



Creating a Learning Health System

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2006 Data Analytics Project



Evaluation of
PCR-based
MRSA
screening
program

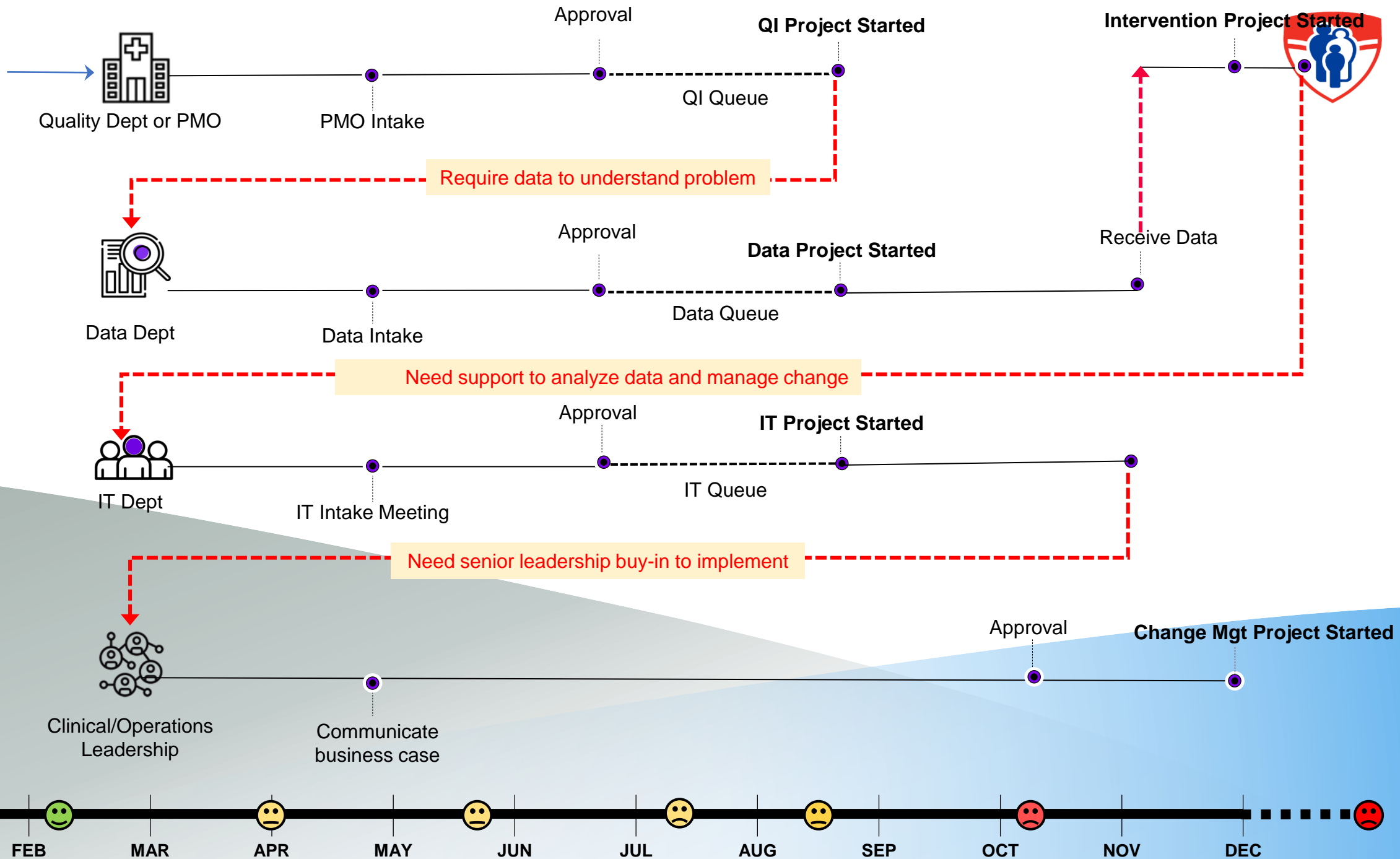


Test: Nasal and Rectal swab

2100 patients avoiding
unnecessary testing per year



Saved: 1.5M per year



Quality Dept or PMO

PMO Intake

Approval

QI Project Started

QI Queue

Require data to understand problem



Data Dept

Data Intake

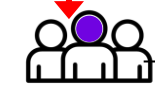
Approval

Data Project Started

Data Queue

Receive Data

Need support to analyze data and manage change



IT Dept

IT Intake Meeting

Approval

IT Project Started

IT Queue

Need senior leadership buy-in to implement

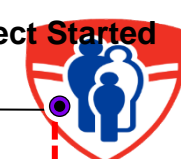


Clinical/Operations Leadership

Communicate business case

Approval

Change Mgt Project Started



Intervention Project Started

JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC





“If only I had data”

