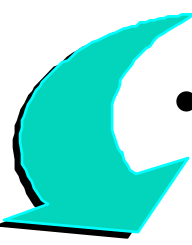


Pathways in Integrated Care Management Systems

Judith Weinstein
The Brondesbury Group

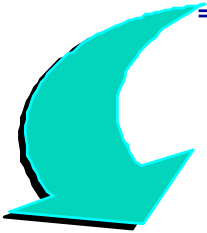


General Outline

- 
- Basic Definitions & Concepts (*or skip to slide 14*):
 - Evidence-Based Decision Making
 - Information Loops & Integrated Care Management
 - Pathways
 - Key Indicators & Discharge Criteria
 - Linking the Patient's Story across the Care Continuum
 - Patient Group Identification with your Care Partners
 - Clarity with Care Outcomes
 - Identifying & Using Key Indicators with Linked Pathways



Definition




Evidence-Based Decision Making:

“The systematic application of the best available evidence to the evaluation of options and to decision making in clinical, management and policy settings.”

Publications of the National Forum on Health. *Synthesis Reports and Issues Papers, Volume II, Evidence-Based Decision Making*” 1997. <http://www.nfh.hc-sc.gc.ca/publicat/finvol2/ebdm/ebdm.htm>
& quoted in: Canadian Health Services Research Foundation. “Growth Through Innovation”. *Annual Report* 1998



A Cautionary Note...

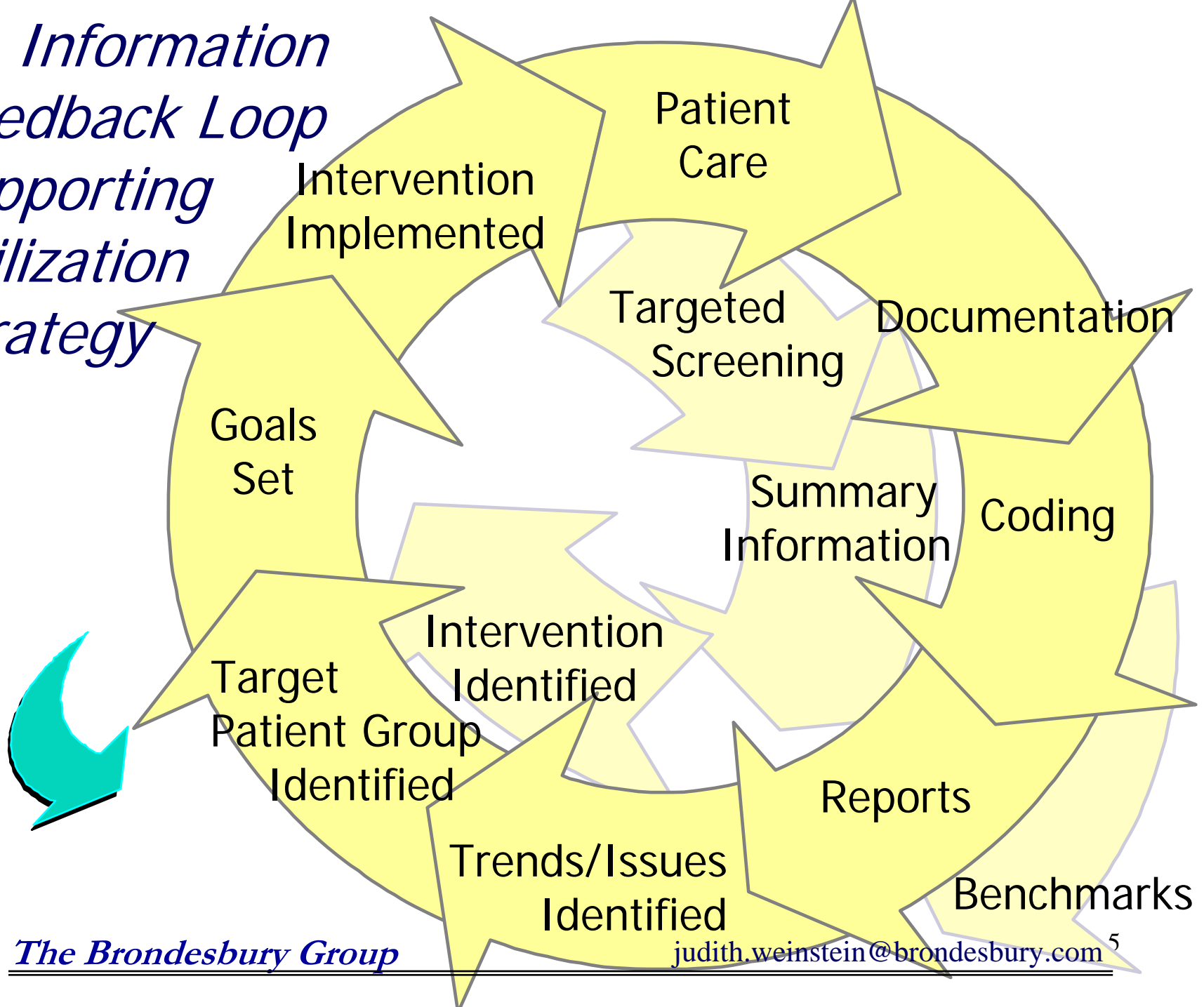


Measurement in the public sector is less about precision and more about increasing understanding and knowledge about what works in an area and thereby reducing uncertainty.

