The following provides a detailed description of each of Alberta's six dimensions of health service quality, as shown on the "Alberta Quality Matrix for Health". The Matrix groups these healthcare services into six dimensions:

1. **Acceptability**
   - Health services are relevant to user needs and are based on accepted or evidence-based practice. Acceptability focuses on the degree to which healthcare services are patient-centred; that is, care is provided in a manner that respects the patient's needs, preferences, and expectations resulting in a positive patient experience. It also considers how barriers to care such as ease of access to the service location, wait times, and co-ordination of care are addressed.

2. **Safety**
   - Health services are obtained in the most suitable setting in a reasonable time. Safety stakeholders, administrators, and healthcare providers from across the health system collaborate to promote, enable, and improve quality of care and support. Safety addresses the risks that patients face due to errors in the delivery of care, mitigates avoidable adverse events, and eliminates preventable adverse events to achieve desired outcomes.

3. **Resources**
   - Resources are optimally used in achieving desired outcomes. Mitigate risks to patient safety and care coordination. Delays and other barriers to access can be minimized through an efficient and effective use of resources. Mitigate risks to patient safety and care coordination. Resources are used prudently in achieving desired outcomes.

4. **Access**
   - Health services are obtained in the most suitable setting in a reasonable time. Access refers to the ease of obtaining care, and includes barriers to care such as ease of access to the service location, wait times, and coordination of care. Access fosters the expectation that by seeking care, patients will be treated in a timely manner.

5. **Appropriateness**
   - Resources are optimally used in achieving desired outcomes. Appropriate services are provided in a manner that is responsive to user needs, preferences, and expectations. Appropriate treatment or intervention is provided based on scientific knowledge and best practice to facilitate the patient's goals and preferences. Appropriate appropriateness is obtained in the most suitable setting in a reasonable time.

6. **Effectiveness**
   - Health services are obtained in the most suitable setting in a reasonable time. Effectiveness is the degree to which interventions work. Effectiveness addresses the risks that patients face due to errors in the delivery of care, mitigates avoidable adverse events, and eliminates preventable adverse events to achieve desired outcomes.

The Alberta Quality Matrix for Health includes six dimensions of quality: Acceptability, Safety, Resources, Access, Appropriateness, and Effectiveness. The Matrix is a tool to display how the dimensions of quality are integral to the healthcare system and is intended to act as a lens through which the healthcare delivery can be viewed.
Healthcare quality is a universal focus in modern health systems. With the publication of Crossing the Quality Chasm: A New Health System for the 21st Century (Institute of Medicine (IOM), 2001), health systems were alerted to the fact that “between the health care we have and the care we could have lies not just a gap, but a chasm.” Since this landmark publication, much attention has been placed on defining quality and in establishing strategies and actions to measure and improve quality in healthcare.

To reach the goal of providing consistently high-quality care, the IOM proposed that health systems commit to “six aims for improvement [to] raise the quality of care.” It proposed that healthcare should be safe, effective, patient-centred, timely, efficient, and equitable to better meet patient needs. Many organizations have built on these aims and adapted them for their own purposes.

In 2005, the Alberta Quality Matrix for Health was created, building on the work of the IOM. Led by the Health Quality Council of Alberta, the provincial Health Quality Network adapted the six aims to the Alberta healthcare context. The Alberta Quality Matrix for Health includes six quality dimensions:

- Acceptability
- Accessibility
- Appropriateness
- Effectiveness
- Efficiency
- Safety

The Matrix helps organize information and thinking around the complexity of the health system and is intended to act as a lens through which the healthcare system can be viewed. It provides a conceptual framework that maps health system quality on two axes. The horizontal axis represents the six dimensions of health service quality, while the vertical axis represents the lifetime health needs of the public and patients. These include:

- Being healthy
- Getting better
- Living with illness or disability
- End of life

The cells of the Matrix guide the user to reflect on those needs across each of the quality dimensions for the particular healthcare service or system that is being considered.

The Matrix is a tool to display how the dimensions of quality are integral throughout the healthcare system. It can be used to create awareness of quality in service delivery and, when populated with measures, can show where opportunities for improvement may exist. By making explicit where improvement is required, it can become a driver for change.

Finally, the Matrix creates a common language and understanding of the concept of quality, which then sharpens the focus on the work that is needed to support a high-performing health system. A common understanding of quality supports policy development, identification of priorities, goal setting, and quality improvement at the macro-, meso-, and micro-level of the health system.

---

3 Health Quality Network – Through leadership, collaboration, and shared learning, bring together quality and safety stakeholders, administrators, and healthcare providers from across the health system to promote, enable, and facilitate the improvement of health service quality and patient safety for the citizens of Alberta (HQN Terms of Reference).
The Alberta Quality Matrix for Health is useful across a broad scope of functions and levels of the healthcare system. For example:

**STRATEGIC PLANNING**

The Matrix can establish a common understanding of quality and provide a framework for strategic planning and policy development. Reference to the Matrix ensures that at the governance and senior leadership level the focus is on the entire health system (from the overall health of the population to end-of-life care) when determining priorities, and ensures that all aspects of quality are considered.

