



# Developing an Assessment Framework and Indicators for the Pediatric Cancer Control System in Ontario (POGO)

**Corin Greenberg & Anne Klassen**

**Other Members of our Team:**

**Ronnie Barr, Mark Greenberg, Lilian Chan,  
Paula Robinson and Nicole Bradley**

## **WORKSHOP**

**A Health Services Research Agenda: Building  
Capacity within the Maternal, Child, & Youth Sector**

**February 18th and 19th, 2010  
Sheraton Gateway Hotel, Toronto, Ontario**

# Project Overview

# Project Overview

- **Initiative funded to develop:**
  - conceptual framework for tracking performance of Ontario's childhood cancer delivery system
  - appropriate performance indicators.
  
- **Goals**
  - The resulting framework will assist associated programs to **self regulate**
  - Framework will be linked to credible, collectible, evidence-based indicators, acceptable to stakeholders

## Project Overview

- **Phase I** – Define the focus; review existing frameworks; select or construct an appropriate framework
- **Phase II** – Develop a robust, clearly defined, preliminary set of performance indicators
- **Phase III** – Present framework to stakeholders for feedback and for indicator-by-indicator rating (Delphi panel/focus groups)

# Project Overview

- **Iterative and inclusive process** involving Ontario's pediatric oncology stakeholder community:
  - Multi-centre; Multi-sector; Multi disciplinary
  - Including Care Providers; Managers; Parents; Survivors; Researchers; and MOHLTC colleagues
  
- **Challenges**
  - No existing pediatric cancer scorecard
  - No comprehensive set of performance indicators
  
- **Strengths and Advantages**
  - Research group includes methodological and pediatric oncology expertise
  - Pediatric oncology community desires outcome-tracking (PPOP) and sees initiative as appropriate vehicle for advancing this goal
  - Project builds on five key factors.

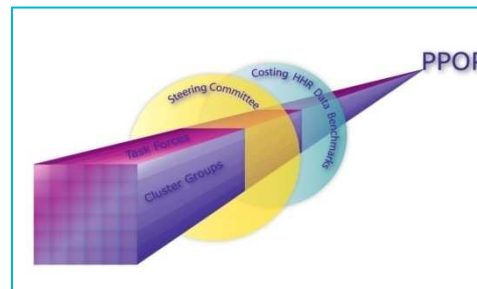
# Project Overview

❑ **FIVE** factors that present unique opportunity to advance the development of performance measurement for pediatric oncology:

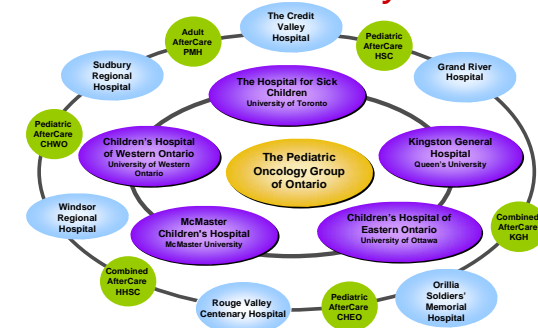
1. Enduring, evidence based, collegial partnership of stakeholders



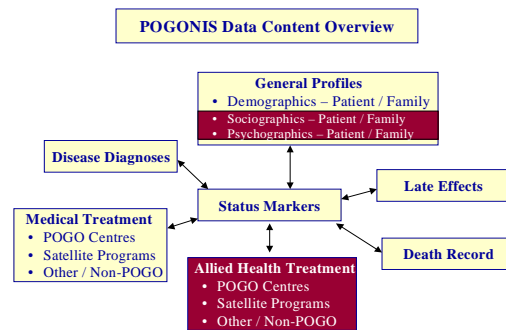
2. Evidence- & consensus-based long range plan



3. Well integrated delivery & cancer control system



4. POGO has assembled critical enabling components (POGONIS, 45.1)



5. Systematic review of improvement frameworks for pediatric services



# **Achievements/ Milestones**

# Achievements / Milestones

## Research Team

- **Conducted** monthly meetings to construct a framework and compile list of performance indicators
  - Selected and adapted an assessment framework to the discipline
  - Developed a robust list of potential performance indicators for each concept
  
- **Ensures ongoing KT** and community involvement
  - Provides ongoing oral reporting to POGO Board and MOHLTC
  - Presentations at conferences

