# OPTIMIZATION OF CANCER CARE PATHWAY OF SCHEDULED PATIENTS WHEN OUTSOURCING CHEMO SUPPLY

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## WHAT WAS DONE?

**Optimization** of the clinical pathway of scheduled patients receiving chemotherapy in the main full hospitalization unit of the hospital

# WHY WAS IT DONE?

Outsourcing of the chemotherapy production in our hospital by 2020



#### **New constraints:**

anticipated production before patients are admitted to the clinical ward

### HOW WAS IT DONE?

Cartography of the clinical pathway of scheduled patients to describe each step and validation





Brainstorming workshops to identify areas of improvement with pharmacists/physicians/nurses/secretaries and implementation

# WHAT HAS BEEN ACHIEVED?

Two critical steps have been identified in this pathway



Follow-up form completed by pharmacists to:

Secure all the critical steps

Remind secretaries when to call patients

Remind physicians when to give the "OK production"

Reception of the biological test results by the secretary

Patients'call by the secretary 72h(instead of 24h) before to remind them to do their biological test in medical laboratory

Creation of an electronic and standardized prescription with the specific date for the biological test

Over a 2 months period: the proportion of given "OK production" 24-48h before the admission ✓ from 18 % to 40 % (n= 15 patients)

## WHAT NEXT?

- Better anticipation
- ✓ <u>Process-oriented approach</u> used to identify solutions was very fruitful and led to collaborative solutions likely to be applied and accepted by both clinical ward and pharmacy
- This method could be applied to improve other types of processes in our hospital