THE PARADOX OF HEALTHCARE DATA

MASSIVE AMOUNTS GENERATED



30%

Of all data generated is for health

ALMOST ALL IS UNUSED



<5%

Of Health data is used in making decisions



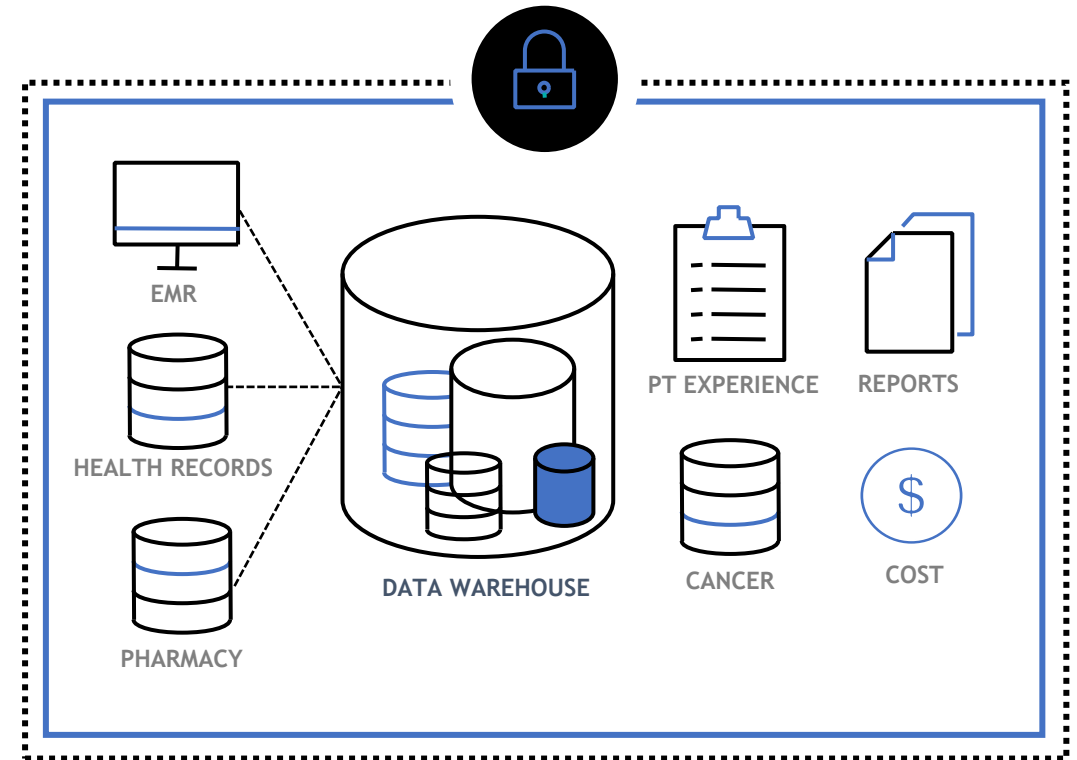
30%

Of leaders state their data are insufficiently accurate to base decisions



Healthcare Data Challenges

- Competing demands
- Lack of technical knowledge
- Privacy
- No budget
- Clinician resistance
- Executive resistance
- Inaccuracy of data
- Inability to obtain results in real time



Could we address these **barriers**?

Yes, through the creation of **a learning health system**, focused on achieving healthcare's triple aim



Learning Health System



Health systems in which ‘knowledge generation processes’ are embedded in daily practice to improve individual and population health





Learning Health System



Systematically gather and create evidence.

Apply the most promising evidence to improve care.



