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# “Good user pathways”: Towards more coherent and user-centred pathways

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7th International Conference on Evidence-based Policy in Long-Term Care

14. Sept 2024, Bilbao



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# The challenge

- Persons with complex and lengthy care needs often experience poor care coordination and unpredictable patient pathways
  - Many of them are older persons
- May lead to poor health outcomes and reduced care quality
- Transitions between units and between organisations are critical



# The solution?

- The «Good patient Pathways» initiative



[Photo: Fredrik Naumann/Felix Features. Hva er viktig for deg?-dagen 2024 - KS](#)

- 2014-2023
- Organised by the Norwegian Association of Local and Regional Authorities (KS), and the Norwegian Institute of Public Health
- **Aim:** to support municipalities and hospitals in care transitions and to ensure that patients/care recipients have coherent, safe, and coordinated services
- Participants organised in ‘learning networks’
- 11 networks completed



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# The study

## Objective

- To summarise ten years experiences with the initiative
- Provide advice for further work

## Methods & material

- Focus groups and individual interviews with 72 persons
  - 12 interviews
  - 38 municipalities
  - 6 hospitals
- Conducted Sept. 23-Jan. 24



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# Findings

The initiative

The process

The results



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# The initiative: Knowledge-based practice

- The initiative was built on two main components, founded in research
- 1. A model for integrated care (patient-centred care pathway) for older patients in need of home care services after discharge from hospitals. Independent of diagnoses\*
- 2. Patient-centredness throughout all care: what matters to you

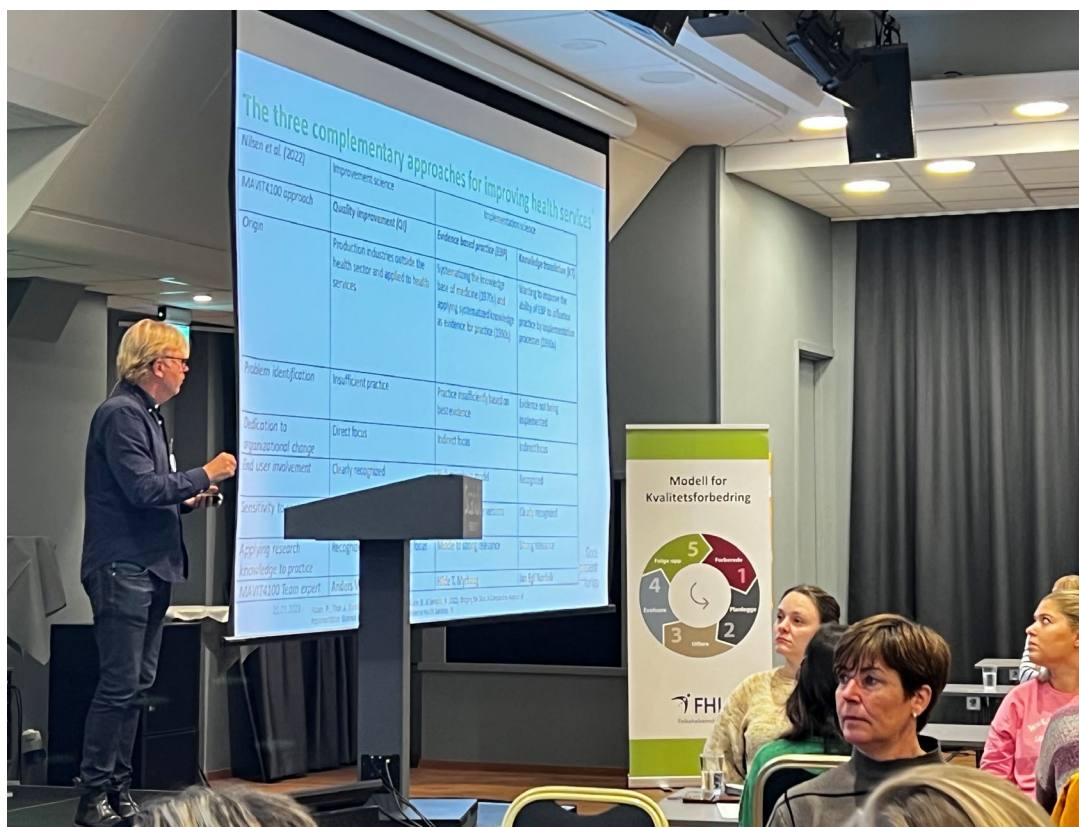


\* Ref: [Røsstad et al \(2013\) Development of a patient-centred care pathway across healthcare providers: a qualitative study | BMC Health Services Research \(springer.com\)](#)



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# The process /implementing the initiative



- Participants were in general satisfied with the learning networks and the process
- Learning networks (5 meetings) and supervision between meetings
  - Difficult to prioritise quality improvement work in daily work and nice to have dedicated time for quality improvement work
  - So-called improvement teams were appointed in each municipality. after some trial and error, most of them found a suitable composition of team members
  - Leaders on all levels need to be involved
  - But essential that frontline workers are engaged



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# The patient as an equal partner in their patient pathway

- Agreement that active patient involvement is essential for creating high quality services
- But not straightforward to implement it in practice
- Triggered a lot of discussion about ‘how to do it?’ ‘who should ask the question’, ‘when should you ask?’ etc.
- The discussions in the learning networks were useful for sharing experiences for how to implement a more patient-centred service



<https://www.whatmatterstoyou.scot>





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# Systematic and predictable pathways

- The patient-centred care pathway was presented as the tool for creating more coherent pathways
  - Contained several checkpoints, formulated in checklists
  - Many worked hard to implement checklists
    - Various strategies for simplifying the implementation
- Other measures and tools were also used to create coherence/care integration
  - Local checklists
  - Physical meetings
  - Contact nurses
- Many called for more knowledge about collaborating partners' routines and practices





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# Discussion & reflections

- The Good patient pathway initiative (“the intervention” led to results on several levels
- **The learning network process:** Participants were happy with taking part in the initiative
  - Learning
  - Dedicated time to work with quality improvement
  - Sharing experiences with others
  - But, the work was focused on their own organisation – not on bridging organisational gaps
- **The local implementation processes:** participation in learning network gave a kick-start to the implementation process
  - But participants found it challenging to sustain the implemented measures after the learning network period was over



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## Cont.

- **Results:** no hard evidence to support that patients received more coherent/integrated services
- But based on participants' experiences, there was raised awareness among staff – and changed work practices – concerning patient involvement and on integrating care



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# Conclusion

A blue speech bubble with a white outline and a tail pointing towards the bottom left, containing the text "YES!" in bold black capital letters.

**YES!**

**Is the ‘Good patient pathways’ approach useful and could it be transferred to other contexts?**

- It is research-based
- is sufficiently generic, and can be locally adapted
- It is framed as continuous quality improvement work - something you should do anyway
- **But** – as with many other initiatives it requires work to implement it, and not least to sustain it and integrate it in regular practice
- The focus was on their own organisation. Further work must focus on inter-organisational collaboration (e.g., hospital-municipalities)



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## Thanks to the project team!

- Merete Rørvik
- Geir Haakon Hilland
- Martin Anfinsen



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Thank you for your attention!

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