# Placing Patients First: Continuous Improvement in Care - Cancer (CIC Cancer) Project



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Clinical

Leaders

Hospital

Managers

Researchers

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Conference Theme: From Volume to Value

### Currently...

- © Cancer is the largest contributor to disease burden in Australia and a leading cause of death in elderly Australians
- © There are increasing levels of cancer-related hospitalisations (44% more between 2001-2014) and expenditure on hospital-based care (\$800m more in 2012-2013 versus 2004-2005)
- © Rising health care costs do not necessarily correspond with better patient outcomes

#### We are...

© Aiming to bring value-based healthcare (VBHC) into cancer care in public and private hospital settings within Western Australia to help drive improvements in care and patient outcomes. To the best of our knowledge, this is the first time that VBHC processes have been implemented simultaneously across multiple hospitals in both the public and private healthcare sectors

Consumers

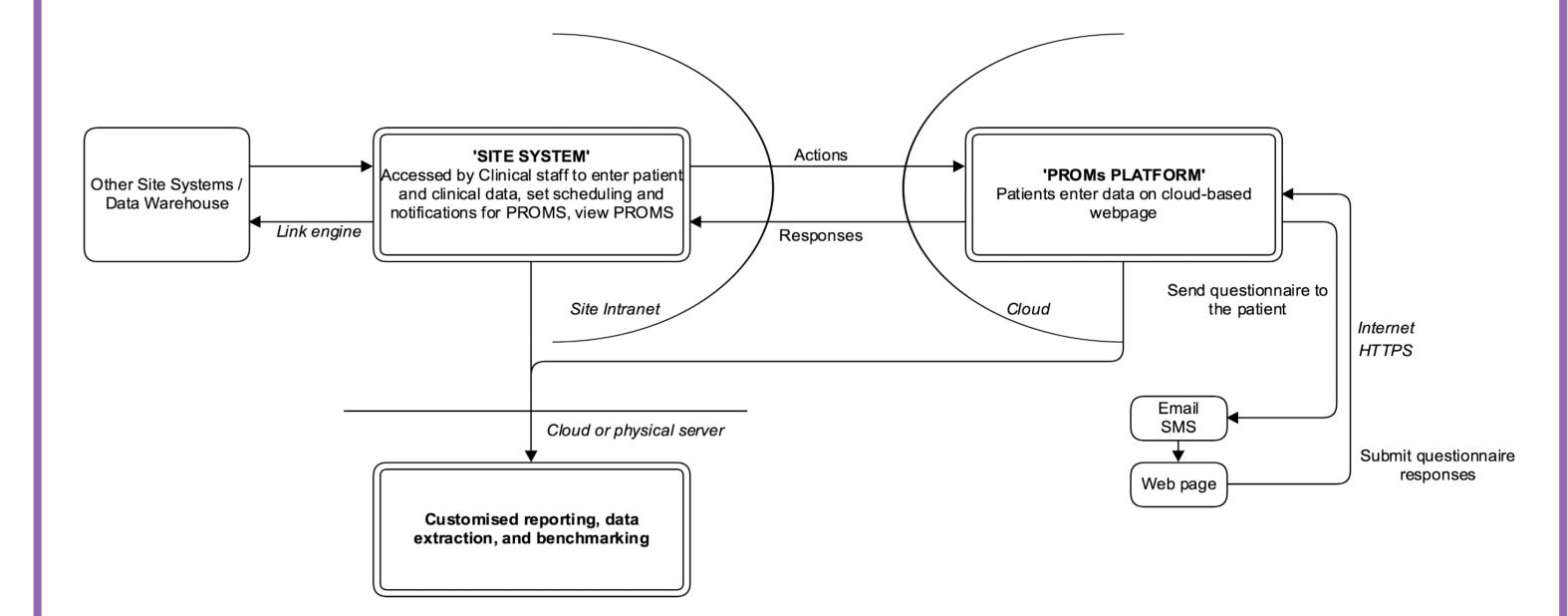
Service

**Providers** 

- © Involving key stakeholders in a major project to measure outcomes important to patients
- © Using datasets established by the International Consortium for Health Outcomes Measurement (ICHOM) to capture clinical and patient-reported outcomes measures (PROMs) after diagnosis with breast, prostate, colorectal, or lung cancer
- © Developing a similar dataset for patients diagnosed with less common and poorer outcome ovarian cancer
- © Creating a web-based environment to collect/extract/integrate data to enable purposeful application of the collected information
- © Evaluating this data to generate hypotheses and implement interventions within a trial framework
- © Increasing capacity for health systems and outcomes research
- © Evaluating the impact of the implementation, including health economics evaluation

#### We have already...

- © Engaged 5 hospital sites (both public and private) and clinical champions across 5 cancer types
- © Implemented a consumer reference group
- © Implemented project planning, governance, and ethics processes
- © Commenced communications and marketing activities (www.ciccancer.com)
- © Commenced implementation of an informatics platform, including identification and mapping of data needs and flows



- © Commenced development of an agreed clinical and PROMs dataset for ovarian cancer with potential links back to ICHOM
- © Implemented a pilot study to capture PROMs in women with breast cancer
- © Collaborated with ICHOM, All.Can and the Organisation for Economic Co-operation and Development (OECD)
- © Implemented postgraduate research training activities

#### In the future, we hope to...

- © Demonstrate a proof-of-principle in which comprehensive cancer care is affordable, accessible, evidencebased and able to continually improve patient outcomes
- © Provide a benchmark for patient outcomes to which cancer treatments are compared against for effectiveness and cost-benefit
- © Provide a template for bettering the long-term monitoring and treatment of other chronic medical conditions such as cardiovascular disease, asthma, and diabetes

## The CIC Cancer project involves...

#### **Engagement**

- Assemble a VBHC transition project team – clinicians, consumers, researchers,
- Pilot trials
- Incorporate research studies aimed at improving care

State/National Benchmarks

Develop new initiatives to

Adoption of evidence based

improve outcomes

Data standardisation

project managers, IT experts

5. Embedding findings into practice Implementing a

Data-Capture-and-**Analyse Model** 

1. Engaging hospitaland patient-based stakeholders with implementation

> 2. Establishing a data-capture model for routine and efficient data collection

#### Data capture

- Identify electronic data-capture tools
- Source data from clinicians, patients (PROMs), associated health care providers, administrative sources
- Collection of data at time points coinciding with patient visit
- Minimise data-entry related errors

Feedback provided

practice

- Clinicians and patients are better informed when selecting treatment options
- Health providers are encouraged to provide quality, transparent data
- Comparative effectiveness research is promoted

#### 4. Determining treatments which promote best patient **outcomes**

#### **Data analysis** 3. Measuring

- Efficient and secure data storage
- Frequent collection of
- measurements Real-time analyses of
- numerical data
- Rapid dissemination of results
- Efficient monitoring of data quality









and analyzing

the captured

data

Government of Western Australia Department of Health