**PROGRAM (SERVICE) PLANNING**

The Matrix can be used to identify or verify that all the dimensions of quality have been addressed in service planning and appropriate measurement tools are in place to continuously monitor the quality of the service delivered.

**PERFORMANCE MEASUREMENT AND REPORTING**

In demonstrating commitment to quality and transparency, organizations, programs, and providers should determine relevant measures across the dimensions of quality and the areas of need to support ongoing reporting and improvement.

**QUALITY AND SAFETY MANAGEMENT**

The Matrix can facilitate quality and safety management activities through the measurement of quality, identification of areas for improvement, and implementation of actions to improve.

**EDUCATION ABOUT QUALITY IN HEALTHCARE**

The Matrix can be used as an educational tool to define the concept of quality in healthcare and to introduce common language.

How the Matrix is populated will be determined by the user and may include concepts or performance metrics or a combination of both. Not all cells will be relevant to every user and a single cell may contain more than one element.

For instance, in strategic planning, the Matrix can be used to stimulate discussion about the planning process or to identify goals and priorities throughout the healthcare system. Most often, these will be expressed as concepts in the Matrix. Similarly, the Matrix can be used in an educational context as a tool to define the concept of quality and its effect on patient care throughout the healthcare system.

For performance measurement, for example, the cells may be populated with specific performance goals and/or metrics for the area defined by the cell. The choice of metrics will depend on the unique needs of the user and the patient or population served. Measurement at the system level may use metrics that vary from measurement at the program/service level.
The health system provides a range of services for patients at various points and stages in their healthcare experience. The Matrix groups these healthcare services into quality dimensions:

### DIMENSIONS OF QUALITY

<table>
<thead>
<tr>
<th>DIMENSIONS</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acceptability</td>
<td><strong>To what extent do patients have a positive experience using healthcare services?</strong>&lt;br&gt;Acceptability focuses on the degree to which healthcare services are patient-centred; that is, care is provided in a manner that respects the patient’s needs, preferences, and expectations resulting in a positive patient experience. It also considers how patients are supported in participating in their own care.</td>
</tr>
<tr>
<td>Accessibility</td>
<td><strong>How easy is it for patients to obtain the health services they need?</strong>&lt;br&gt;Accessibility refers to how much effort patients have to expend to be able to access the services they need. It considers barriers to care such as ease of access to the service location, wait times, and coordination of care.</td>
</tr>
<tr>
<td>Appropriateness</td>
<td><strong>What service or treatment balances patient needs and preferences with evidence-informed practice to produce the best possible outcome?</strong>&lt;br&gt;Appropriateness refers to the collaboration between the patient and the healthcare provider to determine the care that respects the needs and preferences of the patient and is supported by evidence-informed practice.</td>
</tr>
<tr>
<td>Effectiveness</td>
<td><strong>Is the treatment or intervention provided based on scientific knowledge and best practice to facilitate the optimal outcome for the patient?</strong>&lt;br&gt;Effectiveness refers to the efficacy of the treatment or intervention in providing the best outcome for the patient. The choice of treatment or intervention for the patient is based on current scientific knowledge and evidence-informed practice.</td>
</tr>
<tr>
<td>Efficiency</td>
<td><strong>Are health system resources used prudently?</strong>&lt;br&gt;Efficiency focuses on the extent to which resources (e.g., people, facilities, and equipment) expended on health services add value (directly or indirectly) for the patient and minimize waste.</td>
</tr>
<tr>
<td>Safety</td>
<td><strong>What actions/mechanisms are in place to minimize or eliminate any opportunity for patients to be harmed by the care they receive?</strong>&lt;br&gt;Safety considers whether care processes are designed and implemented to prevent or mitigate risk of harm to patients.</td>
</tr>
</tbody>
</table>
The following provides a detailed description of each of Alberta’s six dimensions of health service quality, as shown on the horizontal axis of the Matrix.

**Healthcare context.** The **Efficiency** focuses on the extent to which resources (e.g., people, facilities, and equipment) expended on health services add value. It considers the use of resources to make them more productive and cost-effective.

**Effectiveness** refers to the efficacy of the treatment or intervention in providing the best outcome for the patient. The treatment or intervention provided is based on scientific knowledge and best practice to facilitate achieving desired outcomes.

**Accessibility** refers to how much effort patients have to expend to be able to access the services they need. It considers barriers to care such as ease of access to the service location, wait times, and coordination of care.

To what extent do patients have a positive experience using healthcare services? **Acceptability** refers to care that supports patients through an acute episode of illness, injury, or treatment (e.g., surgery). It is often linked to emergency services and hospital care, but can also be provided in the community (e.g., primary care) and at home (e.g., home care).

**Living with illness or disability** refers to care and support provided to patients managing a chronic illness, and to patients managing a health-related disability. This can refer to specialized services that provide support to optimize patients’ health and functional abilities within the limitations of their chronic conditions.

