## The First Care Paths in Connect Care Launched

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Heart Failure (HF) and Acute Exacerbation of Chronic Obstructive Pulmonary Disease (AECOPD) are the first two Care Paths developed in Connect Care that launched in July 2022 and will be used to assist in operationalizing and ensuring the success of future Care Path development.

Connect Care already gives healthcare providers at AHS and its partners a central access point for more complete, up-to-date patient information and best practices. Now, with the addition of Care Paths at <u>Connect Care sites</u>, staff will benefit from time-saving in-hospital automation that improves workflow efficiency, patient safety and evidence-based care – with further enhancements incorporated as more Care Paths are developed.

<u>Care Paths</u>, created in Connect Care, optimize the in-hospital portion of a patient's overall clinical Care Pathway (depicted by the orange timeline below). As part of the larger patient journey from primary care, through hospital and into community care, Care Paths promote continuity of care along with other provincial pathway initiatives, such as the Provincial Pathways Unit (PPU) and Connect Care smart-sets, which focus on primary care, community care, and out-patient areas.



The HF and AECOPD Care Paths were the first to be developed in Connect Care because they account for the highest hospital admission rates of all chronic diseases with longer hospital stays, and frequent readmission/emergency room visits.





A Care Path is an advanced clinical decision support tool which provides direction and guidance on diagnosis, management, and referral of patients for specific medical specialties. They allow an integrated multidisciplinary approach through shared coordination of a patient's health care goals across care settings.

Before Care Paths were developed, evidenced-based recommendations were only available in the form of 'admission order sets' adapted from the original provincial paper-based order sets.

Unlike the admission order sets which are used at the time of admission, the Care Paths can be accessed anytime during the patient hospital stay from admission right through to discharge for continual guidance on recommendations.

## Improving patient care

Care Paths have been shown to reduce variability in care, prescribing errors, length of stay, readmission rates, patient mortality, and health care costs. They also improve patient follow-up with primary-care providers, specialists, and specialty clinics.

Preliminary evaluation of 'guideline-recommended medications' have shown a significant benefit in favor of using the AHS Care Paths compared to non-use. Furthermore, with the first two care paths launched for HF and COPD, a simultaneous clinical, cost, audit and feedback evaluation continues to validate use of these Care Paths from a clinician, patient, and system lens.

Care Paths are also part of the <u>Acute Care Bundle Improvement Initiative (ACBI)</u> which is an AHS quality improvement project that integrates eight provincial evidenced-based initiatives aimed at reducing duplication at the front-lines – CoACT Collaborative Care; Home to Hospital to Home (H2H2H); Pressure Injury Prevention (PIP); Elder-Friendly Care EFC); Heart Failure; COPD, Cirrhosis condition-specific order sets/care paths; and Enhanced Recovery After Surgery (ERAS). Many of the ACBI metrics are embedded into the Care Paths for easy access – a win-win for both providers, staff and patients.

Providers at Connect Care sites are embracing the new functionality of care paths
Data shows that Connect Care sites are embracing the new functionality, with uptake as high as
100% for HF and 68% for AECOPD Care Paths.

To view a site's progress, refer to "<u>HF Care Path enrollments in the last 90 days</u>" and, "<u>COPD Care Path enrollments in the last 90 days</u>" (*AHS credentials required to access*).

*Please Note:* In the linked figures, the blue bars show the percentage of patients placed on the Care Path at each Connect Care site; the grey bars to the right show the number of admissions for HF and AECOPD; and red bars indicate the percentage of HF and AECOPD Adult Admission Order Sets. Data extracted January 31, 2023, shows previous 90 days (Connect Care Launch sites 1-4) and since November 6, 2022 (Launch 5 sites).

Staff are feeling empowered and ready to use Care Paths to optimize patient care, with over 24,000 allied health providers and nurses, and over 700 prescribers completing training on the <a href="MyLearningLink">MyLearningLink</a> (MLL) Care Path education modules.

Those who wish to complete the MLL training can search 'Care Path' and take any of the following available courses (AHS credentials required to access). Prescribers without AHS access to MLL, can complete the Accredited HF Canada module at <u>Lifelong Learning</u>, <u>Faculty of Medicine & Dentistry</u> through the University of Alberta.

## Care Path Courses in MLL:

- EPIC Care Paths Allied Health/Nursing (15 min)
- EPIC Care Paths Prescribers (20 min); not accredited. Note: this course is also inserted into the accredited modules below.

## Accredited Courses:

- Heart Failure Disease Care Path Integration: Evidenced-Based Guideline Recommended Best Care
  - o RCPSC MOC 3 SAP 1.5 hrs
  - CFPC Mainpro+ 3-credits-per-hour for 1.5 hrs (4.5 credits)
- Acute Exacerbation of Chronic Obstructive Pulmonary Disease Care Path Integration -Evidenced-Based Guideline Recommended Best Care
  - o RCPSC MOC 3 SAP 1.0 hrs
  - CFPC Mainpro+ 3-credits-per-hour for 1.0 hr (3.0 credits)

The Launch of the first two Care Paths in Connect Care are being monitored closely. Learnings from the HF and COPD Care Paths have been compiled into a Care Path Development Guide to assist future Care Paths planned for implementation: Hip and Knee Arthroplasty, Cirrhosis, Breast Health, and Tracheostomy Management Pediatrics.