



# Integrating Practice Consistency Across Care Systems

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## LEARNING OBJECTIVES

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1. Summarize an Enterprise Approach to Integrating Pathways into Practice



2. Distinguish Various Factors that Create Hurdles to Implementing Consistent Care

3. Translate Key Performance Indicators into Opportunities

## TEAMWORK MAKES THE DREAM WORK!



## HCA HEALTHCARE OVERVIEW



**270,000** colleagues



**1,800** sites of care



**21** states and two countries



**30+** million patient encounters annually



## 2018 ANNUAL HCA HEALTHCARE PATIENT TOUCHPOINTS

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13M

Physician/Clinic Visits

9.4M

Outpatient + ASC  
Visits

2M

Inpatient Admissions

8.8M

ER Visits

335M

Triages by Transfer  
Centers

90M

CRM & Digital  
Encounters

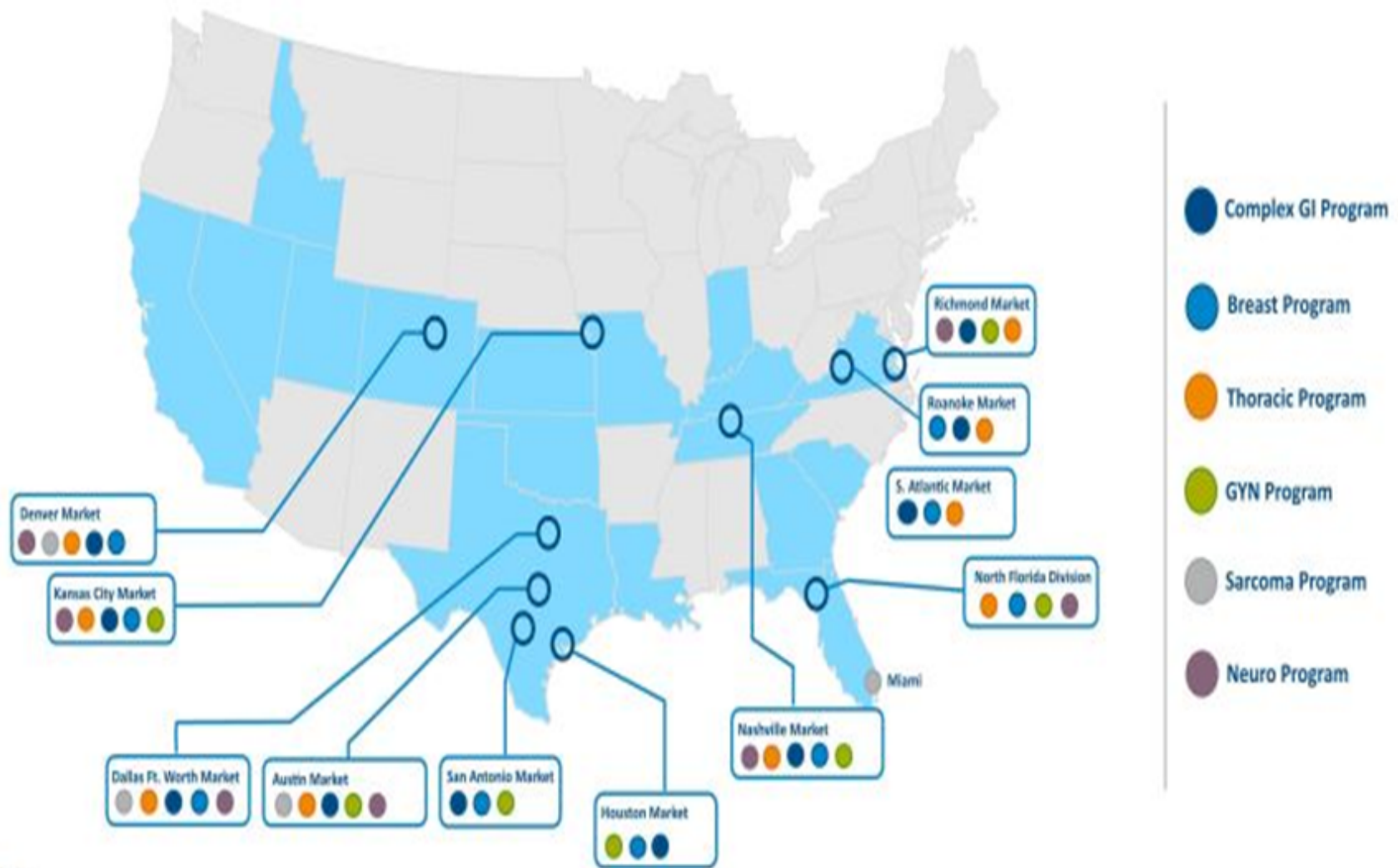
600K

ER Follow-Up  
Referrals

311K+

Patients Navigated by  
HCA Programs

# CLINICAL PROGRAMS SOLID TUMOR PROGRAM FOOTPRINT



# CLINICAL PROGRAMS COMMUNITY IMPACT 2020

## CLINICAL PROGRAMS COMMUNITY IMPACT

Local Workgroup Meetings  
**225+**

**8** Solid Tumor Programs

**22** Pathways Developed

**15** Markets

Engaged Physicians  
**350+**

**64** National Leadership Meetings & Tumor Conferences

**9365+** Patients Impacted

# ENTERPRISE INTEGRATION

SUMMARIZE AN ENTERPRISE APPROACH TO INTEGRATING PATHWAYS INTO PRACTICE



**OBJECTIVE 1**



# WHAT ARE PATHWAYS FOR SARAH CANNON?



OBJECTIVE 1

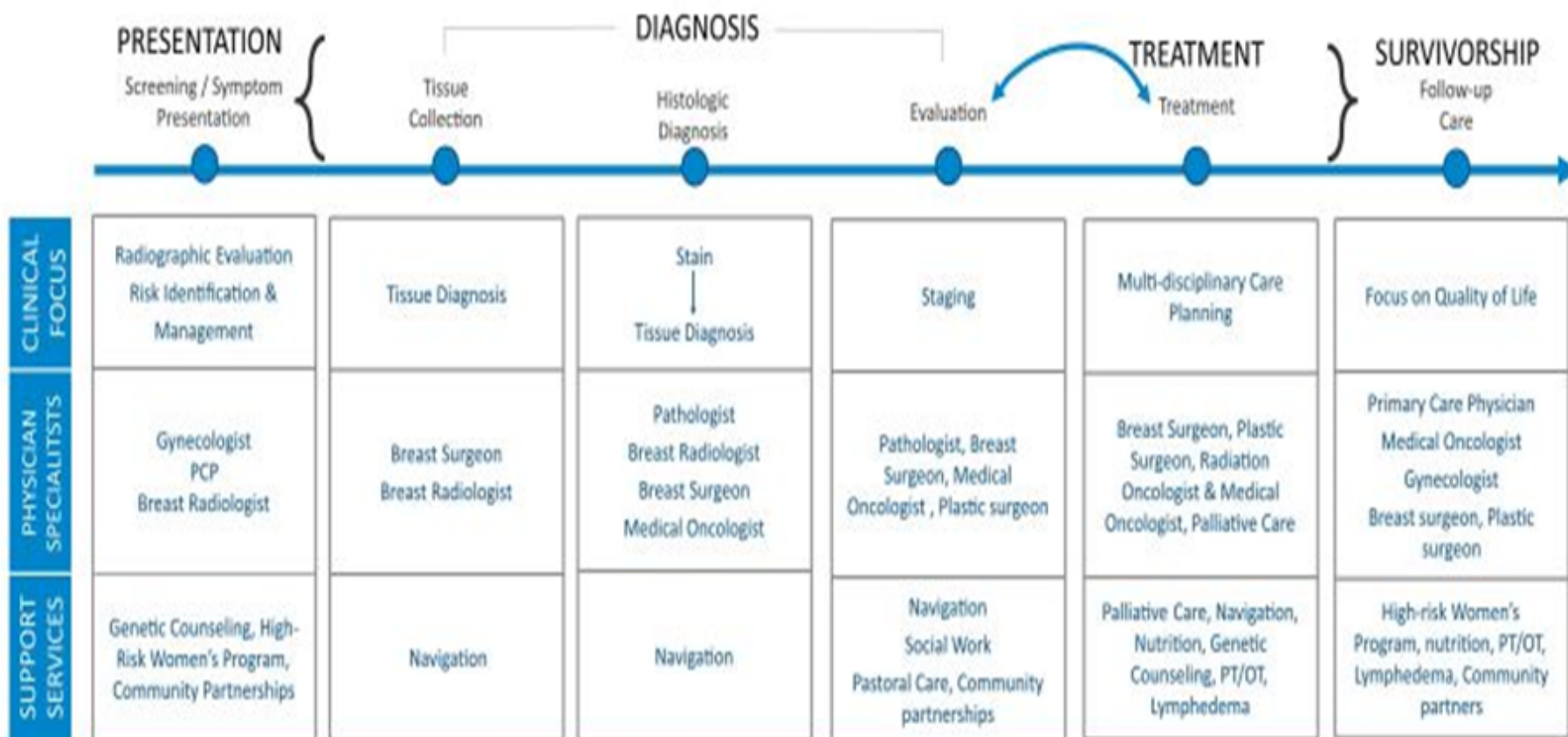
**Clinical Pathways aim to improve, in particular, the continuity and coordination of care across different disciplines and sectors**