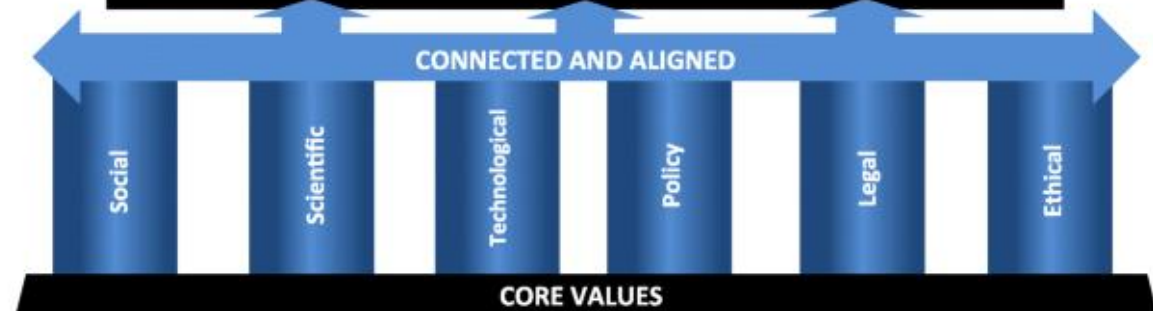
LHS OUTCOMES



LHS PROCESSES



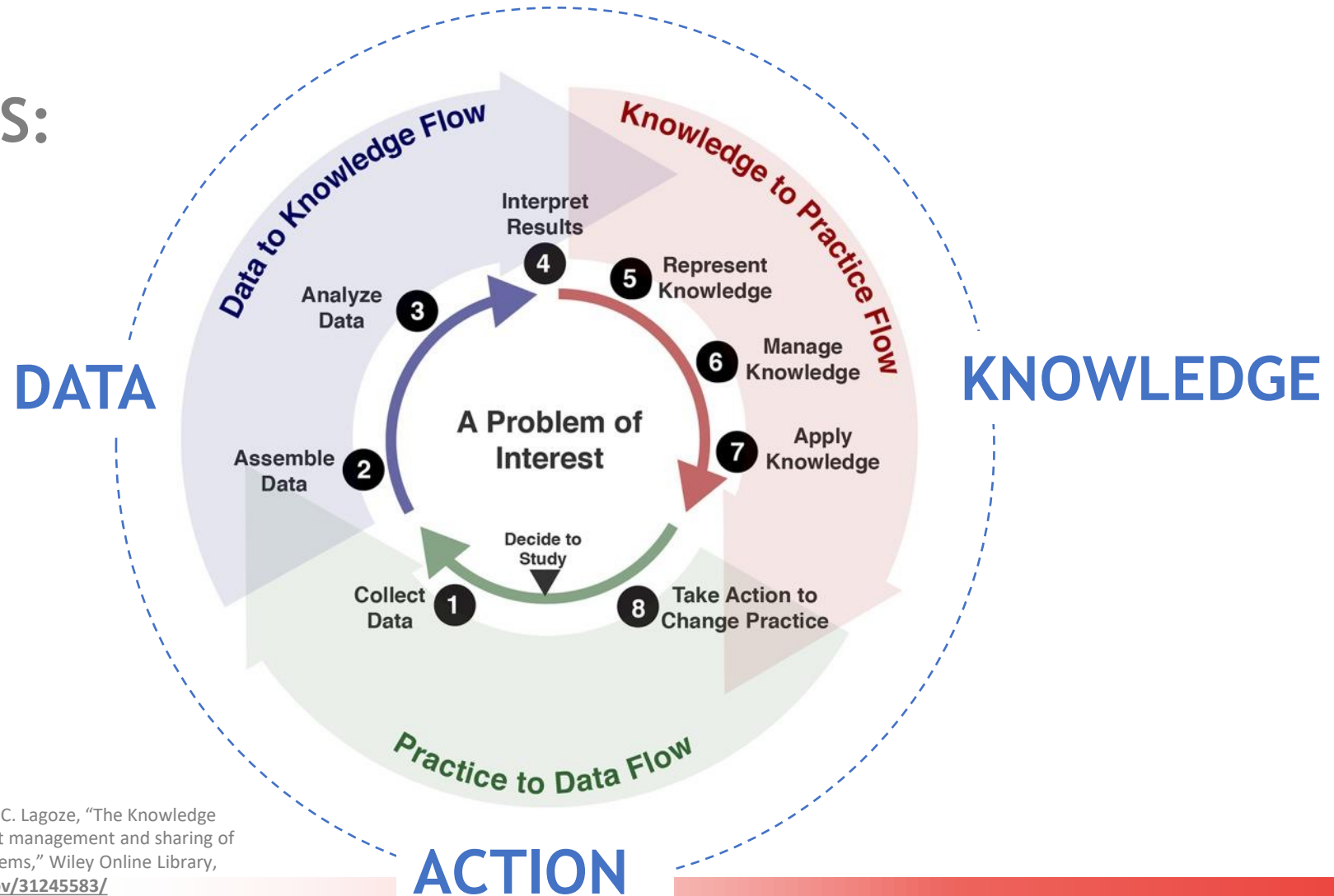
LHS PILLARS





Improving Healthcare Quality

3 INGREDIENTS:





My Journey to building a Learning Health System



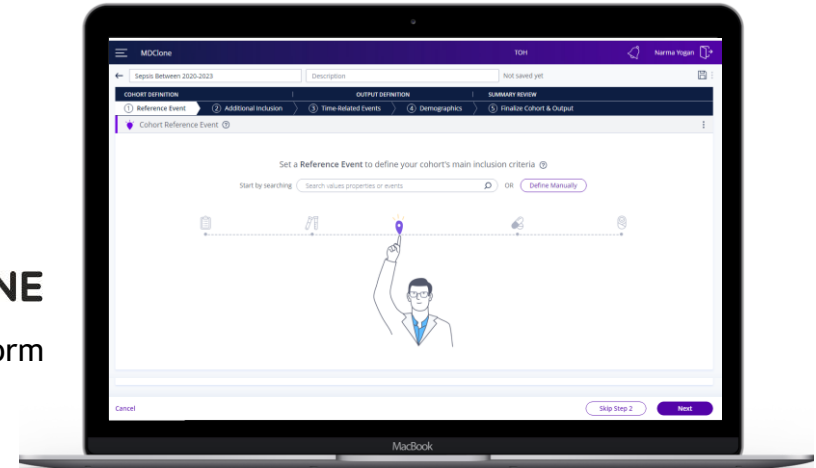


The Ottawa Hospital

L'Hôpital d'Ottawa



Launched
MDCLONE
ADAMS Platform



Pre-Electronic
Medical Record



Deployed EMR
1.0



Built Data
Warehouse



Assembled
Analytics
Department



Developed
Business
Intelligence
Strategy



Deployed Data
Access Tools



