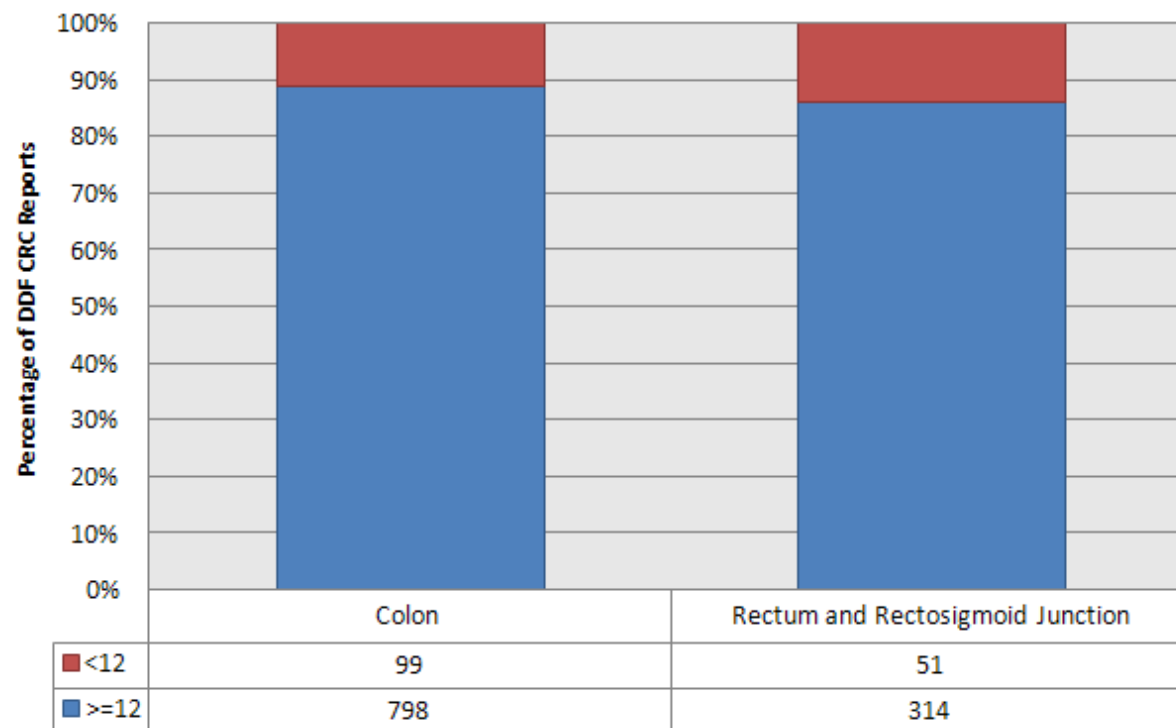
Positive Surgical Margin Rate for Radical Prostatectomies for pT2 Patient Overall Since Synoptic Pathology "Go Live Date" to Sept. 2009

Percent of Discrete Synoptic Prostate resection reports with positive pT2 margins since "Go-Live" to September 2009



# Colorectal surgical pathology indicators are now available monthly

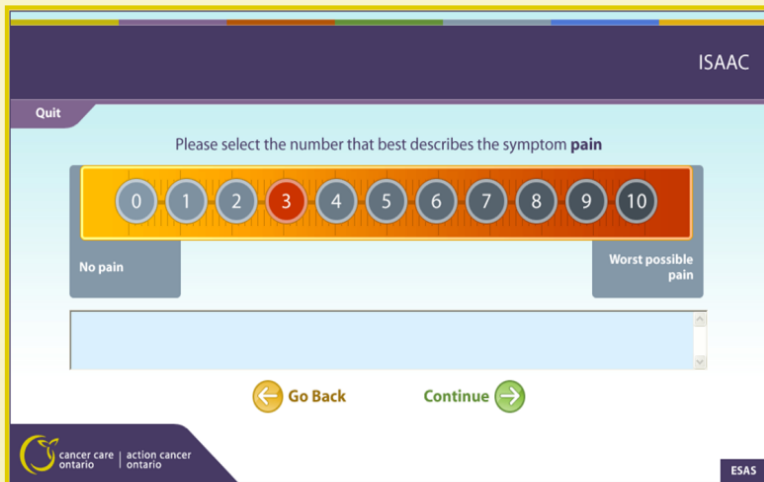
Percent of Discrete Synoptic CRC Resection reports with 12 or more nodes examined since "Go-Live" to September 2009



