



Univerza v Novem mestu
Fakulteta za *zdravstvene vede*

KLJUČNI REZULTATI PROJEKTA

VPLIV INTEGRIRANIH
KLINIČNIH POTI NA IZIDE
PACIENTOV, KOMUNIKACIJO
IN STROŠKOVNO
UČINKOVITOST

AVGUST, 2023

Spoštovana bralka in spoštovani bralec,

v tem dokumentu predstavljamo ključne rezultate aplikativnega projekta *Vpliv integriranih kliničnih poti na izide pacientov, komunikacijo in stroškovno učinkovitost*, saj želimo, da so dosežki enostavno dostopni na enem mestu. Na ta način skušamo olajšati iskanje informacij o integriranih kliničnih poteh, ki so pomembno orodje za razvoj kakovostne integrirane zdravstveno-socialne oskrbe.

Pregled obstoječih študij kaže, da obstajajo različni in specifični vplivi kliničnih poti na zdravstveno obravnavo pacientov, vendar so ključne dimenzije vpliva izidi pacientov, komunikacija v timu in s pacienti/svojci ter stroškovna učinkovitost, ki smo jih obravnavali v projektu. Ker so obstoječe raziskave v glavnem temeljile na samoceni strokovnjakov in na ozkih raziskovalnih pristopih ter zanemarile proučevanje vpliva integriranih kliničnih poti na izide pacientov, komunikacijo v timu in s pacienti ter stroškovno učinkovitost, smo skušali v projektu z interdisciplinarnim pristopom zapolniti to raziskovalno vrzel.

Osredotočili smo na predstavitev znanstvenih člankov in znanstvenih prispevkov, objavljenih na konferencah, da bi zagotovili preprost dostop do znanstvenih rezultatov projekta. Dosežek projekta se kaže v uporabi celovitega interdisciplinarnega pristopa (zdravstvene vede, sociologija, ekonomija, komunikologija) ter kvalitativnega in kvantitativnega pristopa zbiranja podatkov, s kateri smo merili ključne elemente vpliva integrirane klinične poti na socialno-zdravstveno storitev in vključili vse ključne akterje (zdravstvene delavce, menedžment in paciente/svojce). Njegov pomen za razvoj znanosti se jasno kaže tudi v nadgradnji teorije razvoja integriranih kliničnih poti in medorganizacijskega sodelovanja. Vključeni so samo članki in prispevki, ki so bili objavljeni do konca avgusta 2023 oziroma do konca trajanja projekta, pri čemer sta še dva članka v recenzijskem postopku.

Da bi bili podatki čim bolj uporabni, objavljamo tudi integrirani klinični poti za obravnavo pacientov za totalno endoprotezo kolka in s kronično ledvično boleznijo, ki smo ju oblikovali v okviru projekta. Torej dokument vključuje:

- 10 znanstvenih člankov, objavljenih med februarjem 2021 in avgustom 2023,
- 11 prispevkov, objavljenih na konferencah med majem 2021 in majem 2023, in
- dve integrirani klinični poti.

Z veseljem bomo odgovorili na vaša vprašanja o projektu in morebitnem sodelovanju,

člani projekta



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Splošna bolnišnica
Novo mesto

O PROJEKTU



Javna agencija za znanstvenoraziskovalno
in inovacijsko dejavnost Republike Slovenije



MEDICINSKI CENTER

Ključni podatki

Aplikativni projekt: Vpliv integriranih kliničnih poti na izide pacientov, komunikacijo in stroškovno učinkovitost

Šifra projekta: L7-2631

Nosilec: Univerza v Novem mestu Fakulteta za zdravstvene vede

Partnerji: Splošna bolnišnica Novo mesto in Univerza v Novem mestu Fakulteta za ekonomijo in informatiko

Celotna vrednost projekta: 400.067,76

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Začetek: 1. 9. 2020

Konec: 31. 8. 2023

Vodja projekta: [prof. dr. Karmen Erjavec](#)



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Opis projekta

Demografsko staranje predstavlja enega najresnejših izzivov, s katerim se sooča večina evropskih držav, tudi Slovenija. Delež starejših od 65 let se povečuje, prav tako pričakovana življenjska doba. Poleg izziva starajoče se populacije se zdravstveni sistem sooča z neprestano optimizacijo organizacije zdravstvenega sistema, novimi tehnologijami in spremenjenimi načini obravnave pacientov.

Klinične poti so prepoznane kot orodje kakovosti za standardizacijo zdravstvenih procesov za podporo izvajanja kliničnih smernic in protokolov. Vsebujejo podrobne smernice za vsako fazo vodenja pacienta z namenom izboljšanja kontinuitete in usklajenosti oskrbe v različnih disciplinah in sektorjih. Prvotno so se klinične poti začele s sprejemom in končale z odpustom iz bolnišnice, kar je še danes temeljna značilnost kliničnih poti v večini bolnišnic po svetu, tudi slovenskih, ki so jih začele uvajati leta 2002. V času uvajanja je bilo potrebno premostiti številne ovire, kot je deljenje dokumentacije posameznih poklicnih skupin z drugimi udeleženci v procesu zdravljenja, medpoklicno sodelovanje in

timsko delo ter procesna ureditev kliničnega dela. Po začetni uvedbi se poraja nov izziv, kako oceniti učinkovitost obstoječih kliničnih poti ter jih nadgraditi po načelih integriranega pristopa za razvoj kakovostne integrirane zdravstveno-socialne oskrbe starejših. Pričakovati je, da bodo izzivi, povezani z izvajanjem kliničnih poti na področjih klinične heterogenosti in organizacijske zapletenosti, v prihodnjih letih še večji.

Integrirana oskrba je koncept dela, ki se v zdravstvu postopoma, vendar vse bolj uveljavlja. Prizadeva si za boljše usklajevanje zdravstvene in socialne oskrbe glede posameznikovih potreb z zavezo, da bo izboljšala kakovost oskrbe in premagala razdrobljeno oskrbo s stalnim partnerstvom. Klinična integracija se nanaša na procese znotraj ali med poklici z uporabo skupnih smernic in protokolov, organizacijska integracija se nanaša na usklajene mreže ponudnikov ali pogodbe, ki združujejo ločene organizacije, sistemska integracija pa vključuje skladnost pravil in politik na vseh organizacijskih ravneh. Vse stopnje vključevanja zadevajo procese združevanja organizacij in strokovnjakov z namenom izboljšanja rezultatov za paciente, kot so izkušnje pacientov in kakovost oskrbe.

Aplikacija spoznanj integrirane oskrbe na klinično pot je integrirana klinična pot (v nadaljevanju: IKP), splošno opredeljena kot postopek za medsebojno odločanje in organizacijo predvidljive oskrbe za dobro opredeljeno skupino pacientov v natančno opredeljenem obdobju. Vključuje izrecno navedbo ciljev in ključnih elementov oskrbe, ki temeljijo na dokazih, najboljši praksi in pričakovanih pacientov; omogoča olajšanje komunikacije in usklajevanja vlog ter nadaljevanje dejavnosti večdisciplinarne skupine izvajalcev oskrbe, pacientov in njihovih svojcev; dokumentacijo, spremljanje in oceno odstopanj in rezultatov ter tudi določitev ustreznih virov.

Družboslovne študije o vplivu uveljavljanja kliničnih poti na dvig kakovosti komunikacije v timu in s pacienti, pacientove izide in stroškovno učinkovitost so redke, pa še te v glavnem temeljijo na samo-ocenah strokovnjakov, ne da bi dejansko preverile njihovo realizacijo v praksi. Pri tem so obstoječe raziskave obravnavale problem samo z vidika posameznih znanstvenih področij in ostale omejene znotraj posameznih disciplin ali celo ožje ter niso omogočile celovitega vpogleda v problem integrirane oskrbe in IKP. Zato obstaja raziskovalna vrzel na področju celovite oz. interdisciplinarne (zdravstvo, sociologija, komunikologija, ekonomija) obravnave integrirane oskrbe in IKP z uporabo kvalitativnega in kvantitativnega pristopa na študiji primera pred in po pilotni uvedbi IKP.

Namen in cilji projekta

Namen projekta je zapolniti to raziskovalno vrzel na področju raziskovanja vloge IKP v integrirani zdravstveni in socialni obravnavi z ugotavljanjem vpliva uvedbe IKP na izide pacientov, komunikacijo in stroškovno učinkovitost s študijo primera pred in po pilotni študiji.

Cilji projekta:

- z analizo mednarodne znanstvene literature ugotoviti ključne elemente integrirane zdravstveno-socialne obravnave, ki zagotavljajo celovito obravnavo s programi IKP, kot so pacienti izidi, stroškovna učinkovitost in komunikacija;
- z aplikacijo teoretičnih ugotovitev o integrirani zdravstveno-socialni obravnavi na izbrane tri ključne kliničnih poti, ki jih izvaja Splošna bolnišnica Novo mesto, oblikovati tri IKP;

- postaviti model merjenja vpliva IKP ter z uporabo celovitega pristopa, ki vključuje kvantitativno (anketiranje) in kvalitativno raziskavo (poglobljeni intervjuji, intervjuji v fokusni skupini) ter analizo stroškovne učinkovitosti, izmeriti izide pacientov, komunikacijo v timu in s pacienti ter stroškovno učinkovitost na primeru treh kliničnih poti, torej pred pilotno uvedbo treh IKP v klinični praksi Splošne bolnišnice Novo mesto;
- pilotno izvajati tri IKP v klinični praksi Splošne bolnišnice Novo mesto in ponovno izmeriti komunikacijo v timu in s pacienti, izide pacientov in stroškovna učinkovitost;
- z analizo rezultatov pred- in po-uvedbi IKP ugotoviti vpliv IKP na izmerjene ključne dejavnike (komunikacijo v timu in s pacienti, izide pacientov in stroškovna učinkovitost).

ZNANSTVENI ČLANKI

Vpliv IKP na komuniciranje v timu, z vodstvom in s pacienti: sistematičen pregled literature

Povzetek

Integrirane klinične poti (IKP) so ključna orodja za spodbujanje komuniciranja in sodelovanja med ponudniki zdravstvenih storitev ter njimi in pacienti. Zato je bil namen sistematične pregledne študije izčrpno pregledati znanstvene članke na področju vpliva IKP na komuniciranje v timu, z vodstvom in s pacienti od leta 2010 do 2020. Za iskanje člankov so bile uporabljene baze podatkov, in sicer: Cinahl, Ebsco in Medline, PubMed, Google Učenjak in Cobiss. S podrobnejšo analizo branja besedil posameznih člankov je bilo od 282 znanstvenih člankov vključenih 12 člankov, ki so ustrezali omejitvenim merilom. Analiza rezultatov je pokazala, da so dokazi razmeroma slabe kakovosti, obenem pa ponujajo nasprotujoče si rezultate o vplivu IKP na komuniciranje v timu in s pacienti, čeprav večina člankov navaja njihov pozitiven vpliv. Rezultati študije tudi kažejo, da je IKP treba prilagoditi posamezni situaciji in potrebam posameznih timov ter doseči podporo vodstva, še posebej pa je treba poenotiti različne IT sisteme. Nadomeščanje neposrednega komuniciranja z digitalnim sproža dodatne ovire v komuniciranju v timu.

The impact of IKP on communication in the team, with management and with patients: a systematic review of the literature

Abstract

Integrated Clinical Pathways (ICPs) are important tools for promoting communication and collaboration between healthcare providers and these with patients. Therefore, the objective of this systematic review study was to comprehensively review scientific articles on the impact of ICPs on team communication, management, and patients from 2010 to 2020. Databases were used to search for articles, namely: Cinahl in Ebsco, PubMed, Medline, EBSCO, Google Scholar and Cobiss. A more detailed analysis of the reading of the text of each article included 12 articles out of 282 scientific articles that met the restrictive criteria. Analysis of the results showed that the evidence was of relatively poor quality while providing conflicting results on the impact of ICP on team and patient communication, although most articles cite its positive impact. Studies have highlighted the need to adapt ICP to individual situations and the needs of individual teams and to gain management support, particularly the need to standardize different IT systems. However, replacing face-to-face communication with digital brings additional barriers to team communication.

ŠIMEC, Mateja, ERJAVEC, Karmen. Vpliv integriranih kliničnih poti na komuniciranje v timu - z vodstvom in s pacienti : integrativni pregled literature. *Revija za zdravstvene vede*. [Tiskana izd.]. 2021, vol. 8, no. 1, str. 60-75, ilustr. ISSN 2350-3610. https://fzv.uni-nm.si/uploads/custom/FZV_pripone/revija/revija_jhs_2021_v8n1_www.pdf, <http://www.dlib.si/details/URN:NBN:SI:doc-EG2NQD9A>. [COBISS.SI-ID 70335747]

Vesna Zupančič

Vpliv (integriranih) kliničnih poti na izide zdravstvene obravnave: sistematičen pregled literature

Povzetek

Klinične poti so prepoznane kot orodje za zagotavljanje kakovosti zdravstvene obravnave pacientov. Predstavljajo standardizacijo zdravstvenih procesov za podporo izvajanju kliničnih smernic in protokolov. Cilj raziskave je bil podati pregled obstoječe znanstvene literature in identificirati vpliv (integriranih) kliničnih poti na izide zdravstvene obravnave. Raziskava temelji na pregledu literature, ki je bila objavljena od leta 2010 do leta 2020, za identifikacijo, izbiro in kritično oceno vseh ustreznih študij. Izvedena je v okviru aplikativnega projekta Vpliv integriranih kliničnih poti na izide pacientov, komuniciranje in stroškovno učinkovitost (L7-2631). V vsebinsko analizo je bilo vključenih 35 člankov. Skupno je bilo prepoznanih 25 področij, kjer obstajajo dokazi o pozitivnem vplivu kliničnih poti na izide zdravstvene obravnave, najpogosteje glede zmanjšanja števila komplikacij in varnostnih odklonov, skrajšanja dolžine hospitalizacije in izboljšanja kliničnih izidov zdravljenja pri pacientu, ob tem pa pride še do zmanjševanja stroškov. Na 8 področjih izmed teh obstajajo znanstveni dokazi o negativnem vplivu, na 6 področjih pa, da klinične poti niso imele vpliva na izide zdravstvene obravnave. Znanstvenih dokazov o vplivu integriranih kliničnih poti na izide zdravstvene obravnave pacientov je malo.

The impact of (integrated) clinical pathways on health care outcomes: a systematic review of the literature

Abstract

Clinical pathways are recognized as a tool for ensuring the quality of health care for patients. They represent the standardization of healthcare processes to support the implementation of clinical guidelines and protocols. The aim of the study was to provide a review of the existing scientific literature and to identify the impact of (integrated) clinical pathways on healthcare outcomes. The study is based on a literature search to identify, select, and critically appraise all relevant studies from 2010 to 2020, conducted as part of the Impact of integrated clinical pathways on patient outcomes, communication and cost-effectiveness (L7-2631) application project. 35 articles were included in the content analysis. In total, 25 domains were identified where a positive impact of clinical pathways on healthcare outcomes could be demonstrated; most commonly in terms of reducing the number of complications and safety incidents, shortening the length of stay in hospital, and improving clinical treatment outcomes for patients while reducing costs. In 8 areas of these there is scientific evidence of a negative impact, and in 6 areas clinical pathways had no impact on healthcare outcomes. There is little scientific evidence of the impact of integrated clinical pathways on patient outcomes.