(Auditor General of Canada, 1996, p 21 *Report to the House of Commons: Matters of Special Importance*)

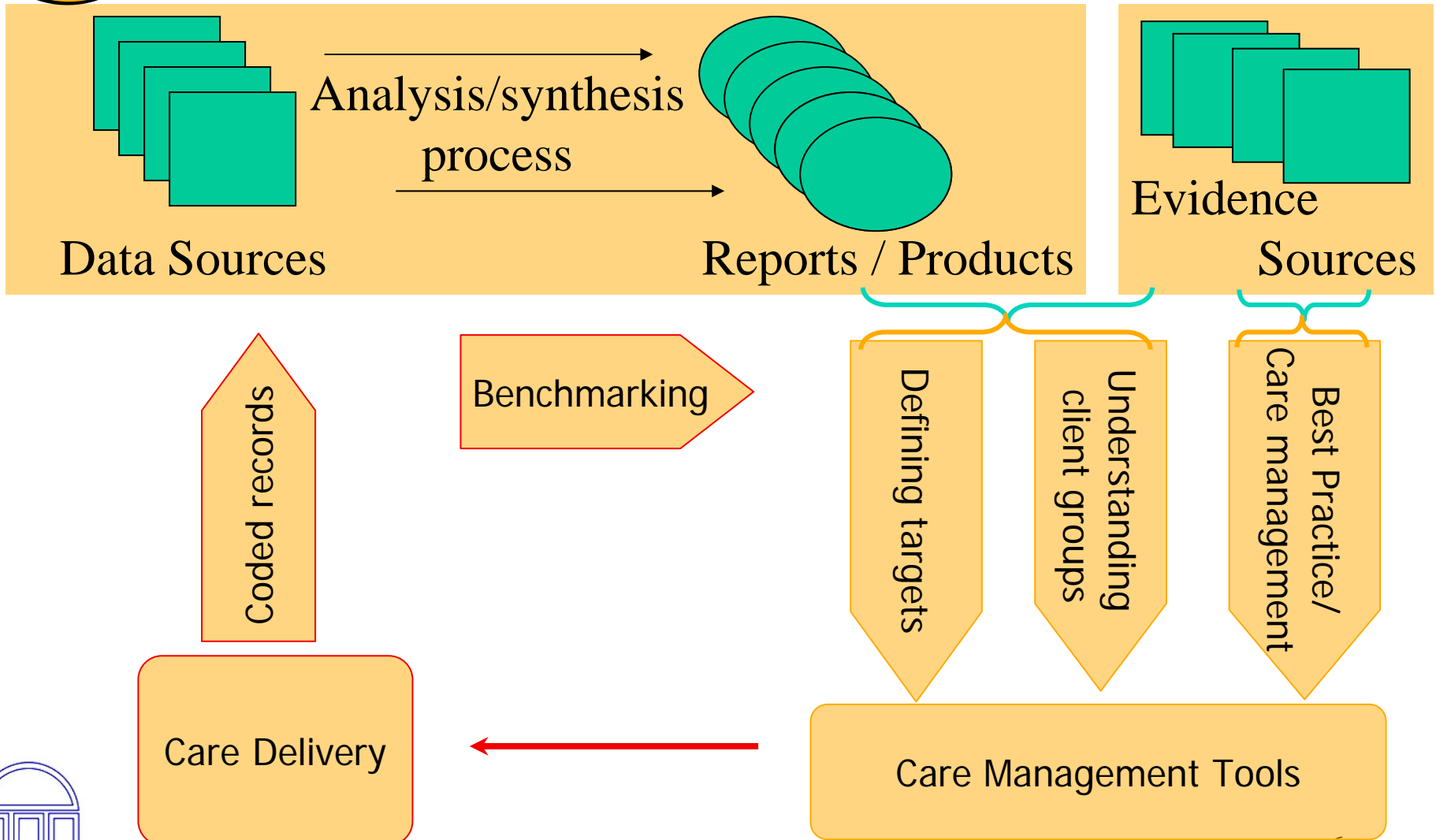


*An Information
Feedback Loop
supporting
Utilization
Strategy*





Integrating Quality & Utilization Management for Care Management



Definition



Pathway:

“A multidisciplinary tool, which makes explicit the usual patient problems and activities that must occur to facilitate the achievement of expected patient outcomes in a defined length of time.”

