

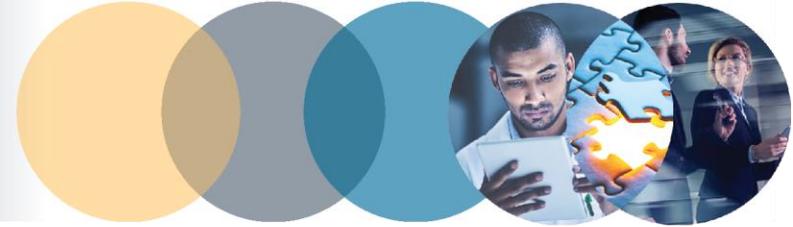
# Sparking Action to Support Rapid-Learning Health and Social Systems in Canada

**APPTA Policy Rounds Series**

**18 September 2020**

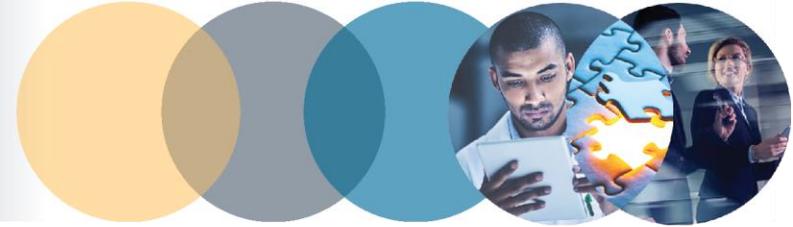
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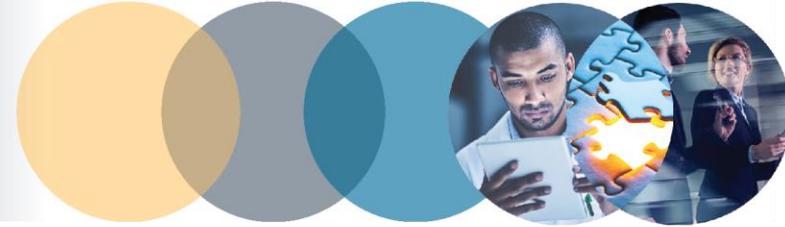
## Overview

- Supporting evidence-informed policymaking
- Rapid-learning health and social systems
- Discussion of efforts to sparking action in area both in AGE-WELL and elsewhere
- Q&A