ZUPANČIČ, Vesna. Vpliv (integriranih) kliničnih poti na izide zdravstvene obravnave : sistematičen pregled literature. *Revija za zdravstvene vede*. [Tiskana izd.]. 2021, vol. 8, no. 1, str. 37-59, ilustr. ISSN 2350-3610. https://fzv.uni-nm.si/uploads/custom/FZV_pripone/revija/revija_jhs_2021_v8n1_www.pdf, <http://www.dlib.si/details/URN:NBN:SI:doc-UFAMT21F>. [COBISS.SI-ID 70328579]

Upravljaljske ovire za medorganizacijsko sodelovanje pri predoperativnem zdravljenju bolnikov z osteoartritisom kolka ali kolena

Povzetek

Medorganizacijsko sodelovanje med zdravstvenimi ustanovami je splošno priznan način izboljšanja zdravstvenih storitev. Ker obstaja raziskovalna vrzel na področju preučevanja vzrokov za neuvedbo inovacij na področju medorganizacijskega sodelovanja, je bil cilj te študije identificirati ključne upravljaljske ovire za medorganizacijsko sodelovanje v predoperativnem zdravljenju bolnikov z osteoartritisom kolka ali kolena v Sloveniji. Izvedena je bila presečna študija z uporabo različnih metod: spletno anketiranje (n = 135) in večnivojski kvalitativni pristop, v katerem so bili intervjuvani pacienti (n = 21), zdravstveni delavci in drugi deležniki (n = 42). Analiza ovir, ki vplivajo na celostni pristop na makro, mezo in mikro ravni, je pokazala, da so bili dejavniki na makro ravni statistično pomembno zaznani kot glavne ovire, medtem ko so bili dejavniki na mikro ravni zaznani kot manjše ovire. Pri ovirah na treh ravneh med anketiranci iz javnega in zasebnega sektorja ni bilo bistvenih razlik. Bistvene razlike pa so bile v percepcijah različnih poklicnih skupin na mikro in mezo ravni, ne pa tudi na makro ravni. Analiza poglobljenih intervjujev je potrdila pomen ovir na makroravni. V slovenskem zdravstvenem sistemu prevladuje kultura nesodelovanja v kombinaciji z »vodstveno neodločnostjo«, pri čemer vodje in drugi ključni deležniki zaradi pomanjkanja avtonomije ne sprejemajo nujnih odločitev. Intervjuvanci so ugotavljali, da je ena glavnih ovir za medorganizacijsko sodelovanje pomanjkanje sredstev in osebja, zlasti zdravnikov in medicinskih sester na primarni ravni. Pri predoperativni obravnavi bolnikov z osteoartritisom kolka ali kolena sta kultura nesodelovanja in izvršilna neodločnost glavni oviri medorganizacijskega sodelovanja v Sloveniji na makro ravni.

Management barriers to inter-organizational collaboration in preoperative treatment of patients with hip or knee osteoarthritis

Abstract

Inter-organizational collaboration among healthcare institutions is widely recognized to improve healthcare services. Because there is a research gap in examining the management barriers to inter-organizational collaboration in countries with less efficient healthcare systems and the reasons for non-implementation of innovations, the aim of this study was to identify key management barriers to inter-organizational collaboration in the preoperative treatment of patients with hip or knee osteoarthritis in Slovenia using a mixed-methods approach with key stakeholders. A cross-sectional study was conducted using multiple methods. An online survey (n = 135) and a multilevel qualitative approach were used, interviewing patients (n = 21), healthcare professionals, and other stakeholders (n = 42). The overall assessment of barriers affecting the integrated approach at the macro, meso, and micro levels revealed that macro-level factors were statistically significantly perceived as the major barriers, while micro-level factors were the minor barriers. There was no significant difference between public and private sector respondents in the barriers at the three levels. However, there were significant differences in the perceptions of different professional groups at the micro and meso levels, but not at the macro level. The analysis of the in-depth interviews confirmed the importance of macro-level barriers. A culture of noncooperation combined with "managerial indecision" prevails in the Slovenian healthcare system due to weak management support for inter-organizational

collaboration, with managers and other key stakeholders failing to make urgent decisions due to a lack of autonomy. Interviewees commonly noted that one of the major barriers to inter-organizational collaboration was a lack of resources and staff, particularly of primary care physicians and nurses. In the preoperative treatment of patients with hip or knee osteoarthritis, the culture of non-collaboration and executive indecision are the major macro-level barriers to inter-organizational collaboration in Slovenia.

HUSSEIN, Mohsen, ERJAVEC, Karmen, KREGAR-VELIKONJA, Nevenka. Management barriers to inter-organizational collaboration in preoperative treatment of patients with hip or knee osteoarthritis. *Healthcare*. 2023, vol. 11, no. 9, [article no.] 1280, 14 str., tabele. ISSN 2227-9032. <https://www.mdpi.com/2227-9032/11/9/1280>, DOI: 10.3390/healthcare11091280. [COBISS.SI-ID 151763459], [JCR, SNIP, WoS, Scopus]
kategorija: 1A2 (Z, A', A1/2); uvrstitev: SSCI, SCIE, Scopus, MBP (CINAHL, DOAJ, PUBMED)

Ovire za medorganizacijsko sodelovanje pri predoperativnem zdravljenju bolnikov z osteoartritisom kolka ali kolena

Povzetek

Uvod: Integrirane klinične poti naj bi zagotavljale najboljše in najučinkovitejše zdravljenje. Ker nobena študija o ovirah za medorganizacijsko sodelovanje ni raziskala ovir za neizvedeno integrirano klinično pot v državi z manj učinkovito organiziranim zdravstvenim sistemom, je bila raziskava namenjena identifikaciji teh ovir pri predoperativnem zdravljenju bolnikov z osteoartritisom kolka ali kolena v Sloveniji.

Metode: Izvedena je bila presečna študija z uporabo različnih metod, vključno s kvantitativnim anketiranjem in poglobljenimi intervjuji z vključenimi ključnimi akterji na mikro, mezo in makro ravni v Sloveniji.

Rezultati: Anketiranci so pretežno izrazili pomanjkanje medorganizacijskega sodelovanja. Izpostavljene ovire so individualistična kultura, stopnja razvitosti zdravstvenega sistema, financiranje, administracija in regulativni okvir na makro ravni, pomanjkanje kadra na mezo ravni ter pomanjkanje tehnoloških standardov, zaupanja, komunikacije in percepcije pritiski na mikroravni.

Razprava in zaključek: Poleg ovir, ugotovljenih v predhodnih študijah, študija kaže, da sta individualistična kultura in stopnja razvitosti zdravstvenega sistema na makroravni, ki se kažeta kot pritisk na zdravstvene delavce in druge akterje na mikroravni, pomembne ovire za medorganizacijsko sodelovanje.

Barriers to inter-organisational collaboration in the preoperative management of patients with osteoarthritis of the hip or knee

Abstract

Introduction: Integrated clinical pathways should provide the best and most efficient treatment. As no study on barriers to inter-organisational collaboration has investigated the barriers to unimplemented integrated clinical care in a country with less efficiently organised health system, the study aimed to identify these barriers in the preoperative management of patients with hip or knee osteoarthritis in Slovenia.

Methods: A cross-sectional study was conducted using multiple methods, including a quantitative survey with participants involved in target patient groups, and in-depth interviews with involved key actors at micro, meso and macro levels in Slovenia.

Results: Respondents predominantly expressed a lack of inter-organisational collaboration. The exposed barriers are individualistic culture, the level of development of the health system, financing, administration, and regulatory frame at the macro level, shortage of staff at the meso level, and the lack of technological standards, trust, communication, and perception of pressures at the micro level.

Discussion and conclusion: In addition to the barriers identified in previous studies, our study shows that individualistic culture and the level of development of the health system at the macro level, manifested as a pressure on health professionals and other actors at the micro level, are important barriers to inter-organisational collaboration.

hip or knee. International journal of integrated care. 2023, vol. 23, iss. 2, 1-12 str., tabele. ISSN 1568-4156. <https://ijic.org/articles/10.5334/ijic.6995>, DOI: 10.5334/ijic.6995. [COBISS.SI-ID 149841667], [JCR, SNIP, WoS, Scopus] kategorija: 1A2 (Z, A', A1/2); uvrstitev: Scopus (d), SCIE, SSCI, Scopus, MBP (CINAHL, DOAJ, PUBMED)

Kakovost zdravstvenih storitev in njen odnos do timskega sodelovanja in komunikacije med pandemijo COVID-19

Povzetek

Ogrodje: Pri iskanju inovativnih metod za izboljšanje kakovosti in učinkovitosti zdravstvenih storitev so bile uvedene integrirane klinične poti (IKP).

Cilj: Ker v raziskavah učinkovitosti IKP obstaja vrzel, je bil cilj študije raziskati vlogo in vpliv sodelovanja in komunikacije na samooceno učinkovitosti IKP v treh interdisciplinarnih timih IKP.

Metode: Medsektorska študija je bila izvedena z uporabo deskriptivnega kvantitativnega pristopa z anketiranjem (n = 152) in kvalitativnega pristopa z intervjuji v fokusnih skupinah (n = 27) in poglobljenimi intervjuji (n = 22) v tipični splošni bolnišnici v Sloveniji.

Rezultati: Rezultati so pokazali, da se zdravstvenim delavcem zdi zdravstvena nega pacientov in delo zdravstvenih delavcev bolj kakovostna z IKP kot brez IKP. Člani ekipe IKP so komunikacijo, sodelovanje in učinkovitost v timih IKP ocenili kot razmeroma dobre, vendar so kot glavni razlog za svoje omejeno delo navedli pomanjkanje osebja. Vpliv sodelovanja in komunikacije tima na varnost IKP obstaja, vendar ne pojasni zadostnega deleža variance, korelacija pa je srednje močna. Rezultati so tudi razkrili, da pandemija COVID-19 ni primarno vplivala na strah članov tima IKP pred možno okužbo, kot so pokazale študije v prvem valu pandemije COVID-19, temveč na pomanjkanje osebja, kar je povzročilo večji strah pred napakami in možnimi pritožbami in tožbami pacientov in svojcev.

Zaključek: Potrebni so ukrepi za dodatno zaposlovanje članov tima in zadrževanje sedanjega kadra s finančnimi nadomestili in spodbujanjem podpornih značilnosti delovnega mesta.

Health service quality and its relationship to team collaboration and communication during the COVID-19 pandemic

Abstract

Background: In the search for innovative methods to improve the quality and efficiency of health services, integrated clinical pathways (ICPs) have been introduced.

Aim: As there is a gap in research on ICP efficiency, the aim of the study was to investigate the role and impact of collaboration and communication among three interprofessional ICP teams on the self-assessment of efficiency of ICPs.

Methods: Across-sectional study was conducted using a descriptive quantitative with a survey (n = 152) and qualitative methods with a focus group (n = 27) and in-depth interviews (n = 22) in a typical general hospital in Slovenia.

Results: The results showed that health-care professionals found patient health care and the work of health-care professionals' better quality with ICP than without ICP. The ICPs team members assessed communication, cooperation, and effectiveness in the ICP team as relatively good but identified the lack of staff as the main reason for their limitations. The impact of ICP team collaboration and communication on ICP safety exists but it does not explain a sufficient proportion of the variance and the correlation is medium strong. The result also revealed that the COVID-19 pandemic did not primarily affect ICP team members' fear of possible infection, as studies have shown in the first wave of the COVID-

19 pandemic, but rather staff shortages leading to increased fear of errors and possible complaints and lawsuits from patients and relatives.

Conclusion: Measures are needed for the additional employment of team members and the retention of current staff through financial compensation and the promotion of supportive workplace characteristics.

ŠIMEC, Mateja, KRSNIK, Sabina, ERJAVEC, Karmen. Health service quality and its relationship to team collaboration and communication during the COVID-19 pandemic. Open Access Macedonian Journal of Medical Sciences. 2023, vol. 11, no. e, ilustr., str. 1-6. ISSN 1857-9655. <https://oamjms.eu/index.php/mjms/article/view/11454/8458>, DOI: 10.3889/oamjms.2023.11454. [COBISS.SI-ID 153812483], [SNIP], kategorija: 1B (Z); uvrstitev: Scopus, MBP (CAB)

Vpliv nefinančnih dejavnikov na stroškovno učinkovitost splošne bolnišnice v Sloveniji

Povzetek

Ogrodje: Največji delež izdatkov za zdravstvo predstavljajo bolnišnice, ki se v Sloveniji večinoma financirajo iz javnih sredstev. V zdravstvu je izrednega pomena, da se management ne osredotoča na zniževanje stroškov na račun zdravja pacientov, temveč na izboljšanje vrednosti in s tem rezultatov zdravstvene oskrbe. Poleg ekonomskih dejavnikov, ki se uporabljajo za določanje stroškovne učinkovitosti bolnišnice, je treba upoštevati neekonomske ali mehke dejavnike.

Cilj: Cilj te študije je bil razjasniti vpliv nefinančnih dejavnikov na stroškovno učinkovitost bolnišnice.

Metoda: Izvedeno je bilo spletno anketiranje med zaposlenimi v Splošni bolnišnici Novo mesto (N = 150) v letu 2021. Podatki so bili analizirani s faktorsko analizo in multiplo linearno regresijo.

Rezultati: Na samooceno stroškovne učinkovitosti je vplivala komunikacija v bolnišnici, zadovoljstvo in sodelovanje v multidisciplinarnem timu, pripravljenost zaposlenih na inovativnost, sodelovanje z zunanjimi izvajalci ter ocena kakovosti zdravstvene oskrbe. Največji vpliv je imela komunikacija z bolnikom, sledi komunikacija z zunanjimi izvajalci in komunikacija z vodstvom.

Zaključek: Za zmanjšanje stroškov ob ohranjanju ali celo izboljšanju zdravstvenih rezultatov je komunikacija z bolniki izjemno pomembna.

Influence of Non-financial Factors on Cost-efficiency of a General Hospital in Slovenia

Abstract

Background: Hospitals account for the largest share of health-care expenditures, which are mainly financed by public funds. In health care, it is of paramount importance that the management focuses not on reducing costs at the expense of patient health, but on improving the value and thus the health-care outcomes. In addition to the economic factors used to determine a hospital's cost-efficiency, non-economic or soft factors should be considered.

Aim: The aim of this study was to elucidate the influence of non-financial factors on a hospital's cost-efficiency.