As adopted by the Durham Region Path Work Group

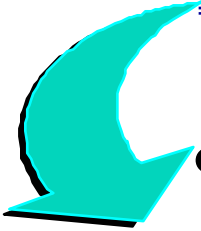


A Sample Pathway

MASTECTOMY	PRE-ADMISSION CLINIC	DAY OF SURGERY (POST OP)	POST OP DAY 1 IN-PATIENT)	DISCHARGE CRITERIA
Clinical Observations	Assessment of coping with cancer diagnosis	Pain control Nausea control Assessment of coping skills	Pain Control Nausea control Beginning self care	Pain & Nausea Controlled (with or without medication) Afebrile
Potential Complications	Problems with concentration & remembering information Stress reaction re: diagnosis	---> Bleeding Seroma	---> ---	Teaching re: s/s Infection, Seroma, Bleeding, Impaired function (shoulder), Lymphedema, Coping problems
Medications	Have Rx filled if same day surgery	Analgesia Antiemetic	---	---> at home or has Rx
Treatments		Hemovac Drsg	Hemovac draining Drsg/Tensor	---> Home with hemovac Printed Instructions Given, Taught & Reinforced Re Wound & Drain Care
Nutrition / Hydration		Fluids po - DAT	DAT	---
Elimination		Voiding	Voiding Passing flatus	---
Activity/ Positioning	DAY SURGERY Printed instructions given & explained re: Exercises (Day surgery) Axillary Node Dissection &/or Modified Rad. Mastectomy	Physiotherapist prn Patient does Stage 1 Exercises Affected arm supported by pillow. ACTIVITY I FVFI 3-4	Physiotherapist ---> Stage 2 Exercises	Printed Instructions Given, Taught & Reinforced Re: Exercises




Key Indicators

- 
- Events or outcomes that show patient progress
 - Developed systemically by the team
(congruence of expert opinion & evidence)
 - Used to evaluate patient progress & identify variances




Examples of Key Indicators

- 
- Up in chair
 - Pain score 3
 - Tolerating clear fluid diet
 - Demonstrates ostomy care
 - Lung sounds clear



Discharge Criteria




Events or outcomes related to the reason for admission that show the patient can be safely discharged to home or the next level of care.

- Developed systemically by the team
- Confirmed jointly with partners in patient/client care



Examples of Discharge Criteria

- 
- ROM (50) degrees
 - Pain and nausea controlled ...
 - Two successful feedings (breast/bottle) documented
 - Printed instructions given, taught & reinforced ...



Key Indicators & D/C Criteria

MASTECTOMY		LAKERIDGE HEALTH CORPORATION	
KEY INDICATORS & DISCHARGE CRITERIA			
TARGET LOS = 0-2 DAYS			
Please delete and/or add indicators according to PHYSICIAN TREATMENT PLAN Consider use of PATIENT PROBLEM LIST if Target date not met			
<u>PATH</u>			
<u>DATE</u>	<u>GOAL #</u>	<u>PATH GOAL</u> (Key Indicator)	<u>DOCUMENT GOAL</u> (DATE MET/INITIAL)
_____	POST OP DAY 0		
	MAS0001 Stage 1 exercises		_____/__
	MAS0002 DATC referral		_____/__
_____	POST OP DAY 1		
	MAS0003 Stage 2 exercises		_____/__
_____	DISCHARGE CRITERIA (In-pt. or Day Surgery)		
	MAS0004 Pain & Nausea controlled		_____/__
	MAS0005 Afebrile		_____/__
	Pkg.instructions given,taught & reinforced re:		
	MAS0008 Wound/drain care Physio exercise book		_____/__
	MAS0009 Post op care		_____/__
	MAS0010 DATC arranged		_____/__
SEPT/99 Version # 4		TO BE RETAINED WITH THE HEALTH RECORD	

