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Research Team Develops Canada's First Measures of Performance in Treating Inflammatory Arthritis

A team of researchers has developed Canada's first set of systematic measures for tracking how well or poorly health systems are doing in providing services to people who have inflammatory arthritis (IA), a potentially crippling condition that is on the rise in Canada.

The researchers developed six key measures for gauging access to specialist care and initiation of treatment for people with IA, a disease grouping that includes rheumatoid arthritis, ankylosing spondylitis, juvenile idiopathic arthritis, and psoriatic arthritis. The work is described in March issue of *The Journal of Rheumatology*.

People who receive early diagnosis and start of treatment have a better chance of responding well and avoiding permanent joint damage from rheumatoid arthritis (RA), the most common form of IA. There is a growing body of evidence that early detection and treatment are also crucial to good outcomes for people who have other types of IA.

An estimated 1 million Canadians have IA. The incidence of IA is increasing in Canada and projections indicate there will be a shortage of rheumatologists needed to treat growing numbers of patients. In response, rheumatologists, researchers and <u>Alberta Bone and Joint Health Institute</u> (ABJHI) have been working with the <u>Arthritis Alliance of Canada</u> (AAC) to design models of care that improve access to specialists, treatment methods and patient outcomes.

"As models of care are designed to respond to the challenges ahead, we need to have at our disposal a sound methodology and evidence-based measures for determining whether they are meeting performance objectives," Dr. Claire Barber, the lead researcher, said. "The objective of our study was to develop a standardized set of system-level measures for evaluating these models of care regardless of where they are being applied in Canada. To our knowledge, these are the first measures of their kind in Canada."

The performance measures include how long people with new onset of IA wait for consultation with a rheumatologist, the percentage of IA patients seen by a rheumatologist, the percentage of IA patients seen in yearly follow-up by a rheumatologist, the percentage of RA patients treated with a disease-modifying anti-rheumatic drug (DMARD), how long it takes to commence DMARD therapy for RA patients, and the number of rheumatologists per capita.

"These measures will serve as the crucial starting point in future efforts to continuously improve the quality of care for people with IA," Dr. Deborah Marshall, a member of the research team, said. "As health systems managers track performance in these six critical areas, they will be able to see where there are opportunities for improvement and where they can raise the quality bar."

"Health care systems manage best what they measure consistently, and good management leads to better patient outcomes and cost-effective care," Christopher Smith, ABJHI's chief operating officer, said. ABJHI is known nationally for its expertise in designing disease care paths and in developing frameworks for measuring how the care paths perform against evidence-based objectives.

Dr. Barber said the measures were developed for health systems in Canada but can be applied to arthritis care systems in other countries.

Dr. Barber is a rheumatologist and assistant professor in the Department of Medicine, University of Calgary. Dr. Marshall is a professor the Department of Community Health Sciences, and the Arthur J.E. Child Chair in Rheumatology Research, University of Calgary, and ABJHI's Director of Health Technology Assessment and Research.

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Alberta Bone and Joint Health Institute is Canada's only independent institute for channeling knowledge into better bone and joint health care services and the nation's leading organization for engaging stakeholders in adopting best practices. ABJHI is a not-for-profit institute and a registered charity. For more information and to make a donation, visit www.abjhi.com.

The Arthritis Alliance of Canada is a coalition of over 35 organizations representing patient groups, arthritis consumer organizations, professional organizations, not-for-profits, government, industry and researchers. The Alliance's goal is to improve the lives of Canadians with arthritis. While each member organization continues its own work, the Alliance provides a central focus for national arthritis-related initiatives. For more information, visit www.arthritisalliance.ca

The Arthritis Society has been setting lives in motion for over 65 years. Dedicated to a vision of living well while creating a future without arthritis, The Society is Canada's principal health charity providing education, programs and support to the over 4.6 million Canadians living with arthritis. Since its founding in 1948, The Society has been the largest non-government funder of arthritis research in Canada, investing more than \$190 million in projects that have led to breakthroughs in the diagnosis, treatment and care of people with arthritis. The Arthritis Society is accredited under Imagine Canada's Standards Program. For more information and to make a donation, visit www.arthritis.ca.

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