

Renal Cell Carcinoma (RCC) Patients’ Receiving Systemic Therapy Journey in Greek Public Hospitals

Topic: Patient-Centered Research, SDC: Oncology, STA: Surgery

Introduction

- Process mapping allows hospitals to “see” and understand the patient’s experience by separating the management of a specific condition or treatment into a series of consecutive events or steps. The sequence of these steps between two points (from admission to the hospital to discharge) can be viewed as a patient pathway or process of care.¹
- The best methodology to extract this information is through the patient journey mapping process.²

Objectives

- The objective of the study was to describe RCC patients’ undergoing systemic therapy journey in Greek public hospitals and identify best practices to improve the journey process.
- Here, we present study outcomes based on observations of the RCC patients’ journey within a two Greek public hospitals’ oncology clinics and on health professionals’ perspective.

Methods

- To map RCC patients' journey, a lean methodology-based observational study was conducted. Semi-structured interviews were also used to explore key stakeholders' perceptions of this journey.
- The sample of 45 patients and 8 healthcare staff members was derived from two oncology units of two Greek Public Hospitals.
- Data was collected in 2023 by the researchers, in collaboration with stakeholders from the participating hospitals.

Results

- Regarding patients’ journey prior to systemic therapy initiation, almost 4 out of 10 patients (35.7%) did not realize something was going wrong with their health until they contacted a doctor, and they found it during a random check-up. The median time from being seen by a doctor for the tumor to being referred to a specialized doctor or a cancer center was 21 days (IR=23). For 36% of the participants the official diagnosis was set more than one month after their visit to the doctor. Almost all patients (92.9%) stated that when they contacted a specialized doctor/hospital for the cancer, they underwent some diagnostic test (e.g., ultrasound, biopsy, etc.). For the 57.1% of the patients, it took less than a month from the first visit to their doctor until there was an official diagnosis of their disease. For 25% of the patients, the diagnosis of their disease was made for the first time by a major cancer center. The median time from cancer diagnosis until receiving of first systemic therapy was approximately 38 days.
- The steps of the procedure for the patient undergoing systemic therapy are shown in **Figure 1**.
- As for the patients’ in-hospital journey, the admission procedure median duration time (most likely scenario) varied from 136 to 313 minutes, but it could decrease from 98 128 mins if the process run smoothly and swiftly, ensuring prompt access to necessary care; thus, having an impact on the patient’s overall experience (**Table 1**).
- Longer waiting times in the process were observed during the preparation of the therapy drugs and the laboratory test progression (40-85.5 minutes) , which had an impact on the time the patient was waiting until they got their therapy. Also, facilities could not accommodate the number of patients who were treated daily in the day care clinic as there were staff shortages and there was a lack of beds and chairs to receive patients who required therapy.
- According to health professionals, other challenges included:
 - the increased volume of patients managed daily,
 - the lack of facilities to accommodate the day care clinic,
 - the unscheduled arrivals of patients earlier than their appointment and
 - the lack of healthcare staff.

Kaitelidou D¹, Kydonaki K¹, Lontos M², Timotheadou E³, Dionysopoulos D³, Svarna A², Siskou O⁴, Galanis P⁵, Peleka P⁵, Charalambous G⁶, Angelopoulos G¹, Michailidou S³, Kostaras D⁷, Karokis A⁷, Yfantopoulos N⁷, Gountas I⁷, Lazouras K⁷, Emmanouil G⁷, Paloukis K⁷, Konstantakopoulou O⁷

¹Center for Health Services Management and Evaluation, Nursing Department, National and Kapodistrian University of Athens, Athens, Greece, ²Alexandra Hospital, Athens, Greece, ³Papageorgiou Hospital, Thessaloniki, Greece, ⁴University of Piraeus, Piraeus, Greece, ⁵National and Kapodistrian University of Athens, Athens, Greece, ⁶Hippocratio Hospital of Athens, ATHENS, Greece, ⁷MSD Greece, Athens, Greece

Figure 1. The steps of the admission procedure for the patient undergoing systemic therapy