Piloted Learning
Health System

1995

CARE DIGITIZATION

2004

DATA DEMOCRATIZATION

2010













DATA LITERACY & USE

2020

IMPROVED LEARNING

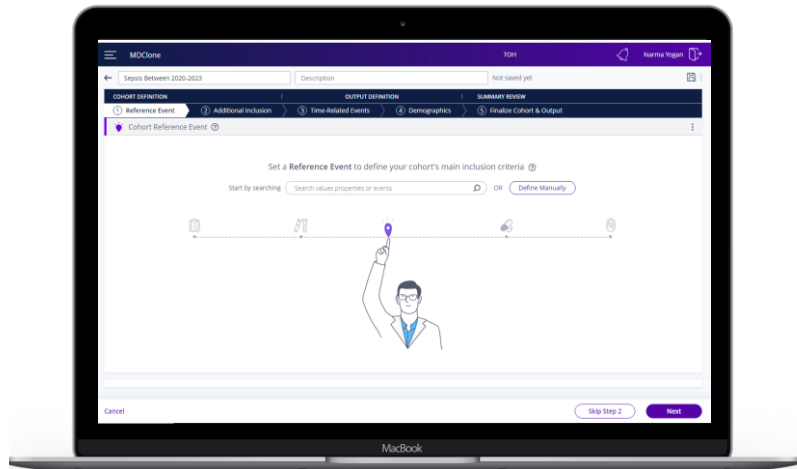


Accelerating Data Democratization & Use

	Traditional Methods	MDCLONE
 Clinician-friendly interface requires <u>no</u> coding or database knowledge		
 Data is validated and organized in the way that care happens		
 Can iterate on study design and view data in real-time		
 Can share data with collaborators while maintaining patient privacy		