Method: An online survey was conducted among the staff at the Novo mesto General Hospital (n = 150) in 2021. Data were analyzed using factor analysis and multiple linear regression as statistical methods.

Results: Self-assessment of cost-efficiency was influenced by communication in the hospital, satisfaction, and cooperation within the multidisciplinary team, willingness of employees to innovate, cooperation with external providers, and evaluation of the quality of health care. Communication with the patient had the greatest impact, followed by communication with external providers and communication with the management.

Conclusion: To reduce costs while maintaining or even improving health-care outcomes, communication with patients is extremely important

KRSNIK, Sabina, ERJAVEC, Karmen. Influence of non-financial factors on cost-efficiency of a general hospital in Slovenia. *Open Access Macedonian Journal of Medical Sciences*. 2023, vol. 11, no. e, str. 291-297, ilustr. ISSN 1857 9655.
<https://oamjms.eu/index.php/mjms/article/view/11597/8520>, DOI: [10.3889/oamjms.2023.11597](https://doi.org/10.3889/oamjms.2023.11597).
[COBISS.SI-ID [154612227](#)], [SNIP]

Komunikacija v interdisciplinarnih zdravstvenih timih z vidika pacientov in osebja

Povzetek

Uvod: Kakovost komunikacije med zdravstvenimi delavci je pomemben vidik interdisciplinarnega timskega dela. Ker obstaja vrzel v raziskavah komunikacije v interdisciplinarnih timih po ocenah članov tima in pacientov, je bil cilj te raziskave analizirati interdisciplinarno timsko komunikacijo in sodelovanje v timu v slovenski splošni bolnišnici z vidika zdravstvenih delavcev in pacientov.

Metode: Izvedena je bila študija primera z uporabo spletnega anketiranja (n = 150) in kvalitativnim pristopom s fokusnimi skupinami (n = 27) ter poglobljenimi intervjuji s člani interdisciplinarne skupine (n = 22) in bolniki (n = 20).

Rezultati: Člani interdisciplinarnega tima so komunikacijo ocenili kot razmeroma dobro, najmanj pa so bili zadovoljni z enakopravno udeležbo v timski komunikaciji, predvsem v komunikaciji med zdravniki zaradi interdisciplinarnega rivalstva. Zdravstveni delavci so posebej izpostavili pomanjkanje časa za komunikacijo z bolniki, nezadovoljstvo s komunikacijo z določenimi zdravniki in preobremenjenost z administracijo. Pacienti so bili relativno zadovoljni s komunikacijo članov tima. Kritizirali pa so pomanjkanje komunikacije med člani tima in bolniki ter nedosledna sporočila članov tima.

Zaključek: Komunikacija v interdisciplinarnih timih je bila v tem okolju srednje dobra. Pomanjkanje osebja je bilo glavni vzrok komunikacijskih težav.

Communication in interprofessional health care teams from the perspective of patients and staff

Abstract

Introduction: The quality of communication among health care professionals is an important aspect of interprofessional teamwork. As there is a gap in research on communication in interprofessional teams as assessed by team members and patients, the aim of this study was to analyze interprofessional team communication and team participation in a Slovenian general hospital from the perspective of health care professionals and patients.

Methods: This was a case report study using a multi-methods study with a survey (n = 150) and a qualitative approach with focus groups (n = 27) and in-depth interviews with interprofessional team members (n = 22) and patients (n = 20).

Results: Interprofessional team members rated communication as relatively good, being least satisfied with equal participation in team communication, especially communication with physicians due to interdisciplinary rivalry. Nursing assistants particularly emphasized the lack of time for communication with patients, dissatisfaction with communication with physicians, and overload with documentation. The patients were relatively satisfied with the communication of the team members. However, they criticized the lack of communication between team members and patients and inconsistent messages of team members.

Conclusion: Communication in interprofessional teams was moderately good in this setting. Low staffing was a primary driver of communication problems

ERJAVEC, Karmen, KNAVS, Nastja, BEDENČIČ, Klemen. Communication in interprofessional health care teams from the perspective of patients and staff. *Journal of health sciences*. [Online ed.]. 2022, vol. 12, no. 1, str., tabele. ISSN 1986-8049. <https://www.jhsci.ba/ojs/index.php/jhsci/article/view/1591/801>, DOI: [10.17532/jhsci.2022.1591](https://doi.org/10.17532/jhsci.2022.1591). [COBISS.SI-ID [104575747](#)], [[SNIP](#), [Scopus](#)] kategorija: 1B (Z); uvrstitev: [Scopus](#), MBP (CAB, DOAJ)

Pogledi članov tima in pacientov na stroškovno učinkovitost (integrirane) klinične poti

Povzetek

Ogrodje: Integrirane klinične poti (IKP), ki so izboljšale obstoječe klinične poti (KP) z delom interdisciplinarnih timov, so postale pomembno orodje za informirano odločanje in zagotavljanje stroškovno učinkovitejše in na vrednotah temelječe zdravstvene nege.

Cilj: Ker manjka študij o stroškovni učinkovitosti IKP, je bil cilj te raziskave ugotoviti mnenje članov skupine, ki zdravi bolnike s totalno artroplastiko kolka, in njihovih pacientov o stroškovni učinkovitosti obstoječe KP in IKP, ki bi ga lahko uvedli v prihodnosti.

Metode: Uporabljen je bil mešani deskriptivni kvantitativni in kvalitativni pristop. Izvedeno je bilo anketiranje 61 članov tima KP obravnave pacientov s totalno artroplastiko kolka, poglobljeni intervjuji (n = 12) in fokusne skupine (n = 11). Poleg tega so bili opravljeni poglobljeni intervjuji z 20 bolniki, ki so bili vključeni v obravnavo KP totalne artroplastike kolka v tipični slovenski splošni bolnišnici.

Rezultati: Rezultati so pokazali, da so udeleženci občasno dajali prednost stroškovni učinkovitosti pred kakovostjo zdravstvene oskrbe. Pogosto so uporabljali KP, da bi zmanjšali stroške in čas oskrbe bolnikov. Medicinske sestre s srednjo izobrazbo so statistično značilno pogosteje dajale prednost stroškovni učinkovitosti zdravstvene nege pred kakovostjo zdravstvene oskrbe kot diplomirane medicinske sestre, zdravniki ipd. Člani tima in pacienti so pozitivno ocenili stroškovno učinkovitost IKP obravnave pacientov s totalno artroplastiko kolka, pacienti pa so tudi poudarili, da ima osebje, zlasti medicinska sestra, premalo stika s pacienti.

Zaključek: Tako člani tima, ki zdravijo paciente s totalno artroplastiko kolka, kot njihovi pacienti imajo pozitiven odnos do stroškovne učinkovitosti IKP. Zdravstveno negovalno osebje ima zaradi pomanjkanja kadra premalo stika z bolniki.

Team members and patients' views on cost-effectiveness of (integrated) clinical pathway

Abstract

Background: Integrated clinical pathways (ICPs), which have particularly enhanced existing clinical pathways (CPs) through the work of multifunctional teams, have become an important tool to enable informed decision-making and provide more efficient, cost-effective, and value-based care.

Aim: In the absence of studies on the cost-effectiveness of ICPs, the aim of this study was to determine the opinion of team members treating patients with total hip arthroplasty and their patients on the practice of cost-effectiveness of the existing CP and ICP that might be introduced in the future.

Methods: A mixed descriptive quantitative and qualitative approach was used. A survey of 61 team members of CP for total hip arthroplasty was conducted, as well as in-depth interviews (n = 12) and focus groups (n = 11). In addition, in-depth interviews were performed with 20 patients who had undergone total hip arthroplasty at CP in a typical Slovenian general hospital.

Results: The results showed that participants occasionally prioritized cost-effectiveness over quality of health care. They frequently used CP to reduce the cost and time of patient care. Nurses with secondary education were statistically significantly more likely to prioritize cost-effectiveness of health care over quality of health care than nurses with higher education, physicians, and others. Team members and patients evaluated positively the cost-effectiveness of ICP for total hip arthroplasty, but patients also pointed out that staff, especially nurse had too little contact with patients.

Conclusion: Both team members treating patients with total hip arthroplasty and their patients have a positive attitude toward the cost-effectiveness of ICP. The nursing staff has too little contact with the patients due to staff shortages.

ERJAVEC, Karmen. Team members and patients' views on cost-effectiveness of (integrated) clinical pathway. Open Access Macedonian Journal of Medical Sciences. 2022, vol. 10, no. e, str. 219-224.<https://oamjms.eu/index.php/mjms/article/view/8049/6860>, DOI: 10.3889/oamjms.2022.8049. [COBISS.SI-ID 101283843], [SNIP, Scopus] kategorija: 1B (Z); uvrstitev: Scopus, MBP (CAB)

Ocena komunikacije medicinskih sester z vodstvom oddelka in bolnišnice pri uvajanju integriranih kliničnih poti v Sloveniji

Povzetek

Uvod: Pomemben dejavnik pri izvajanju inovacij, kot so integrativne poti klinične oskrbe (IKP), je podporna komunikacija vodstva oddelka in bolnišnice. IKP so bili uvedeni v klinično okolje kot orodje za izboljšanje kakovosti, varnosti in učinkovitosti zdravstvenih storitev.

Cilj: Namen raziskave je bil oceniti komunikacijo med medicinskimi sestrami, ki delajo v okviru treh KP, ter predstojniki oddelkov in vodstvom bolnišnice v tipični slovenski bolnišnici ter ugotoviti glavne razloge za takšno oceno komuniciranja z uporabo pristopa mešanih metod.

Material in metode: V presečni študiji smo uporabili mešan deskriptivni kvantitativni pristop z anketiranjem in kvalitativnim pristop s fokusnimi intervjuji medicinskih sester, ki delajo v okviru KP za obravnavo pacientov s kronično ledvično boleznijo, možgansko kapjo in totalno artroplastiko kolka v tipični slovenski bolnišnici.

Rezultat in zaključek: Rezultati so pokazali, da ima komunikacija pomembno vlogo pri izvajanju KP in da medicinske sestre slabše komunicirajo z vodstvom bolnišnice kot z vodji oddelkov ne glede na starost, spol, izobrazbo in KP. Glavni razlogi za slabo komunikacijo pri izvajanju KP so komunikacijski (šibka izmenjava informacij, pomanjkanje ustreznih komunikacijskih kanalov, enostranska in avtoritativna komunikacija s strani vodstva bolnišnice) in organizacijski (pomanjkanje kadra, neorganiziranost osebja).

Assessment of nurses' communication with department and hospital management in implementation of integrated clinical pathways in Slovenia

Abstract

Introduction: An important factor in the implementation of innovations such as integrative clinical care pathways (ICPs) is supportive communication from department and hospital management. ICPs have been introduced into the clinical environment as a tool to improve the quality, safety and efficiency of health services.

Aim: The study aimed to assess communication of nurses working in three ICPs and department heads and hospital managers in a typical Slovenian hospital and to identify the main reasons for this communication using a mixed methods approach.

Material and methods: The cross-sectional study used a mixed descriptive quantitative method with a survey and a qualitative method with a focus group interviews of nurses working in ICPs for chronic kidney disease, stroke and total hip arthroplasty in a typical Slovenian hospital.

Result and conclusion: The results showed that communication plays an important role in the implementation of ICPs and that nurses communicate worse with hospital managers than with department heads, regardless of age, gender, education and ICPs. The main reasons for poor communication in the implementation of ICPs are communication-related (weak exchange of information, lack of appropriate communication channels, one-sided and authoritative communication on the part of hospital managers) and organizational (lack of staff, disorganisation of nursing staff).

ŠIMEC, Mateja, KRSNIK, Sabina, ERJAVEC, Karmen. Assessment of nurses' communication with department and hospital management in implementation of integrated clinical pathways in Slovenia = Ocena komunikacji pielęgniarek z kierownictwem oddziału i szpitala we wdrażaniu zintegrowanych ścieżek klinicznych w Słowenii. *Pielęgniarstwo XXI wieku*. Sept. 2022, vol. 21, iss. 3, str. 138-142, tabele. ISSN 2450-646X. <https://sciendo.com/article/10.2478/pielxxiw-2022-0022>, DOI: 10.2478/pielxxiw-2022-0022. [COBISS.SI-ID 128532995], [SNIP, WoS] kategorija: 1B (Z); uvrstitev: Scopus, MBP (CINAHL, ERIHPLUS, ESCI)

Integrirane klinične poti: komunikacija in sodelovanje v multidisciplinarnem timu

Povzetek

Ogrodje: Integrirana klinična pot (IKP) je ključna metoda za strukturiranje ali načrtovanje procesov, ki omogoča posodobitev izvajanja zdravstvene nege in usklajevanje različnih vlog in nalog, oblikovanje celovitega, na bolnika osredotočenega interdisciplinarnega zdravstvenega tima in vzpostavitev zaporedje aktivnosti, spodbujanje individualne in timske komunikacije, sodelovanja, povezovanja in transparentnosti ter zniževanje stroškov oskrbe.

Cilj: Ker obstaja raziskovalna vrzel na področju proučevanja komunikacije med člani interdisciplinarnega tima za obravnavo pacientov prek IKP, je bil cilj te študije ugotoviti vpliv komunikacije člana tima na aktivno sodelovanje posameznika v interdisciplinarnem timu.

Metode: Izvedena je bila presečna študija treh IKP v tipični slovenski splošni bolnišnici.

Rezultati: Rezultati kažejo, da v analizirani bolnišnici dve od treh kliničnih poti še nista popolnoma integrirani.

Zaključek: Obstaja šibek vpliv komuniciranja osebja na sodelovanje posameznika v multidisciplinarnem timu, kar kaže na potrebo po različnih dejavnostih za dejansko izvedbo »integracije« kliničnih poti in spodbujanje boljše komunikacije v timih za krepitev sodelovanja v interdisciplinarni poti oskrbe pacientov.

Integrated Clinical Pathways: Communication and Participation in a Multidisciplinary Team

Abstract

Background: An integrated clinical pathway (ICP) is a key method for structuring or planning processes of care, enabling the modernization of health-care delivery and coordination of multiple roles, forming a complete, patient-centered multidisciplinary health-care team and establishing the sequence of activities, promoting individual and team communication, collaboration, networking, and transparency, and reducing the cost of care.

Aim: As there is a research gap in the area of communication among members of a multidisciplinary team for the treatment of patients through an ICP, the aim of this study was to determine the impact of communication of a member of a multidisciplinary team on the active participation of an individual in this multidisciplinary team.

Methods: A cross-sectional study of three ICPs, for chronic kidney disease, stroke, and total hip arthroplasty was conducted in a typical Slovenian general hospital.

Results: The results show that in the analyzed hospital, two of the three clinical pathways are not yet fully integrated.

Conclusion: There is a weak influence of staff communication within a multidisciplinary team on an individual's participation in this multidisciplinary team, indicating the need for various activities to actually implement clinical pathway "integration," and promote better communication within teams to strengthen participation in multidisciplinary patient care pathways.

