

DEPARTMENT OF HEALTH SERVICES
COUNTY OF LOS ANGELES



SUBJECT: CRM -INPATIENT CLINICAL PATHWAYS

POLICY NO. 296.1

PURPOSE:: To provide a standardized approach to clinical decision- making and optimization of the use of resources.

POLICY:: Inpatient Clinical Pathways (ICPs) represent an evidence- based approach for providing treatment for patients with problem prone and/or high volume conditions. ICPs shall be used at all DHS hospitals where the appropriate services are provided.

The Goals of the Inpatient Clinical Pathways shall be to:

1. reduce unexplained variation through a standardized approach to clinical decision-making;
2. collect patient-specific and aggregate process and outcome data;
3. optimize use of resources;
4. incorporate "Best Practices";
5. design for flexibility to allow for patient variability; and
6. reduce medical errors.

The ICPs shall provide a guide for appropriate clinical actions; however, the attending physician shall be responsible for providing care which best meets the needs of the individual patient.

ICP Components: An ICP typically shall have multiple components to address the full course of treatment for a given diagnosis. Components may include:

- Emergency Department (ED)
- Ward
- Floor/Step Down Unit
- Intensive Care Unit (ICU)
- Recovery Unit
- Others as appropriate

ICP Tools: With some exceptions, each ICP component shall consist of the following tools or documents:

Physician's Orders: Pre-printed, diagnosis-specific daily forms, which display the suggested course of treatment for the majority of DHS patients on pathways.

The Physician's Orders shall be used by all Licensed Practitioners to initiate the placement of patients on pathways and to guide the course of treatment during hospitalization.

Daily Care Documentation (DCD): Pre-printed comprehensive daily documentation forms, which list daily goals and expectations.

Variance Documentation: Pre-printed daily forms on which

caregivers document variances from the expected course of treatment and the associated clinical actions and outcomes.

Inpatient Teaching Guide: Pre-printed pathway- specific document to teach patients and their families about their condition, treatment, care, and related issues during the patient's hospitalization.

Post-Discharge Teaching Guide: Pre-printed pathway- specific document to facilitate the continuum of care upon the patient's discharge from the hospital.

Data Collection: To achieve continuous improvement in the efficacy of ICs, data shall be collected on a continuous basis for each ICP. The types of data collected shall include:

Macro Indicators: Major milestones in the course of treatment/care of the patient, which shall indicate the expected progress of the patient and can be assessed by nursing staff or other patient care providers. Major categories may include relief of suffering, restoration of function, clinical outcomes, patient satisfaction, and care process.

Micro Indicators : Expected or anticipated physiologic, behavioral, or subjective outcomes in the treatment and care of the patient. They shall be specific for identified timeframes (e.g., timely initiation of IV antibiotics, adequate oxygenation).

End Points: Measures for evaluating the performance/efficacy of ICPs based on actual patient histories. Major categories shall include length of stay, pathway screening completion, placement completion, and readmission rate.

EFFECTIVE DATE: Jul 01, 2001

SUPERCEDES:

APPROVED: Signature on File