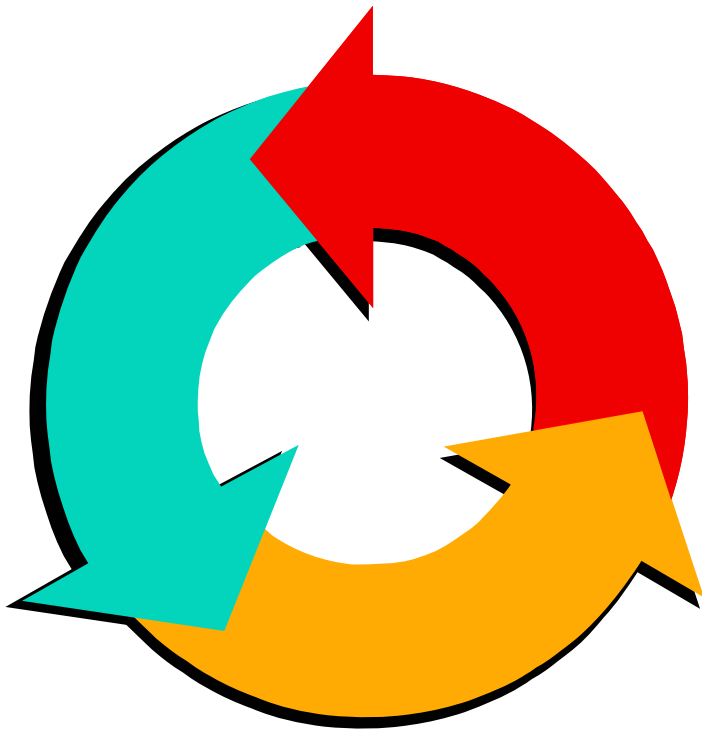
General Key Indicator



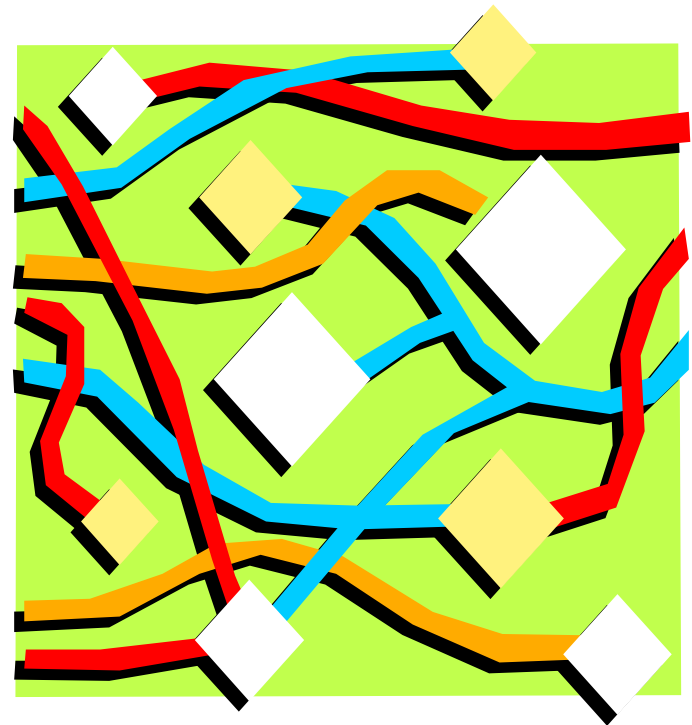
Pathway through a care episode - 2 views



Healthcare Worker View:



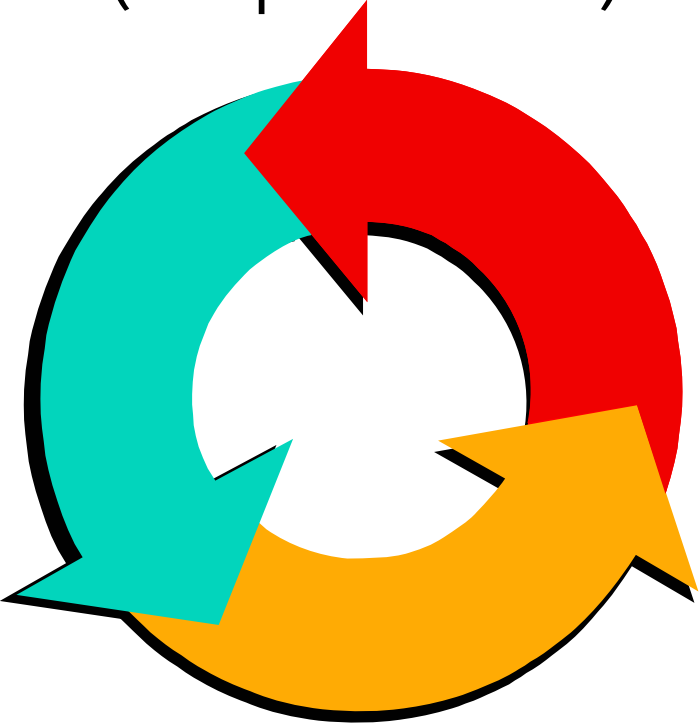
Patient/Client View:



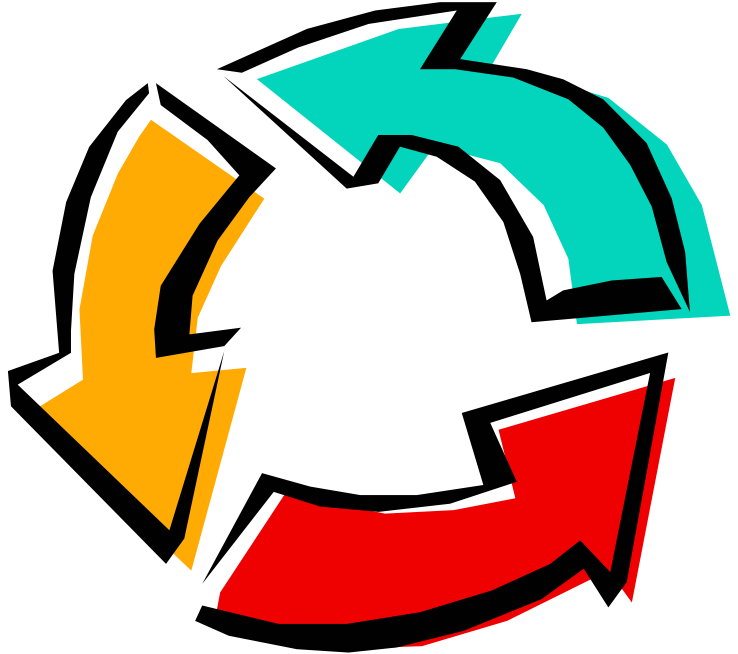
Pathway through a care episode - 2 views



Healthcare Worker View:
(Hospital Based)

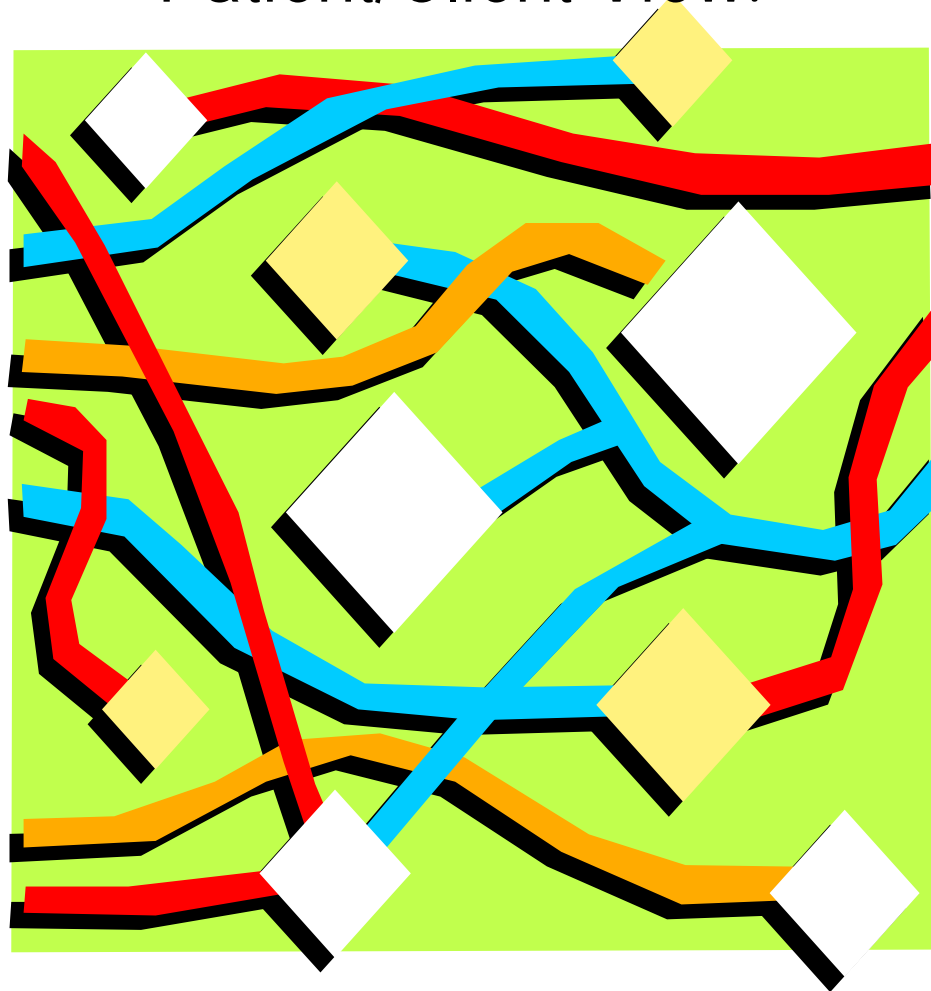


Healthcare Worker View:
(Community Based)



Pathway through a care episode - the important view

Patient/Client View:



Paths for Coordination: Single Care Provider



**Trigger &
Initial
Assessment**

**Discharge
Criteria**

**Admission
Criteria**

Key Indicator



Linking the Patient's Story across the Care Continuum



Patient Identifier	Episode Identifier
Diagnostic/ Procedural Group	Phase Identifier
Resource Needs	Patient Outcomes

