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## Conference Abstract

### **Map of Medicine: A change management tool for integration of local health services**

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## Abstract

**Background:** Health and social care is offered by multiple providers in a complex, but often siloed, environment, with a range of financial arrangements, communication and information systems. It is now vital that key organisations work together to optimise patient care by implementing evidence-based care pathways which collate best practice knowledge and integrate services across the treatment pathway for a wide range of clinical conditions.

The Map of Medicine (MAP) tool is a patient centred approach to integration of care, which provides a mechanism for primary, community and acute care providers to work together to improve communication, transform care and support service redesign in the local setting. Developing locally agreed approaches for the full patient journey, particularly for patients with comorbidities and/or complex health needs, addresses a key health need in our region – efficient navigation of an integrated health care system.

South Eastern Sydney Medicare Local (SESEML), in collaboration with South Eastern Sydney Local Health District (SESLHD), and Eastern Sydney Medicare Local (ESML), is undertaking a pilot of the MAP tool in South Eastern Sydney.

**Method / Design:** Implementation of a referral pathways tool aims to reduce clinical variation and inappropriate or poor quality referrals, and ensure the appropriate utilisation of health services. In other health systems, these factors have led to improved patient outcomes, improved patient journey through the health care system as well as improved patient care experiences for physicians, to ensure the right care is delivered at the right time, and in the right place.

The pilot study in South Eastern Sydney aims to measure the effectiveness and efficiency of MAP as an evidence-based clinical pathways model, customised to the needs of the South Eastern Sydney region, to assist with improving integrated patient care between the primary, community and acute health care settings.

For the purpose of the pilot, four (4) pathway maps will be developed and published for use by a sample of General Practices. Process evaluation will be undertaken to determine the role of the MAP tool in developing and implementing care pathways in the local setting, and to assess the benefit of the tool in supporting change management and service redesign.

Specific factors for assessment will include ease and efficiency of localising maps developed for international use, utilisation of MAP pathway access in both the general practice setting and the acute care setting, and clinician experience.

The MAP pilot study will take into account the methodology applied in the implementation of HealthPathways in Hunter New England region, and allow for comparison of the two tools in a New South Wales setting.

**Discussion:** The MAP pilot study will be completed in March 2015, and will make recommendations on the tool as an evidence-based, local guidance framework in the Australian primary care setting.

Interim findings will be presented in November 2014.

## **Keywords**

**map of medicine; pathways; change management; system integration**

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## **PowerPoint presentation**

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