# Achievements / Milestones – Systematic Review

- **Systematic Review of QI frameworks for CYSN Initiative**
  - peer-reviewed literature
  - targeted scan of grey literature
- **Databases searched from 1986 to May 2007:**  
MEDLINE, CINAHL, PsycINFO, ERIC, EMBASE, Social Service Abstracts, Social work abstracts, Education Index Full Text
- **Inclusion Criteria** - English language material that described, in sufficient detail to permit data extraction, a health, education or social services performance measurement framework with at least 2 categories of quality

# Achievements / Milestones – Systematic Review

## Results of Review

- 26,863 citations screened
- 111 frameworks found with 1488 “quality categories” described
  - 1488 “cards” were created
  - Team sorting process
  - Resulted in 16 concept groups “domains”
- 16 quality domains apparent among frameworks
  - developed for different purposes
  - applied in different sectors, levels of applications, settings, populations

# Achievements / Milestones - Framework

## Constructing a Framework

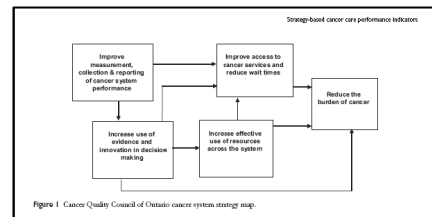
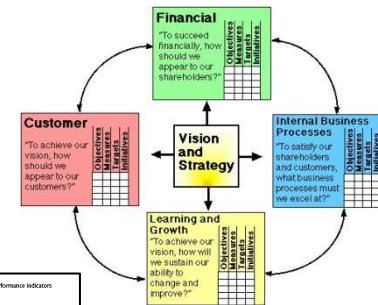
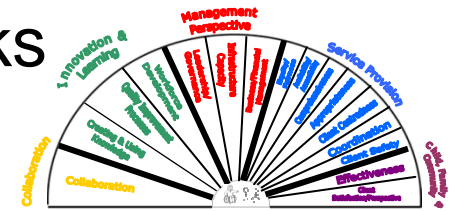
Considered some key relevant frameworks

