

Integrated Care Pathway for Moderate to Severe Depression

Team

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Outline

- Project aim
- What is an ICP
- Our process
- Process mapping
- ICP Moderate to Severe Depression
- Variance
- Decision support tool
- Pilot
- Our learning's
- Summary

Project aim

Develop a multidisciplinary integrated care pathway (ICP) for people referred to Waitemata District Mental Health Community Services in New Zealand who have Moderate or Severe depression

ICP Definition

An ICP determines locally agreed multidisciplinary practice based on guidelines and evidence, where available, for a specific patient/client group. It forms all or part of the clinical record, documents the care given and facilitates the evaluation of outcomes for continuous quality improvement”

Overill 1998

ICP Definition

An ICP is a multidisciplinary outline of anticipated care placed in an appropriate time frame, to help a consumer with a specific condition or set of symptoms move progressively through a clinical experience to positive outcomes. Variation from the pathway may occur as clinical freedom is exercised to meet the needs of the individual consumer

Middleton and Roberts (2000)

Process

- 2007 Bruce Low came to Waitemata DHB
- Presentations
- Project team
- Process mapping for clinicians
- Project put on hold as Bruce returned to Scotland in April 2007

2008

- Project reinstated
- Presentations to Community mental health teams
- Process mapping with service users/families and clinicians
- Key findings

Staff Concerns

- This will be monitoring what we do –big brother
- Will be more work
- This wouldn't work with our client group
- We don't have the resources or time

2008

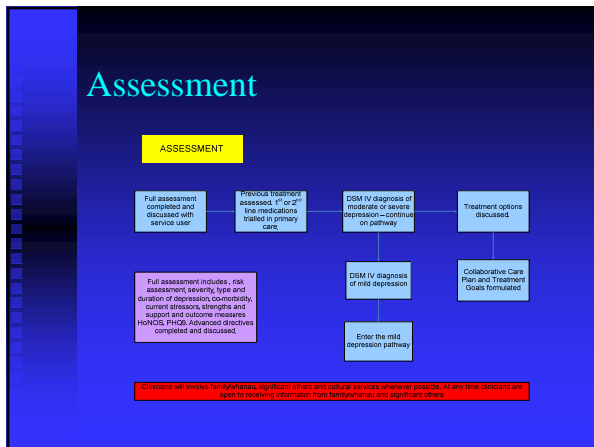
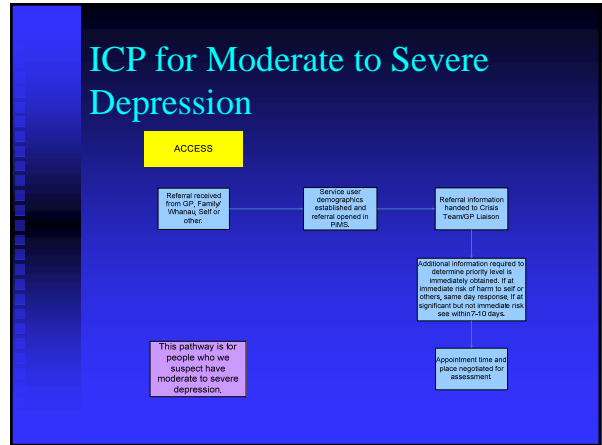
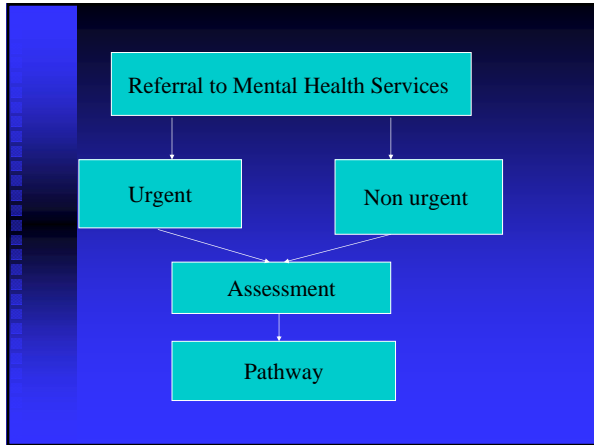
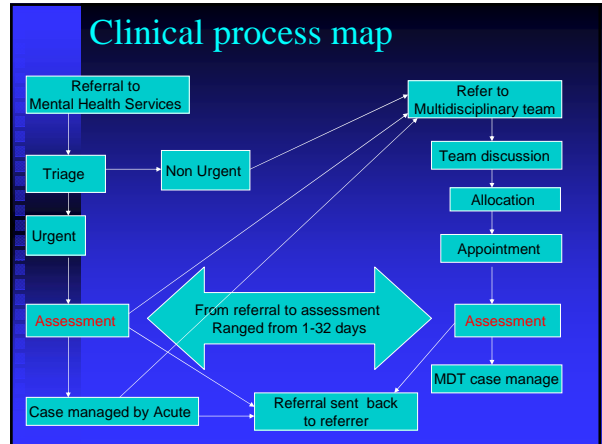
- Presentations to Community mental health teams
- Process mapping with service users/families and clinicians
- Key findings