ŠIMEC, Mateja, KRSNIK, Sabina, ERJAVEC, Karmen. Integrated clinical pathways : communication and participation in a multidisciplinary team. Open Access Macedonian Journal of Medical Sciences. 2021, vol. 9, no. b, str. 1549-1555, tabele. ISSN 1857-9655. <https://oamjms.eu/index.php/mjms/article/view/7205/6448>, DOI: 10.3889/oamjms.2021.7205. [COBISS.SI-ID 89971971], [SNIP, Scopus]
kategorija: 1B (Z); uvrstitev: Scopus, MBP (CAB, DOAJ, PUBMED)

PRISPEVKI NA KONFERENCAH

Vpliv integrirane klinične poti na komuniciranje med zaposlenimi

Povzetek

Integrirana klinična pot (IKP) je pristop, ki zagotavlja enotno in koherentno obravnavo za paciente z različnimi zdravstvenimi stanji. Cilj IKP je zagotoviti najboljše možno zdravstveno oskrbo pacientom, prilagojeno njihovim potrebam in ciljem, ter hkrati optimizirati delovanje zdravstvenega sistema. Na področju standardizacije IKP zagotavlja jasen vodnik obravnave pacienta po korakih, ki pomaga standardizirati oskrbo in zmanjšati variabilnost. To omogoča, da so vsi člani tima usklajeni, kar izboljša komunikacijo in koordinacijo. Ker IKP vključuje sodelovanje članov interdisciplinarnega tima, lahko izboljša komunikacijo in pomaga zagotoviti, da so vsi člani ekipe seznanjeni z načrtom obravnave pacienta. IKP lahko tudi pomaga izboljšati komunikacijo z zagotavljanjem jasnega okvira odločanja. IKP pogosto vključuje orodja za sledenje in spremljanje napredka, ki lahko pomagajo izboljšati komunikacijo z zagotavljanjem jasnega zapisa pacientove obravnave. Tako so vsi člani tima seznanjeni s pacientovim napredkom in morebitnimi spremembami načrta obravnave. Izvedena je bila študija primera komuniciranja med zaposlenimi v eni od slovenskih bolnišnic na primeru integrirane klinične poti endoproteze kolka, v kateri smo ugotavljali vpliv uvedbe integrirane klinične poti na komuniciranje med zaposlenimi in z vodstvom.

Impact of an integrated clinical pathway on communication between staff

Abstract

The Integrated Clinical Pathway (ICP) is an approach that provides unified and coherent care for patients with diverse conditions. The goal of the integrated clinical pathway is to provide patients with the best possible healthcare tailored to their needs and goals, while optimizing the functioning of the healthcare system. In the area of standardization, the ICP provides clear, step-by-step guidance for patient care that helps standardize care and reduce variability. This allows all team members to be aligned, which improves communication and coordination. Because the ICP requires collaboration among members of a multidisciplinary team, it can improve communication and help ensure that all team members are aware of the patient's treatment plan. The ICP can also help improve communication by providing a clear framework for decision making. The ICPs often include tracking and progress monitoring tools that can improve communication by providing a clear record of the patient's treatment. In this way, all team members are aware of the patient's progress and any changes to the treatment plan. Using an integrated clinical pathway for hip arthroplasty as an example, we conducted a case study of communication between staff in one of the Slovenian hospitals to determine the impact of implementing an integrated clinical pathway on communication between staff and with management.

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mesto, Faculty of Economics and Informatics: Univerza v Novem mestu, Fakulteta za poslovne in upravne vede: = University of Novo mesto, Faculty of Business and Management Sciences: Založba Univerze v Novem mestu: = University of Novo mesto Press, 2023. Str. 29. ISBN 978-961-6770-63-7. <https://www.zalozba-unm.si/index.php/press/catalog/book/55>. [COBISS.SI-ID 154742531]

Ovire pri uvajanju integriranih kliničnih poti: primer medorganizacijskega sodelovanja

Povzetek

V Sloveniji poteka razvoj kliničnih poti od leta 2002. Treba je bilo premostiti številne ovire. Glede na prepoznane trende utrjevanja na pacienta osredotočene zdravstvene obravnave, uvajanje integriranega pristopa ter prizadevanj za uporabo sodobnih metod in orodij za zagotavljanje kakovosti in varnosti je treba preiti na razvoj integriranih kliničnih poti. Aktualni sta vprašanji vpliva (integriranih) kliničnih poti na izide pacientov, komunikacijo in stroškovno učinkovitost ter kaj je potrebno za nadgradnjo obstoječih kliničnih poti za izvajanje integrirane zdravstvene obravnave. V študiji primera, ki se izvaja v Splošni bolnišnici Novo mesto v okviru projekta »Vpliv integriranih kliničnih poti na izide pacientov, komunikacijo in stroškovno učinkovitost« (ARSS št. L7-2631), je bil uporabljen kvantitativni in kvalitativni pristop. Vključen je pregled obstoječe dokumentacije, anketiranje, fokusne skupine in intervjuvanje zdravstvenih delavcev in sodelavcev v povezavi s kliničnimi potmi za obravnavo bolnikov z endoprotezo kolka, s kronično ledvično boleznijo in po možganski kapi. V tem prispevku so predstavljene dosedanje ugotovitve v okviru projekta, ki traja od 2020–2023. Znotraj bolnišnice se je oblikovala različna praksa pri razvoju kliničnih poti, ki dejansko pripomorejo k učinkovitosti. Predlagane dopolnitve za razvoj integriranih kliničnih poti so vsebinske in tehnične, njihova izvedljivost in vpliv na učinkovitost je v fazi vrednotenja

Obstacles in Implementing Integrated Clinical Pathways: Case of Inter-organisational Collaboration

Abstract

Clinical pathways have been developed in Slovenia since 2002. In the process, many obstacles had to be overcome. Given the recognized trends towards the consolidation of patient-centered healthcare, introduction of an integrated approach and efforts to use modern methods and tools to ensure quality and safety, it is necessary to move to the development of integrated clinical pathways. Current issues include the impact of (integrated) clinical pathways on patient outcomes, communication and cost-effectiveness, and what is needed to improve existing clinical pathways to implement integrated healthcare. A quantitative and qualitative approaches were used in the case study conducted at the Novo mesto General Hospital as part of the Impact of Integrated Clinical Pathways on Patient Outcomes, Communication and Cost-Effectiveness project (ARSS No. L7-2631). The project included a review of the existing literature, surveys, focus groups and interviews with healthcare professionals and colleagues regarding clinical pathways for the treatment of patients with hip arthroplasty, chronic kidney disease and post-stroke. This paper presents the findings discovered so far in the project, which runs from 2020 to 2023. Different practices have evolved within the hospital relative to the development of clinical pathways that actually contribute to efficiency. The proposed additions for the development of integrated clinical pathways are substantive and technical, and their feasibility and impact on efficiency are reviewed.

ERJAVEC, Karmen. Ovire pri uvajanju integriranih kliničnih poti: primer medorganizacijskega sodelovanja. V: KREGAR-VELIKONJA, Nevenka (ur.). Celostna obravnava pacienta = Holistic approach to the patient: zbornik prispevkov = conference proceedings: 12. mednarodna znanstvena konferenca = 12th international scientific conference: Novo mesto, 17. november 2022. Elektronska izd. Novo mesto: Založba Univerze v Novem mestu: = University of Novo mesto Press, 2023. Str. 117-122. ISBN 978-961-6770-65-1

<https://www.zalozba-unm.si/index.php/press/catalog/view/57/109/232>. [COBISS.SI-ID 158165251]

Zdravstvena nega in sodelovanje v multidisciplinarnih timih

Povzetek

Sodelovanje v multidisciplinarnem timu je pomemben vidik zagotavljanja kakovosti zdravstvene oskrbe. Z raziskavo smo poskušali ugotoviti, kako zdravstveni delavci zaznavajo interdisciplinarno sodelovanje in merila kakovosti v tipični slovenski splošni bolnišnici. Študija primera v slovenski bolnišnici je bila izvedena z uporabo anketnega pristopa (N = 150). Raziskava je pokazala, da so anketiranci v povprečju najvišje ocenili jasno evidentiranje ciljev zdravljenja in soglasja pacienta oziroma družine v dokumentaciji ter sistematično spremljanje zdravstvenih in socialnih potreb pacientov. Rezultati tudi kažejo, da zdravstveni delavci redko sodelujejo z nevladnimi organizacijami ali skupinami za samopomoč glede na potrebe bolnikov. V vseh primerih so zdravniki izjave ocenili nižje kot medicinske sestre in drugi zdravstveni delavci. Vendar pa so zdravniki v povprečju bolje ocenili splošno oceno kakovosti oskrbe pacienta v primerjavi z medicinskimi sestrami. Da medicinske sestre ocenjujejo kakovost interdisciplinarnega sodelovanja višje kot druge poklicne skupine v interdisciplinarnem timu lahko pojasnimo z dejstvom, da so medicinske sestre manj kritične do interdisciplinarnega sodelovanja, saj so močno vpletene v dinamične odnose med medicinskimi sestrami, pacienti in njihovimi družinami ter večino svojega časa preživijo s pacientom.

Nursing and Cooperation in Multidisciplinary Teams

Abstract

Cooperation in an interdisciplinary team is an important aspect of ensuring the quality of medical care. With the research, we tried to fill the research gap and find out how health workers perceive interdisciplinary cooperation and quality criteria in a typical Slovenian general hospital. A case study in a Slovenian hospital was conducted using a survey approach (N = 150). The research showed that, on average, the respondents rated the clear recording of treatment goals and the patient's or family's consent in the documentation as well as the systematic monitoring of the patients' health and social needs. The results also show that health professionals rarely collaborate with non-governmental organizations or self-help groups based on patients' needs. In all cases, doctors rated the statements lower than nurses and other health professionals. However, on average, doctors rated the overall quality of patient care better, while nurses scored significantly worse. The fact that the quality assessments of nurses are higher than those of other professional groups in the interdisciplinary team can be explained by the fact that nurses are less critical of interdisciplinary collaboration, as they are strongly involved in the unique relationship between nurses, patients and their families, and spend most of their time with the patient.

ŠIMEC, Mateja. Zdravstvena nega in sodelovanje v multidisciplinarnih timih. V: KREGAR-VELIKONJA, Nevenka (ur.). Celostna obravnava pacienta = Holistic approach to the patient : zbornik prispevkov = conference proceedings : 12. mednarodna znanstvena konferenca = 12th international scientific conference : Novo mesto, 17. november 2022. Elektronska izd. Novo mesto: Založba Univerze v Novem mestu: = University of Novo mesto Press, 2023. Str. 468-474, tabele. ISBN 978-961-6770-65-1. <https://www.zalozba-unm.si/index.php/press/catalog/book/57>. [COBISS.SI-ID 158396419]

Komuniciranje med zaposlenimi in s pacienti v okviru integriranih kliničnih poti

Povzetek

Za izboljšanje učinkovitosti bolnišnične oskrbe ter kakovosti oskrbe z zmanjšanjem razlik v procesih in rezultatih celostne oskrbe pacienta v bolnišnicah se priporoča uvedba integriranih kliničnih poti (IKP). IKP lahko razumemo kot metodo ali orodje za zagotavljanje strukture, interdisciplinarnega postopka in spremljanja rezultatov ter kot skladen niz metod in modelov na finančni, upravni, organizacijski, storitveni in klinični ravni, namenjeni ustvarjanju poveztivosti, usklajevanju in sodelovanju znotraj in med sektorji zdravljenja in oskrbe. Cilj IKT je tudi izboljšati komuniciranje med zaposlenimi in s pacienti oziroma svojci. To je relevantno, saj obstoječe študije velik delež napak v zdravstvu pripisujejo komunikacijskim napakam in pomanjkanju učinkovitega timskega dela, ki pomembno prispevata k pojavu tveganj na področju varnosti pacientov. Zato je prispevek skušal ugotoviti, kako zaposleni v tipični slovenski bolnišnici ocenjujejo komuniciranje med zaposlenimi in s pacienti oziroma svojci v okviru treh IKP.

Communication between employees and patients within integrated clinical pathways

Abstract

The implementation of Integrated Clinical Pathways (ICP) is recommended to improve the efficiency of hospital care and the quality of care by reducing differences in processes and outcomes of holistic patient care in hospitals. ICP can be understood as a method or tool to ensure structure, interdisciplinary process and monitoring of outcomes, as well as a coherent set of methods and models at financial, administrative, organisational, service and clinical levels that aim to create connectivity, coordination and cooperation within and between treatment and care sectors. ICT also aims to improve communication between employees and with patients or relatives. This is relevant because existing studies attribute a large proportion of healthcare errors to communication failures and a lack of effective teamwork, which contribute significantly to patient safety risks. Therefore, this work sought to find out how employees in a typical Slovenian hospital evaluate communication between employees and with patients or relatives within the three ICPs.

ERJAVEC, Karmen. Komuniciranje med zaposlenimi in s pacienti v okviru integriranih kliničnih poti = Communication between employees and patients within integrated clinical pathways. V: KREGAR-VELIKONJA, Nevenka (ur.). Celostna obravnava pacienta = Holistic approach to the patient : zbornik povzetkov : mednarodna znanstvena konferenca : international scientific conference : Novo mesto, 18. november 2021. Elektronska izd. Novo mesto: Fakulteta za zdravstvene vede: = Faculty of Health Sciences, 2021. Str. 18. ISBN 978-961-94985-9-0. https://fzv.uni-nm.si/uploads/_custom/FZV_pripone/Simpozij/2021/unmfzv_zbornik_povzetkov_2021_www.pdf. [COBISS.SI-ID 87575299]

Multidisciplinarna zdravstvena obravnava pacienta: komuniciranje z vidika pacienta in zdravstvenega osebja

Povzetek

Uvod: Komuniciranje pri multidisciplinarnem timskem delu predstavlja pomemben vidik kakovostne zdravstvene obravnave pacienta. Pričujoča raziskava poskuša zapolniti vrzel v raziskovanju komuniciranja pri multidisciplinarni obravnavi pacienta, ocenjenega od pacientov in članov tima. Namen raziskave je analizirati timsko komuniciranje in sodelovanje v multidisciplinarnem timu z vidika pacientov in zdravstvenih delavcev.

Metode: V okviru študije primera je bil uporabljen kvantitativni pristop z anketiranjem (n = 150) in kvalitativni pristop z uporabo fokusnih skupin (n = 27) in poglobljenih intervjujev s pacienti (n = 20) in s člani multidisciplinarnega tima (n = 22) v slovenski splošni bolnišnici.

Rezultati: Člani multidisciplinarnega tima ocenjujejo komuniciranje kot relativno dobro, najmanj pa so zadovoljni z enakopravno udeležbo v timski komunikaciji, predvsem s komuniciranjem z zdravniki zaradi interdisciplinarnega rivalstva. Izvajalci zdravstvene nege so posebej izpostavili pomanjkanje časa za komuniciranje s pacienti, nezadovoljstvo s komuniciranjem z zdravniki in preobremenjenost z dokumentacijo. Pacienti so bili relativno zadovoljni s komuniciranjem s člani tima, poročali pa so o pomanjkanju komuniciranja med člani tima in pacienti ter nedoslednih sporočilih članov tima.

