



**Patient pathways**  
at Vejle Cancer Hospital, Denmark

*June 15th, 2022*



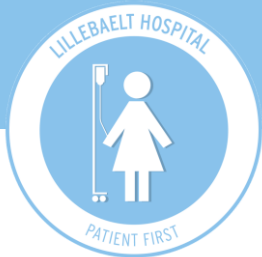


## Political focus on integrated cancer pathways

The core of the political decision was to develop integrated cancer pathways

Based on:

- National evidence based guidelines
- Clinical standards for diagnostics and treatment for all cancer types
- Maximum waiting times for patients – from referral to primary treatment
- Monitoring the cancer pathways

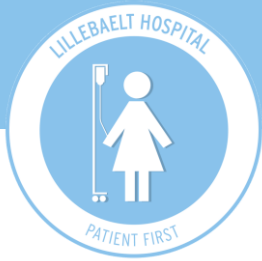


## Challenges in practice

The patient's pathway from referral through clinical workup to final treatment was:

- Long
- Not well planned or coordinated
- Waiting times were too long
- Clinical processes were subject to undesirable variation

We wanted to optimize clinical and logistic quality as well as the patient experience.

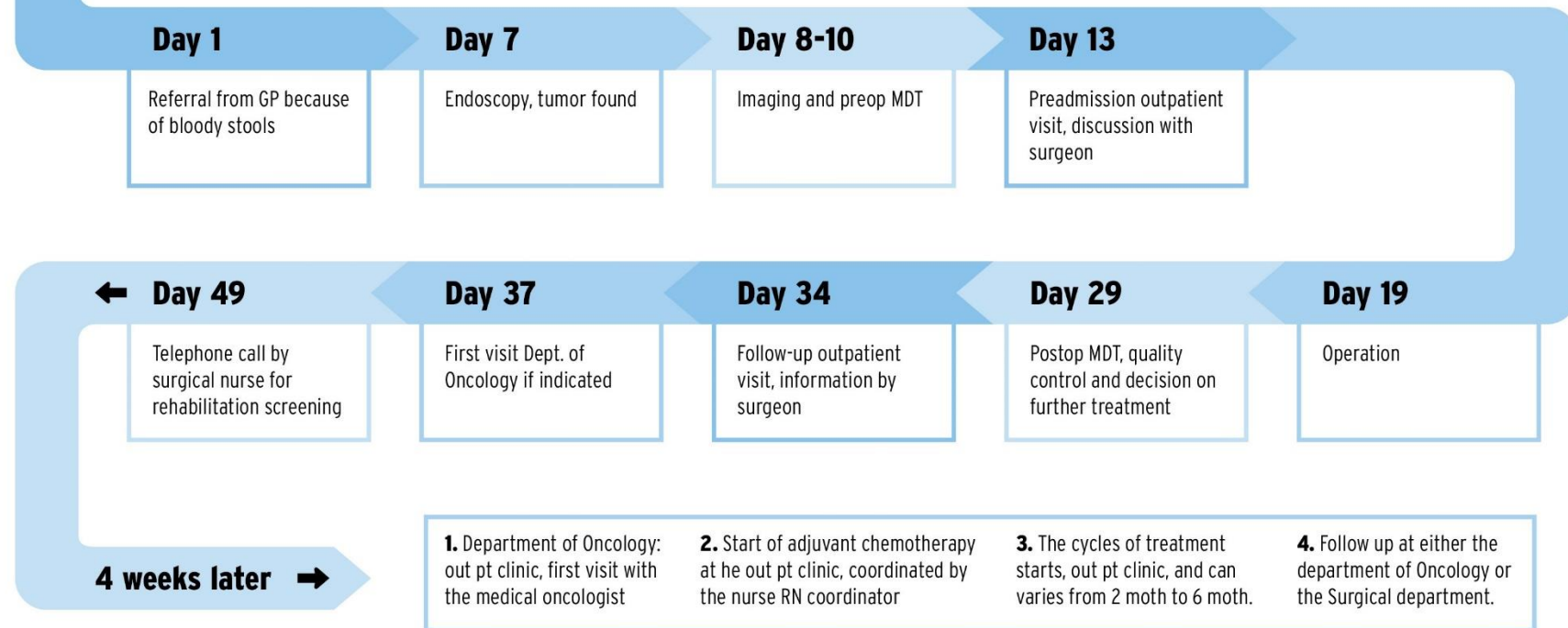


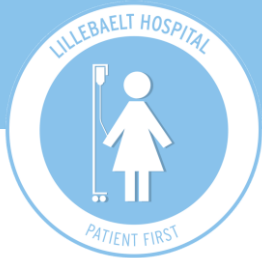
# The patient's pathway through a quality culture

Illustration to accompany description of quality work in every step of a patient's colorectal cancer pathway at the Center of Excellence, Vejle Hospital



**Meet the patient:** Hanna Petersen, 62 years old. Lives in Vejle, Denmark.





## National survey on patient experiences

Results from the National Survey on Patient experiences:

### The Department of Oncology

99 % of outpatients find staff friendly and welcoming

96% of patients are satisfied with the treatment

87 % of the outpatients feel that their Medical Doctor takes responsibility for their clinical pathway

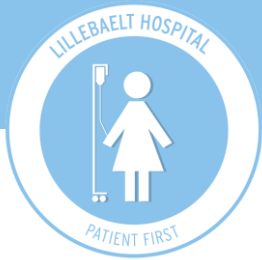
### The Department of Organ Surgery and Plastic Surgery

100 % of patients find staff friendly and welcoming

100 % feel informed about the effects of new medicine

76 % feels that staff allow relatives to participate in treatment decisions





## Success factors

- Patient and Relatives Council
- Program Steering Committee for the Patient's Cancer Hospital responsible for Program plans I & II
- Strategic focus on engaging all employees
- Respecting the professional knowledge and pride of employees in carrying out tasks
- Easy access to high quality data, including PRO (patient-reported outcomes)
- Educating management in leading improvement processes
- Understanding that quality improvement must cover both organizational and patient experienced quality as well as clinical quality

## Next steps?

Quality improvement never ends:

- Quality indicators and observations from employees
- Patients and relatives show us where there is still room for improvement and how to improve

Programme Plan III for the Patient's Cancer Hospital at Vejle is in progress

