



FAQs

1. What is C-HOBIC?

C-HOBIC (Canadian Health Outcomes for Better Information and Care) is a project that introduces a systematic, structured language to patient assessment and documentation, in acute care, complex continuing care, long-term care and home care. Sponsored and managed by the Canadian Nurses Association, and funded with contributions from Canada Health Infoway and other provincial partners, C-HOBIC uses the same methodology developed in Ontario through its HOBIC program.

These clinical outcomes have a concept definition, a valid and reliable measure, and empirical evidence linking them to nursing inputs or interventions. Each concept is mapped to ICNP[®], the clinical reference terminology for nursing developed by the International Council of Nurses, which provides a standardized clinical term and an associated coding.

Phase 1 of C-HOBIC (May 2007 to June 2009) was implemented in Ontario (acute care, long-term care, complex continuing care and home care), Manitoba (long-term and home care) and Saskatchewan (long-term care). In this phase, nurses were taught about collecting standardized clinical outcomes and how to use this information to plan for and evaluate care.

Phase 2 of C-HOBIC (currently underway) is due to be completed in March 2014. In Manitoba, the second phase of C-HOBIC will build standardized measures into admission and discharge assessment screens (with the Allscripts system) at the St. Boniface Hospital. Using C-HOBIC's clinical information, St. Boniface will make available a synoptic report to support patient transitions from acute care to other health-system sectors. In Ontario, this same type of synoptic report will be available on the ClinicalConnect portal to assist patient transitions within a Local Health Integration Network (LHIN).

2. What are the objectives of C-HOBIC?

C-HOBIC's aims are to

- standardize the C-HOBIC language concepts in accordance with ICNP[®] and the Systematized Nomenclature of Medicine — Clinical Terms[®] (SNOMED CT[®]);
- capture patient outcome data related to nursing care across four sectors of the health system: acute care, complex continuing care, long-term care and home care;
- share the captured data as patients transition across the various sectors of the health system;
- store the captured and standardized data in relevant, secure jurisdictional data repositories (or databases) in preparation for entry into provincial electronic health records (EHRs); and
- facilitate the use of the data for aggregation and analysis at provincial and national levels to inform studies and comparisons related to health-system use and performance indicators.

3. **What are the benefits of collecting this information?**

There are many benefits to collecting this standardized suite of clinical data:

- It gives nurses access to real-time information about the effect of nursing care on patients.
- It provides health-care executives with real-time reports they can link with staffing, financial and other data (such as length of stay and readmissions), which helps them understand how well their unit/organization is doing to improve clinical outcomes and prepare patients for discharge.
- It offers researchers standardized aggregate data to support examinations into how well the system is working to meet people's health-care needs.

4. **How does C-HOBIC contribute to the priorities for health-care renewal in Canada?**

The collection of standardized clinical information across the continuum of care will support patient safety, increase the use of information technology and provide clinical information to support professional accountability.

5. **Are there other benefits to collecting the C-HOBIC data set?**

The C-HOBIC team has been in discussions with the Canadian Institute for Health Information (CIHI) about ways to include C-HOBIC data in the Discharge Abstract Database (DAD). Including the C-HOBIC data set in DAD will provide standardized patient-centred outcomes data to support aggregation and analysis of clinical outcomes, health-system use and performance reporting.

With C-HOBIC data sets at CIHI, we could also link it with other data sets, such as those in home care and long-term care homes, and understand clinical outcomes across the continuum of care.

6. **Is C-HOBIC different from the Canadian National Nursing Quality Report (NNQR-C) or the Nursing Quality Indicators for Reporting and Evaluation (NQuIRE®)?**

C-HOBIC is working in collaboration with NNQR-C and NQuIRE® (a Registered Nurses' Association of Ontario initiative). Together, these programs are best seen as complementary: C-HOBIC focuses on patient assessment and outcome data; NNQR-C on data to report nursing and organizational performance; and NQuIRE® on nursing interventions and best practices.

All three initiatives recognize the use of evidence-based, meaningful quality indicators as an essential component of accountability for a sustainable health-care system.

For more information, visit the C-HOBIC webpage at http://www2.cna-aiic.ca/c-hobic/about/default_e.aspx