

MIS Standards Department

Strategic Plan
2013 - 2016

April 2013



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Introduction

This document contains the MIS Standards team strategic plan for 2013 - 2016. It reflects input from stakeholders across the province and recognizes the increasing need for quality data and analytical capacity to support the health care system. The short and long term goals for MIS data of each regional health authority were also considered in the development of this strategic plan.

The MIS Standards team of the NL Centre for Health Information provides leadership in the province for the development and adoption of the MIS Standards within the public health system. To assist the Centre's MIS Standards team in setting its priorities and enhancing its services, an extensive consultation process was undertaken. The findings have informed the development of this 3 year plan and will shape the work plans and stakeholder support offered by the team in the years ahead.

Background

The Standards for Management Information Systems in Canadian Health Service Organizations (The MIS Standards © 2013) provide a national framework for collecting, reporting, and using financial and statistical data related to the day-to-day operations of health service organizations in Canada. The MIS Standards apply across the continuum of care including acute care, community based services and long term care. In this province, the RHAs report all expenditures, as well as key statistical information related to the services they provide based on these standards. The MIS Standards are developed, maintained and published by the Canadian Institute for Health Information (CIHI) in Ottawa. Newfoundland and Labrador adopted the MIS Standards as the basis for reporting and implementation in 1990.

MIS Standards Partnerships

The Newfoundland and Labrador Centre for Health Information MIS Standards team consists of a Manager, MIS Standards and two provincial MIS Standards Consultants, with an additional consultant starting in 2013. They work in collaboration with staff of the Financial Information Services division of the DHCS and the regional health authorities, supported by an extensive network of 18 provincial committees. Provincial support is provided by the MIS team through direct consultation, education, and provision of resource materials. The Manager, MIS Standards also acts as the provincial MIS Coordinator, liaising with the Canadian Institute for Health Information (CIHI) in Ottawa and representing the province on the CIHI MIS Standards Technical Working Group.

Provincial MIS committees assist in the development, interpretation and adoption of the MIS Standards within the provincial health system. Their purpose is to facilitate implementation and evaluation of the MIS Standards as they pertain to their disciplines. The main functions of the committees are to evaluate statistical reporting, identify key indicators, identify reporting issues and recommend resolutions, act as a liaison between the MIS team at the Centre and the Regional Health Authorities for their discipline, provide guidance within the RHA's regarding issues discussed within the committee and dissemination of information received from the Centre and CIHI into the regions. The following is a list of provincial committees:

- Provincial Data Quality and Reporting Committee
- Audiology
- Clinical Laboratory
- Nutritional Services
- Medical Imaging
- Electrodiagnostic, Cardiac and Vascular Laboratories
- Food Services Administration
- Health Information Services
- Nursing and Nursing Network
- Occupational Therapy
- Pastoral Care
- Pharmacy
- Physiotherapy
- Psychology
- Respiratory Services
- Social Work
- Speech-Language Pathology
- Therapeutic Recreation

Current MIS Standards Team Activities

The primary areas of focus for the MIS Standards team include the following initiatives:

- **Implementation of the 2013 MIS Standards revisions**
 - ◆ New national clearing accounts
 - ◆ New national revenue accounts
 - ◆ New sick leave compensation accounts
- **Research related to revisions to MIS Standards for 2016**
 - ◆ Long term care and residential services reporting
 - ◆ Visit reporting for community health services
 - ◆ Administrative clearing accounts
 - ◆ Maintenance of the workload measurement system component of the provincial Medical Imaging Meditech dictionary standard
- **Major Nursing and Operating Room Initiatives**
 - ◆ Development of the Nursing Report Card (statistical reporting summary)
 - ◆ Nursing and Operating Room functional centre reviews
- **Education and creation of learning products and presentations**
 - ◆ Creation of new presentations for in-person education
 - ◆ Evolution of webpage to include educational presentations online
 - ◆ Provision of educational sessions to each region
- **Provincial and region specific data quality initiatives**
 - ◆ Province wide chart of accounts data consistency project
 - ◆ Reporting of surgical visits



Current State of MIS Data Quality and Reporting

CIHI conducts an annual assessment of the quality of the data submitted by Newfoundland and Labrador (NL) to the Canadian MIS Database (CMDB). The MIS Compliance Assessment (MCA) score determines the degree to which provincial data was reported as per the MIS Standards and CMDB reporting requirements. It determines compliance to the chart of accounts as well as the timeliness and reasonableness of the data. The results are published in the Provincial / Territorial Data Quality Report.