Standardize evidence-based practice throughout Network

Utilization and distribution of expertise across National Network

Provide synchronicity to enact impactful change

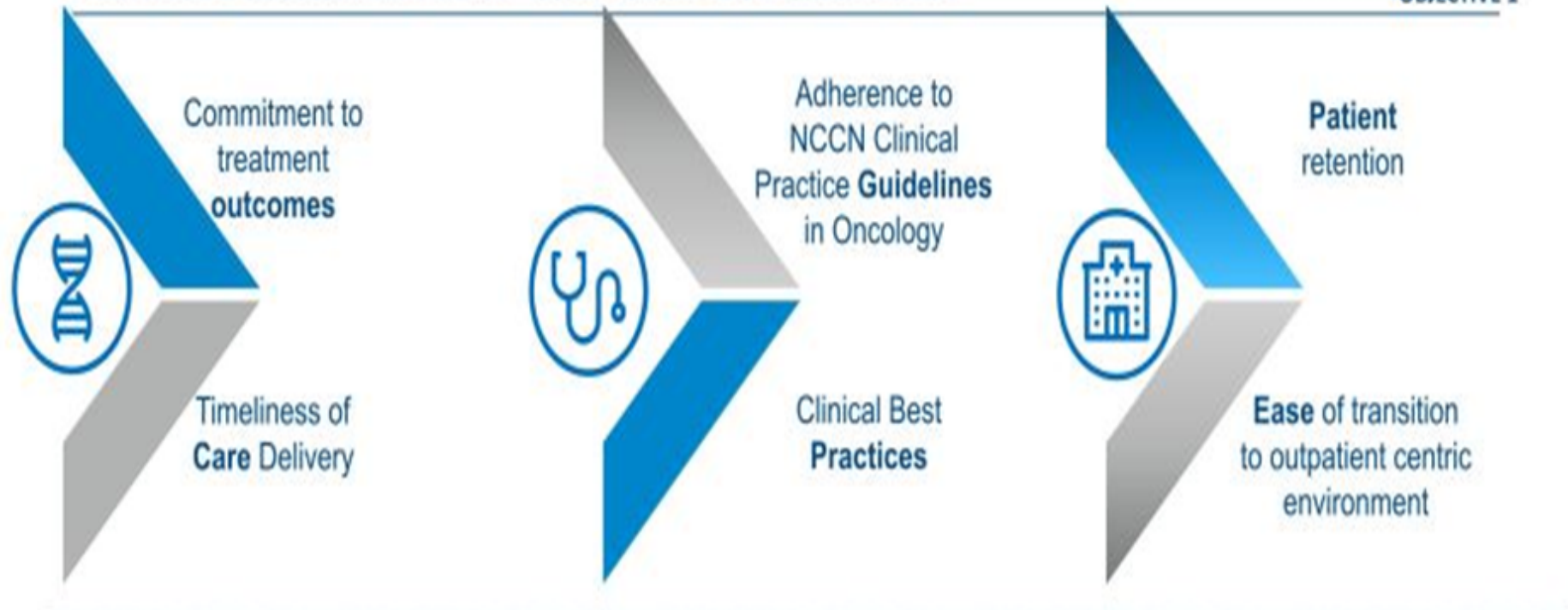
Provides Metrics and Standards for Navigation





OBJECTIVE 1

## CLINICAL PATHWAYS AND THE VALUE TO PATIENTS



25 days

Average time from Diagnosis to treatment for navigated patients



### Overall MDM adherence metrics

(January through November 2019)

