

SCHEDULE 11 – EXPANDING PATIENT REPORTED OUTCOMES:

ORTHOPEDIC SURGERY

PART A – PROGRAM DESCRIPTION

Program Overview

Cancer Care Ontario (CCO) will work with the Ministry of Health (ministry) and the Canadian Institute for Health Information (CIHI) on a three-year (2017-18 to 2019-20) project that will test the implementation of Patient Reported Outcome Measures (PROMs) associated with hip and knee replacement surgery in hospital sites across the province.

PROMs are measurement instruments that patients complete to provide information on aspects of their health status and quality of life. PROMs are essential to understanding whether health care services and procedures make a difference to patients' health status and health care experiences, as they provide insight into the effectiveness of care from the patients' perspective and complement existing information on care quality and health care delivery.

Since 2007, CCO has been collecting PROMs data for cancer patients and, with over 9 million records, CCO has the largest PROMs database in the world. As a result, CCO has a nuanced understanding of the fundamental requirements for building and overseeing a comprehensive PROMs collection system and is well equipped to partner with the ministry and CIHI to ensure the efficient and effective implementation of hip and knee replacement surgery PROMs collection in Ontario.

CCO's pilot project tasks and outcomes include, but are not limited to:

- Continue to provide thought leadership on PROMs analysis and contribute to the operations of the PROMs pilot project steering committee.
- Lead the onboarding of pilot site participants and evaluate site readiness
- Implement an electronic PROMs capture tool in pilot sites and provide on-site leadership and training
 - CCO's electronic PROMs collection tool, the Interactive Symptom Assessment and Collection (ISAAC) platform, incorporated into the clinic flow of participating hospitals. These sites accounted for 51.7% of all hip and knee surgeries performed in Ontario.
 - As of August 2019, CCO is currently live with PROMs collection in 26 participating hospitals.
- Ensure the collected PROMs inform clinical practice and contribute to improved patient experiences
 - Incorporating the electronic capture of hip and knee PROMs into clinical practice will require significant change management. Patient responses to PROMs will flow directly into the ISAAC database in real-time, and physicians will have immediate access to individual patient responses and aggregate-level reports via the ISAAC Admin portal. Automatically generated real-time histogram printouts and electronic PDFs, including a patient-level reporting functionality to track individual patients' outcomes over time.
- Collaborate with CIHI on the analysis of collected PROMs data

- CCO will provide CIHI with monthly data cuts, enabling CIHI to provide sites with performance measurement and reporting with both provincial and national comparisons. This will require close collaboration between CCO, CIHI, participating pilot sites, and the ministry.

The successful execution of the pilot project will achieve four key objectives

- 1) Establish a mechanism for the ongoing collection of PROMs across the province and position Ontario as a world leader in PROMs collection and analysis
- 2) Facilitate the delivery of more patient-centred, responsive care by promoting the use of patient-generated data in clinical assessments and patient engagement
- 3) Test the electronic collection of hip and knee replacement surgery PROMs and assess the feasibility of scaling up the collection of hip and knee PROMs to all hospital sites in Ontario
- 4) Assess the feasibility of using CCO's ISAAC tool as the platform for the collection of all PROMs, not just PROMs associated with hip and knee replacement surgery. Overtime, the ISAAC tool would also be potentially used to collect PROMs associated with shoulder, ankle, and spine surgery, and more.

PART B – VOLUMES, FINANCIAL/PERFORMANCE AND REPORTING OBLIGATIONS

| Dedicated Funding Envelopes | Funding Branch/Division | TP Parent/Cost Centre |
|--|---|---|
| Expanding Patient Reported Outcomes: Orthopedic Surgery (PROMs) | Home and Community Care Branch Ontario Health Teams Division | Vote/Item 1412-01 Cost Centre 524331 |

| Activities | 2018-19 Opening | 2018-19 Incremental Base | 2018-19 One-Time | 2018-19 Total Allocation | 2019-20 Opening | 2019-20 Administrative Efficiency | 2019-20 Incremental Base | 2019-20 One-Time | 2019-20 Total Allocation | 2019-20 Deliverables |
|-------------------|-----------------|--------------------------|------------------|--------------------------|---|-----------------------------------|--------------------------|------------------|--------------------------|--|
| | (A) | (B) | (C) | D = (A+B+C) | (E) | (F) | (G) | (H) | I = (E+F+G+H) | |
| Program Resources | \$1,023,560 | \$194,416 | | \$1,217,976 | \$1,240,723 (Reallocated \$22,746 from Operations) | \$(28,010) | | | \$1,212,714 | <ul style="list-style-type: none"> • Draft business requirements for ongoing ISAAC enhancements • Oversee data quality checks and documentation. • Transfer PROM data to CIHI on a monthly basis • Provide orientation to site administrators on how to use and implement ISAAC to collect PROMs • Conduct site visits and collaborate with sites to strategize optimal integration of PROMs into clinic workflow. • Provide training to staff at sites implementing PROMs • Provide ongoing implementation and operational support for sites • Convene a community of practice for sites who are collecting PROMS to share lessons learned and best practice • Create evaluation framework and develop post-implementation patient and |
| | | | | | | | | | | |

