

## IBD Clinical Care Pathways

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## Disclosures

- AbbVie- nursing consultant for patient choice document development



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## Learning Objectives

- Define Clinical Care Pathways (CCPs) and their intended outcomes
- Discuss the process of developing a clinical care pathway
- Review two clinical care pathways implemented within the IBD Unit, University of Calgary
- Discuss challenges and barriers to Clinical Care Pathway implementation



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## Defining Clinical Care Pathways (CCPs)

- Defined as “a structured means of developing and implementing local protocols of care based on evidence based clinical guidelines”<sup>[1]</sup>
- Also known as co-ordinated care pathways, integrated care pathways, care maps, or anticipated recovery pathways<sup>[1]</sup>
- Integrate clinical practice guidelines and consensus reports with local expert knowledge and clinical standards<sup>[2]</sup>

1. Campbell H, Hotchkiss R, Bradshaw N, Porteous M. Integrated care pathways. *BMJ*. 1998 Jan 10;316(7125):133-7.  
 2. Kitchiner DJ, Bundred PE. Clinical pathways: A practical tool for specifying, evaluating and improving the quality of clinical practice. *MJA [Internet]*. 1999 [cited 2012 Feb 07];170:54-55. Available from: <http://www.mja.com.au/public/issues/jan18/kitchner/kitchner.html>




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## The Calgary IBD Center of Excellence and Clinical Care Pathways

- **GOAL:** Define a standardized, systematic, and consistent time-bound approach to the care of IBD patients, with measurable benchmarks
- Integrate Clinical Practice Guidelines and Consensus Reports from:
  - Canadian Association of Gastroenterology (CAG)
  - American College of Gastroenterology (ACG)
  - British Society of Gastroenterology (BSG)
  - European Crohn's and Colitis Organisation (ECCO)
- Collaborate with other disciplines
  - Rheumatology, other Immune-Mediated Disciplines
  - Infectious Diseases




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## Outcomes of CCP Implementation

- Achieve excellence in patient care
- Align standard of care processes with clinical research initiatives
- Support other disciplines to work to full scope of practice  
*Example: Registered Nurse, LPNs*
- Facilitate Quality Assurance (QA), Quality Improvement (QI), and Program Evaluation initiatives
- Fan out regionally, nationally, and internationally




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## Clinical Care Pathway Development Process

- **Research** existing best practices and supporting evidence
  - Review national and international clinical practice guidelines and consensus reports
  - Consult with practice experts
  - Assess current clinical standards
  - Identify gaps and inconsistencies
- **Design** Draft CCP and Supporting Documents/Tools
- **Implement** (“Beta testing”)
- **Evaluate**
  - Consult with stakeholders and request feedback
- **Revise and Implement** Improvements




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## Classification of Clinical Care Pathways

- **Clinic Specific**
  - High-Risk Inflammatory Bowel Disease Clinic
  - Pregnancy Clinic
- **Medication Specific**
  - Biologics (TNF Antagonists; α4β7 Integrin Antagonist; IL12/23 Inhibitor)
  - Immunomodulators (AZA, 6-MP, MTX)
  - Corticosteroids
  - 5-aminosalicylic acid (5-ASA)
- **Monitoring and/or Complication Specific**
  - Immune Status and Vaccination Recommendations in IBD
  - Baseline Assessments for the Clinically Symptomatic Patient
  - Post-operative Recurrence Monitoring

AZA = azathioprine; 6-MP = 6-mercaptopurine; MTX = methotrexate




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## Supporting Documents and Tools (1)

- Standardized Patient Intake Forms
- Standardized Blood Work Requisitions
  - Comprehensive IBD Blood Work Requisition
  - Routine Monitoring IBD Blood Work Requisition
  - Medication-specific Monitoring Blood Work Requisition  
*Example: Monthly blood work for AZA and 6-MP*
- Standardized Nursing Order Sets
- Templated Booking Requisitions
- Standardized Medication Prescription Templates




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## Supporting Documents and Tools (2)

- *Your IBD Navigator* Patient Education Book and Templated Patient Information Sheets
- Patient Education Tools
  - LexiComp Online Medication pamphlets
  - Crohn's and Colitis Canada (CCC) brochures
  - Patient Education Events
- Client Responsibilities Document
- Health Maintenance Work-Up and Recommendations
  - Immunity status confirmation and vaccinations
  - Latent tuberculosis (TB) screening
  - Surveillance (Pap smear, GI dysplasia)
  - Vitamin D optimization




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## Additional Value for CCP Adoption

- Backbone of customized Patient Electronic Medical Record (EMR)
- Supports standardized dictation structure




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## High Risk IBD Clinic Clinical Care Pathway

- Initiated July 2011
- Facilitates the timely evaluation of symptomatic individuals at high risk for IBD
- Pre-determined assessment procedures completed within goal time period of 2-4 weeks
  - Clinic consultation
  - Colonoscopy +/- EGD with biopsies as clinically indicated
  - Comprehensive IBD blood work; stool specimens as needed
  - Optional: Diagnostic imaging (CEUS, MRE and/or CTE) if IBD confirmed or highly suspected OR to assist with differential diagnosis
- Follow-up appointment- to initiate treatment if IBD confirmed




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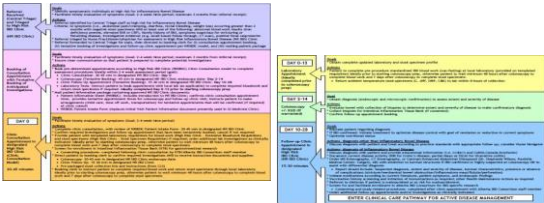
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## High Risk IBD Clinic Clinical Care Pathway




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## Anti-TNF Biologic Therapy Clinical Care Pathway

- Designed to standardize and facilitate:
  - the process of initiating treatment with an anti-TNF agent
  - a plan for appropriate and timely monitoring and evaluation to assess for clinical and endoscopic response and/or remission
  - the timely recognition and management of potential side effects and adverse events associated with biologic use
- Serves as a standing physician or nurse practitioner order set maintained as part of the patient's medical chart
  - facilitates nurses to work to full scope of practice
- Provides consistent patient education
- Reinforces patient responsibilities and expectations, promotes patient compliance and engagement




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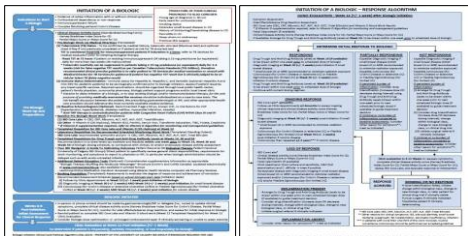
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## Anti-TNF Biologic Therapy Clinical Care Pathway




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**Challenges and Barriers to Clinical Care Pathway Implementation**

- "But I don't practice that way..."
- "But I don't have time..."
- "But I don't work in an academic setting..."
- "But it's too much paperwork..."

Strong Partnership



Excellence in Care

**CHANGE CAN BE CHALLENGING...  
BUT THE OUTCOMES CAN BE EXTRAORDINARY**

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**The Philosophical View**

*If you build it, they will come*



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**Questions?**

Thank you for your attention!



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