



## **Review of the Quality of Care and Safety of Patients Requiring Access to Emergency Department Care and Cancer Surgery and the Role and Process of Physician Advocacy**

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### **Objectives and Scope**

Pursuant to section 13 of the *Health Quality Council of Alberta Regulation 130/2006* (the “Regulation”), the Health Quality Council of Alberta (“HQCA”) will, through a quality assurance committee, conduct a full and thorough review of:

#### **Part A: Quality of Care and Safety of Patients requiring Emergency Department Care and Cancer Surgery**

1. To determine whether the quality of care provided to and the safety of:
  - a. a group of 321 patients that accessed emergency department services at the University of Alberta Hospital (UAH) during 2008, and
  - b. a group of 9 patients that accessed emergency department services at the UAH during 2010

was significantly compromised due to extended lengths of stays awaiting diagnosis and treatment in the emergency department. These cases were identified publicly on October 22, 2010. The cases had been collected by the emergency department physicians serving in the role of triage physicians at the UAH.

2. To determine whether the quality of care and the safety of a group of 250 cancer patients on a surgical wait list of 1,200 were seriously compromised due to delayed access to surgery as alleged in a question raised in the Alberta Legislature on February 28, 2011.
3. Based on the findings and analysis of the investigation and an analysis of current practices, make recommendations for system-level improvements in access and wait times for emergency department care and cancer treatment.

#### **Part B: Role and Process of Physician Advocacy in Patient Safety and Health Service Quality**

1. To investigate the role and ability of physicians to advocate for patients whose quality of care and safety the physicians believe is or could be compromised due to system resources or policies.



2. Based on the findings and analysis of the investigation and an analysis of current practices, make recommendations for system-level improvements in the policies and practices relating to physician advocacy intended to serve the best interests of patients.

The Council has established a quality assurance committee under section 10(2) of the Regulation for the purpose of conducting the planned and systematic study, assessment and evaluation of the matters set out above. The quality assurance committee must conduct the review as a quality assurance activity under section 9 of the *Alberta Evidence Act*. A team of health professionals and system review experts who have no known association with the specific matters under review will be appointed to the quality assurance committee.

A panel of experts will be appointed to assist and advise the Council in this review.

Under section 10 of the Regulation the HQCA has access to information held by health authorities for the purpose of carrying out its objects. The HQCA, which is a custodian of health information, can support the quality assurance committee's work by providing necessary health information to the Committee in accordance with section 35 of the *Health Information Act*.

### **Deliverables and Timeline**

John W. F. Cowell M.Sc, MD, CCFP, FRCP, the CEO of the HQCA is the review sponsor.

A full report of the findings and recommendations will be made public as soon as is feasible but is expected to be released within 9 months. A progress report will be released publicly at 3 months and 6 months.

Approved by the Council of the Health Quality Council of Alberta

[Original signed by D. Lorne J. Tyrrell]

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D. Lorne J. Tyrrell, OC, AOE, MD/PhD, FRCP  
Chair

Revised:  
March 24, 2011