## PRACTICE CASE STUDY

DIAGNOSTIC<br>ASSESSMENT<br>PROGRAM

Electronic Pathway Solution (DAP-EPS)

## THEMES

- Communication
- Information
- Navigation
- e-Health

41 When I didn't see it appearing on the DAP-EPS, this MRI that was supposed to be scheduled, after about a week I called the
Nurse Navigator and within a few days, the MRI was scheduled and I saw it on the DAP-EPS even before I got a call about it.

- Patient User

DAP-EPS was an electronic solution that streamlined communication within the Diagnostic Assessment Programs (DAPs); facilitated patient navigation, communication and information; and provided a platform for better patient management, workflow and productivity.

While it was sunsetted in 2014, it was suggested that, with current technology and understanding, we should be able to create even more sophisticated digital tools for navigation and communication. Improved navigation, information and communication tools can help guide patients and caregivers through their diagnostic journey in an efficient, streamlined manner. It could also enhance providers' effectiveness and experience in terms of ensuring they have more comprehensive patient information in a timely fashion.

## HOW IT WORKED

Acting as a central clinical and scheduling information repository, the DAP-EPS was an interactive digital tool used by patients, care providers, and DAP staff to communicate with each other in real-time, improving the workflow and productivity of care providers and DAP staff.

Built on clinically validated disease pathways and shared care decision-making models, the tool had the following intended outcomes:

- The optimization of workflow management tools for Diagnostic Assessment Programs (DAPs)
- Seamless navigational support aimed at reducing time to cancer diagnosis and treatment
- Streamlined communication regarding some aspects of the diagnostic phase of care
- Improved patient experiences from their referral from a family physician to diagnosis, providing patients access to diagnostic pathways, test results, and scheduling information in real-time
- Ongoing patient-provider communication and patientrelated clinical information sharing among care providers and DAP staff.


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## CHALLENGES

While many institutions across the country offer highquality e-health tools, many of them are provider-focused, while those that provide access to patients offer static information or have limited functionality.

## SOLUTIONS

- The creation of two easily accessible and highly coordinated portals: one for patients and another for providers
- The DAP-EPS facilitated navigation and communication, improving patient experience. It provided timely information for patients and providers about what was happening throughout the diagnostic trajectory.


## WHAT DID IT ACHIEVE?

- The DAP-EPS optimized the patient's experience by providing timely and relevant patient-focused information.
- It allowed the integration of results and communication among care providers and decreased the time from suspicion to diagnosis.
- It supported better patient navigation with a focus on managing time and resources for better alignment and coordination (e.g. allowing appointments and scheduling future appointments based on real-time results).
- It raised system efficiency by creating cost-effective strategies to reduce gaps and duplication in records handling for cancer patients.
- It increased harmonization between hospital and laboratory information systems.


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## FURTHER <br> INFORMATION

DAP-EPS was a joint initiative between
Cancer Care Ontario, the Canadian Cancer Society, and Canada Health Infoway.

## LESSONS LEARNED

The DAP-EPS offered an innovative, patient-centred navigation tool that provided a balance of general, yet relevant, content (eg. disease and test information) with customized, individual information such as appointments, test results, and diagnoses.

The degree of integration with hospital information systems continued to improve, but gaps remained in the patient record and these presented challenges for staff, providers, as well as patients.

Successful implementation of similar digital tools in other jurisdictions should include the following considerations: readiness of digital infrastructure as part of a comprehensive and sustainable health data system; availability and quality of necessary data; funding continuity; ongoing commitment from stakeholders; and system-wide planning and evaluation.

## Source:

Cancer Care Ontario (2014). DAP-EPS Benefits Evaluation Final Report.

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