Razprava in zaključek: Komuniciranje v multidisciplinarnih timih je bilo v tem okolju zmerno dobro. Kot glavno vodilo komunikacijskih težav je bilo prepoznano pomanjkanje osebja.

Multidisciplinary medical treatment of the patient: communication from the perspective of the patient and medical staff

Abstract

Background: Communication in multidisciplinary teamwork represents an important aspect of the quality of the patient's medical treatment. This study attempts to fill a research gap on communication in multidisciplinary patient care as assessed by patients and team members. The aim of the study is to analyze team communication and collaboration in a multidisciplinary team from the perspective of patients and medical professionals.

Methods: The case study used a quantitative approach with surveys (n = 150) and a qualitative approach with focus groups (n = 27) and in-depth interviews with patients (n = 20) and members of the multidisciplinary team (n = 22) in a Slovenian general hospital.

Results: Multidisciplinary team members rated communication as relatively good but were least satisfied with equal participation in team communication, especially with communication with physicians due to interdisciplinary rivalry. Nurses specifically pointed to a lack of time to communicate with patients, dissatisfaction with communication with physicians, and being overwhelmed with documentation. Patients were relatively satisfied with communication with team members but reported a lack of communication between team members and patients and inconsistent messages from team members.

Discussion and conclusion: Communication in multidisciplinary teams was moderately good in this setting. Staff shortages were cited as the main cause of communication problems.

ŠIMEC, Mateja, ERJAVEC, Karmen. Multidisciplinarna zdravstvena obravnava pacienta: komuniciranje z vidika pacienta in zdravstvenega osebja = Multidisciplinary medical treatment of the patient = communication from the perspective of the patient and medical staff. V: KAUČIČ, Boris Miha (ur.), et al. *Medicinske sestre in babice skupaj za zdravje ljudi : zbornik recenziranih prispevkov in povzetkov : 14. kongres zdravstvene in babiške nege Slovenije : 11. in 12. maj 2023, Kongresni center Brdo, Brdo pri Kranju*. [Ljubljana]: Zbornica zdravstvene in babiške nege Slovenije - Zveza strokovnih društev medicinskih sester, babic in zdravstvenih tehnikov Slovenije, 2023. Str. 187-192, tabele. ISBN 978-961-273-259-2. <https://doi.org/10.14528/ASAE9754.1>, https://www.zbornica-zveza.si/wp-content/uploads/2023/06/Web_Zbornik-ZBN_2023_Popravljen_09_06_23.pdf, DOI: [10.14528/ASAE9754](https://doi.org/10.14528/ASAE9754). [COBISS.SI-ID [158706179](https://www.cobiss.si/id/158706179)]

Karmen Erjavec

Komuniciranje med zaposlenimi in s pacienti v okviru integriranih kliničnih poti

Povzetek

Za izboljšanje učinkovitosti bolnišnične oskrbe ter kakovosti oskrbe z zmanjšanjem razlik v procesih in rezultatih celostne oskrbe pacienta v bolnišnicah se priporoča uvedba Integriranih Kliničnih Poti (IKP). IKP lahko razumemo kot metodo ali orodje za zagotavljanje strukture, interdisciplinarnega postopka in spremljanja rezultatov ter kot skladen niz metod in modelov na finančni, upravni, organizacijski, storitveni in klinični ravni, namenjeni ustvarjanju povezljivosti, usklajevanju in sodelovanju znotraj ter med sektorji zdravljenja in oskrbe. Cilj IKT je tudi izboljšati komuniciranje med zaposlenimi in s pacienti oziroma svojci. To je relevantno, saj obstoječe študije velik delež napak v zdravstvu pripisujejo komunikacijskim napakam in pomanjkanju učinkovitega timskega dela, ki pomembno prispevata k pojavu tveganj na področju varnosti pacientov. Zato je prispevek skušal ugotoviti, kako zaposleni v tipični slovenski bolnišnici ocenjujejo komuniciranje med zaposlenimi in s pacienti oziroma svojci v okviru treh IKP.

Communication between Employees and Patients within Integrated Clinical Pathways

Abstract

The implementation of Integrated Clinical Pathways (ICP) is recommended to improve the efficiency of hospital care and the quality of care by reducing differences in processes and outcomes of holistic patient care in hospitals. ICP can be understood as a method or tool to ensure structure, interdisciplinary process and monitoring of outcomes, as well as a coherent set of methods and models at financial, administrative, organisational, service and clinical levels that aim to create connectivity, coordination and cooperation within and between treatment and care sectors. ICT also aims to improve communication between employees and with patients or relatives. This is relevant because existing studies attribute a large proportion of healthcare errors to communication failures and a lack of effective teamwork, which contribute significantly to patient safety risks. Therefore, this work sought to find out how employees in a typical Slovenian hospital evaluate communication between employees and with patients or relatives within the three ICPs.

ERJAVEC, Karmen. Komuniciranje med zaposlenimi in s pacienti v okviru integriranih kliničnih poti. V: KREGAR-VELIKONJA, Nevenka (ur.). *Celostna obravnava pacienta = Holistic approach to the patient: zbornik prispevkov = conference proceedings: 11. mednarodna znanstvena konferenca = 11th international scientific conference : Novo mesto, 18. november 2021*. 1. izd. Novo mesto: Fakulteta za zdravstvene vede: = Faculty of Health Sciences, 2022. Str. 68-75, tabele. ISBN 978-961-95655-0-6. https://fzv.uni-nm.si/uploads/custom/FZV_pripone/Simpozij/2021/Zbornik_2021_www.pdf. [COBISS.SI-ID [114967299](https://www.cobiss.si/id/114967299)]

Vpliv ne-ekonomskih dejavnikov na stroškovno učinkovitost v zdravstvenem varstvu

Povzetek

Bolnišnice predstavljajo največji delež izdatkov zdravstvenega varstva, ki se v pretežni meri financira iz javnih sredstev. V zdravstvu je izrednega pomena, da se vodstvo ne osredotoča na zniževanje stroškov na račun zdravja pacientov, ampak je precej pomembnejše izboljševanje vrednosti in posledično boljše zdravstvene izide pacientov. Poleg ekonomskih dejavnikov, na podlagi katerih se določi stroškovna učinkovitost posamezne bolnišnice, pa nanjo posredno vplivajo tudi neekonomski, t. i. mehki dejavniki. Študija, ki bi obravnavala vpliv ne-ekonomskih dejavnikov na stroškovno učinkovitost v slovenskem prostoru še ni bila izvedena, zato prispevek zapolnjuje omenjeno raziskovalno vrzel. Z ustreznimi statističnimi tehnikami smo preverili, kakšna je splošna ocena stroškovne učinkovitosti v Splošni bolnišnici Novo mesto in ali dajejo zdravstveni delavci pri svojem delu prioriteto stroškovni učinkovitosti pred kakovostjo. Rezultati multiple linearne regresije so pokazali, da na stroškovno učinkovitost vplivajo pripravljenost zaposlenih na inovacije, komunikacija, kakovost zdravstvene obravnave, zadovoljstvo in sodelovanje multidisciplinarnega tima ter sodelovanje z zunanjimi izvajalci.

The influence of non-economic factors on cost-effectiveness in health care

Abstract

Hospitals account for the largest share of health care expenditures, which are mainly financed by public funds. In healthcare, it is of utmost importance that management does not focus on reducing costs at the expense of patient health, but much more importantly on improving the value and therefore health outcomes of patients. In addition to the economic factors used to determine an individual hospital's cost-effectiveness, it is also indirectly influenced by non-economic, or soft factors. A study focusing on the impact of non-economic factors on cost efficiency in Slovenia has not yet been conducted, so the present work fills this research gap. We applied appropriate statistical techniques to examine the overall assessment of cost-effectiveness in Novo mesto General Hospital and to determine whether healthcare professionals prioritize cost-efficiency over quality in their work. The results of multiple linear regression showed that cost-effectiveness is influenced by the willingness of staff to innovate, communication, quality of health care, satisfaction and cooperation of a multidisciplinary team, and cooperation with external contractors.

KRSNIK, Sabina. Vpliv ne-ekonomskih dejavnikov na stroškovno učinkovitost v zdravstvenem varstvu. V: STARC, Jasmina (ur.). Izzivi globalizacije in družbeno-ekonomsko okolje EU = Globalisation challenges and the social-economic environment of the EU : zbornik prispevkov = conference proceedings : 11. mednarodna znanstvena konferenca = 11th international scientific conference : Novo mesto, 19. maj 2022. Elektronska izd. Novo mesto: Založba Univerze = University of Novo mesto Press, 2022. Str. 272-278, ilustr. ISBN 978-961-6770-56-9. <https://www.zalozba-unm.si/index.php/press/catalog/book/34>. [COBISS.SI-ID 131109891]

Zdravstvena obravnava pacienta - sodelovanje in komuniciranje članov multidisciplinarnega tima z vodstvom

Povzetek

Pri zdravstveni obravnavi pacienta je kot ključno orodje za povezan pristop zdravstvenega osebja do pacienta, do njegovih potreb in za dobro medsebojno sodelovanje osebja, ki izvaja zdravstveno obravnavo, predstavljena klinična pot, ki omogoča načrtovanje procesov zdravstvene obravnave, posodabljanje obravnave pacienta in koordinacijo različnih vlog, oblikuje na pacienta osredotočen multidisciplinarni zdravstveni tim ter določa zaporedja aktivnosti, spodbuja komunikacijo, sodelovanje, povezovanje in preglednost opravljenega dela ter zmanjšuje stroške zdravljenja. Cilj raziskave je bil ugotoviti vpliv komuniciranja članov multidisciplinarnega tima z vodstvom na sodelovanje posameznika v multidisciplinarnem timu za obravnavo pacienta po klinični poti. V splošni bolnišnici je bila izvedena presečna študija treh kliničnih poti – obravnava pacienta s kronično ledvično boleznijo, možgansko kapjo in totalno endoprotezo kolka. Rezultati raziskave so pokazali jasno razlikovanje v komuniciranju med vodstvom oddelka in vodstvom bolnišnice, ugotovljeno pa je bilo tudi, da obstaja šibek vpliv komuniciranja člana multidisciplinarnega tima z vodstvom na sodelovanje posameznika v multidisciplinarnem timu, kar nakazuje potrebo po različnih aktivnostih za spodbujanje kakovostnejšega komuniciranja z vodstvom v multidisciplinarnih timih za obravnavo pacienta po klinični poti.

Medical treatment of the patient - cooperation and communication of the members of the multidisciplinary team with the management

Abstract

A clinical pathway is presented as a key tool for the healthcare team's integrated approach to the patient, their needs, and for good collaboration among healthcare professionals. It forms a patient-centred multidisciplinary healthcare team and establishes processes, promotes communication, collaboration, networking, and transparency of the work done, and reduces the cost of care. The purpose of the study was to determine the impact of communication between multidisciplinary team members and management on an individual's participation in a multidisciplinary team to treat the patient in the clinical setting. A cross-sectional study was conducted across three clinical pathways in a general hospital setting - treatment of a patient with chronic kidney disease, stroke, and total hip arthroplasty. The results of the study showed a significant difference in communication between department management and hospital management, and it was found that there was a weak influence of communication between a member of a multidisciplinary team and management on individual participation in a multidisciplinary team, indicating the need in multidisciplinary teams for clinical treatment of the patient.

ŠIMEC, Mateja. Zdravstvena obravnava pacienta - sodelovanje in komuniciranje članov multidisciplinarnega tima z vodstvom. V: STARC, Jasmina (ur.). Izzivi globalizacije in družbeno-ekonomsko okolje EU = Globalisation challenges and the social-economic environment of the EU : zbornik prispevkov = conference proceedings : 11. mednarodna znanstvena konferenca = 11th international scientific conference : Novo mesto, 19. maj 2022. Elektronska izd. Novo mesto:

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Stroškovna učinkovitost in klinična pot

Povzetek

Zdravje je opredeljeno kot vrednota, ki jo visoko na lestvici vrednot uvrščajo tako mladi kot stari. Hkrati pa ugotavljamo, da za današnji čas velja, da je napredek v medicini jasen in izrazit. Vse to se na eni strani odraža v daljši življenjski dobi prebivalstva, na drugi pa v vedno večjih izdatkih za zdravstvo v bruto domačem proizvodu. K temu pa prispeva tudi vedno večja ozaveščenost posameznikov. Posledica vsega pa je, da je treba dajati na področju zdravstva vedno več pozornosti tudi stroškovni učinkovitosti, ob tem pa upoštevati zadovoljivo kakovost storitev. K slednjemu pa naj bi prispevale prav integrirane klinične poti. V teoretičnem delu prispevku predstavimo ureditev zdravstvenega sistema v Sloveniji ter razvoj proučevanja stroškovne učinkovitosti v zdravstvu, še posebej v bolnišnicah. Dejstvo namreč je, da se za bolnišnično dejavnost namenja največji del izdatkov za zdravstveno varstvo. V zadnjem, empiričnem delu pa s pomočjo študije primera predstavimo aktivnosti za operacijo kolka, njihovo vrednotenje ter možnosti za prihranek. Pri tem ugotavljamo, da je možnosti za prihranke in s tem možnosti za vpeljavo novih aktivnosti za vpeljavo integrirane klinične poti malo.

Cost-Effectiveness and Clinical Pathway

Abstract

Health is defined as a value that ranks high on the scale of values for young and old. At the same time, we note that the advances in medicine today are clear and evident. All this is reflected on the one hand, in the longer life expectancy of the population and, on the other, in the growing expenditure on healthcare as a proportion of gross domestic product. The growing awareness of the individual also contributes to this. The consequence of all this is that more and more attention must be paid to cost efficiency in the area of health care, taking into account the satisfactory quality of services. Integrated clinical pathways are expected to contribute to the latter. In the theoretical part of the paper, we present the regulation of the healthcare system in Slovenia and the development of the study of cost-effectiveness in healthcare, especially in hospitals. The fact is that the largest part of health care expenditure is spent on hospital activities. In the last, empirical part, we present activities for hip surgeries, their evaluation and possibilities for savings, based on a case study. We find that the opportunities for savings and thus the opportunities for introducing new activities to implement an integrated clinical pathway are low.