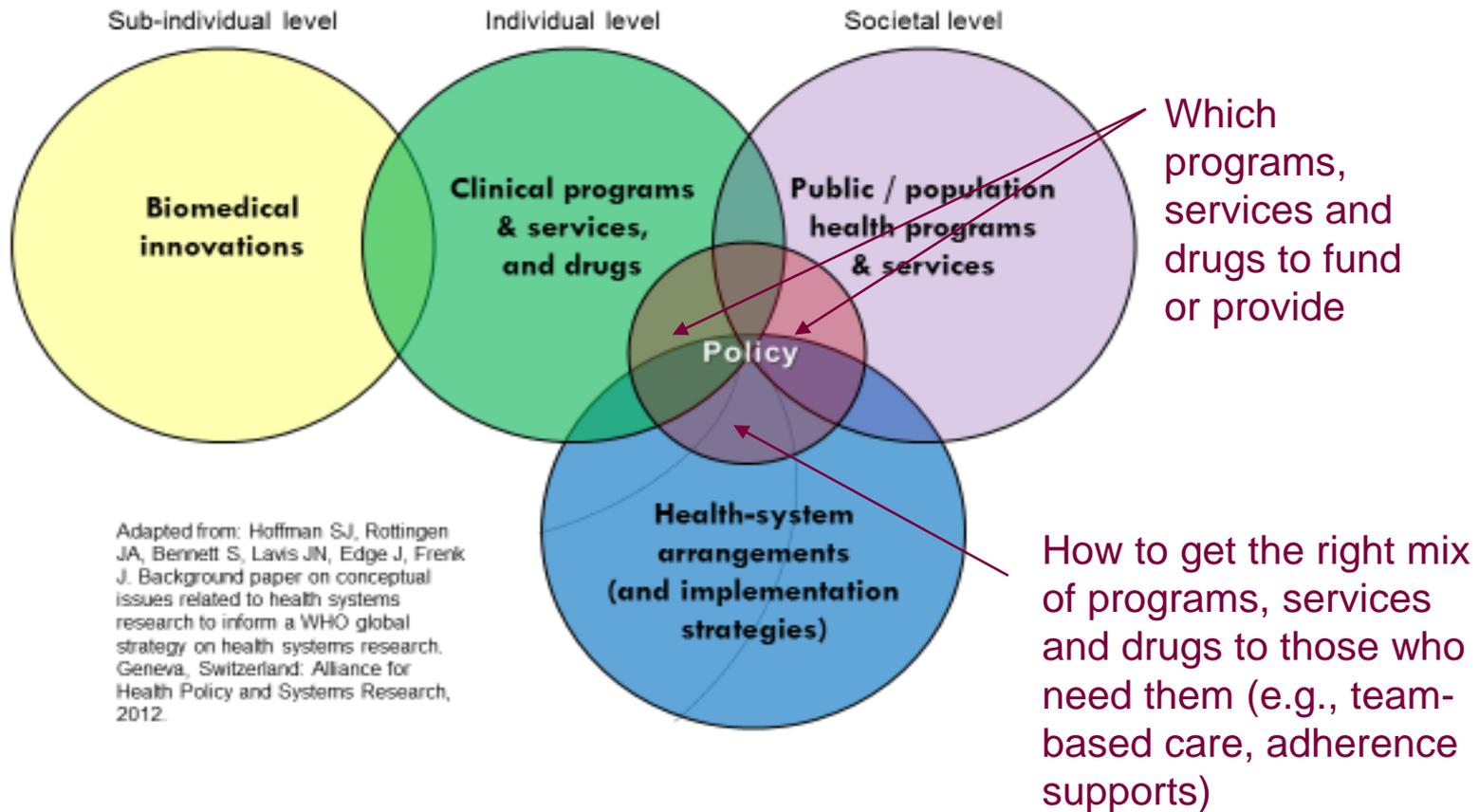


# Supporting Evidence-Informed Policy

- Systematically and transparently using the best available data and research evidence, as well as citizens' values and preferences, in each of:
  - 1) Prioritizing problems and understanding their causes (agenda setting)
  - 2) Deciding which option to pursue (policy development)
  - 3) Ensuring the chosen option makes an optimal impact at acceptable cost (policy implementation)
- ... alongside the institutional constraints, interest-group pressure, values and other types of information (like jurisdictional reviews, consultations, expert review groups, and opinion polls) that influence the policy process



## Some Perspective on EIP





# Rapid-Learning Health Systems

- The combination of a health system and a research system that at all levels – self-management, clinical encounter, program, organization, regional (or provincial) health authority and government – is:

## Patient centred

- Engaged patients

## Data and evidence driven

- Digital capture, linkage and timely sharing of relevant data
- Timely production of research evidence

## System supported

- Appropriate decision supports
- Aligned governance, financial and delivery arrangements