Success with MDClone



Launched
MDCLONE
ADAMS Platform

2020

2021

2022

2023

50 users

180 Users

200+ Users

33 Service Lines

1000+ Data files downloaded

20+ Years of Data from many sources

80+ QI & Research Projects

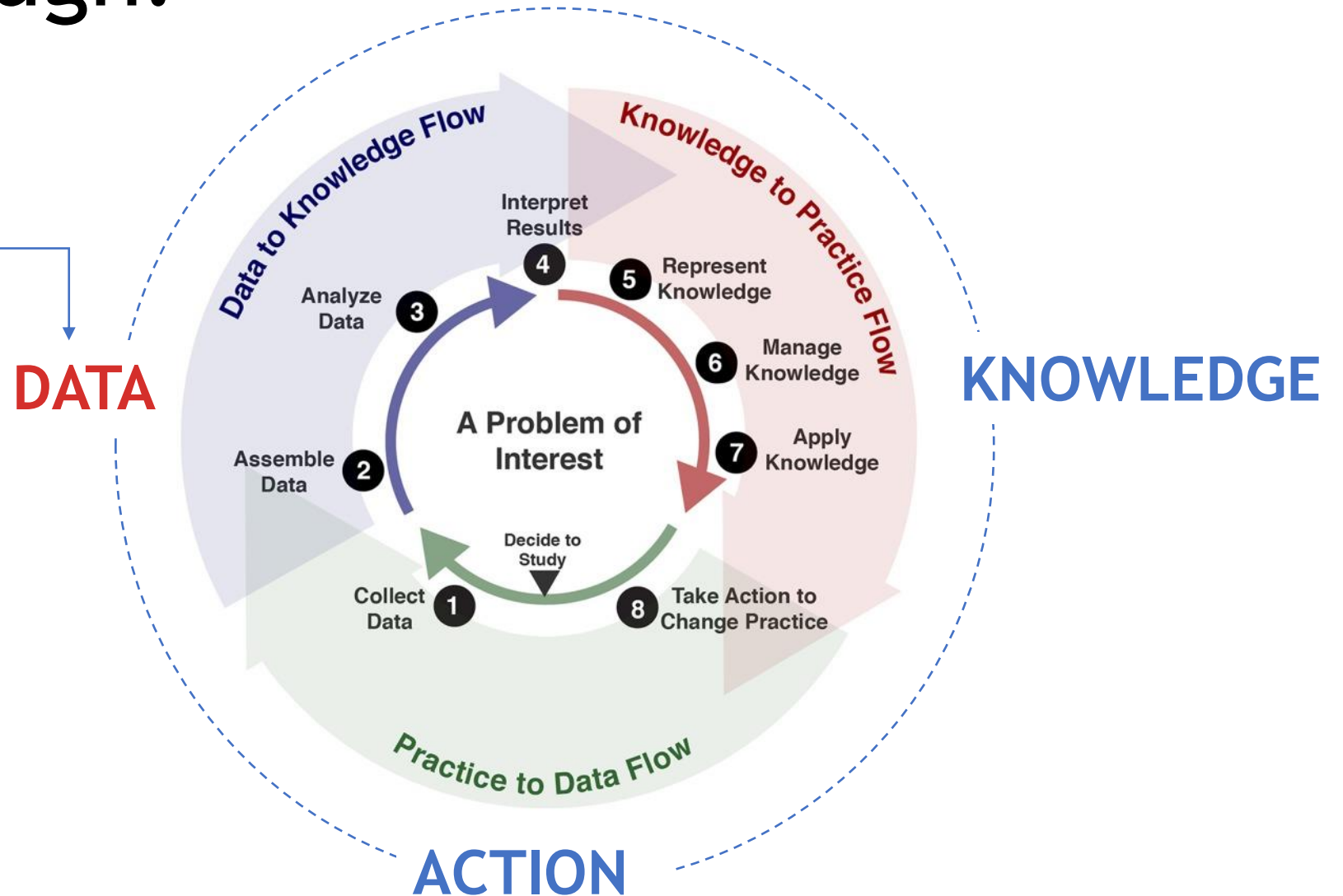
8 Academic & Hospital Collaborations



Is Data Enough?

MDCLONE ADAMS Platform:

1. Data Structure
2. Workflow Design
3. Synthetic Data on-the-fly



Creating impact from data requires
more than a technology platform



Sheba Medical Center

More Than 70 Years of Excellence

6 hospitals & centers

Over **1,700** physicians

Nearly **10,000** healthcare professionals

1,600,000 clinical visits per year

12,000 babies delivered annually

1,900 beds

WORLD'S BEST HOSPITALS 2019-2022
Newsweek
POWERED BY statista

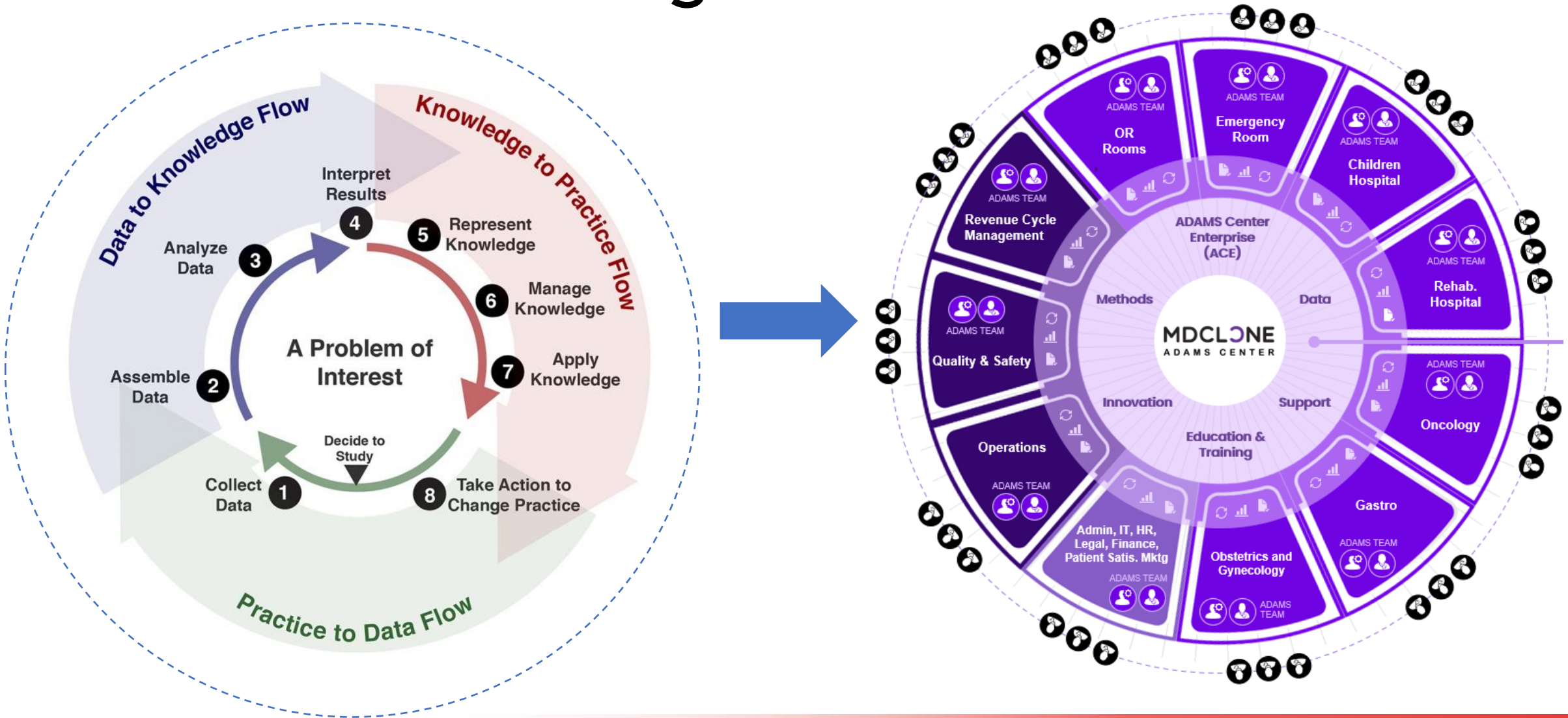
SHEBA Tel HaShomer City of Health

ARC

- Largest hospital in XXX
- Deployed MDClone in XXX
- Innovation Partner of the Ottawa Hospital
- Other important facts?