- 16 quality domains from BC review

- Traditional Balanced Scorecard

- Cancer Care Ontario

- Hospital Reports

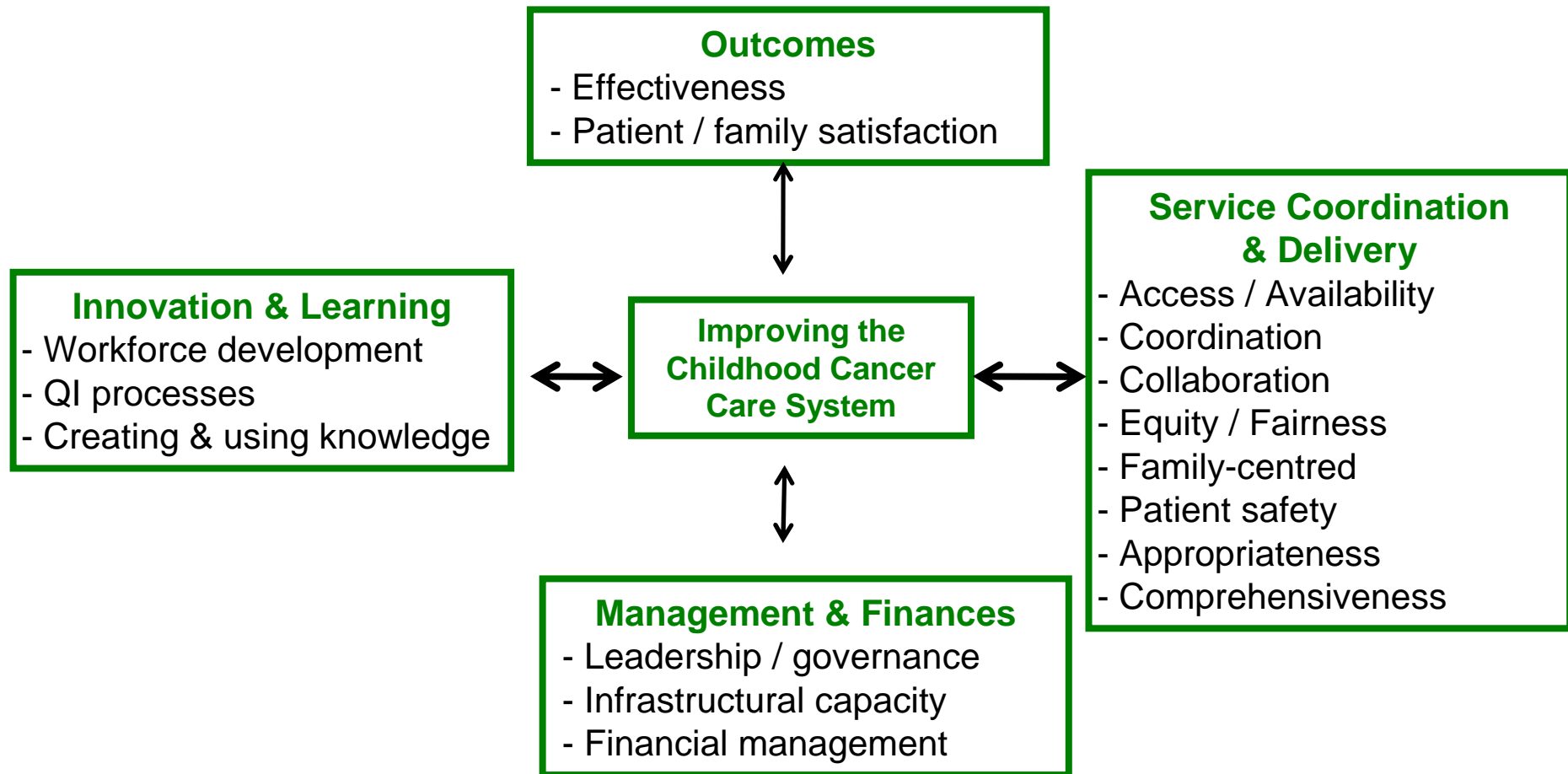


Clinical Utilization and Outcome	Financial Performance and Condition
Patient Satisfaction	System Integration and Change