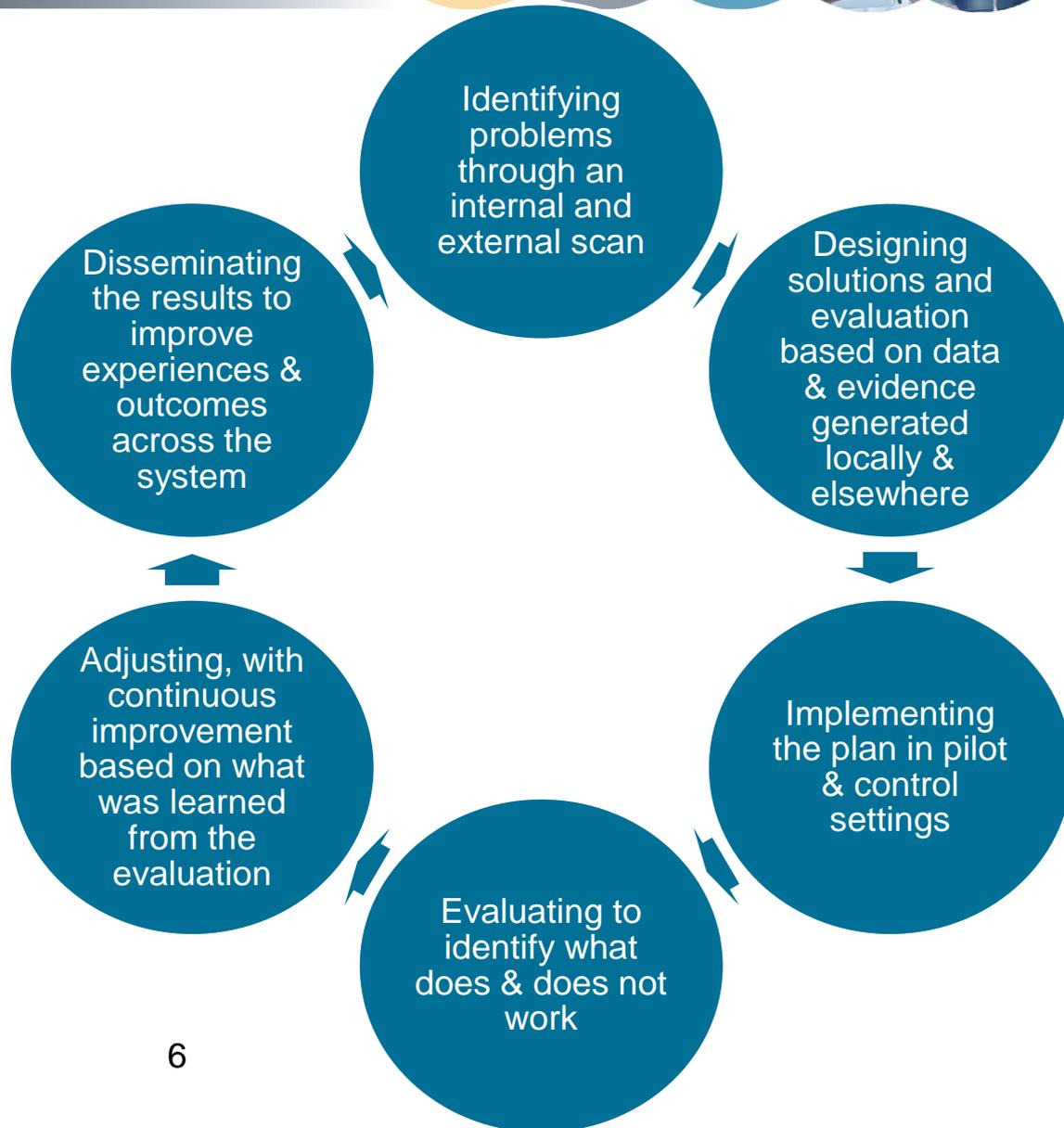
## Culture and competencies enabled

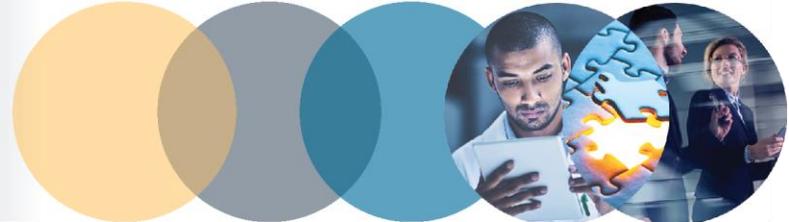
- Culture of rapid learning and improvement
- Competencies for rapid learning and improvement



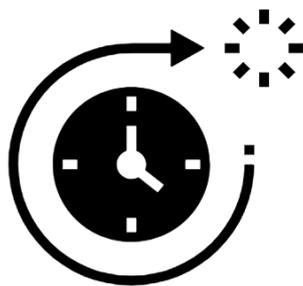
## Why rapid learning?