GRIVEC, Malči. Stroškovna učinkovitost in klinična pot. V: STARC, Jasmina (ur.). Izzivi globalizacije in družbeno-ekonomsko okolje EU = Globalisation challenges and the social-economic environment of the EU : zbornik prispevkov = conference proceedings : 11. mednarodna znanstvena konferenca = 11th international scientific conference : Novo mesto, 19. maj 2022. Elektronska izd. Novo mesto: Založba Univerze: = University of Novo mesto Press, 2022. Str. 194-206, ilustr. ISBN 978-961-6770-56-9. <https://www.zalozba-unm.si/index.php/press/catalog/book/34>. [COBISS.SI-ID 131109635]

Pomen razvoja integriranih kliničnih poti za celovito obravnavo pacientov

Povzetek

V Sloveniji poteka razvoj kliničnih poti od leta 2002. Potrebno je bilo premostiti številne ovire. Glede na prepoznane trende utrjevanja na pacienta osredotočene zdravstvene obravnave, uvajanje integriranega pristopa ter prizadevanj za uporabo sodobnih metod in orodij za zagotavljanje kakovosti in varnosti je potrebno preiti na razvoj integriranih kliničnih poti. Aktualni sta vprašanji vpliva (integriranih) kliničnih poti na izide pacientov, komunikacijo in stroškovno učinkovitost ter kaj je potrebno za nadgradnjo obstoječih kliničnih poti za izvajanje integrirane zdravstvene obravnave. V študiji primera, ki se izvaja v Splošni bolnišnici Novo mesto v okviru projekta »Vpliv integriranih kliničnih poti na izide pacientov, komunikacijo in stroškovno učinkovitost« (ARSS št. L7-2631) je bil uporabljen kvantitativni in kvalitativni pristop. Vključen je pregled obstoječe dokumentacije, anketiranje, fokusne skupine in intervjuvanje zdravstvenih delavcev in sodelavcev v povezavi s kliničnimi potmi za obravnavo pacientov z endoprotezo kolka, s kronično ledvično boleznijo in po možganski kapi. V tem prispevku so predstavljene dosedanje ugotovitve v okviru projekta, ki traja od 2020–2023. Znotraj bolnišnice se je oblikovala različna praksa pri razvoju kliničnih poti, ki dejansko pripomorejo k učinkovitosti. Predlagane dopolnitve za razvoj integriranih kliničnih poti so vsebinske in tehnične, njihova izvedljivost in vpliv na učinkovitost je v fazi vrednotenja.

The importance of developing integrated clinical pathways for comprehensive patient care

Abstract

Clinical pathways have been developed in Slovenia since 2002. In the process, many obstacles had to be overcome. Given the recognized trends towards the consolidation of patient-centered healthcare, introduction of an integrated approach and efforts to use modern methods and tools to ensure quality and safety, it is necessary to move to the development of integrated clinical pathways. Current issues include the impact of (integrated) clinical pathways on patient outcomes, communication and cost-effectiveness, and what is needed to improve existing clinical pathways to implement integrated healthcare. A quantitative and qualitative approaches were used in the case study conducted at the Novo mesto General Hospital as part of the Impact of Integrated Clinical Pathways on Patient Outcomes, Communication and Cost-Effectiveness project (ARSS No. L7-2631). The project included a review of the existing literature, surveys, focus groups and interviews with healthcare professionals and colleagues regarding clinical pathways for the treatment of patients with hip arthroplasty, chronic kidney disease and post-stroke. This paper presents the findings discovered so far in the project, which runs from 2020 to 2023. Different practices have evolved within the hospital relative to the development of clinical pathways that actually contribute to efficiency. The proposed additions for the development of integrated clinical pathways are substantive and technical, and their feasibility and impact on efficiency are reviewed.

patient : zbornik prispevkov = conference proceedings : 12. mednarodna znanstvena konferenca = 12th international scientific conference : Novo mesto, 17. november 2022. Elektronska izd. Novo mesto: Založba Univerze v Novem mestu: = University of Novo mesto Press, 2023. Str. 7-15, tabele. ISBN 978-961-6770-65-1. <https://www.zalozba-unm.si/index.php/press/catalog/book/57>. [COBISS.SI-ID 158045699]

Vesna Zupančič

Pomen razvoja integriranih kliničnih poti za obravnavo pacientov s kronično ledvično boleznijo

Povzetek

Kronična ledvična bolezen je izraz za heterogene motnje, ki vplivajo na strukturo in delovanje ledvic. Pacienti se sočasno soočajo s sladkorno boleznijo, hipertenzijo in srčno-žilnimi boleznimi. Za obravnavo pacientov s kronično ledvično boleznijo so bile pripravljene klinične smernice, na podlagi katerih so bile oblikovane klinične poti. Te klinične poti je treba nadgraditi v integrirane klinične poti. Namen raziskave je bil ugotoviti, kako definirajo in prepoznava pomen razvoja integriranih poti za obravnavo pacientov s kronično ledvično boleznijo posamezne skupine deležnikov. V študiji primera oddelka splošne bolnišnice je bil uporabljen kvantitativni in kvalitativni raziskovalni pristop. Uporabljeni so podatki iz anketiranja, fokusne skupine in intervjuvanja posameznih skupin deležnikov, pridobljeni v okviru aplikativnega projekta Vpliv integriranih kliničnih poti na izide pacientov, komuniciranje in stroškovno učinkovitost (L7-2631). Ugotovitve so dopolnjene z nestrukturirano analizo in sintezo vsebine izbranih znanstvenih člankov. Integrirane klinične poti so orodje za organizirano obliko pomoči pacientom in njihovim bližnjim, ki obsega zdravstveno in socialno oskrbo. Vključuje stalno spodbudo h kontinuirani obravnavi, dobri koordinaciji, sodelovanju in iskanju rešitev ter k partnerstvu med pacienti in zdravstvenimi (so)delavci – z namenom kakovosti in učinkovitosti zdravstvene obravnave, zadovoljstva in dobrega počutja pacientov in zdravstvenih (so)delavcev.

The Importance of developing integrated clinical pathways for the health care of patients with chronic kidney disease

Abstract

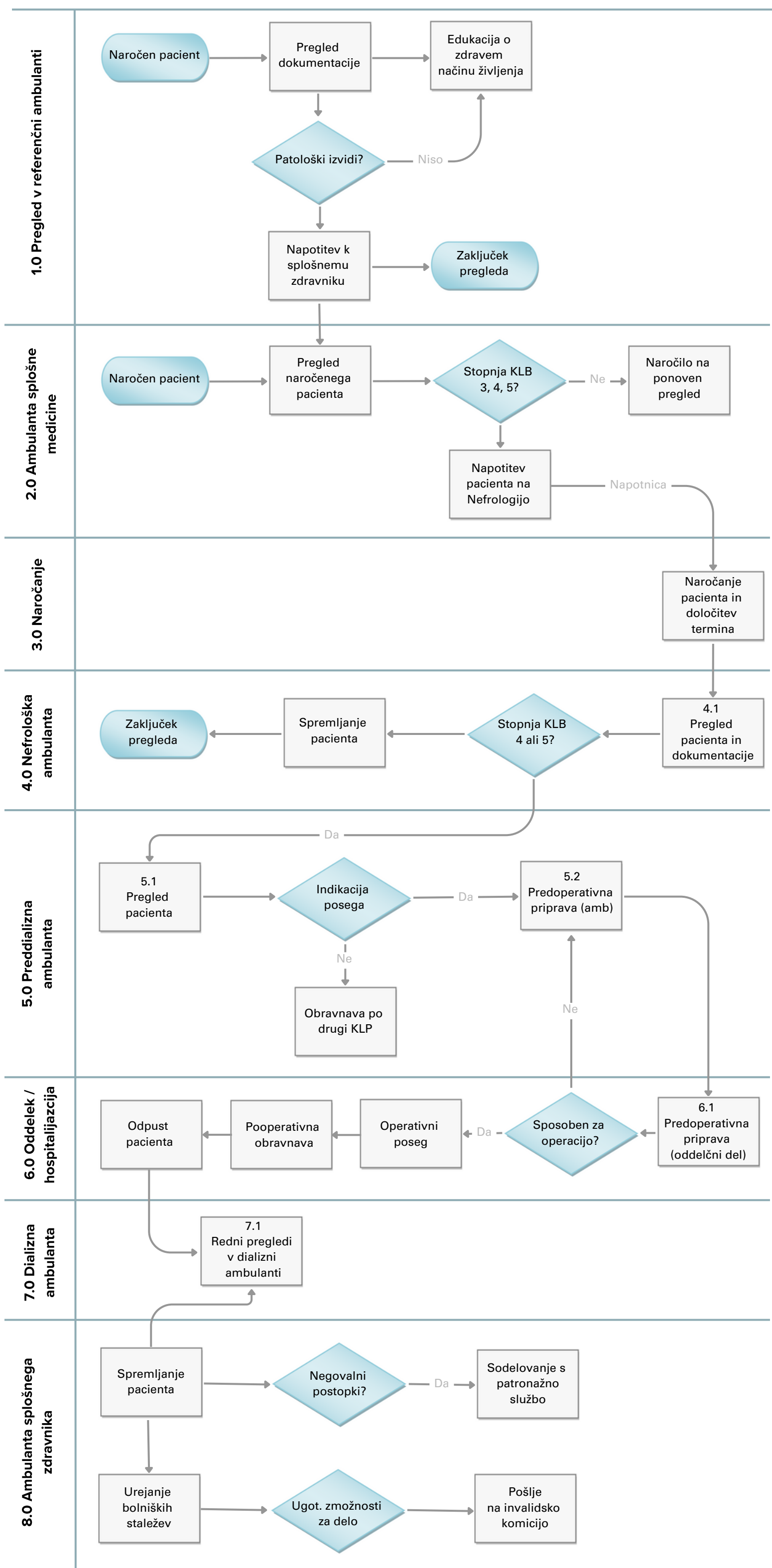
Chronic kidney disease is a term used to describe heterogeneous diseases that affect the structure and function of the kidneys. Patients have concomitant diabetes, hypertension, and cardiovascular disease. Clinical guidelines for the management of patients with chronic kidney disease have been established and clinical pathways have been developed based on these guidelines. These clinical pathways need to be further developed into integrated clinical pathways. The objective of this study was to determine how individual stakeholders define and recognise the importance of developing integrated pathways for the management of patients with chronic kidney disease. A quantitative and qualitative research approach was used as part of a case study in a general hospital. Data were used from surveys, focus groups, and interviews with individual stakeholders obtained as part of the Impact of integrated clinical pathways on patient outcomes, communication, and cost-effectiveness (L7-2631) project. The results are supplemented by an unstructured analysis and synthesis of the content of selected scientific articles. Integrated clinical pathways are a tool for an organised form of support for patients and their families that encompasses health and social care. They involve ongoing promotion of continuous care, coordination, cooperation and solution-finding, and partnership between patients and staff - with the aim of quality and efficiency of medical care, satisfaction and well-being of patients and (co-)workers.

ZUPANČIČ, Vesna. Pomen razvoja integriranih kliničnih poti za obravnavo pacientov s kronično ledvično boleznijo = The Importance of developing integrated clinical pathways for the health care of patients with chronic kidney disease. V: GRIVEC, Malči (ur.). Izzivi globalizacije in družbeno-ekonomsko okolje EU = Globalisation Challenges and the Social-economic Environment of the EU : zbornik povzetkov = book of abstracts : 12. mednarodna znanstvena konferenca = 12th international scientific conference : Novo mesto, 18. maj 2023. Elektronska izd. Novo mesto: Univerza v Novem mestu, Fakulteta za ekonomijo in informatiko: = University of Novo mesto, Faculty of Economics and Informatics: Univerza v Novem mestu, Fakulteta za poslovne in upravne vede: = University of Novo mesto, Faculty of Business and Management Sciences: Založba Univerze v Novem mestu: = University of Novo mesto Press, 2023. Str. 89. ISBN 978-961-6770-63-7. <https://www.zalozba-unm.si/index.php/press/catalog/book/55>. [COBISS.SI-ID 155044099]

INTEGRIRANA KLINIČNA POT

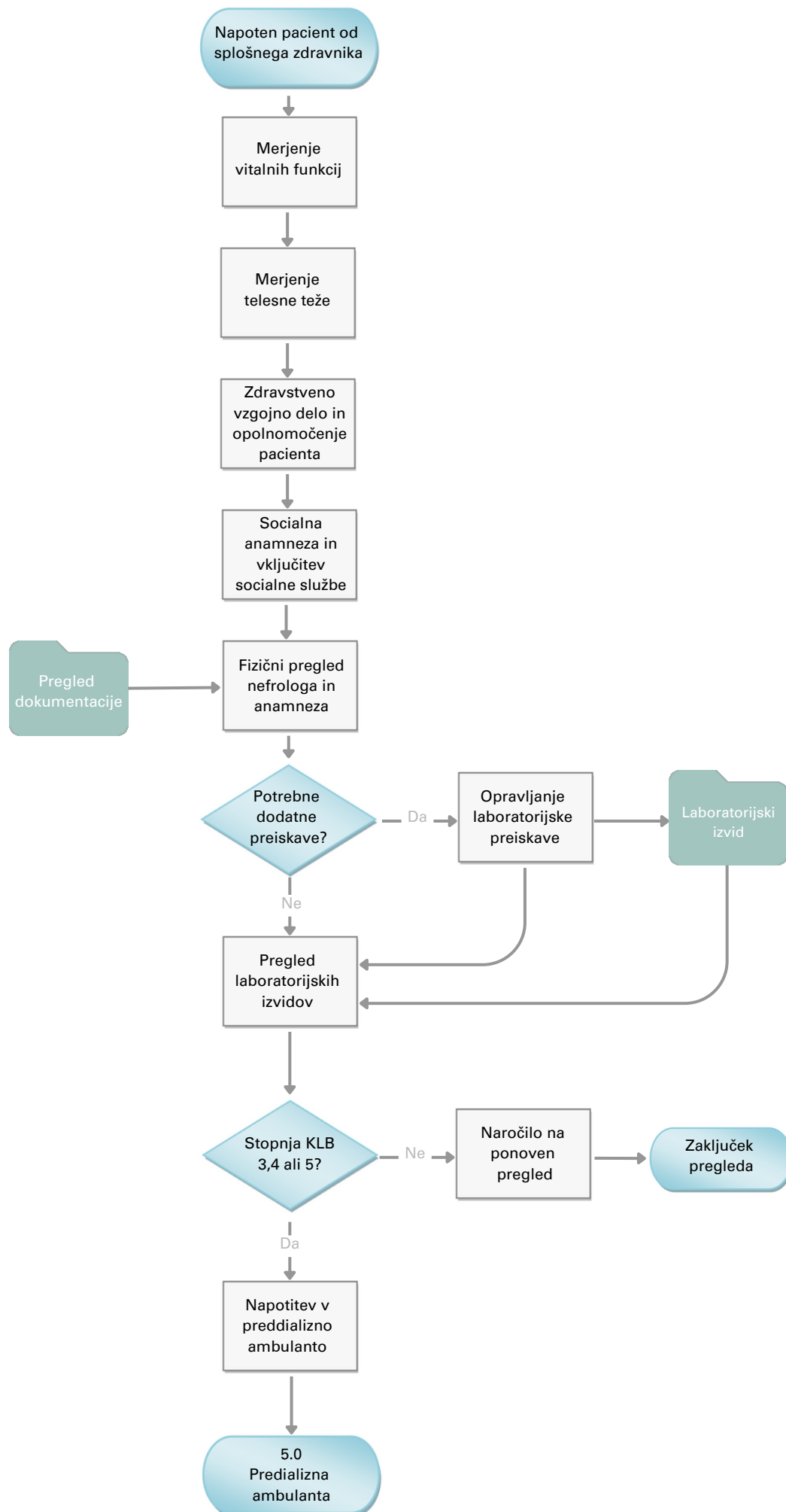
**Proces klinične poti pri
konstrukciji arteriovenskih fistul**