Sheba's Learning Health System



What is an ADAMS Center?

Creating **culture change** and supporting **continuous learning** to achieve **high-value**, **patient-centered** and **data-driven** healthcare



Establish a hub of **performance improvement** to support and prioritize activity



Engage clinical staff to ask and answer clinical, operational and financial questions



Generate actionable information from the data we collect



Validate and measure impact on patient health and health system operations





Learning Health System *in Action*

40+ PROJECTS IN 7 MONTHS:

1. **Infectious Diseases** - Are we following guidelines for duration of antibiotic mng. in uncomplicated bacteremia?
2. **ER** - Length of in-hospital observation **for anticoagulated Patients Following Minor Head Trauma?**
3. **Gynecologic Oncology** - Anticoagulant Therapy in Patients with Ovarian Cancer
4. **Operations Room** - **Sugammadex** use for reverse neuro-muscular block
5. **Oncology** - What is causing the bottlenecks in Oncology Centre patient flow?
6. **Blood Bank** - Are we following guidelines for blood products utilization (CRYO)?
7. **Blood Bank** - Are we following guide for blood products utilization (PLT)?
8. **Gastro** - What is causing the bottleneck in patient flow at the Gastro unit and the effect of sedation protocol?
9. **Operations Room** - Is there better use of Topical hemostatics in OR?
10. **Gynecologic Oncology** - What is the infection rate post-hysterectomy?
11. **Diabetic Foot Clinic** - Evaluate the key outcomes measures in the diabetic foot clinic
12. **Operations & Methods** - Define and analyze data for key Operations & Methods department projects
13. **Nursing** - Evaluate the palliative care coordinator follow-up for dying patients
14. **Infectious Diseases** - Monitor of Clostridium cohorts
15. **ER** - Establishing Guidance for Lumbar Puncture Usage in the ER for Diagnosing Headaches and Fevers
16. **Pediatric** - Implementing Evidence-Based Administration of IVIG in Pediatrics
17. **Oncology** - Characterising the care approach to dying patients
18. **Pediatric Hemato-Oncology** - Central Line-Associated Complications in Pediatric Patients
19. **General Surgery** - Assessment of the scope of activity in favor of reorganizing the department
20. **General Surgery** - Monitoring of colon surgeries complications
21. **Respiratory Institute** - Time to diagnosis from referral to respiratory institute with suspected lung disease
22. **Respiratory Institute** - Impact of BAL testing on non-immunized patients' treatment outcomes
23. **Internal Ward** - Improving clinical treatment in internal medicine wards
24. **Gynecologic Oncology** - Improved information extraction for cancer patients using NLP models
25. **Oncology** - Identifying bottlenecks in the oncology facility
26. **Oncology** - Creation of a NLP-based treatment recommendation list
27. **Nursing management** - Assessing clinical workload for patient distribution in emergency departments
28. **Gynecology** - Professional exposure meetings for residents
29. **Biobank** - Completing clinical information for biobank patients
30. **Rheumatology** - Establishing a Rheumatology Patient Registry
31. **Rheumatology** - Tracking patients treated with JAK inhibitors
32. **Rheumatology** - Defining the activity of the Rheumatology unit
33. **Gynecology** - Monitoring of pulmonary maturation after administration of Celstone
34. **Operating room** - Reducing the number of painful patients in the recovery unit (over 5)
35. **Operating room** - A re-evaluation of the percentage of operating room patients with skin injuries
36. **Breast Cancer Surveillance Clinic** - Identified follow-up registry for patients of the institute
37. **Respiratory Institute** - Mapping nurses' activities at the institute
38. **Nursing** - Nursing staff suturing an incision in the emergency room
39. **Nursing** - Giving a local block by a nurse to a patient with a femoral neck fracture
40. **Nursing** - Record control quality improvement (Currently done manually)
41. **Pediatrics** - Children's burn hospitalizations: intelligent planning
42. **Psychiatry** - Reducing spontaneous death in psychiatry ward
43. **Internal Ward** - Detection of BBB drugs that affect PGP (difficulty obtaining community data)
44. **Internal Ward** - DVT prevention in Parkinson's patients

Pilot: Building an Learning Health System

At The Ottawa Hospital we challenged ourselves to build **an ADAMS Centre** in 90 days, with 9 projects