Service user key findings

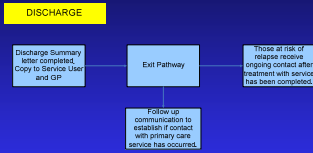
- Need to be suicidal
- Learnt to exaggerate feelings
- GP thought MHS couldn't help
- Referral sent back to GP and didn't know
- No understanding of distress
- Waiting time for therapy /referral
- Appointment times during work hours
- Transfer of care – had to start all over again no consistency

Family key findings

- Did not know where to go for help
- Managing family member at home
- Things have to get very bad
- Not sure how long we had to wait
- Family meetings cancelled
- Care giver burden
- Negotiated care plan changed with no consultation
- Didn't know family member was discharged
- Care depended on the individual clinician
- Collaborative care planning
- Clear visit schedule
- Clear communication
- Having access to key worker



Discharge



Concerns will involve family/whānau, significant others and cultural services whenever possible. All key clinicians are open to receiving information from family/whānau and significant others.



Variances

- **Variance** is a deviation from an activity set out in an ICP
- **Tracking** needs to be quick, intuitive, meaningful, part of record keeping linked to relevant activity by unique identifier
- **Auditing** will show trends, reasons for deviations, is this due to individual, clinical judgement, operational or systems, feedback information

Decision support tool

- Intuitive, transportable system
- Supports evidence based practice
- Records input and outcome data
- Identifies pathway variance patterns
- Tracks where a service user is, on the pathway
- Provides evidence based information to review and rework pathway

So why use an ICP

ICP's can

- Demonstrate what we do, as a service
- Help understand what makes a difference, with the population we see
- Show evidence not just opinion
- Link inputs with outcomes
- Demonstrate best use of resources/time when we are resource/time short -work smarter
- Provide a consistent delivery of care

Why use an ICP

- Help increase the number of correct decisions
- Allow staff to stop doing tasks that have little evidence base
- Unify clinicians views around EBBP
- Assist working in partnerships to a common purpose
- Assist staff morale and cohesion around decision making
- Reduce time in team discussions /meetings
- Support clinical Utility of outcome measures

Pilot

- Delayed
- Clinical lead
- Training
- February 2009

Our learnings

- Allocated time
- Clinical Governance
- Clinical lead
- Inviting others on and off the bus at different points along the journey
- Alleviate fears by working collaboratively
- Separating clinical pathway from clinical process
- Service user/family/whanau central to ICP

Summary - an ICP aims

To have the:

- Right people
- In the right order
- In the right place
- Doing the right thing
- At the right time
- With the right outcome
- All with attention to the service User experience



Integrated Care pathways
are where
Evidence Based Best Practice is used
and evaluated

(Not just Talked about)

When we think things get too
hard. Remember the donkey!



34-20