INTEGRIRANA KLINIČNA POT - KONSTRUKCIJA AVF (ver. 0.1)



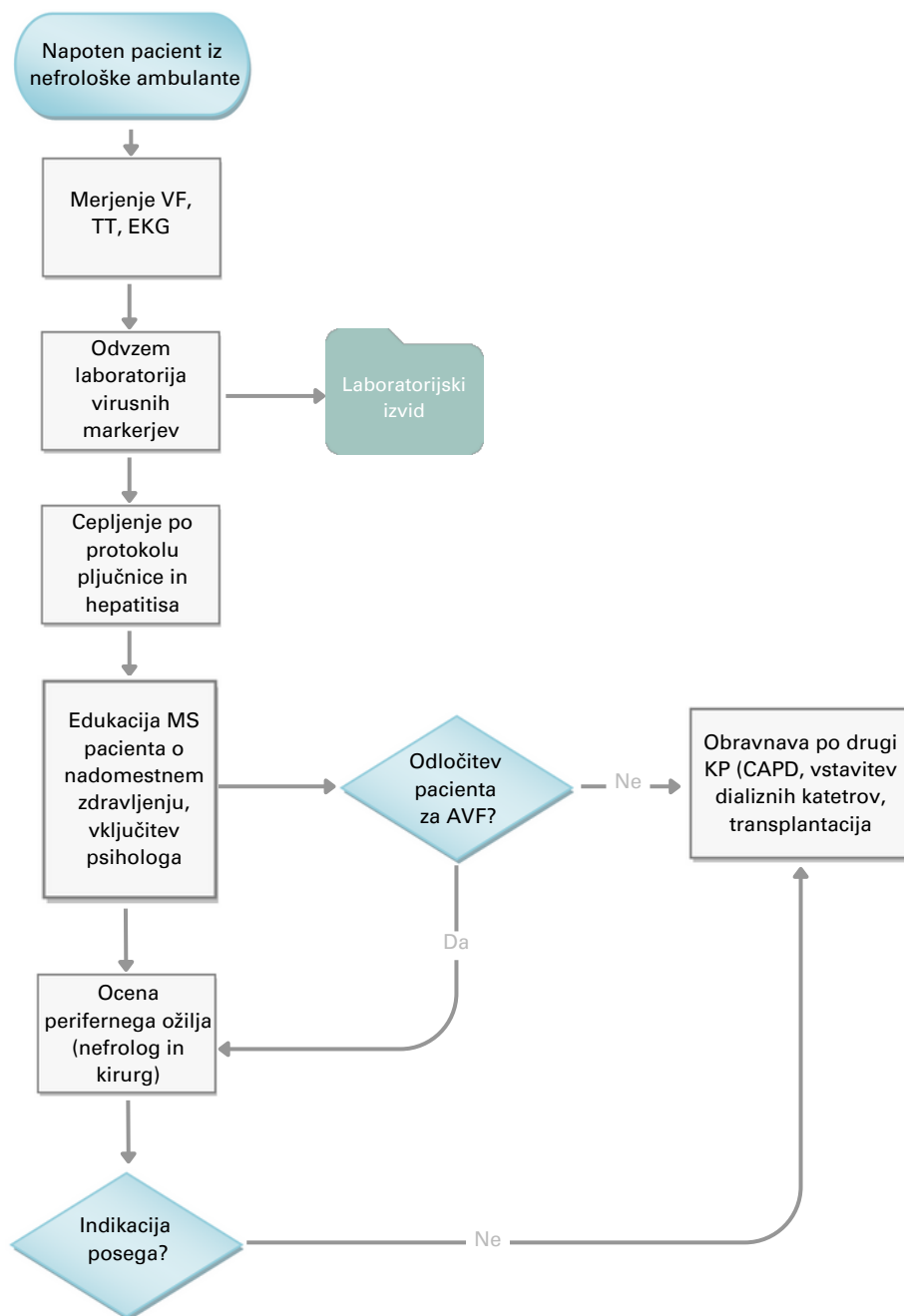
4.0 Nefrološka ambulanta

4.1 Pregled pacienta

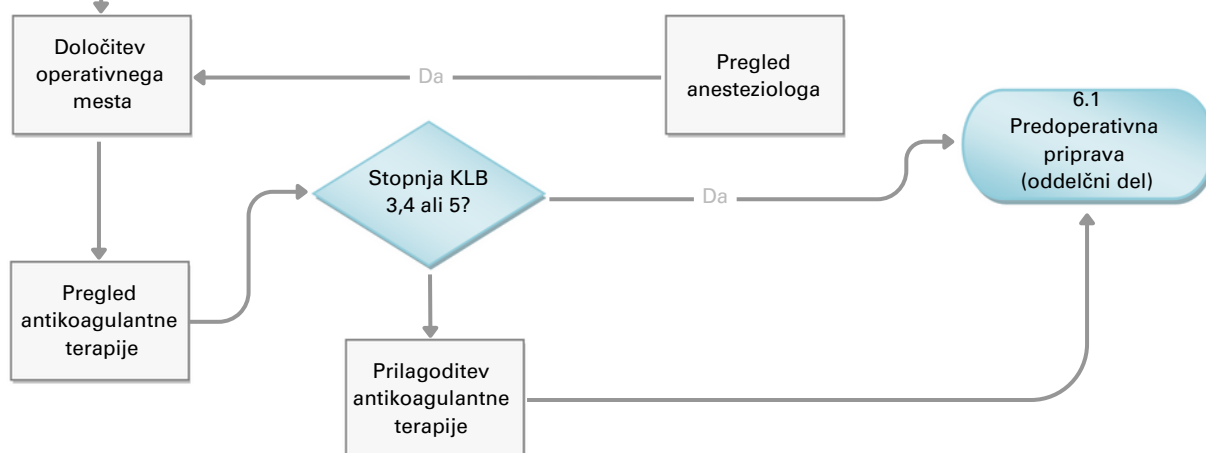


5.0 Preddializna ambulanta

5.1 Pregled pacienta

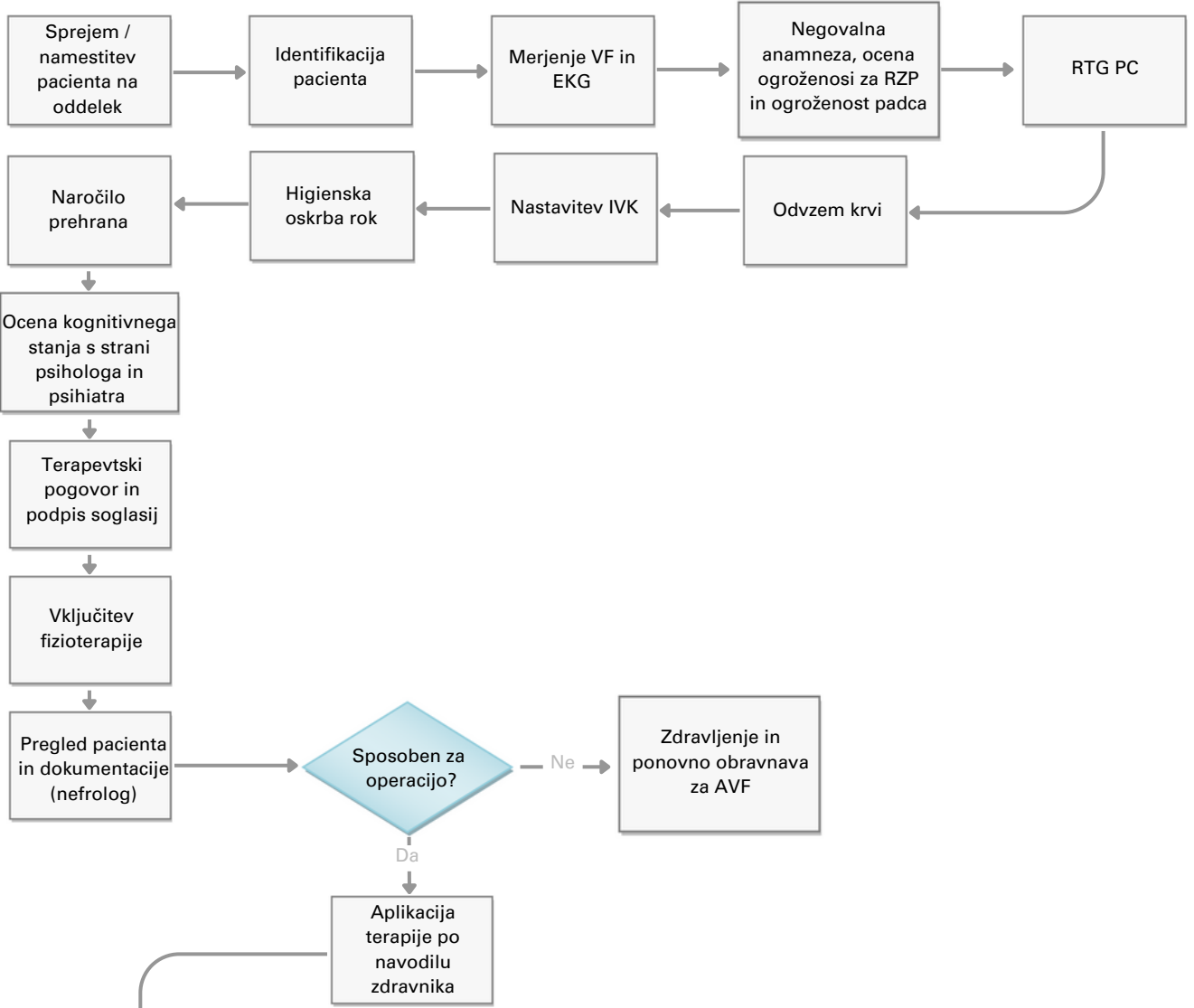


5.2 Predoperativna obravnava (amb. del)

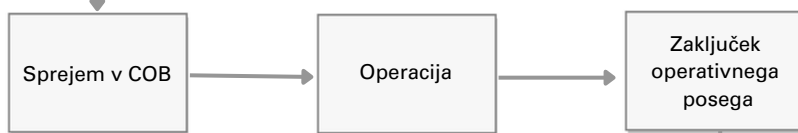


6.0 Oddelek / hospitalizacija

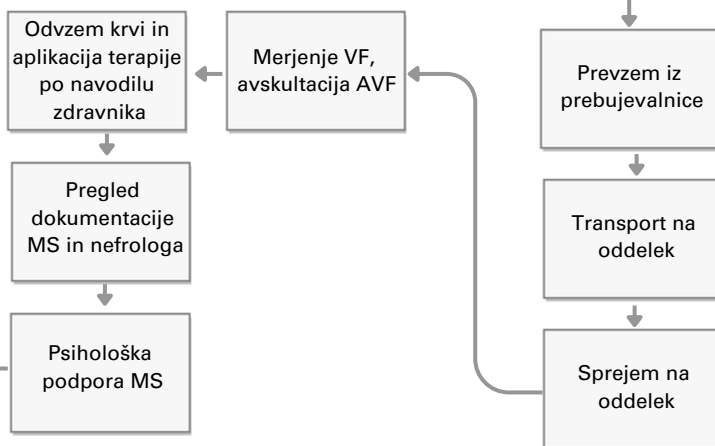
6.1 Predoperativna priprava (oddelčni del)