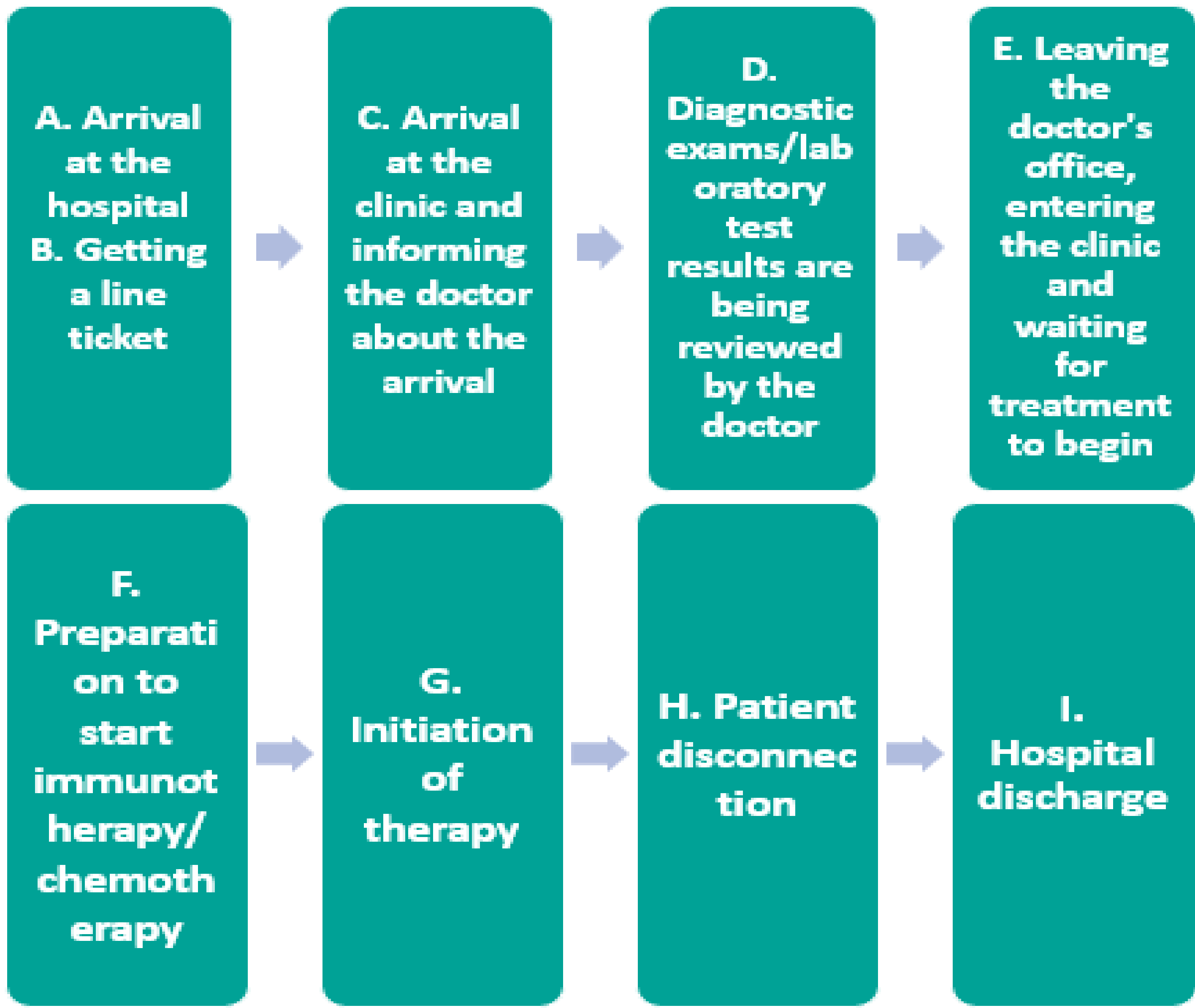


Table 1. Duration of the procedure for the patient undergoing systemic therapy (minimum, maximum, median, and expected time per step of the procedure)

	Optimistic Time (O) Minimum time (mins)	Pessimistic Time (P) Maximum time (mins)	Most Likely Time (M) Median time (mins)	Expected Time (ET) ET = (O + 4M + P) / 6
A. Arrival at the hospital				
B. Getting a line ticket / Waiting around the clinic	0.0 - 3.0	3.0 - 54.0	2.0 - 46.0	1.8 - 40.2
C. Arrival at the clinic and informing the doctor about the arrival / Arrival at the clinic secretariat, provision of a priority number and referral for blood sampling. A buzzer/beeper is provided to notify the patient immediately	2.0 - 5.0	7.0 - 30.0	4.0 - 19.0	4.2 - 18.5
D. Diagnostic exams/laboratory test results are being reviewed by the doctor	10.0 - 45	22.0 - 171	15.0 - 105	15.3 - 106
E. Leaving the doctor's office, entering the clinic, and waiting for treatment to begin	32 - 35	42 - 162	40.0 - 85.5	39.5 - 89.3
F. Preparation to start therapy.	3 - 8.0	10 - 15.0	4.5 - 10	5.2 - 10.5
G. Initiation of therapy	40.0	70.0	49 - 60	51 - 58.3
H. Patient disconnection	3.0	6.0	4.0 -5.0	3.7 - 4.8
I. Hospital discharge				
TOTAL	98.0 - 128.0	165.0 - 503.0	136.0 - 313.0	134.5 - 313.8

Conclusions

- The findings of this study emphasize the main challenges associated with the care provided to RCC patients undergoing systemic therapy.
- Addressing these challenges may reduce system delays, facilitate patients’ navigation within the system and ultimately improve healthcare quality.

Disclosures
This study was funded by Merck Sharp & Dohme LLC, a subsidiary of Merck & Co., Inc., Rahway, NJ, USA

References

1. NHS: Institute for Innovation and Improvement. (2005). Process mapping, analysis and redesign. Retrieved from NHS Institute for Innovation and Improvement: <https://www.institute.nhs.uk/>

2. Trebble TM, Hansi N, Hydes T, Smith MA, Baker M. *Process mapping the patient journey: an introduction* 2010; BMJ 341.