Consider: privacy legislation, C3, health data initiatives



Linking the Patient's Story across the Care Continuum - Some Resources



What's New at OHIH (Office of Health & the Information Highway)

http://www.hc-sc.gc.ca/ohih-bis/whatnew/index_e.html

[Community Care Connects](http://www.communitycareconnects.com/home.asp) (C3)

<http://www.communitycareconnects.com/home.asp>

CCAC Coding Resource Guide for a Project team at Tillsonburg

http://www.rtchealth.com/projects/bpp/pages/pdfs/BPP Diagnostic Coding Final Report_oct18.pdf



Funding programs of the Office of Health and the Information Highway, Health Canada - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Refresh Home Search Favorites Media History Mail Print Edit Discuss

Address http://www.hc-sc.gc.ca/ohih-bis/whatfund/index_e.html Go

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Office of Health and the Information Highway

ICTs in Health Infoway

OHIH Funding

What's new
What is CHI
What we fund
What's available
What's happening

Canada Health Infostructure Partnerships Program (CHIPP)

[About CHIPP](#) [Frequently Asked Questions](#)
[List of funded projects](#) [News Releases](#)

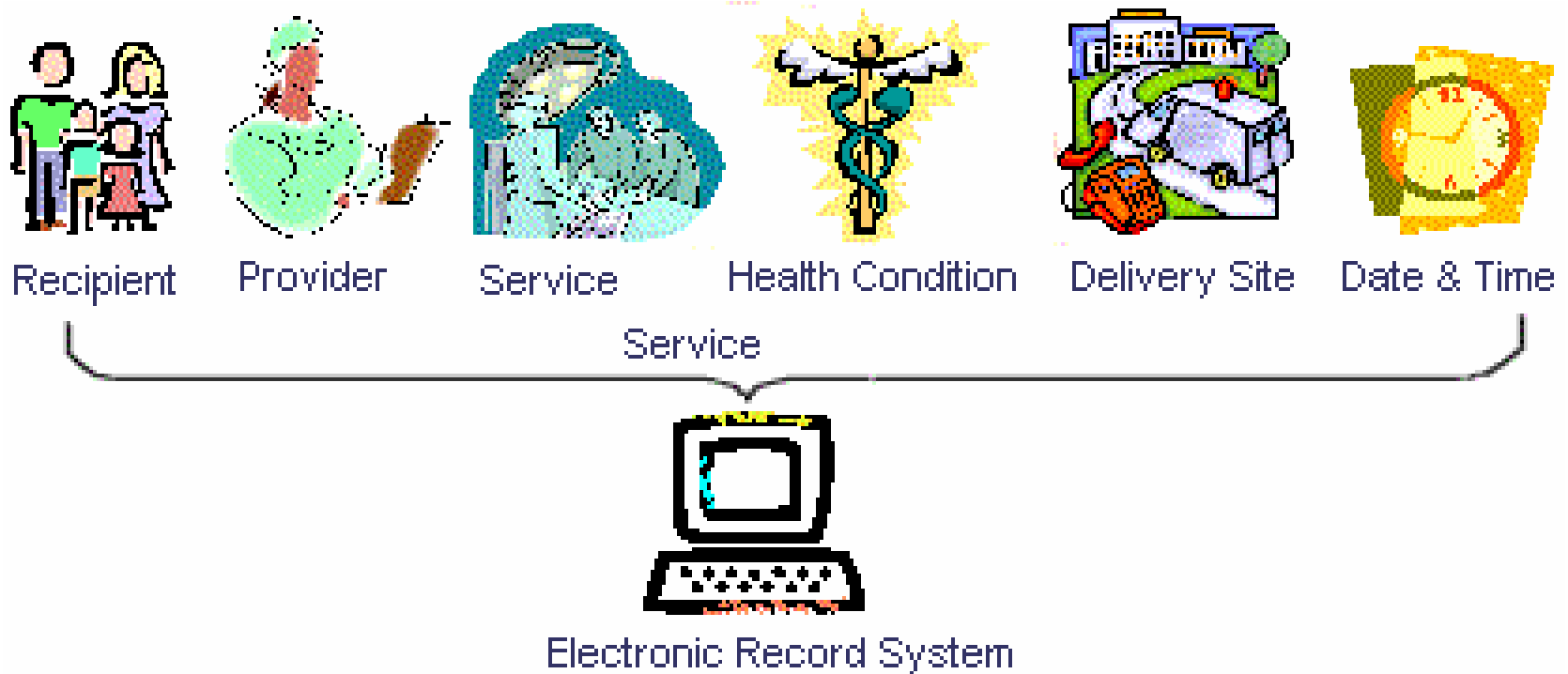
LET'S CHIPP IN: NATIONAL WORKSHOP
(by invitation only)
August 23, 24 an 25, 2001
Ottawa, Ontario
[Agenda](#)
[Biographies and Abstracts](#)