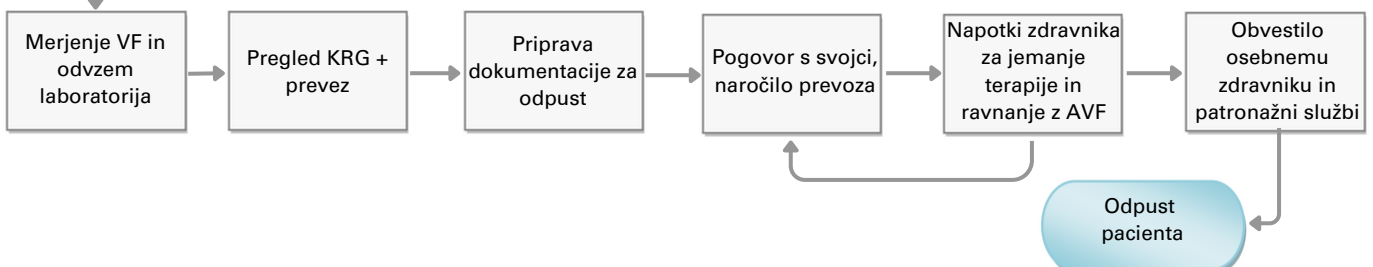
6.2 Operacija



6.3 Pooperativna obravnava

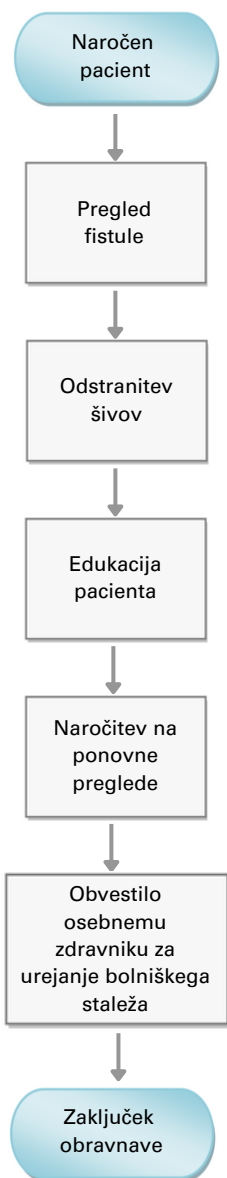


6.4 Odpust pacienta



7.0 Dializna ambulanta

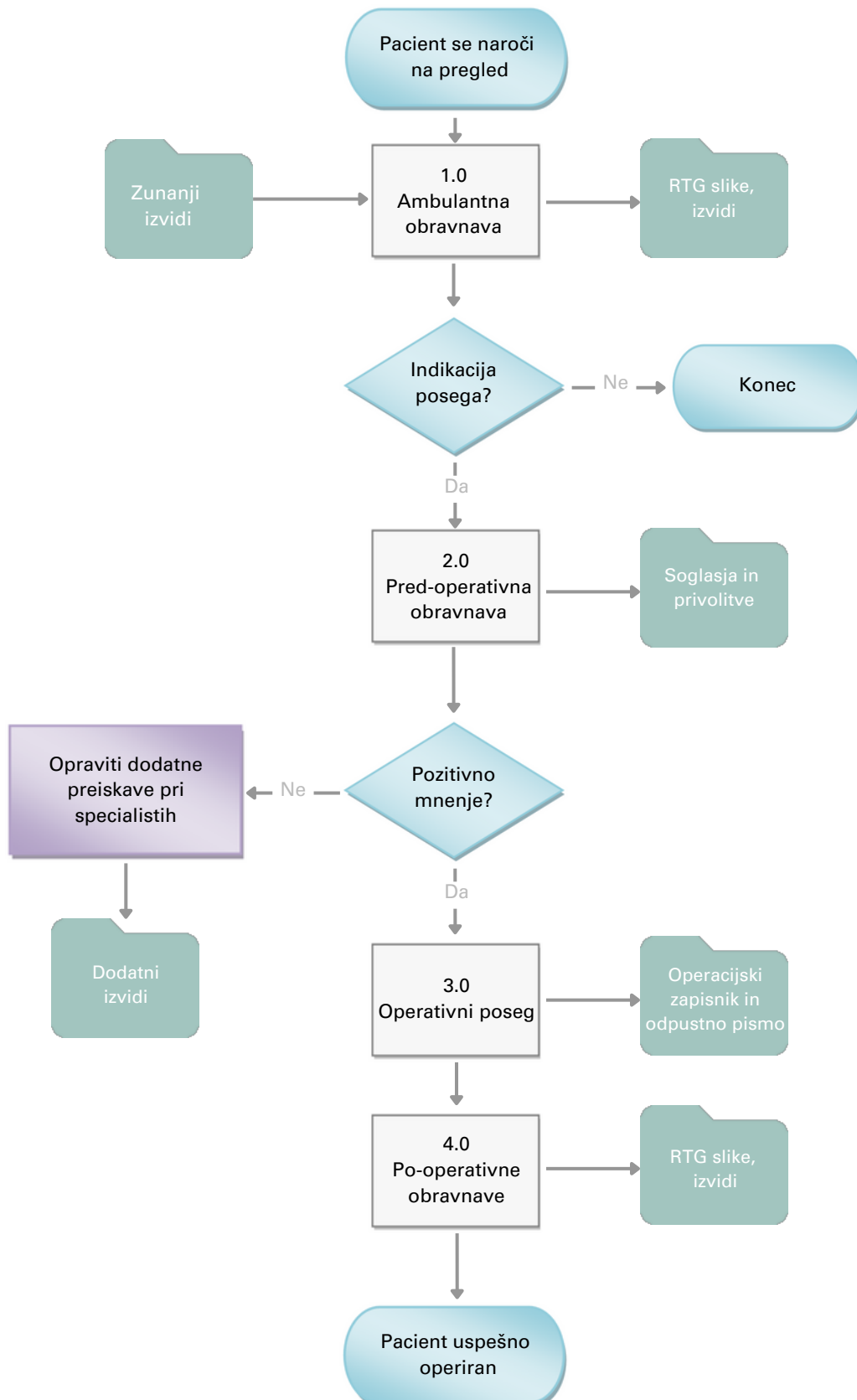
7.1 Redni pregled v dializni ambulanti



INTEGRIRANA KLINIČNA POT

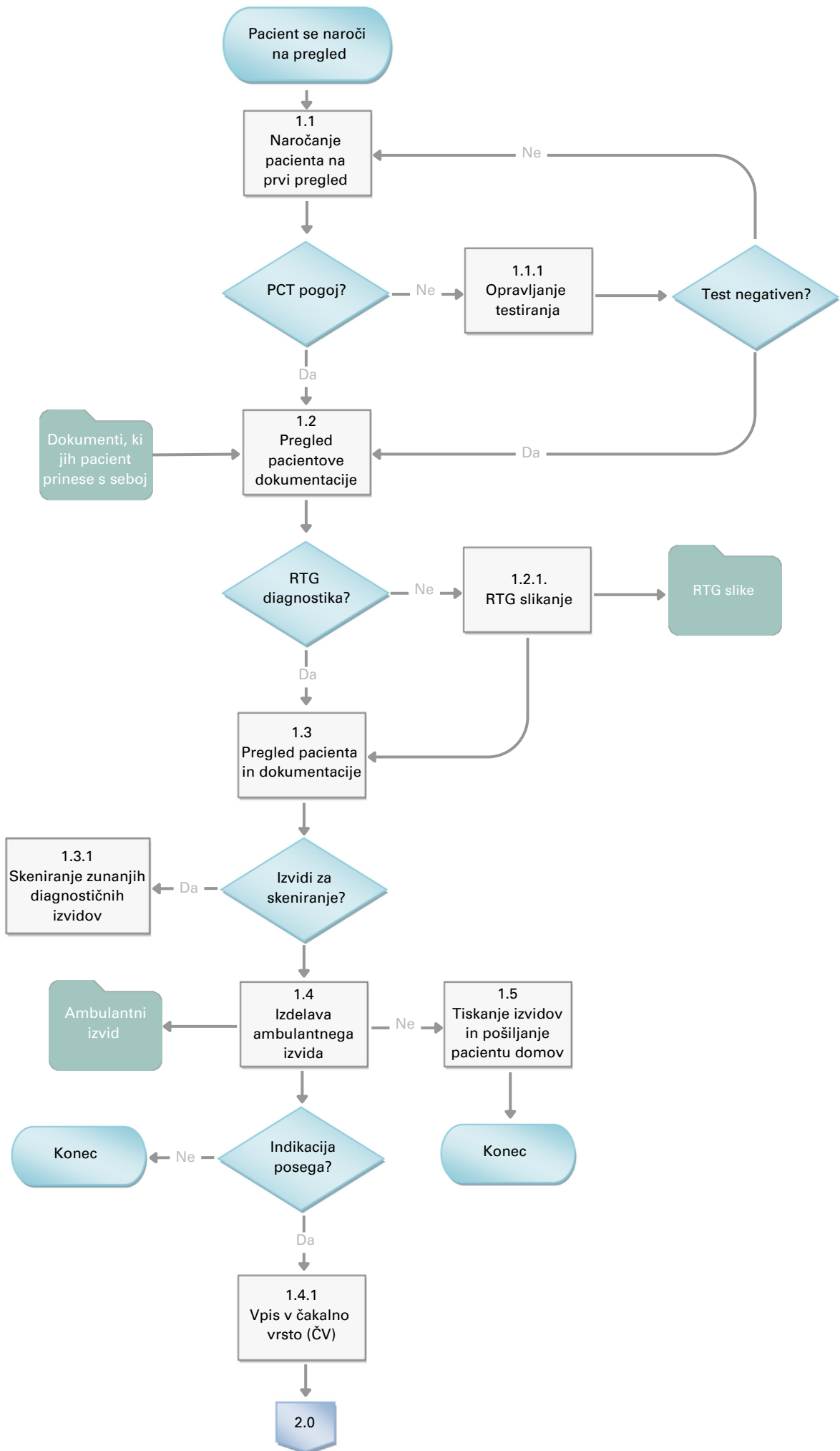
**Proces klinične poti pri vstavitvi
endoproteze kolka**

INTEGRIRANA KLINIČNA POT - TEP KOLKA (ver. 0.1)

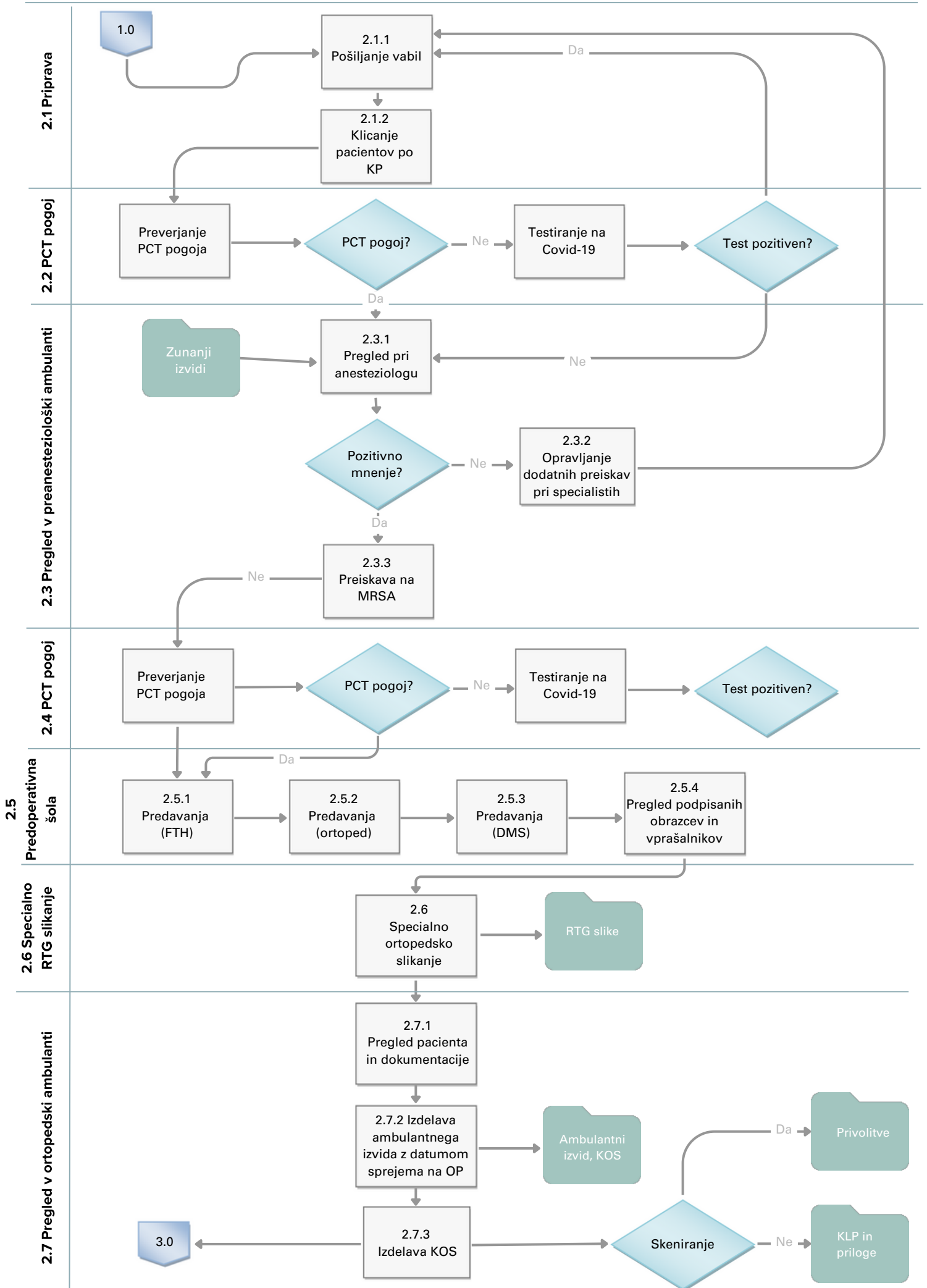


1.0 Ambulantna obravnava pacienta

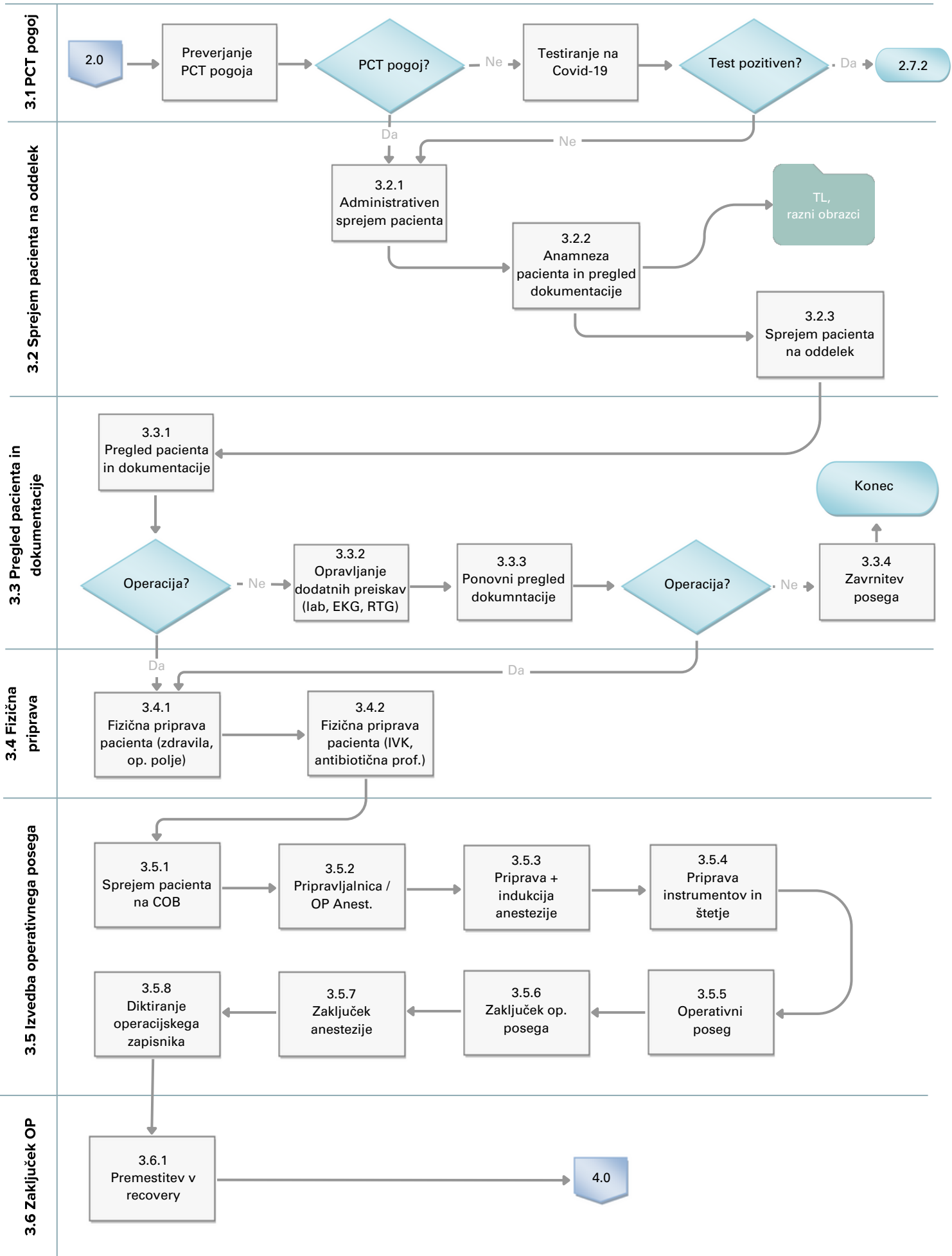
1.0 Ambulantna obravnava pacienta



2.0 Predoperativna obravnava



3.0 Operativni poseg



4.0 Po-operativna obravnava

