

As your hospital works throughout this year to develop their own standardized colectomy care pathway for the 2019 QI project, here are some things to consider...

Why are we doing this project?

- The goal of the care pathway project is to facilitate multidisciplinary discussions to implement evidence-based best practices for all patients while still allowing for some variation and autonomy in practice style based on patient needs.
- All patients having a colectomy should receive the same care best practice standardized care.

Creating a standardized pathway for your hospital will be a process:

- New pathway implementation will take time to develop at your hospital. It may require the development of new protocols, order sets, staff education, and patient education materials.
- The MSQC colectomy care pathway template is a compilation of best practices vetted through the collaborative. This is meant to provide direction and guidance for your site to determine what the standardized practice will be for your hospital.
- Determine your multidisciplinary team and plan regular meetings throughout the year.
 - Consider the following:
 - Buy-in, who needs to agree on the pathway, who should be present at each meeting?
 - Consider breaking up the pathway by phase of care, or clustering topic areas that will be discussed by a common group of clinicians. For example, if anesthesia will be present, make sure to cover the specific measures that require their input.
- The first meeting should be held by March 30th to earn full QI points. During this meeting you should do a complete review of the colectomy care pathway measures and determine current practice. This will allow the group to have an informed and productive discussion going forward. Document all current practices in the top row of the appropriate section of the **Colectomy Care Pathway Site Template (preop, immediate Peop, etc. tabs)**.
- Focus your initial efforts on the QI process measures:
 - Conduct an analysis of the current practice for the eight process measures scored for the QI project and identify where there are issues leading to low compliance. What are the opportunities for improvement?
 - Plan interventions that will address the process measures that are currently below goal performance of 80%
- For the remainder of the pathway:
 - Is there current standard practice at the hospital?
 - If not, is standardizing this process something that can be done during this project year?
 - What will the process be to make the change?
 - If not why?
- Keep your care pathway excel document up to date as you move through the process. How does current practice align?
 - What are the implementation steps that need to happen to improve care?
 - What barriers exist? How can they be overcome?
 - Track the performance of new practices, are the order sets being used? Why or why not?
- If you determine that a recommended standard practice is not possible at your hospital, such as developing an ostomy team, make notes about the decision process on the template document as well.
- What is the revised/final practice? Successes barriers? Entering this information will then populate the hospital master tab in the excel document to create your hospital's care pathway.

- Document the specific process, order set, or protocol, etc.
 - We realize that not all implementation goals and steps can be completed in a year...but still make sure to document in the revised/final practice section what the current status is. This will help to keep your site on track and inform MSQC of the hard work put into your project.
- The care pathway excel document is what you will submit to MSQC for to fulfill the measure of creating your hospital's standardized care pathway. This will also serve as your project tracking form to narrate all of work accomplished in 2019.