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7. Implementation and evaluation of inflammatory arthritis models of care in Canada

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Objectives: The Arthritis Alliance of Canada (AAC) is a pan-Canadian assembly of more than 36 member organizations, leading several pan-Canadian initiatives to support high quality care in Canada; 1) the implementation of the pan-Canadian approach to inflammatory arthritis (IA) models of care; 2) a System Level Performance Measurement Framework (SLPMF) to inform quality improvements; and 3) a pan-Canadian RA Core Clinical Dataset (RACCD) to inform the harmonization of a core minimum set of data for collection.

Challenge: The current pattern of health care delivery to those living with IA is in crisis: the economic burden is expected to double within a generation, and the number of rheumatologists in Canada is already insufficient to provide timely care. In response to these challenges, the AAC developed the pan-Canadian Approach to Inflammatory Arthritis Models of Care (IA MOC) to improve the delivery of IA care. Furthermore, the AAC developed the SLPMF and the RACCD for evaluation and continuous improvement of IA care in Canada.

Method: The pan-Canadian Approach to IA MOC, a patient-centred team-based approach, addresses the complex, long-term issues facing patients across the continuum of care. There were several phases in the development of both the SLPMF and the RACCD including: a literature review, followed by a drafting a list of candidate measures/data elements by key stakeholders; refined via in-person meetings, based on importance to the provision of high quality clinical care; finally, an online-modified Delphi process using RAND-appropriateness methodology was held over 3 rounds to obtain input from a broader representation of arthritis stakeholders across Canada.

Results: The pan-Canadian IA MOC uses a patient-centred team-based approach focused on systems and processes to remove barriers and promote early referral and Treat 2 Target (T2T) management approaches. Six system-level performance measures were selected and are being pilot tested in arthritis centres in Canada. 9 out of 10 subgroups and 49 data elements were selected for inclusion in the RACCD.

Conclusion: The pan-Canadian Approach to IA MOC is a framework with sufficient flexibility to be operational at a local or regional level. We are working with champions to integrate this approach into local jurisdictions. The SLPMF and the RACCD will evaluate current and future models of care to inform continuous quality improvements for IA patient care in Canada.