SITUATION

Our healthcare system is at a tipping point, where unprecedented levels of chronic disease (or “frailty”) in an aging population meets a health system that works in silos, designed to fix one problem at a time.

Every person who lives long enough will experience frailty. Currently, care in frailty is characterized by inappropriate decisions and costly, uncoordinated care. Over half of a person’s lifetime health costs occur in the last 6 months of life, yet here is little evidence that these end-of-life expenditures lead to a better patient experience.

BACKGROUND

The Palliative and Therapeutic Harmonization (PATH) model is an innovative, award winning solution, designed to improve appropriateness of care and resource utilization across the healthcare continuum. Using a validated and structured methodology, PATH trains health care providers and teams to help patients choose a blend of treatments for cure and treatments for comfort. The end result is that health teams function more efficiently and effectively, and patients and families have a better experience in the last stage of life.

The PATH approach meets the Institute for Health Improvement (IHI) Triple Aim Criteria, has been recognized as a Leading Practice by Accreditation Canada, and has been translated into programs that address system challenges using strategies that build efficiency, effectiveness, and relevance across the healthcare continuum including:

- **PATH Outpatient Services**: Where community-dwelling, frail adults can receive assistance with general care planning; decision-making about specific health interventions such as surgery or chemotherapy; and care planning to avoid hospitalization.

- **PATH Tertiary Care**: Where patients and families receive high-level assistance planning treatment. Demonstrated specialized applications include:
  - **Renal-PATH**: where patients with chronic kidney disease receive individualized assistance with dialysis decision-making.
  - **Oncology-PATH**: where decisions about chemotherapy and other treatments consider the impact of frailty.
  - **Pre-Surgical-PATH**: where routine screening for frailty alerts surgeons and anesthetists to risk, and offers the opportunity for focused decision-making prior to surgical interventions.

- **PATH Long Term Care**: where PATH programming improves organization and builds capacity; and the most frail and vulnerable (or their families) have the opportunity to engage in individualized discussions of prognosis and develop transformational care plans designed to optimize appropriateness and avoid suffering.

- **PATH Home Care**: where a new, efficient, and effective assessment allows for improved decision-making and transitions across the health care continuum.

ASSESSMENT

Use of the PATH process improves appropriateness of care, with consistent data demonstrating that its application can result in a 75% reduction in the demand for medical and surgical interventional treatments in frailty (J Am Geriatr Soc. 2012. Dec;60(12). This reduction is patient and family-led and associated with high satisfaction.

A qualitative study of PATH indicates that this type of service is not found anywhere else in the healthcare system and provides clarity in the otherwise chaotic experience of navigating through healthcare with frailty. Although the primary aim of PATH is to improve appropriateness of care, data indicates that it is also associated with better value for healthcare dollars with an economic analysis showing cost avoidance in acute care of over $7,000 per patient seen.

In short, the model presents a unique opportunity to provide better patient care with better value for healthcare dollars.

PATH builds capacity and changes the culture of how we deliver care to frail older adults through

- **Standardized Team Education Program (STEP)**: PATH training helps individual practitioners and health teams from all sectors and disciplines build efficiency and capacity for appropriate care through the delivery of PATH programs.

- **Assessment tools**: collaborative and comprehensive tools that quickly bring the patient’s history into focus.

- **PATH Clinical Practice Guidelines for frailty**: Guidelines that guide physicians through the treatment of common health conditions in frailty.

- **Knowledge Translation Tools**: a library of written and video knowledge translation tools for the public so that they can engage with and understand the model.

RECOMMENDATION

To get started, request a focused discussion about how PATH could benefit your institution.

Contact information can be found at: pathclinic.ca