**End of life** addresses symptom management, best possible functioning, and preparation for eventual death for those with terminal illness. It is a part of care from the moment of the diagnosis of a life-limiting illness. It includes support for, and the involvement of, the person’s close circle, to the degree desired by the person, and it extends to the time of bereavement.

Palliative end-of-life care focuses on medical, physical, emotional, spiritual, and psychological needs of the person, and it aims to help people live and prepare as well as possible as they approach death. This care is provided in any setting, and is delivered with a multi-disciplinary approach, supported when necessary by specialized teams.

The health system provides a range of services for patients at various points and stages in their healthcare experience. The Matrix groups these healthcare services into four general but overlapping areas, based on patients’ lifetime needs, as shown on the vertical axis of the Matrix. This is not meant to depict a linear progression, as patients can move back and forth between areas of need over time.

### AREAS OF NEED

#### Being healthy
Achieving health and preventing occurrence of injuries, illness, chronic conditions, and resulting disabilities.

**Being healthy** refers to actions Albertans take and services the health system provides to support Albertans to stay healthy and to prevent injuries and illness. This includes lifestyle behaviors such as healthy eating and weight control, exercise, not smoking, reducing alcohol intake, and taking informed risks to avoid injury. It also includes preventive healthcare activities such as immunization and preventive screening.

#### Getting better
Care related to acute illness or injury.

**Getting better** refers to care that supports patients through an acute episode of illness, injury, or treatment (e.g., surgery). It is often linked to emergency services and hospital care, but can also be provided in the community (e.g., primary care) and at home (e.g., home care).

#### Living with illness or disability
Care and support related to chronic or recurrent illness or disability.

**Living with illness or disability** refers to care and support provided to patients managing a chronic illness, and to patients managing a health-related disability. This can refer to specialized services that provide support to optimize patients’ health and functional abilities within the limitations of their chronic conditions.

#### End of life
Care and support that aims to relieve suffering and improve the quality of living with or dying from advanced illness or bereavement.

**End-of-life care** addresses symptom management, best possible functioning, and preparation for eventual death for those with terminal illness. It is a part of care from the moment of the diagnosis of a life-limiting illness.

It includes support for, and the involvement of, the person’s close circle, to the degree desired by the person, and it extends to the time of bereavement.

Palliative end-of-life care focuses on medical, physical, emotional, spiritual, and psychological needs of the person, and it aims to help people live and prepare as well as possible as they approach death. This care is provided in any setting, and is delivered with a multi-disciplinary approach, supported when necessary by specialized teams.

The choice of metrics will depend on the unique needs of the user and the specific performance goals and/or metrics for the area defined by the cell. The Matrix can be used as an educational tool to define the concept of quality in the health system. Most often, these will be expressed as concepts in the programs, and providers should determine relevant measures across programs, and providers should determine relevant measures across reporting and improvement.
### Dimensions of Quality

<table>
<thead>
<tr>
<th>Areas of Need</th>
<th>Acceptability</th>
<th>Accessibility</th>
<th>Appropriateness</th>
<th>Effectiveness</th>
<th>Efficiency</th>
<th>Safety</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Being Healthy</strong></td>
<td>Health services are respectful and responsive to user needs, preferences and expectations.</td>
<td>Health services are obtained in the most suitable setting in a reasonable time and distance.</td>
<td>Health services are relevant to user needs and are based on accepted or evidence-based practice.</td>
<td>Health services are based on scientific knowledge to achieve desired outcomes.</td>
<td>Resources are optimally used in achieving desired outcomes.</td>
<td>Mitigate risks to avoid unintended or harmful results.</td>
</tr>
<tr>
<td><strong>Getting Better</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Living with Illness or Disability</strong></td>
<td>Care and support related to chronic or recurrent illness or disability.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>End of Life</strong></td>
<td>Care and support that aims to relieve suffering and improve quality of living with or dying from advanced illness or bereavement.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Description**

The Alberta Quality Matrix for Health provides a framework for strategic planning and policy development. It includes six dimensions of quality that are relevant to the particular healthcare service or system that is being assessed. These dimensions are:

- **Acceptability**: Health services are respectful and responsive to user needs, preferences, and expectations.
- **Accessibility**: Health services are obtained in the most suitable setting in a reasonable time and distance.
- **Appropriateness**: Health services are relevant to user needs and are based on accepted or evidence-based practice.
- **Effectiveness**: Health services are based on scientific knowledge to achieve desired outcomes.
- **Efficiency**: Resources are optimally used in achieving desired outcomes.
- **Safety**: Mitigate risks to avoid unintended or harmful results.

The Matrix can facilitate quality and safety management activities, including education about quality in healthcare, quality and safety management, performance measurement and reporting, and program (service) planning. It can also be used as an educational tool to define the concept of quality and establish strategies and actions to measure and improve quality in healthcare. The same Matrix can be used for different purposes, such as policy development, identification of priorities, goal setting, and quality improvement.