# Centers performing Breast Surgery but not SLNB

| Hospitals with > 30 Breast Surgeries |                                                                                                                                                                      | Hospitals with < 30 Breast Surgeries                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                      |
|--------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| LHIN                                 | Hospital                                                                                                                                                             | Hospital                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                      |
| 1                                    | <ul style="list-style-type: none"> <li>Leamington District Hospital</li> </ul>                                                                                       |                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                      |
| 2                                    | <ul style="list-style-type: none"> <li>Listowel Memorial Hospital</li> </ul>                                                                                         | <ul style="list-style-type: none"> <li>Alexandra Marine &amp; General Hospital</li> <li>Four Counties Health Services</li> <li>Clinton Public Hospital</li> <li>Grey Bruce Health Services (Markdale &amp; Wiarton)</li> <li>Hanover &amp; District Hospital</li> </ul> | <ul style="list-style-type: none"> <li>Seaforth Community Hospital</li> <li>South Bruce Grey Health Center (Walkerton &amp; Kincardine)</li> <li>South Huron Hospital</li> <li>St. Mary's Memorial Hospital</li> <li>Strathroy-Middlesex General Hospital</li> </ul> |
| 3                                    |                                                                                                                                                                      | <ul style="list-style-type: none"> <li>Groves Memorial Community Hospital</li> <li>North Wellington Health Care (Mount Forest &amp; Louise Marshall)</li> </ul>                                                                                                         |                                                                                                                                                                                                                                                                      |
| 4                                    | <ul style="list-style-type: none"> <li>Hamilton General Hospital</li> <li>Niagara Health System – Greater Niagara</li> <li>West Lincoln Memorial Hospital</li> </ul> | <ul style="list-style-type: none"> <li>Haldimand War Memorial Hospital</li> <li>West Haldimand General Hospital</li> </ul>                                                                                                                                              |                                                                                                                                                                                                                                                                      |
| 8                                    |                                                                                                                                                                      | <ul style="list-style-type: none"> <li>Stevenson Memorial Hospital</li> </ul>                                                                                                                                                                                           |                                                                                                                                                                                                                                                                      |
| 10                                   | <ul style="list-style-type: none"> <li>Brockville General Hospital</li> </ul>                                                                                        | <ul style="list-style-type: none"> <li>Lennox and Addington County General Hospital</li> </ul>                                                                                                                                                                          |                                                                                                                                                                                                                                                                      |
| 11                                   | <ul style="list-style-type: none"> <li>Hopital Monfort</li> </ul>                                                                                                    | <ul style="list-style-type: none"> <li>Almonte General Hospital</li> <li>Arnprior and District Memorial Hospital</li> </ul>                                                                                                                                             | <ul style="list-style-type: none"> <li>Hawkesbury and District Hospital</li> </ul>                                                                                                                                                                                   |
| 12                                   |                                                                                                                                                                      | <ul style="list-style-type: none"> <li>Huron District Hospital</li> </ul>                                                                                                                                                                                               |                                                                                                                                                                                                                                                                      |
| 13                                   | <ul style="list-style-type: none"> <li>Sault Area Hospital</li> </ul>                                                                                                | <ul style="list-style-type: none"> <li>Anson General Hospital</li> <li>Espanola General Hospital</li> <li>Kirkland and District Hospital</li> <li>Lady Dunn</li> </ul>                                                                                                  | <ul style="list-style-type: none"> <li>Lady Mnto</li> <li>Sensenbrenner Hospital</li> <li>St. Joseph's General Hospital – Elliot Lake</li> <li>Weeneebayko General Hospital</li> </ul>                                                                               |
| 14                                   |                                                                                                                                                                      | <ul style="list-style-type: none"> <li>Dryden Regional Health Centre</li> <li>Geraldton District Hospital</li> <li>Lake of the Woods District Hospital</li> </ul>                                                                                                       | <ul style="list-style-type: none"> <li>McCausland Hospital</li> <li>Sioux Lookout Meno Ya Win Health Centre</li> <li>Temiskaming Hospital</li> </ul>                                                                                                                 |

