Understanding the Patient Journey by Establishing the Care Delivery Value Chain Among Patients with Rheumatoid Arthritis

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Background

Rheumatoid arthritis (RA) is a chronic disease with a high treatment burden. To align patient preferences and value with healthcare delivery, mapping patient journeys by means of a Care Delivery Value Chain (CDVC) has gained interest.

Aim

The objective was to define a process map for RA patients, increase the transparency of care delivery and identify areas of improvement.

Methods

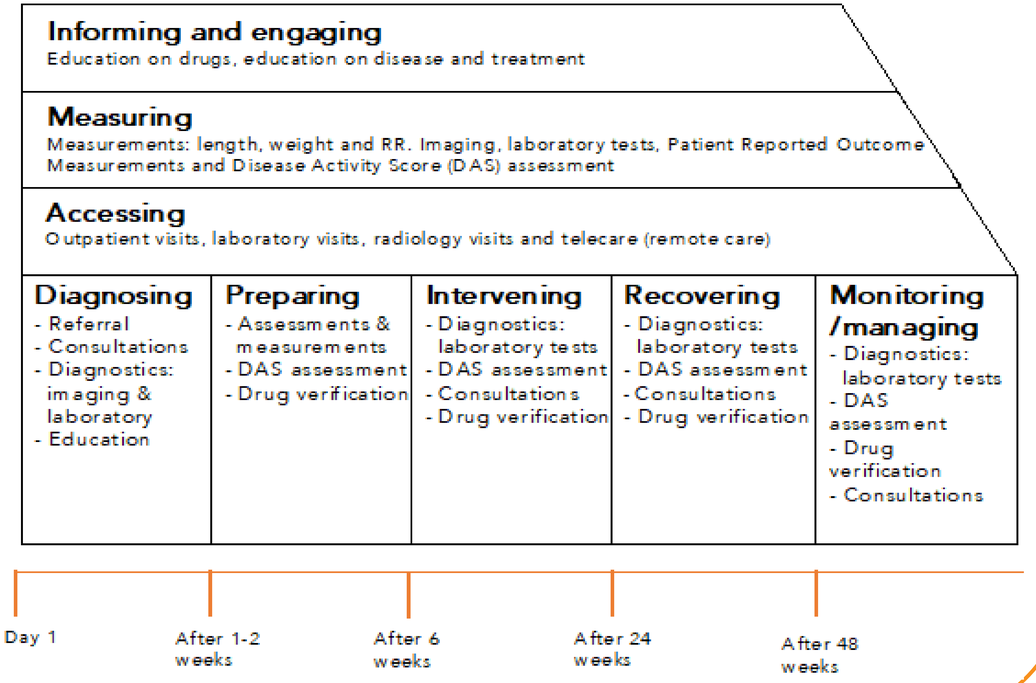
Data were collected from electronic health records and interviews with involved staff. To map the care cycle of RA patients several steps were undertaken:

1. Resources and activities utilized by the RA patients were reported;
2. Activities were outlined according to the CDVC;
3. Time, location, decisions and staff were appended to the patient journey;
4. The detailed process map was validated by a staff delegation and the RA patient panel via focus groups.

Results

The CDVC included resources and activities concerning the rheumatology department, laboratory, pharmacy and diagnostics (figure 1). The number of steps per CDVC phase in the detailed process map ranged from four to twelve. The majority of the activities are performed in the intervening and recovery phases. Minor improvement suggestions were proposed during focus groups with patients and medical staff. The integration of patient reported outcome measures and developing a patient reported measurement of the disease activity score were identified as areas where improvement is warranted.

Figure 1. Care Delivery Value Chain of RA patients



Conclusion

Mapping the CDVC provided insight and transparency in the patient journey, delivered activities and resources concerning RA care cycle. The framework is recommended for other (chronic) conditions. Future research will focus at assigning the care cycle costs to these activities to transit into a thru value-based healthcare system.

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