

BRINGING CARE QUALITY TO LIFE: TOWARDS QUALITY INDICATOR-DRIVEN PATHWAY MODELLING FOR INTEGRATED CARE NETWORKS

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Background and Motivation

- Integrated care as an approach for ensuring and improving the quality of care, patient satisfaction and system efficiency, especially against the background of an increasing prevalence of chronically ill and multimorbid patients
- Currently there is no commonly used, comprehensive approach for the quality **management** in integrated care settings
- There are quality indicators available, but their implementation in the care process has deficits
- **Integrated care pathways** as essential tool for the provision of integrated care (process-oriented view)



Objective

Method

To utilise care pathways for quality management in integrated care

RQ1: How can **process**relevant quality **indicators** for health care networks be identified and classified?

RQ2: What are the relevant concepts for the integration of quality **indicators** in care pathway process models?

Environment

Application domain (Healthcare domain) People: health care providers, patients, ... **Organisational systems:** care facilities, care networks, ... Technical systems: hospital information systems, ... **Problems & opportunities:** quality goals/ guidelines not systematically translated into care pathways; missing methodological and technological support for integration of quality indicators in care processes, ...



Knowledge Base

Foundations Scientific theories and methods: conceptualisation of health care quality (esp. process quality), conceptualisation of integrated care, performance-, processand indicator modelling Experiences & expertise, artefacts & processes: state-of-the-art of application domain (e.g. existing care pathways, clinical quality indicator development methods; medical guidelines as basis for quality and pathway specifications)

DSR framework according to Hevner et al. (2004) and Hevner (2007)

base

Rigor

Cycle

• Classification framework for process quality in integrated care settings (\rightarrow RQ1)

Results

- Health care need: staying healthy, getting better, living with illness/ disability, end-of-life care
- **Quality goal:** effectiveness, safety, patient-centeredness, continuity
- Levels of analysis: micro, meso, macro
- Domain ontology preparing method development/language extension (\rightarrow RQ2)



Outlook

- Extending existing pathway modelling language BPMN4CP by a quality perspective
- Methodological support for development and implementation of care pathways in a comprehensive network of care providers
- Demonstration and evaluation of the artefact (method)

References

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