9 Projects in 90 Days



1. Impact of multi-pronged approach to **reduce inappropriate use of Pregabalin** during the peri-op period
2. Define the business case for **automatically substituting Provist** in patients **allergic to iodinated contrast media** and needing urgent imaging
3. Evaluate use and **impact Carbetocin** in patients undergoing **C-section**
4. Impact of multi-pronged approach to **reduce overuse of urine cultures, urinalysis and antibiotics**
5. Describe the clinical and financial opportunities created by implementing three different models for **providing routine ambulatory care laboratory testing**
6. Evaluate use and **impact of Tranexamic acid** in surgical patients
7. Describe demographic and clinical characteristics of high versus low **frailty groups**, using the CIHI-HFRM
8. Identify the health conditions accounting for the majority of in-patient **hospital care costs** as a surrogate marker of disease burden
9. Evaluate the **value of CT scan of the head** in **anticoagulated patients** with head injury, and compare to findings in Sheba Medical Centre



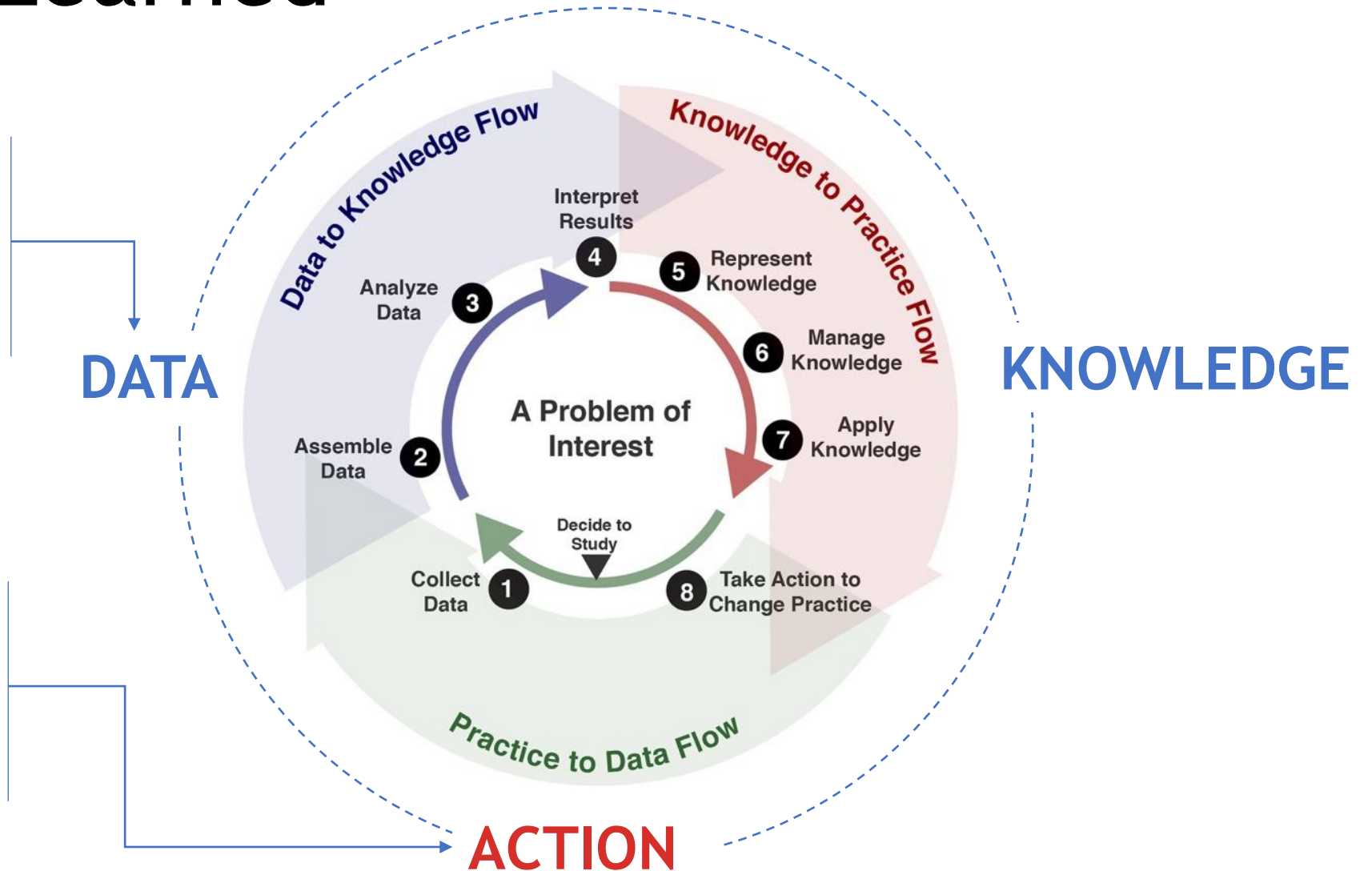
What We Learned

MDCLONE ADAMS Platform:

1. Data Structure
2. Workflow Design
3. Synthetic Data on-the-fly

MDCLONE ADAMS Centre:

1. Embedding Enablers within Operations
2. Workflow design includes visibility on actions
3. Ability to share progress



What's Next?