# Achievements / Milestones - Framework

## Pediatric Oncology Balanced Scorecard

Sixteen Quality Concepts Mapped to Four Thematic Headings



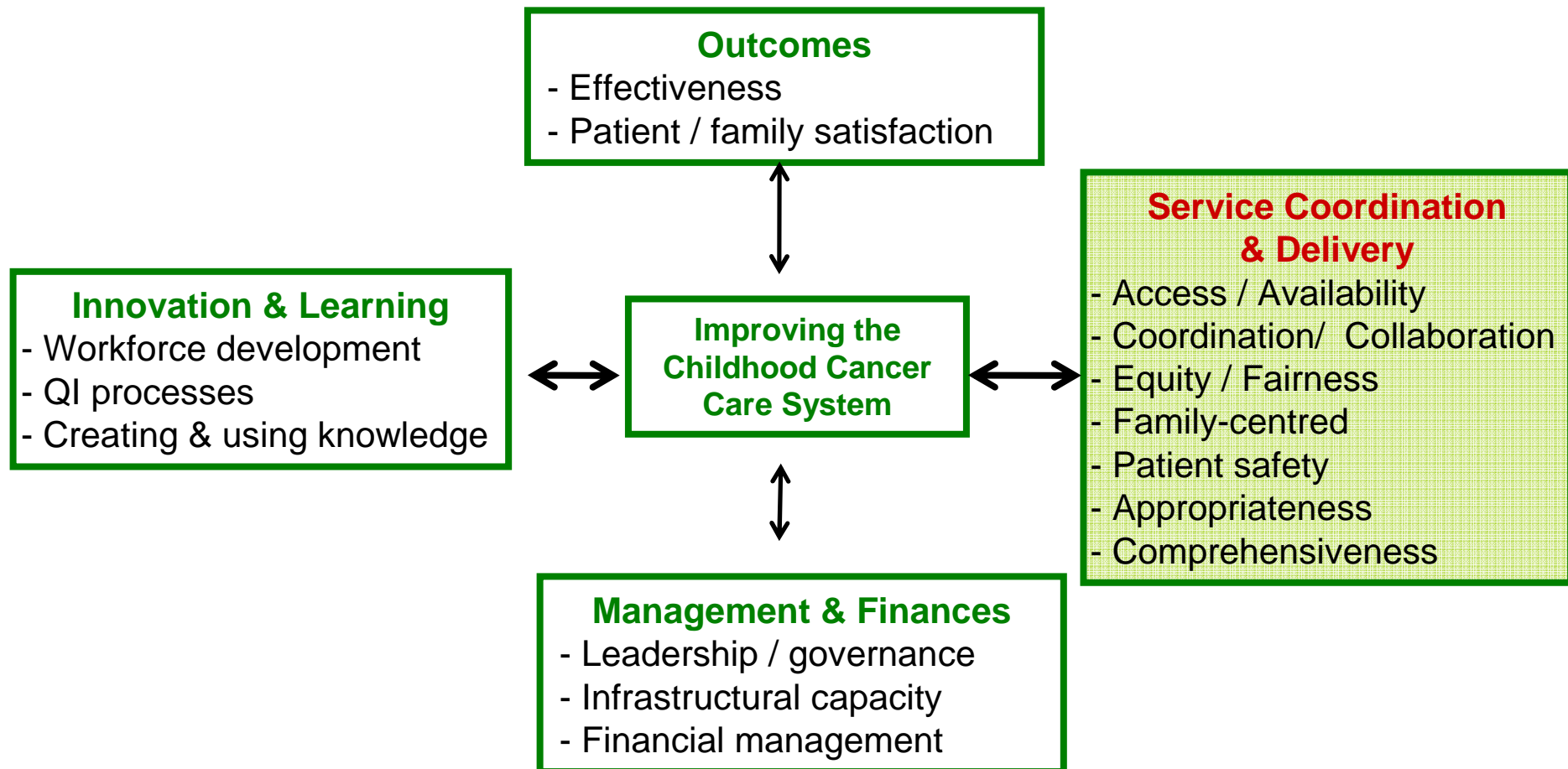
# Achievements / Milestones – Indicators