NL continues to be among the leaders nationally in MIS reporting compliance. In fiscal year 2010-11, NL ranked fourth with a score of 66.3. The following is an excerpt from the CIHI 2011-12 CMDB report published November 2012 which illustrates the breakdown of NL's MCA score.*

Provincial/Territorial Data Quality Report

Canadian MIS Database (CMDB) 2010–2011

Indicator Name and Description		Metric	Optimal Value	N.L.
Data Quality Assessment				
Contextual Information	Number of Participating Hospitals - CMDB	#	N/A	34
Accuracy	1. Compliance With CMDB Chart of Accounts*	%	100	94.4
	Expenses in CMDB minimum primary accounts and secondary financial accounts	%	100	88.8
	Revenues in CMDB minimum secondary financial accounts	%	100	100.0
	2. Compliance With Minimum Statistical Reporting in Core Functional Centres†	%	100	82.0
	Earned Hours	%	100	98.8
	Inpatient and Resident Days	%	100	99.9
	Workload Units	%	100	50.6
	Procedures, Exams and Interventions	%	100	39.2
	Surgical Visits	%	100	96.5
	Post-Anesthetic Recovery Room Visits	%	100	76.5
	Face-to-Face Visits	%	100	78.9
	Attendance Days	%	100	91.6
	Meal Days	%	100	99.2
	Beds/Bassinets Staffed and in Operation	%	100	96.8
Timeliness	3. Data Submission Delay			
	After deadline of October 31	Days	0	0
	After resubmission deadline	Days	0	150
	Total delay	Days	0	150
Comparability	4. Financial Indicator Analysis in Selected Patient Care Functional Centres ^{†,*}	%	100	89.1
	Nursing Inpatient Services	%	100	86.4
	Operating and Post-Anesthetic Recovery Rooms	%	100	N/A
	Selected Ambulatory Care Services	%	100	93.2
	Diagnostic Services	%	100	93.3
	Therapeutic Services	%	100	97.6
Data Quality Evaluation (Derived From Indicators 1 to 4)		%	100	66.3

*Source: Canadian Institute for Health Information Provincial / Territorial Data Quality Report Canadian MIS Database (CMDB) 2010-11 published November 2012.

Preliminary assessment by the Canadian Institute for Health Information of the quality of Newfoundland and Labrador's 2011-12 data indicate gains over previous year's results. While there remain areas for improvement, the continuous improvements are promising and many of the issues identified have already being rectified or are in process.

MIS Stakeholder Needs Assessment

Methodology

The MIS standards team conducted a survey in October and November of 2012. The survey invited provincial stakeholders to provide their input as to the state of MIS data collection and reporting today, and their anticipated focus for the future. Respondents included representation from all levels of health care such as; front line health care providers, clinical managers, managers – other and senior management (VP and Director).*

The purpose was to identify stakeholder's knowledge, challenges and usage of MIS data. The information gathered was used to assess how the MIS team can provide the most appropriate services to all provincial stakeholders in order to best meet their support needs and remain a leader in this area on the national landscape. Furthermore, through a series of provincial committee discussions, emails,

teleconferences and various formal and informal meetings, additional input was provided from all level of stakeholders.

*Survey Respondent Type	Number
Front Line Health Care Providers	16
Clinical Managers	19
Managers - Other	17
Senior Management (VP / Director)	10
Other – Not Classified	1
Total Survey Respondents	63

Information Analysis

Upon determination that all quantitative and qualitative feedback had been received, the data was collated to facilitate further analysis. The stakeholder's qualitative input was compiled to indicate common themes in the text. Quantitative analysis and presentation of findings were also provided. The full results can be found in the MIS Standards Stakeholder Consultation March 2013 document.*

*The document is available for reference at:

<http://nlchi.nl.ca/images/STAKEHOLDER%20ASSESSMENT%20AND%20SURVEY%20RESULTS.pdf>

This compiled information provided a comprehensive view of the issues currently encountered by stakeholders related to MIS data collection and reporting in Newfoundland and Labrador and form the basis of this strategic plan.

Survey and Consultation Conclusions

The information gathered through the survey reinforced the feedback received through other opportunities for consultation with provincial and regional stakeholders. The NL health care system has benefited from adoption of the MIS Standards over the past two decades. Despite strong agreement on the need for standardized financial and statistical data and the benefits achieved to date, there is recognition that the full benefits of adoption of the MIS Standards have yet to be realized.

Stakeholders are using MIS data for a variety of management purposes ranging from financial reporting, workload measurement, productivity and utilization analysis, performance measurement and benchmarking. Unfortunately, the degree of data collection, reporting and use varies among the RHAs both in its maturity and level of automation. As expected, stakeholders identified diverse MIS Standards issues, challenges, and goals through the consultation process, although many common themes emerged.