# Symptom Management: Empowering Patients to Manage their Symptoms



- ISAAC is an easy-to-use electronic tool that puts cancer patients in control of their own symptoms
  - Allows patients to track their symptoms over time
  - Notifies appropriate clinicians when the scores exceed certain parameters
- ISAAC is web-based, patients can access where internet connection is available
- Currently piloting Tele-ISAAC
  - A new telephone access option for patients

# Ontario Renal Network

## Program of Work – Core Elements Going into 2010...

1.  
Provincial  
Program  
Management

2.  
Regional Program  
Management

3.  
Performance  
Measurement &  
Management

4.  
Information  
Technology

5.  
Communications  
and Stakeholder  
Relations

# Cancer System Provincial Scorecard December 2009

| Region                         | RADIATION<br>Apr-Sept 2009           |                                    |              |                                            | SYSTEMIC<br>Ref-Con = Apr-Sept 2009<br>Con-Tr = Jul-Sept 2009 |                                     |              |                                            | SURGERY<br>Apr-Sept 2009 |              |                |                                            | COLONOSCOPY<br>WT & Vol = Apr-Sept 2009<br>Participation = 2006-2007 |                           |     |                                            |                             | STAGE<br>Rate = Apr-Jan 2009<br>% Hosp = at Q2 ending |                                      | PATHOLOGY<br># hosp = at Q2 ending<br>% Complete = Sept 09 |                     | SYMPTOM MGMT<br>Jul-Sept 2009 |              | THORACIC<br>Apr-Mar 08 | MCC<br>Q2<br>Ending<br>09/10 | RSTP<br>Safe<br>Handling<br>as of<br>Nov 09 | Overall<br>Provincial<br>Rank | Change<br>from<br>Previous<br>Rank |
|--------------------------------|--------------------------------------|------------------------------------|--------------|--------------------------------------------|---------------------------------------------------------------|-------------------------------------|--------------|--------------------------------------------|--------------------------|--------------|----------------|--------------------------------------------|----------------------------------------------------------------------|---------------------------|-----|--------------------------------------------|-----------------------------|-------------------------------------------------------|--------------------------------------|------------------------------------------------------------|---------------------|-------------------------------|--------------|------------------------|------------------------------|---------------------------------------------|-------------------------------|------------------------------------|
|                                | WT<br>Ref-Con<br>(% w/in 14<br>days) | WT<br>RTT-Tr<br>(% w/in<br>target) | Vol<br>(CIR) | % of<br>Budgeted<br>Vol in the<br>Province | WT<br>Ref-Con<br>(% w/in 14<br>days)                          | WT<br>Con-Tr<br>(% w/in 14<br>days) | Vol<br>(CIS) | % of<br>Budgeted<br>Vol in the<br>Province | WT<br>(% w/in<br>target) | WT<br>(90th) | Vol<br>(cases) | % of<br>Budgeted<br>Vol in the<br>Province | WT<br>(FOBT+)                                                        | WT<br>(Family<br>History) | Vol | % of<br>Budgeted<br>Vol in the<br>Province | FOBT<br>Participati<br>on * | Combined<br>Rate                                      | % Hosp.<br>Collaborati<br>ve Staging | % Hospitals<br>Discrete<br>Path Report                     | % Complete-<br>ness | Lung                          | All<br>Other |                        |                              |                                             |                               |                                    |
| PROVINCE                       | ▼                                    | ▲                                  | ▲            | 100%                                       | ▲                                                             | ▼                                   | ▼            | 100%                                       | ▼                        | ▼            | ▼              | 100%                                       | ▼                                                                    | ▲                         | ▲   | 100%                                       |                             | ▲                                                     |                                      |                                                            |                     |                               |              | ▲                      |                              |                                             |                               |                                    |
| Waterloo<br>Wellington         | ▼                                    | ▲                                  | ▼            | 4%                                         | ▼                                                             | ▲                                   | ▼            | 5%                                         | ▼                        | ▼            | ▲              | 4%                                         | ▼                                                                    | ▲                         | ▲   | 6%                                         |                             | ▲                                                     |                                      |                                                            |                     |                               |              | ▲                      |                              |                                             | 1                             | 0                                  |
| North West                     | ▼                                    | ▲                                  | ▲            | 2%                                         | ▼                                                             | ▲                                   | ▼            | 4%                                         | ▼                        | ▼            | ▲              | 2%                                         | ▼                                                                    | ▼                         | ▲   | 3%                                         |                             | ▲                                                     |                                      |                                                            |                     |                               |              | —                      |                              |                                             | 2                             | 2                                  |
| Central                        | ▲                                    | n/a                                | ▲            | 0.2%                                       | ▼                                                             | ▲                                   | ▲            | 2%                                         | ▼                        | ▼            | ▼              | 11%                                        | ▲                                                                    | ▲                         | ▼   | 12%                                        |                             | ▲                                                     |                                      |                                                            |                     |                               |              | ▲                      |                              |                                             | 3                             | -1                                 |
| Erie St. Clair                 | ▼                                    | ▲                                  | ▲            | 3%                                         | ▲                                                             | ▼                                   | ▼            | 4%                                         | ▼                        | ▼            | ▲              | 4%                                         | ▼                                                                    | ▲                         | ▼   | 9%                                         |                             | ▼                                                     |                                      |                                                            |                     |                               |              | —                      |                              |                                             | 4                             | 2                                  |
| North Simcoe<br>Muskoka        | ▲                                    | ▲                                  | ▼            | 1%                                         | ▼                                                             | ▼                                   | ▲            | 6%                                         | ▲                        | ▼            | ▼              | 1%                                         | n/a                                                                  | n/a                       | n/a | n/a                                        |                             | ▲                                                     |                                      |                                                            | n/a                 |                               |              | —                      |                              |                                             | 5                             | -2                                 |