News Releases - Funded Projects

Start HP Status... Fundin... Inbox - 0... Microsoft... Microsoft... Internet 10:34 AM

Office of Health & the Information Highway

“Assembling a Standard Service Encounter”



http://www.hc-sc.gc.ca/ohih-bis/available/plan200111/plan_e.html#plan

F/P/T Advisory Committee on Health Infostructure

Tactical Plan for a pan-Canadian Health Infostructure 2001 Update

Office of Health and the Information Highway, Health Canada, November 2001

Patient Group Identification with Care Partners



Collaborating with care partners to understand patient groups:

- Why is the patient/client here?
 - Hospitals - moving to ICD 10
 - CCACs - ICD 9
- What is the client's health status?
 - Assessment Tools
 - Minimum Data Sets
- What resources are needed to support desired outcomes?
 - Concurrent review tools
 - Case Costing (workload)



Clarity with Care Outcomes



What level of observation?


- Observed /reported events
 - from literature
 - from local consensus process
- Testing with validated instruments

What level of outcome?

- Global
 - Able to manage ADL in discharge setting
- Episode specific
 - Pain controlled or absent?
 - Level of mobility / flexion

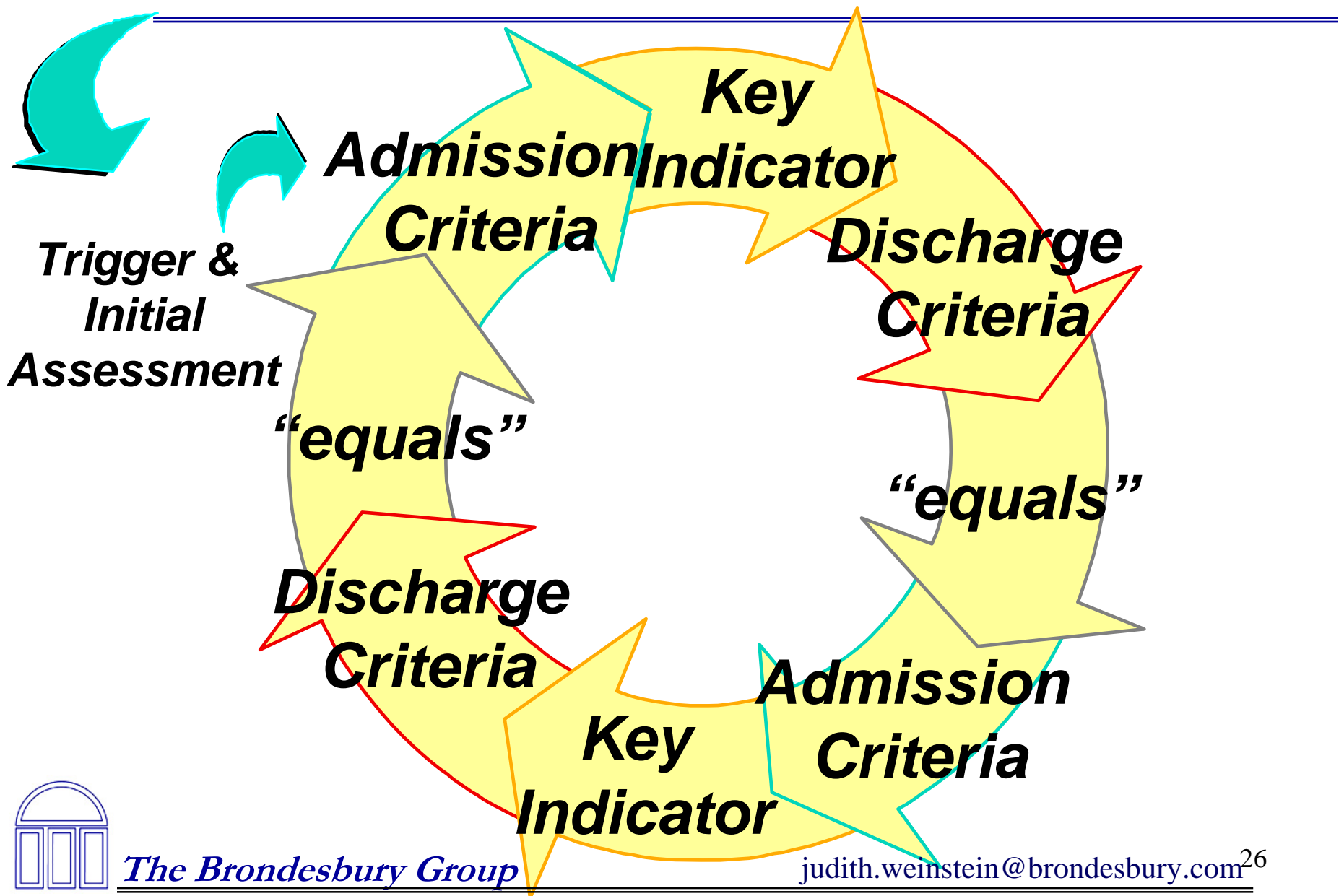


Identifying & Using Key Indicators with linked Pathways

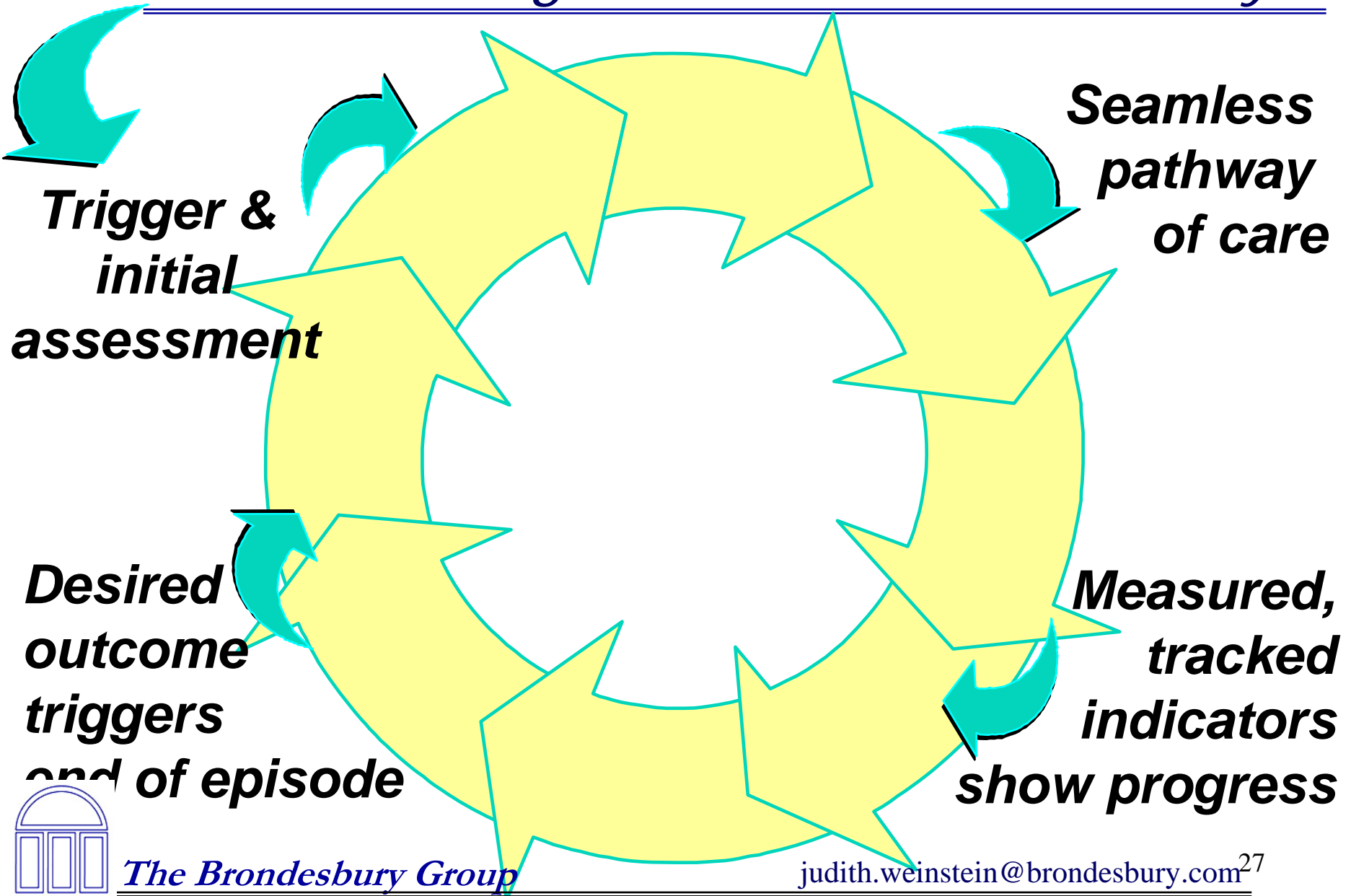
- 
- Tools integrated within system
 - Institutional level
 - Regional level
 - Systematic pathway development
 - Process for team agreement
 - Evidence where available
 - Indicators identified within systematic process
 - Why is this person here?
 - When is it safe for them to go “home”
 - What key indicators show progress to that point?



Our current challenge - to link the care cycle



Our next challenge - to redefine the care cycle



Questions?



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