Dedicated Funding Envelope (DFE 1)

| Activities | 2018-19 Opening | 2018-19 Incremental Base | 2018-19 One-Time | 2018-19 Total Allocation | 2019-20 Opening | 2019-20 Administrative Efficiency | 2019-20 Incremental Base | 2019-20 One-Time | 2019-20 Total Allocation | 2019-20 Deliverables |
|--------------------------------------|--------------------|--------------------------|------------------|--------------------------|--|-----------------------------------|--------------------------|------------------|--------------------------|--|
| | (A) | (B) | (C) | D = (A+B+C) | (E) | (F) | (G) | (H) | I = (E+F+G+H) | |
| | | | | | | | | | | provider surveys to assess challenges, barriers, and opportunities for improvement. <ul style="list-style-type: none"> Collaborate data partners (CIHI) and sites to define regional reporting metrics |
| Hardware and Software | \$50,000 | \$100,000 | \$700,000 | \$850,000 | \$150,000 | | | | \$150,000 | Ensure sites have appropriate hardware/ software and support/ coordinate procurement specifications and configuration, as needed. |
| Operations | \$249,638 | \$44,162 | \$105,000 | \$398,800 | \$271,054 (Reallocated \$22,746 to Program Resources) | | | | \$271,054 | Administrative expenses and support areas such as Finance, HR, Legal, Communications, Public Affairs, Procurement, Privacy, and Facilities |
| Fiscal Grand Total | \$1,323,199 | \$338,578 | \$805,000 | \$2,466,776 | \$1,661,777 | \$(28,010) | | | \$1,633,767 | |
| Grand Total Rounded (A) | \$1,323,200 | \$338,600 | \$805,000 | \$2,466,800 | \$1,661,800 | \$(28,000) | | | \$1,633,800 | |
| Cash Flow (B) | | | | | | | | | | |
| Cash Adjustment Rounded (A-B) | \$1,323,200 | \$338,600 | \$805,000 | \$2,466,800 | \$1,661,800 | \$(28,000) | | | \$1,633,800 | |

| PERFORMANCE INDICATORS (2019-20) | REPORTING PERIOD |
|---|--|
| <ul style="list-style-type: none"> • Developed technology to provide real-time PROMs data to clinician at point-of-care. • Partnered with CIHI on transfer specifications to enable PROMs data upload on a monthly basis. • Provided robust on-site support to participating pilot sites, including troubleshooting technology and data flow issues • Provided thought leadership on physician algorithms, which outline appropriate responses to the patient symptom screen responses. | <p style="text-align: center;">Q4 Report</p> <p>CCO will report on progress to the PROMs Pilot Project Steering Committee on a monthly basis</p> |

| 1. Initiative Name: | | | | | |
|----------------------------|-------------------|----------------------------------|---------------------|----------------------------------|----------------------------------|
| Budget | YTD Budget | Year to Date (YTD) Actual | YTD Variance | 2019-20 Year-End Forecast | 2019-20 Forecast Variance |
| | | | | | |
| Progress Report: | | | | | |
| Deliverables: | | | | | |

Other Reports

- 1. Other Reports as requested by the ministry**
 - Reports specified from time to time

- 2. Financial Reporting:**
 - Submit to the MOHLTC reports as outlined in Part E of the Reporting Schedule included in the Ministry of Health and Long-Term Care (MOHLTC) – CANCER CARE ONTARIO (CCO) ACCOUNTABILITY AGREEMENT
 - Financial reports include an integrated financial and performance report

PART D – PAYMENT SCHEDULES

For the purposes of this Schedule “Funding Period” means a period of approximately 2 weeks as follows:

- (a) a period beginning on the 1st day of a month and ending on approximately the 15th day of the same month; and
- (b) a period beginning on approximately the 16th day of a month and ending the last day of the same month;

and “Funding Periods” shall have the corresponding meaning.

The Province shall provide:

- (a) the first installment of Funds for the period commencing on the Effective Date and ending on the last day of the Funding Period that immediately precedes the date on which the Province provides the first installment of Funds;
- (b) all other installments of Funds i