

McMaster HEALTH FORUM

Topic Overview

Building Momentum Using the Avoidable Mortality Indicator in Canada

Stakeholder Dialogue 15 February 2013

The McMaster Health Forum convened a stakeholder dialogue on the subject of building momentum using the avoidable mortality indicator in Canada. With the support of the Canadian Institute for Health Information, the dialogue brought together a broad range of stakeholders from across Canada -- seven policymakers and decision-makers, three participants from government-supported agencies, two from health professional associations, and five from research and analysis groups -- to examine the problem, elements of a comprehensive approach for addressing it, and key implementation considerations.



The views expressed in the issue brief and dialogue summary are the views of the authors and should not be taken to represent the views of the funders.

Deliberation about the problem

A number of dialogue participants saw significant value in an indicator like avoidable mortality that can bring problems to attention (such as geographical regions or populations within Canada that contribute disproportionately to the avoidable mortality rate) and spur an examination of the sectors, systems, programs and services that contribute to such problems. And no dialogue participants argued that the indicator should not be part of a broad suite of indicators that are reported on and monitored. That said, dialogue participants identified two pairs of interrelated features of the problem that contribute to the challenge of building momentum in using the avoidable mortality indicator in Canada: 1) lack of clarity about how the indicator could best be used (particularly in terms of informing decisions) and by whom it could best be used; and 2) lack of consistent approaches to measuring avoidable mortality internationally, which complicates crosscountry comparisons, and the lack of access to avoidable mortality data within the country, which precludes research and analysis groups from using the data to inform decision-making.





Participants drawn from government, stakeholder and research organizations gather during a McMaster Health Forum event on 15 February 2013

Deliberation about an approach

Dialogue participants generally supported the first two of the three potential elements of a comprehensive approach to addressing the problem: 1) increasing dialogue about the avoidable mortality indicator and its potential uses, particularly among health system policymakers and managers (ideally through a series of informal interactions about treatable mortality and examples of interventions that have had an impact on the indicator), health professional leaders (particularly if the focus can be on specific conditions and the likely causes of high mortality from these conditions), and the public (with whom the emphasis should optimally be on what the indicators tell them about progress and challenges and not on the methodology); and 2) supporting informed decision-making about prevention and treatment programs, partly by positioning the indicator in the context of a suite of indicators and by developing an international consensus on the approach and terminology, but primarily by supporting the use of research evidence about the prevention and treatment initiatives that would have the greatest impacts on the avoidable mortality indicator (possibly through the use of micro-simulation models that could illustrate whether and how prevention and treatment interventions could affect the avoidable mortality rate).

Deliberation about next steps

Many dialogue participants committed to increasing dialogue within their own constituencies about the avoidable mortality indicator and its uses, and to supporting informed decision-making about prevention and treatment programs. Dialogue participants also prioritized: 1) calling for a consensus process at the international level to harmonize the approach and terminology; 2) making available avoidable mortality data to research and analysis groups; 3) incorporating the avoidable mortality indicator in the suite of indicators that governments monitor now; 4) having the Canadian Institute for Health Information (CIHI) continue to develop standards for and prepare reports about the avoidable mortality indicator; 5) having CIHI and/or its partners prepare compelling case studies of interventions and their realized or expected impacts on the avoidable mortality rate, and support interprovincial learning about what is changing (or not) and why.

Dialogue deliverables

To learn more about this topic, consult the <u>issue</u> <u>brief</u> that was presented to participants before the dialogue, the <u>summary</u> of the dialogue, and <u>view</u> or <u>listen</u> to the <u>interviews</u> with dialogue participants. For an electronic copy of the issue brief or dialogue summary, or to view or listen to the interviews, visit our website <u>www.mcmasterhealthforum.com</u> and click on 'Products' along the sidebar, or for direct access to our <u>YouTube</u> and <u>iTunes U</u> channels, simply click on the icons below.



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