

Descriptive measures and quality indicators for improving the quality of care and services provided by the designated centres of expertise for adult severe burn patients in Québec
English summary

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SUMMARY

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Introduction

In Québec, two centres of expertise for adult severe burn patients were formally designated in 2004-2005, one in the western region and the other in the east, to cover the entire province and meet the specific needs of this particular subgroup of trauma patients. During the last evaluation cycle of the centres of expertise, which was conducted in 2010 by the Trauma Services Advisory Group under the Ministère de la Santé et des Services sociaux (MSSS), certain recommendations were made to these centres, including one to ensure a regular process of jointly analyzing clinical and administrative data using recognized indicators specific to severe burn patients, both in acute care and in rehabilitation. The aim of the present guide is to support the updating of this recommendation by identifying descriptive statistics and quality indicators for the portrayal of severe burn patients and measurement of the quality of the care and services provided by the designated centres of expertise, all of this with continuous improvement in mind.

Methodology

A review of scientific and grey literature was conducted to identify available descriptive statistics for severe burn patients and quality indicators used to evaluate the services intended for this clientele, both in the hospital and the rehabilitation setting. A consultation process (adapted from the Delphi method) was carried out with experts from the two centres of expertise in order to select measures specific to severe burn patients, based on information found by the literature review. To complete the process, severe burn patients were asked to assess the different measures identified and provide feedback on their experience as users of the care and services provided by the centres of expertise. Subsequently, a preliminary data collection was carried out to test the applicability of the selected measures.

Results

This approach yielded 30 descriptive statistics and 36 quality indicators for the portrayal and quality monitoring of severe burn patients admitted to either of Québec's two designated centres of expertise. Thirteen statistics pertain to the description of the patient and the burn injury, while the others concern the care episodes at different stages of the service continuum: pre-hospital (n = 1), hospital (n = 10) and rehabilitation (n = 6). As for the quality indicators, one was selected for the pre-hospital stage, 23 for the hospital/acute care phase, and 12 for rehabilitation.

Conclusions

This concerted approach with experts from the service continuum for severe burn patients led to the identification of specific measures to describe their profile and evaluate the care and services provided at the designated centres of expertise. The work initiated by the two centres during the data collection pilot phase and the refinement of the selected measures should be continued. Such a process will permit confirmation of the workload required to obtain data and identification of the optimal measures for quality monitoring of these patients, while providing an overall portrait of severe burn patients in Québec.

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