- 1) Most policy initiatives will **use up some political & social capital** (to launch, institutionalize & sustain it)
- 2) No policy initiative will **get it right** the first time or get it right for all time
- 3) No policy initiative will **do it all**
- 4) Any policy initiative also needs to be seen as a chance to do **more to achieve the quadruple aim**





# Three Categories of Supports That Can Help to Achieve the Trifecta of a Compelling Problem, a Viable Policy / Decision, and Conducive Politics



## Dynamic response

(tried and tested with the McMaster Health Forum and its 'sister' centres)

Provide locally contextualized 'best evidence' and systematically elicited citizen values & stakeholder insights in 3-90 business days (e.g., rapid syntheses, citizen panels & stakeholder dialogues)



## Structural reform

(no wins yet beyond WHO, but we're just ramping up)

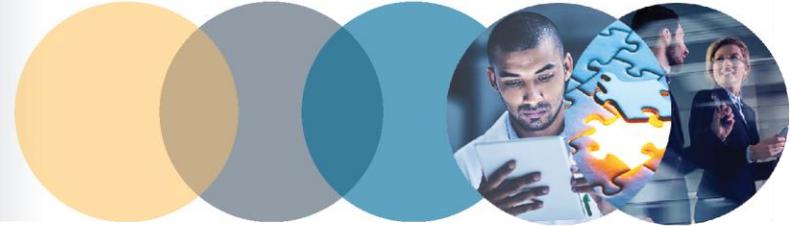
Institutionalize the use of synthesized research evidence as an input to commissions / inquiries and to robust citizen- & stakeholder-engagement processes, and require the justification of recommendations based on research evidence



## Implementation support

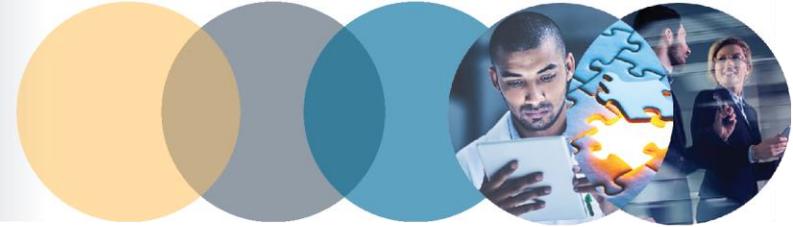
(so far, so good with RISE: Rapid-Improvement Support and Exchange)

Provide evidence-based technical supports for 'rapid learning and improvement' in the 3-5 year implementation of a 'low rules' system-wide transformation (e.g., collaboratives, coaching, events, webinars, briefs, syntheses & website)



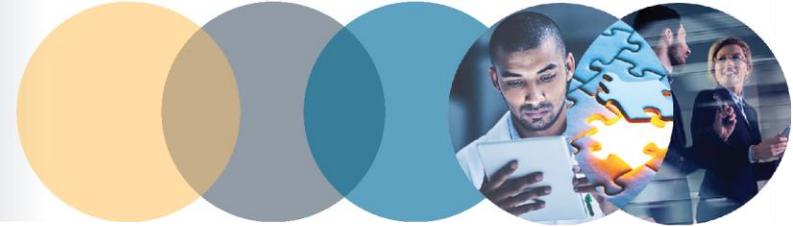
## AGE-WELL Example (1)

- AGE-WELL platform project focused on tech-based solutions for enabling rapid-learning health and social systems
  - Identifying three topics (possibly more) over three years
    - Working with an interdisciplinary steering committee for each topic (AGE-WELL partners and others)
    - For each topic we are convening citizen panels followed by a national stakeholder dialogue to generate insights and action
    - Each informed by a citizen brief and evidence brief



## AGE-WELL Example (2)

- First topic = Identifying and harnessing the potential of technology in long-term care settings in Canada
  - Tentative focus of deliberations (currently a work in progress)
    - Identifying and harnessing the potential of communication technologies in long-term care
    - Identifying and harnessing the potential of technologies that support care provision in long-term care
    - Enable a rapid-learning approach to support the development, evaluation and implementation of new technologies to enhance experience and outcomes, keep costs manageable and ensure positive provider experiences



## Opportunities

- **The COVID-19 pandemic can help spark action towards:**
  - A more joined up network in Canada (reducing the noise signal ratio)
  - Accelerating gains made in areas like virtual care
  - Focusing on moving forward with areas that have become apparent as needing to strengthen going forward (e.g., LTC, integrated care, etc.), many of which are areas of long-called for reforms



## Q&A

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