## Information Sources Consulted

- POGO Outcomes Working Group Report (2004-05)
  - a set of key pediatric oncology indicators in four relevant areas
  - indicator selection criteria
  - suggested data collection strategies
  - recommendations re benchmarking
  
- Pediatric and adult cancer indicators identified through a grey literature scoping review
  
- B.C. Group Systematic Review (N=26,863 citations)
  - Pediatric performance indicators (n=264) identified within the systematic review by B.C. pediatric initiative
  - Adult cancer indicators

# Achievements / Milestones – Indicator Examples

## Pediatric Oncology Balanced Scorecard



# Achievements / Milestones - Indicator Examples

## Service Coordination & Delivery

- **Access / Availability**
- Coordination / Collaboration
- Equity / Fairness
- Family-centred
- Patient safety
- Appropriateness
- Comprehensiveness

### Access/ Availability Definition

Extent to which services are available and accessible (geographic location; physical environment; affordability; and in a timely manner)

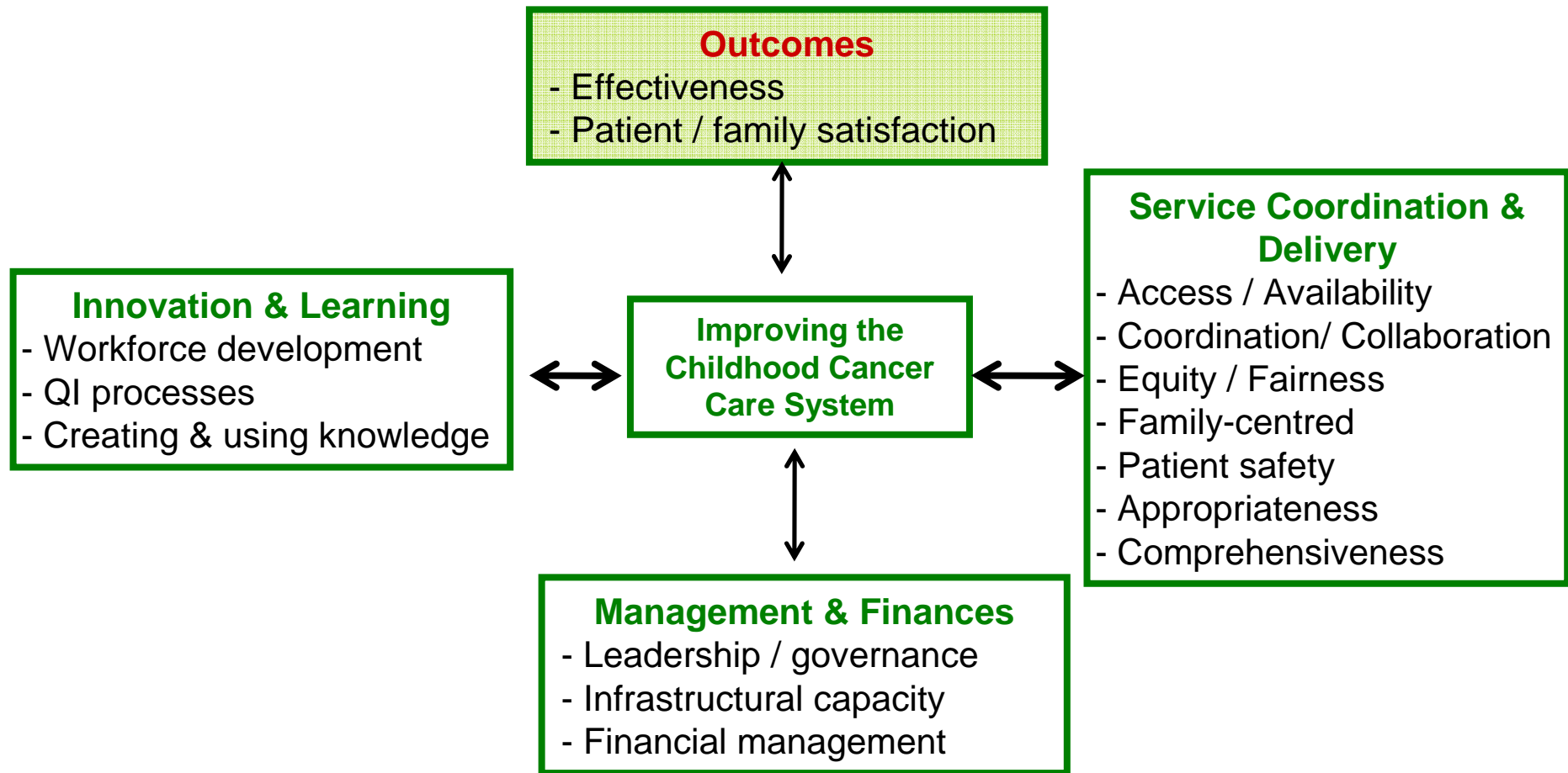
### Preliminary Indicator Example

#### **POGO Satellite (i.e. devolved) Care Program**

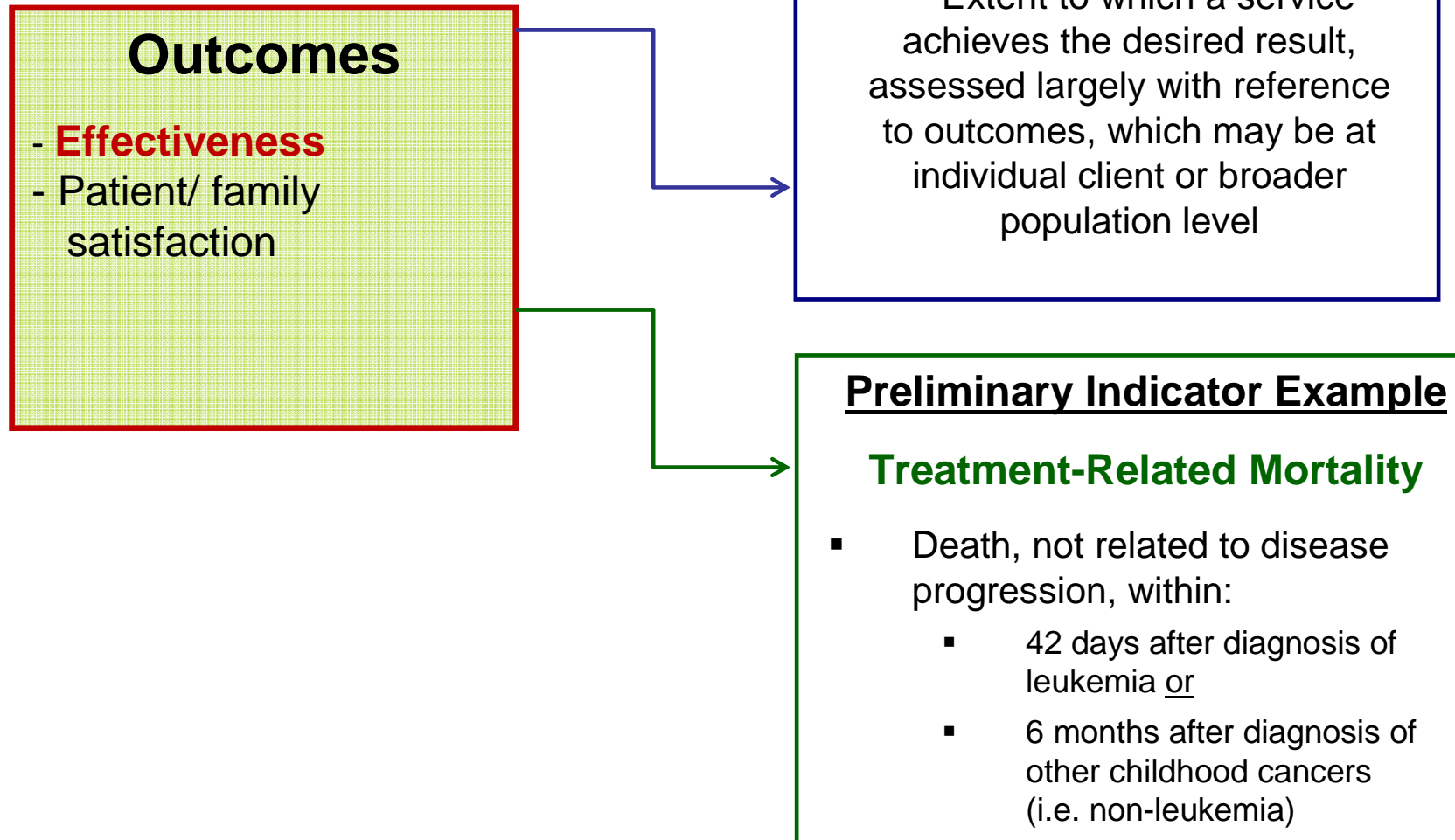
- % eligible enrolled in Satellite Care
- Reasons why patients are not referred to Satellite Care

# Achievements / Milestones – Indicator Examples

## Pediatric Oncology Balanced Scorecard



# Achievements / Milestones - Indicator Examples



**Next Steps**

# Next Steps

## □ Phase II

- Preliminary indicators to be further culled
- Dictionary of precise definitions to be developed
- Criteria for Delphi group rating of each indicator e.g.,
  - Important/ relevant to key issues and system self-regulation