Complex Gastro-Intestinal: 73%

Breast: 65%

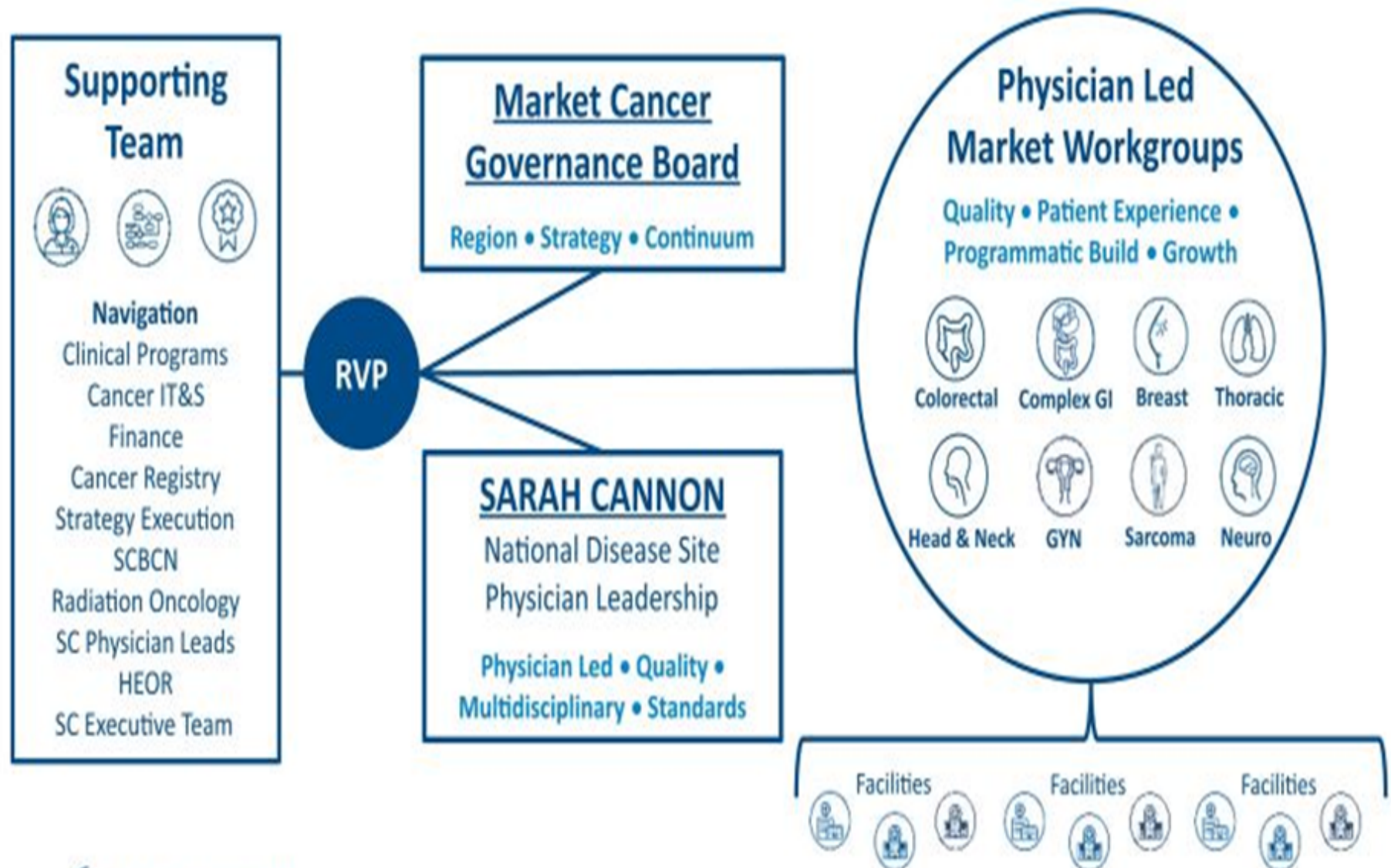
Thoracic: 72%

97%

Navigated patient retention rate



# SARAH CANNON CANCER GOVERNANCE MODEL





## PATHWAY DEVELOPMENT: WHAT YOU NEED TO KNOW



### Development

4 - 6 MONTHS



Physician

- Physician engagement
- Pathway build
- Define adherence metrics



Navigation

- Assist with data accuracy
- Ensures workflow is feasible



### Pilot

3-6 MONTHS

- Define the pathway workflow process
- Implement pathways in practice
- Review metric for data concerns or issues
- Work groups review and discuss findings

- Review reports for data entry concerns and accuracy
- Define care coordination barriers