Building a Learning Health System via MDClone's
ADAMS Centre at [MUHC](#)



McGill University Health Centre

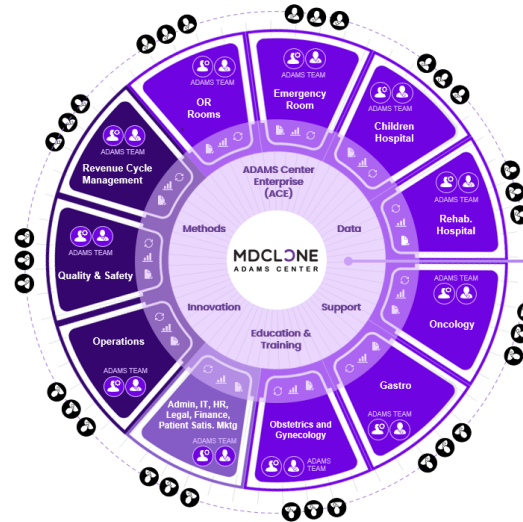
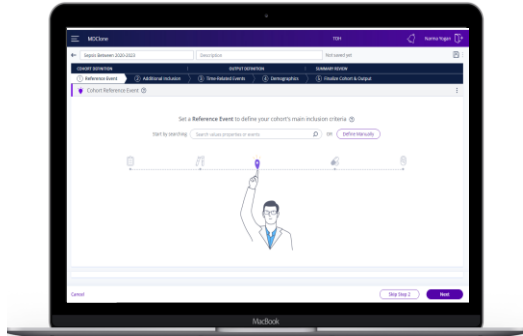


- New Role - Director, Innovation, Transformation, and Clinical Performance MUHC & McGill Professor of Health Innovation
- **Other important facts?**





Our 1 Year Plan



Implement the **MDClone ADAMS Platform** to enabling access to data for all MUHC patients

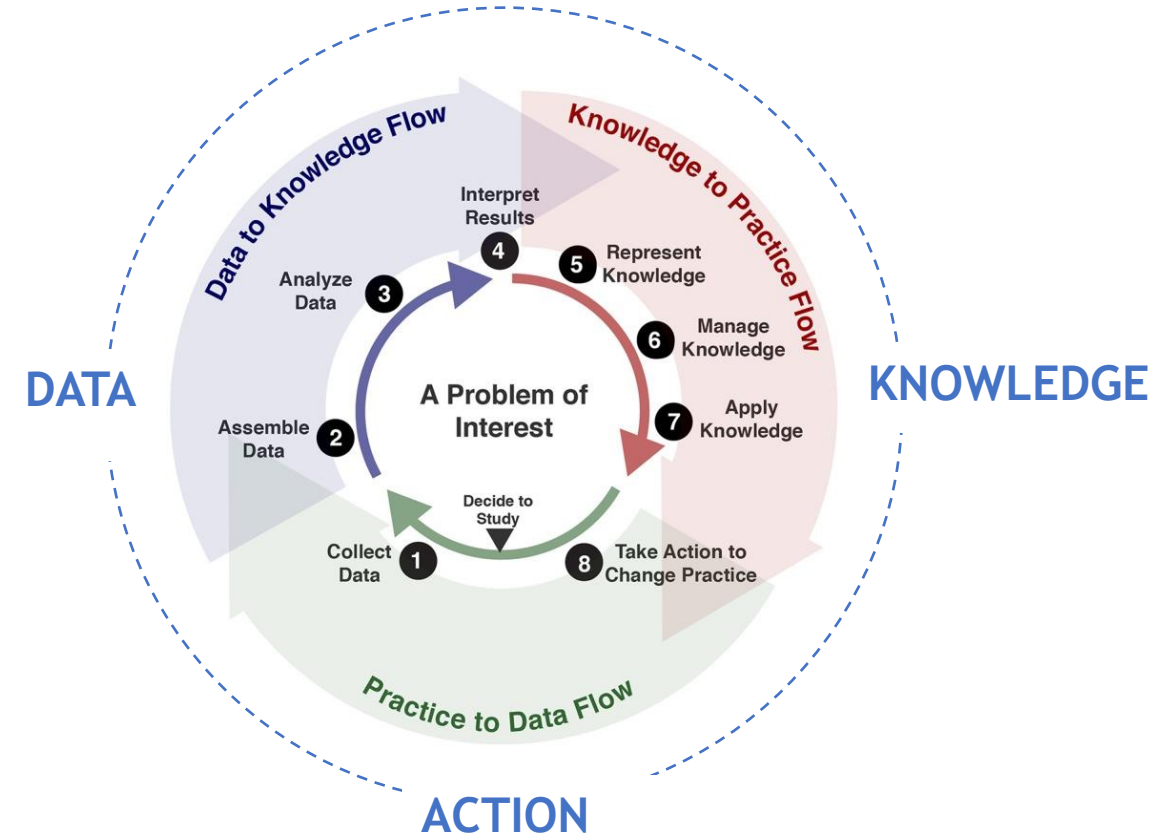
Create an **MDClone ADAMS Center**, a proven approach to create a learning health system

Become a **national center of excellence** in healthcare analytics and data-driven transformation



Takeaways

1. Speed to Data
2. Speed to Understanding
3. Alignment with health system goals
4. Promoting Disciplined Action



Questions?