Areas of immediate need for support focused on education and data quality. Basic MIS education and training in data collection and use is required. Interestingly expectations for focus in three years time show a shift towards greater use of the data for performance measurement and benchmarking. This likely reflects the assumption that today's efforts will ensure MIS data will be of sufficient quality and quantity in the future for stakeholders to have confidence in its accuracy, comparability and reliability for greater use. This information is the cornerstone of the MIS Standards team strategic plan for 2013-16 which will guide the MIS team to focus efforts, distribute resources and achieve results where they are needed most.

Desired State of MIS Data Collection and Reporting

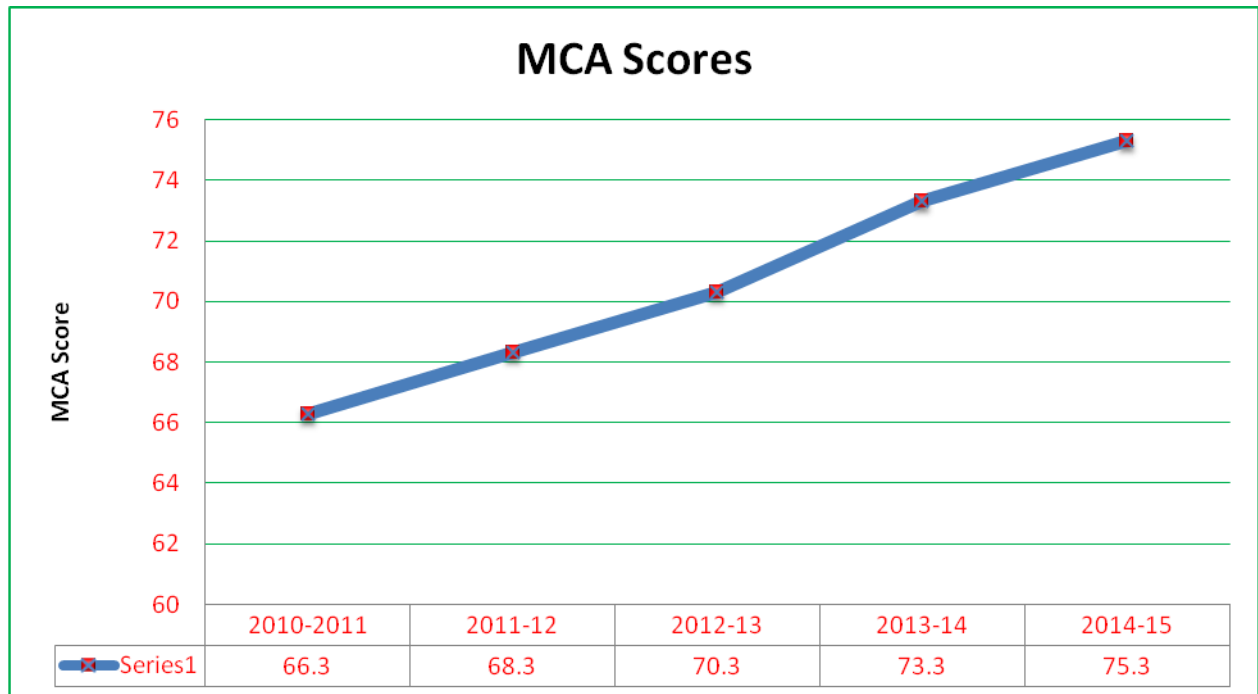
The overarching goal for MIS Standards adoption in NL is to collect and report quality data, consistent across the RHA's, and fully utilize it for accountability reporting, performance measurement and decision support.

In order to do so, the RHA's must meet all minimum provincial statistical and financial reporting requirements, ensuring alignment with national standards to the greatest degree possible. Various quality initiatives are needed to address known inconsistencies in interpretation, implementation, and reporting. As the quantity and quality of MIS data improves, use through evolving benchmarking, performance measurement and analytics will drive future standards revisions and quality initiatives.

A commitment for increased engagement and support from the Department of Health and Community Services demonstrates support for MIS Standards in the short term and the future. This support will help guide and implement the evolution of the future data analytics environment.

The following chart indicates the desired result to be achieved in relation to data quality initiatives.

Forecast of MCA Scores by Year After Quality Initiatives



The projected forecast of MCA scores shows an increase of:

2% Year one

3% Year two (5% cumulative over 2011-12)

5% Year three (7% cumulative over 2011-12)

The scorecard indicates the measures, targets, priority level and ownership for each objective identified in the strategic plan. This plan will guide the development of staff performance objectives and work plans for the coming three years.

