

Using strategy-based indicators of cancer care performance for routine monitoring and reporting in Ontario

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Objective:

To promote quality improvement and demonstrate public accountability by implementing strategy-based performance reporting in Ontario's cancer system.

Methods:

Over 15 months, the Cancer Quality Council of Ontario (CQCO) developed a set of strategy-based system level cancer care performance indicators suitable for routine monitoring and public reporting.¹ Using a modified scorecard methodology, 25 selected indicators were mapped to the five strategic goals of the Ontario cancer system: (1) improve measurement, collection & reporting of cancer quality (2) increase use of evidence in decision-making (3) improve access to cancer services and reduce wait times (4) increase effective use of resources across the system (5) reduce the burden of cancer. This strategy map - which delineates lead and lag relationships between each indicator - was designed to ensure that the indicators would measure progress over time against a set of specific and widely accepted goals.

In April 2005, these results will be reported publicly for the first time.

Results are targeted at four audiences: (1) cancer system managers & planners (2) care providers (3) government and policy makers (4) cancer patients and the public. Reporting the information publicly is intended to stimulate quality improvement efforts among the first three target audiences.

To determine best practices for reaching four diverse audiences, a series of focus groups were conducted with representatives of each group. Based on the findings, web-based reporting was chosen. This was to ensure flexibility in updating information, to make the information widely accessible, and to be able to provide a much greater depth and quantity of information than is possible within the constraints of a single paper-based report.

The core dimensions chosen to report the performance information were provincial and regional results and time trends. Surveyed cancer system managers, planners and providers reported that it was most useful to be able to compare performance across regions and over time.

Results:

The results are best understood based on the five-goal framework:

1. Improve measurement. Significant progress has been made in Ontario's ability to report on cancer performance. Electronic reporting of diagnostic information has been implemented province wide. Although low overall (30%), the capture of stage information within the province's eleven cancer centres has more than doubled (41% to 91%).
2. Increase use of evidence. New analysis on the uptake of published clinical practice guidelines shows good use of evidence across Ontario (range 80-100%).
3. Increase effective use of resources. Two indicators, length of stay and spending on phase of cancer care were analysed. Little regional variation and lack of clear targets highlight the need for better measurement of this goal.
4. Improve access to cancer services. While radiation wait times appear to be decreasing, surgical and systemic therapy wait times are on the rise. Utilisation rates suggest that wait times are the tip of the iceberg: current referrals may be too low.
5. Reduce the burden of cancer. Outcomes related to patient care showed good results, (patient satisfaction, pain management). As expected, surveillance and risk factor indicators underscore the coming burden of cancer on the population.

Conclusions:

Results from 25 cancer-specific indicators reflect the particular challenges facing Ontario: geographically dispersed care, growing concern over wait times, legacy of no central oversight of the majority of cancer services delivered in the province. Implementation and refinement of this instrument will allow us to correct for this legacy and improve quality and accountability for all cancer care delivered in Ontario. Moreover, the results from lead (vs. lag) indicators are being formally linked to provincial and regional planning.

¹Greenberg A, Angus H, Sullivan T, Brown AD. Development of a set of strategy-based system-level cancer care performance indicators in Ontario, Canada. ***International Journal for Quality in Health Care***. Advance Access published online on January 21, 2005.