### Operational

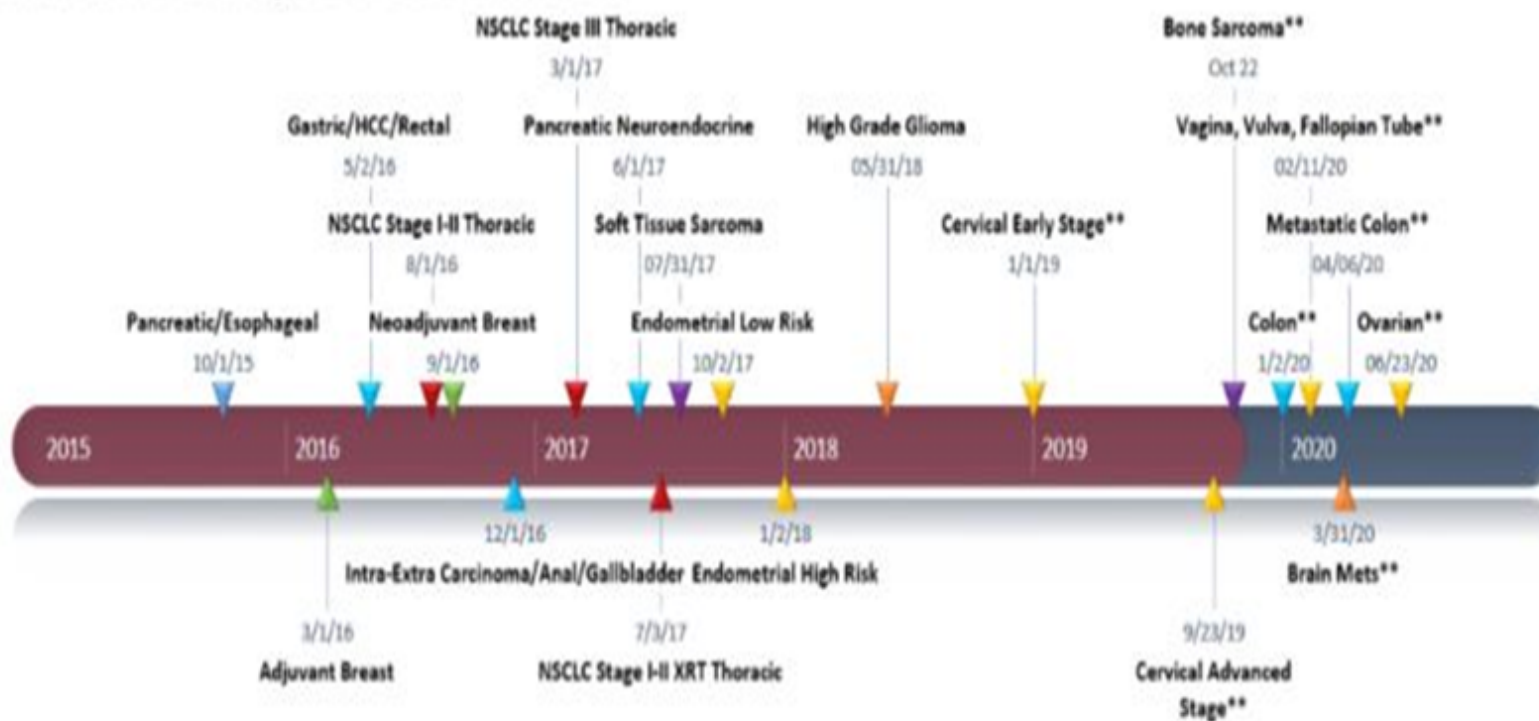
ONGOING

- Distribute adherence data across Sarah Cannon enterprise
- Communicate on pathway improvements and enhancements
- Participate and define outcomes research opportunities

- Fall-out report review for accuracy
- Work with physician for best practice alignment
- Communicate effectively to new physicians regarding role responsibilities
- Educate and assist other navigators



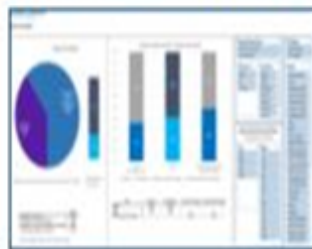
## Clinical Pathways Go-Live Timeline





# REPORTING

## Overall Adherence Report



- Monthly Operational Pathways
- Contrasts Navigated vs Non
- Core vs Non Market

## CP3R Data Reports



- Tumor Specific Quality Measures
- Comparative Data for Physicians
- Fosters Pre-Emptive Awareness of Quality

## Tumor Specific Adherence Reports

- Tumor Specific Pathways
- Pathway Specific Adherence Metrics
- Filterable by Navigator/Physician



