MSSU PRESENTS

Learning Health Systems in Action

WEBINAR RECAP

Using data to inform real-time decision making and health system improvement: NS Health Command Centre for Access and Flow (C3)

Focus: Data

Speakers: Andrea Munster — Senior Director, Care Coordination Centre (C3), Nova Scotia Health

Dr. Logan Lawrence — Lead Implementation Scientist, Nova Scotia Health

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THE PROBLEM

- Fragmented information systems and manual processes limited real-time visibility of patient flow across 41 hospitals.
- Emergency department pressures across the province, bed shortages and frequent surgery cancellations highlighted the need for a coordinated provincial approach.

THE LHS APPROACH

- Implemented a province-wide command centre using shared, real-time dashboards for patient flow and resource allocation.
- Combined operational data with rapid feedback to continuously improve workflows.

WHAT CHANGED

- Significantly reduced surgery cancellations due to bed shortages and improved patient transfers across the province.
- Increased bed utilization, reduced administrative workload, and saved approximately 78,000 patient days through improved coordination.
- 20,000+ additional inpatients served with a 10% reduction in average length of stay on acute medical/surgical units from 2022-2025.

EVIDENCE IN ACTION

- Integrated data from multiple clinical systems to monitor bed availability, surgeries, patient transfers and hospital capacity.
- Used mixed-methods evaluation guided by implementation science to assess and improve implementation.

KEY LESSONS

1. Integrate existing data sources to improve real-time operational decision-making.
2. Embed evaluation throughout implementation to support rapid learning.
3. Use shared data to foster collaboration and system-wide resource planning.

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