| North East                     | ▲                                    | ▲                                  | ▲            | 5%                                         | ▼                                                             | ▼                                   | ▼            | 4%                                         | ▲                        | ▲            | ▼              | 1%                                         | ▼                                                                    | ▼                         | ▲   | 5%                                         |                             | ▲                                                     |                                      |                                                            |                     |                               |              | ▼                      |                              |                                             | 6                             | 3                                  |
| Hamilton NHB                   | ▼                                    | ▼                                  | ▲            | 12%                                        | ▲                                                             | ▲                                   | ▼            | 9%                                         | ▼                        | ▼            | ▼              | 9%                                         | ▼                                                                    | ▼                         | ▼   | 15%                                        |                             | ▼                                                     |                                      |                                                            |                     |                               |              | —                      |                              |                                             | 7                             | -2                                 |
| South East                     | ▲                                    | ▼                                  | ▲            | 4%                                         | ▲                                                             | ▲                                   | ▼            | 5%                                         | ▲                        | ▼            | ▲              | 4%                                         | ▲                                                                    | ▲                         | ▲   | 6%                                         |                             | ▲                                                     |                                      |                                                            |                     | n/a                           |              | —                      |                              |                                             | 8                             | 0                                  |
| Toronto Central<br>PMH         | ▲                                    | ▲                                  | ▼            | 24%                                        | ▼                                                             | ▲                                   | ▲            | 17%                                        | ▼                        | ▼            | ▼              | 20%                                        | ▲                                                                    | ▼                         | ▼   | 4%                                         |                             | ▲                                                     |                                      |                                                            |                     | n/a                           |              | ▲                      |                              |                                             | 8                             | -1                                 |
| Champlain                      | ▲                                    | ▲                                  | ▼            | 11%                                        | ▲                                                             | ▼                                   | ▲            | 11%                                        | ▼                        | ▼            | ▼              | 10%                                        | ▲                                                                    | ▲                         | ▼   | 10%                                        |                             | ▲                                                     |                                      |                                                            | n/a                 |                               |              | ▲                      |                              |                                             | 10                            | 1                                  |
| South West                     | ▲                                    | ▲                                  | ▲            | 9%                                         | ▼                                                             | ▼                                   | ▼            | 11%                                        | ▼                        | ▲            | ▼              | 11%                                        | ▲                                                                    | ▼                         | ▼   | 6%                                         |                             | ▲                                                     |                                      |                                                            |                     | n/a                           |              | ▲                      |                              |                                             | 11                            | 3                                  |
| Toronto Central<br>Odette      | ▲                                    | ▲                                  | ▼            | 16%                                        | ▲                                                             | ▼                                   | ▲            | 12%                                        | ▼                        | —            | ▼              | 8%                                         | ▲                                                                    | ▲                         | ▼   | 3%                                         |                             | ▼                                                     |                                      |                                                            |                     |                               |              | ▼                      |                              |                                             | 12                            | -1                                 |
| Central East                   | ▼                                    | ▲                                  | ▲            | 4%                                         | ▲                                                             | ▲                                   | ▼            | 6%                                         | ▲                        | ▼            | ▼              | 3%                                         | ▼                                                                    | ▲                         | ▲   | 14%                                        |                             | ▲                                                     |                                      |                                                            |                     |                               |              | ▼                      |                              |                                             | 13                            | 0                                  |
| Central West &<br>Miss. Halton | ▼                                    | ▲                                  | ▲            | 4%                                         | ▲                                                             | ▼                                   | ▼            | 5%                                         | ▲                        | ▼            | ▼              | 12%                                        | n/a                                                                  | n/a                       | n/a | 6%                                         |                             | ▼                                                     |                                      |                                                            | n/a                 |                               |              | ▼                      |                              |                                             | 14                            | -4                                 |