## Trended Adherence/Fall-Out Reports

- Pulls Non-Adherent Patients for Navigation Review
- Details Reason for Non-Adherence
- Displays Non-Adherent Reason Trends



## Adherence Report Visuals



- Built Quarterly for Presentations
- Contrasts Different Patient Cohorts

## Outcomes Measures Report



- Displays Survivorship and 30 Day Post-Op Mortality Rate for Different Patient Cohorts




# OPPORTUNITY-OBSTACLES

DISTINGUISH VARIOUS FACTORS THAT CREATE HURDLES TO IMPLEMENTING CONSISTENT CARE



OBJECTIVE 2



 PEOPLE	 PROCESS	 TECHNOLOGY
<ul style="list-style-type: none"><li>• Getting Started</li><li>• Not Feeling Involved</li></ul>	<ul style="list-style-type: none"><li>• Staying Current</li><li>• Lack of Integration</li></ul>	<ul style="list-style-type: none"><li>• Data Collection</li><li>• Data Accuracy</li><li>• Outcomes</li></ul>





## Example Opportunity Number 1



### Data Collection

- Adherence Philosophy
- Observation
- Delivery

## Example Opportunity Number 2



### Physician Engagement

- Employment models
- Comprehensive Engagement
- Corporate
- We Already Use/Follow Pathways

# WHAT DOES SUCCESS LOOK LIKE?

TRANSLATE KEY PERFORMANCE INDICATORS INTO OPPORTUNITIES



**OBJECTIVE 3**

# PATHWAYS IMPROVE PATIENT CARE



OBJECTIVE 3

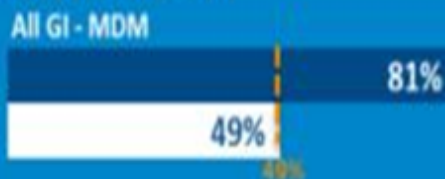
## 9365+

Patients on Pathway  
(Breast, Complex GI, Thoracic)

2015	2016	2017	2018	2019
50	1099	2046	2840	3095



### Complex GI Pathways



## 350+

Engaged Physicians across 10 Markets  
(Austin, Capital, Continental, Dallas, Houston, Kansas City, Nashville, N. Fla, San Antonio, S. Atlantic)

2015	2016	2017	2018	2019
15	65	60	125	100



### Thoracic Pathways



### Breast Pathway



■ Pathway Adherence ■ Non-Pathway Adherence | Baseline prior to Pathway implementation

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<sup>1</sup>Data Range: 10/15 - 12/19



## OBJECTIVE 3

# Clinical Programs – Research Studies

1

## HEOR 12 – Ongoing Prospective Study

### Neoadjuvant Therapy for Borderline Resectable Pancreatic Cancer Patients

- Determine if chemotherapy prior to surgical resection will improve resectability and survival rates for patients with borderline resectable pancreatic cancer
- Evaluate the ability to establish a protocol-driven multidisciplinary approach to borderline resectable pancreatic cancer in the community setting across multiple Sarah Cannon centers

2

## HEOR 14 – Abstract Pending

### The Effects of Navigation and Pathways on Pancreatic Cancer Patients

- Investigate effectiveness of Navigation and Pathways programs on pancreatic cancer patient post-op mortality and survival, and compare program outcomes to outcomes of similar patients from national data (SEER).

3

## HEOR 15 – Abstract Presented at ASCO

### Impact of Breast Cancer Pathway Implementation on Genetic Referrals and Testing

- Genetic counseling and testing (GC/T) for breast cancer associated genetic mutations are important components in the appropriate management of newly diagnosed breast cancer.
- Pathways were used to help appropriately select patients who meet criteria across the Sarah Cannon Cancer Network (SCCN).




4

## Upcoming Clinical Program Research Studies

- Surgery vs. SBRT
- Outcomes after surgery for early stage cervical cancer
- Value of Enhanced Surgical Recovery (ESR) in Complex GI surgical procedures across SC markets
- The effects of adherence to pathways on outcomes for lung cancer patients

## OBJECTIVES

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 <b>OBJECTIVE 1</b>	 <b>OBJECTIVE 2</b>	 <b>OBJECTIVE 3</b>
Summarize an Enterprise Approach to Integrating Pathways into Practice	Distinguish Various Factors that Create Hurdles to Implementing Consistent Care	Translate Key Performance Indicators into Opportunities

**QUESTIONS?**





**THANK YOU**