Assessing Methods to Model Patient-Centric Care Pathways across Multiple Healthcare Systems



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Short bio

Sonja Cassidy is a specialist consultant at the Western Norway Regional Healthcare ICT. She holds a degree in Computer Science from the University of Bergen and a Master's in Leadership in Healthcare Organizations from the University of California, San Diego. For the last 18 years she has worked with process improvement in specialist care. Her emphasis has been on simplifying hospital workflows, translating the needs of healthcare professionals and organizations into technology requirements and presenting the possibilities of using technology to improve workflows to the hospitals and staff.

Currently, she has a scholarship to do her PhD as part of the research project Valkyrie at the Norwegian Center of eHealth Research, with a focus on developing EHR-supported, patient-centric, integrated care pathways across multiple healthcare organizations for young adults suffering from anxiety and depression.













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The aim





Assess the challenges of modelling patient-centric pathways across multiple healthcare levels



Suggest guidelines to meet those challenges

Introduction



Clinical pathways

standardized steps to rapidly diagnose the patient's illness and initiate treatment



Care integration

aimed to facilitate and encourage the coordination between levels of care



Patient centered care

- the patient as a recipient of care
- the patient as expert



Patient-centric, integrated care

- Holistic approach
- Patient perspective as evidence
- Vertical integration

Adding to the complexiety of modelling pathways

Multilevel healthcare service delivery

- macro level: system, policy, regulatory
- meso level: regional and local health services, clinical practice
- micro level: patient perspectives

Electronic healthcare records

- macro level: sharing information for better planning of services
- meso level: integrating professional teams and healthcare organizations.
- micro level: supporting the empowerment of patients and improving quality of care

The need for patient-centric, integrated pathways supported by EHRs

Norway, 12.03.20. Covid-19 lockdown

- Hospital disaster plans in place
- Lack of descriptions for end-to-end patient care
- Lack of plans for how EHRs and technology could support care pathways

Urgent actions to support integrated care pathways:

- Macro level: Policy and regulatory changes
- Meso level: Organizational changes. Collaboration
- Micro level: Self-care. Care provided in new locations
- Extended use of existing technology and EHR data



Main findings

Both macro, meso and micro level pathway models were represented in the research.

- The pathways were modelled across multiple healthcare levels (4)
- The modelling included some level of patient engagement (9). Engagement throughout the developing process (3)
- The research discussed the need for modifications to existing mapping tools to reflect multiple healthcare settings (3)
- The research discussed digital technology and EHR data as critical components for patient-centric pathways (5)
- The research used a data-driven approach to modelling, supported by EHR data (1)

The modelling process

different objectives and perspectives on patient care caused tension and challenged the collaborative process of designing patient pathways



pathway modelling helped bridge disciplinary boundaries and develop a common language around the multiorganizational pathway

Main findings: pathway modelling methods

ithin 3 hours fter surgical

Macro and meso level modelling

Business Process Modelling (BPM) **Event Driven** Lean

Service design

Process mining

Unified Modelling Language (UML) Spreadsheets, drawings





rnevs and outcomes depending on journey risk and system resp



Micro level modelling Customer journey mapping (CJM/PJM)









Pre-Op X-Ray Pre-Op CT Pre-Op Ultrasound Pre-Op Cefuroxime/Metronidazol

Anesthesia

Surgery

Post-Op X-Ray

Post-Op CT

Post-Op Cefuroxime/Metronidazol



And Excision

@Anar

Connecting the dots

Recommended modelling approach:

Micro level: PJM Language

Macro and meso levels: BPM Notation (BPMN)

Digital modelling tools



Digital modelling tools



- standardized methods
- allow sharing and reusing of models
- can balance the trade-off between overview, comprehensiveness and detail
- are easily expandable
- allow pictures, videos and documents in the models
- can support pathway simulation and execution



Conclusion and future work



Combining BPMN, CJML and digital modelling tools can:

- 1. help overcome the limitations of a specific modelling method
- 2. provide a different approach that meets the request from earlier research: to design healthcare services that qualify patient-centeredness, care integration and the use of EHR data to support the pathways

Further work is needed to

develop method formalism	improve the visual presentation of the different perspectives	exploit the potential of digital tools and reusable patient pathway templates	explore how data from EHRs can support the pathways
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Extra slide. Valkyrie project, Norwegian Center for e-Health Research

https://ehealthresearch.no/en/projects/valkyrie-distributed-service-oriented-architecture-for-coordinated-healthcare-services