MIS Strategic Plan

GOALS	Target Timeline	Objective	Measure	Priority	Ownership
Standards Meet all minimum provincial and national statistical and financial reporting requirements, ensuring alignment with national standards to the greatest degree possible.	Year 1 2013-14	Implementation of the 2013 Standards revisions	Implementation of the 2013 Standards revisions completed.	High	MIS Consultants
		Ensure the interests of NL are considered in the development of the 2016 Standards through participation on the CIHI National MIS Technical Working Group	<ul style="list-style-type: none"> Attendance at national meetings. Determine and document local needs and implications of proposed revisions 	Medium	MIS Manager
		Revise the engagement model of the DHCS to MIS Standards and activities	Implementation of a new DHCS engagement model.	High	MIS Manager
	Year 2 2014-15	Assess completeness and accuracy of implementation of the 2013 revisions	Adoption of the 2013 revisions verified through the MCA score for 2013-14 and other verification reviews with the RHAs	Medium	MIS Team
		Continue development of 2016 revisions	<ul style="list-style-type: none"> Attendance at national meetings. Determine and document local needs and implications of proposed revisions 	High	MIS Manager
	Year 3 2015-16	Continue development of 2016 revisions	<ul style="list-style-type: none"> Attendance at national meetings. Determine and document local needs and implications of proposed revisions 	High	MIS Manager
		Assist RHA's with preparation for implementation of 2016 revisions	Verify readiness for implementation through the provincial MIS committees.	High	MIS Team

Quality Attain continuous improvement in MIS data quality at the RHA, provincial and national levels	Year 1 2013-14	Surgical Services / Nursing review for all regions	Completion of reviews for all RHAs and recommendations for remediation provided.	High	MIS Consultants
		Increase in statistical reporting for nursing services, including community nursing services	Increase in the # of F/C's reporting nursing workload data	Medium	MIS Team
		Complete Medical Imaging WMS unit value revisions	Verification of RHA implementation of revised unit values.	Medium	MIS Consultants
		MIS COA Consistency Project	Complete review of 711 functional centres and secondaries	High	MIS Team
	Year 2 2014-15	Implementation of Clinical lab WMS	Verification of RHA implementation	High	MIS Consultants
		MIS COA Consistency Project	Complete review of 712 and 713 functional centres and secondaries	High	MIS Team
	Year 3 2015-16	MIS COA Consistency Project	Complete review of 714, 715, 717,718 functional centres	High	MIS Team
		Development of RHA comparative data quality reports	Publish regional DQ reports such as Regional MCA reports.	High	MIS Manager
	Overall Measurement		MCA Scores Yr 1 - +2% Yr 2 - +5% Yr 3 - + 7%		

Use Increase the use of quality data through the use of analytics	Year 1 2013-14	Gain access for MIS Standards team to the Provincial MIS Database Cognos reporting tool to run reports	Access provided and staff able to run reports	High	MIS Manager
		Create provincial analytic reports to publish findings on selected topics of interest	Publication of analytic report	High	MIS Manager
	Year 2 2014-15	Enhance indicator reports for MIS committees and align with HCM indicators	New schedule of indicators available and methodology for comparison	Medium	MIS Consultants
		Increase availability of reports and CIHI links on the MIS webpage	Increase in the count of reports, resources and links available on the webpage	High	MIS Team
	Year 3 2015-16	Continue webpage resource development	Enhancements to the webpage content completed.	Medium	MIS Team
Education Provide quality education and additional resources to stakeholders in support of increased knowledge and use of MIS data.	Year 1 2013-14	Increase availability of educational resources and CIHI links on the MIS webpage	Number of new items	Medium	MIS Team
		Increase the number of educational seminars available to stakeholders	Number of new items	Medium	MIS Team
	Year 2 2014-15	Provide a minimum of one MIS workshop per RHA	Number of trips to each RHA	High	MIS Team
	Year 3 2015-16	Provide a minimum of one MIS workshop per RHA	Number of trips to each RHA	High	MIS Team

MIS Team Development	Year 1 2013-14	Develop proficiency in use of the Provincial MIS Database COGNOS reporting tool.	Complete COGNOS training for MIS consultants	Medium	MIS Team
		Develop proficiency in use of the CIHI e-reporting tools.	Complete tutorials and practice using the tools.	Medium	MIS Team
	Year 2 2014-15	Enhance MIS team analytic capacity through professional development	Completion of further training and educational programs.	Medium	MIS Team
	Year 3 2015-16	Continue enhancement of MIS team analytic capacity in response to evolving needs.	Completion of further training and educational programs.	Medium	MIS Team

Conclusion

The preceding MIS 2013-16 strategic plan enables the MIS team to focus its limited resources on the areas of greatest need for greatest impact. The primary categories of focus are:

- Data Quality
- Standards
- Use of Data
- Education
- MIS Team Development

The next three years will be challenging as the goals and objectives are multifaceted with varying levels of complexity.

Goals and objectives will now be translated into MIS staff member work plans for each of the three years and updated annually. The plan will ensure MIS data will be of sufficient quality and quantity for stakeholders to have confidence in its accuracy, comparability and reliability. As the three years progress, the MIS team will increase its focus on data analytics, performance measurement and benchmarking.

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