  - Relates to the health system level
  - Available/ accessible/ feasible

## □ Phase III

- Delphi Panel recruitment
- Successive presentations of framework and indicators to stakeholders (Delphi panel/ focus groups) for feedback and indicator rating according to criteria

# Next Steps

Knowledge  
Exchange  
Throughout

Indicator Dictionary of Definitions (~80)  
Indicator Rating Criteria  
**(Research Group)**

Review & Rating: BSC Indicator List (2-3 rounds)  
**(Successive Delphi Panels)**  
(pediatric cancer centre representatives, multidisciplinary, key content experts, other stakeholders (e.g. parents, survivors, MOHLTC etc))

Reduction of List of Indicators (~30)  
based on Delphi Results  
**(Research Group)**

Consultation to finalize indicators and  
optimize buy-in  
**(Expert & Opinion Leader Focus Group)**

Final Report; Publication  
**(Research Group)**

# **Key Knowledge Translation (KT) Challenges**

# Key KT Challenges

## KT Challenges

- Large number and range of target audiences
- Sustaining interest throughout its development
- Relevant human resources NOT on hand
  - KT writers/ graphics/ public relations/ website support etc.
- Providing assurance of implementation and continued support e.g. scorecard maintenance, data collection, analyses and reporting

## KT Strengths/ Enablers

- 25 year legacy of provincial level oversight
- Culture of collaboration - well tested POGO system
  - partnership re evidence-based, consensus-based activity
- Community's pre-existing commitment to outcomes monitoring (PPOP, 2005-2010)
- Opportunities for KT /community & stakeholder involvement throughout the initiative



Thank you!

# Interim Strategy Map: Quality Domains Linked to Strategic Priorities of Childhood Cancer System