## Note:

- Overall Provincial Ranking is the sum of all rankings relative to all other Regions normalized to number of measures available. Collaborative Staging and Pathology indicators are excluded from this calculation as implementation is scheduled at different times for hospitals.
- Cancer surgery ranking is based on provincial performance, not LHIN targets.
- The previous scorecard (October 2009) include the following measures: Radiation Apr-Jul 09, Systemic Ref-Con Apr-Jul 09, Systemic Con-Tr Jul 09, Surgery WT Apr-Jul 09, Surgery Vol Apr-Jun 09, Colonoscopy Apr-Jul 09, FOBT Participation 2006-07, Stage Rate Apr-Nov 08, Symptom Management Apr-Jun 09, Thoracic Apr-Jan 09, MCC Q4. Note that the MCC indicator is different in this scorecard.
- An asterisk (\*) in the header means the data in the current scorecard is the same as the previous one.
- There is no trend symbol for data being measured for the first time in the scorecard.

## Performance against the regional target

- Not meeting target
- Not meeting target, but improving or meeting provincial target
- Meeting or within 2% of target. If the region has a stretch target, it is within 5%.

## Performance against the previous scorecard

- ▲ Improved
- ▼ Decreased
- No change



# Conclusion

- Despite recent media attention that may suggest otherwise, Ontario has made significant progress in eHealth.
- Common elements of successes at CCO include:
  - Ensuring that IT/IM innovation is addressing a specific use (access, quality, patient, program)
  - Moving forward with 'good' solution even if not 'perfect'
  - Letting experience guide improvements
- Our imperatives going forward are:
  - Advance disease pathway innovations for cancer
  - Advance measuring/reporting wait times and access to care
  - Improve disease pathway management for renal disease

Questions?