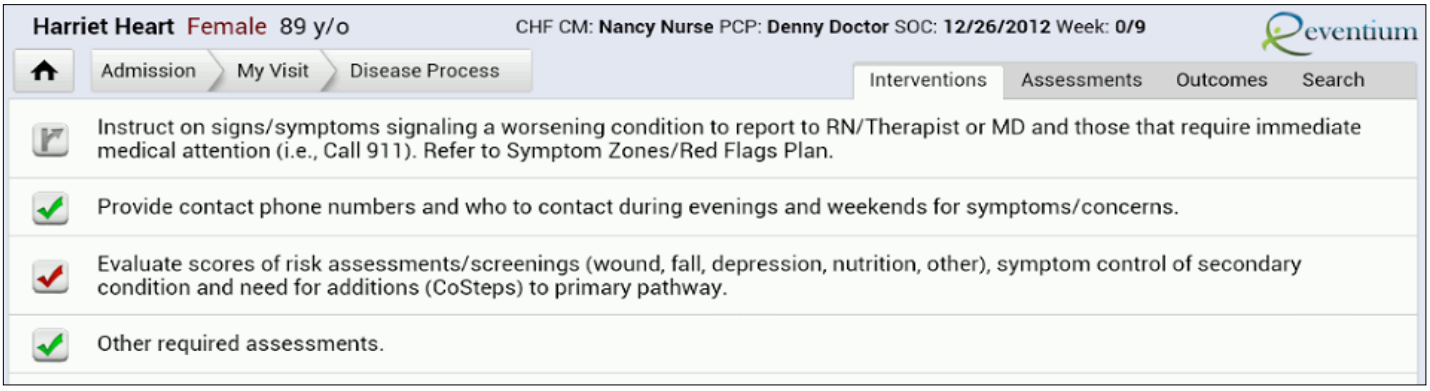
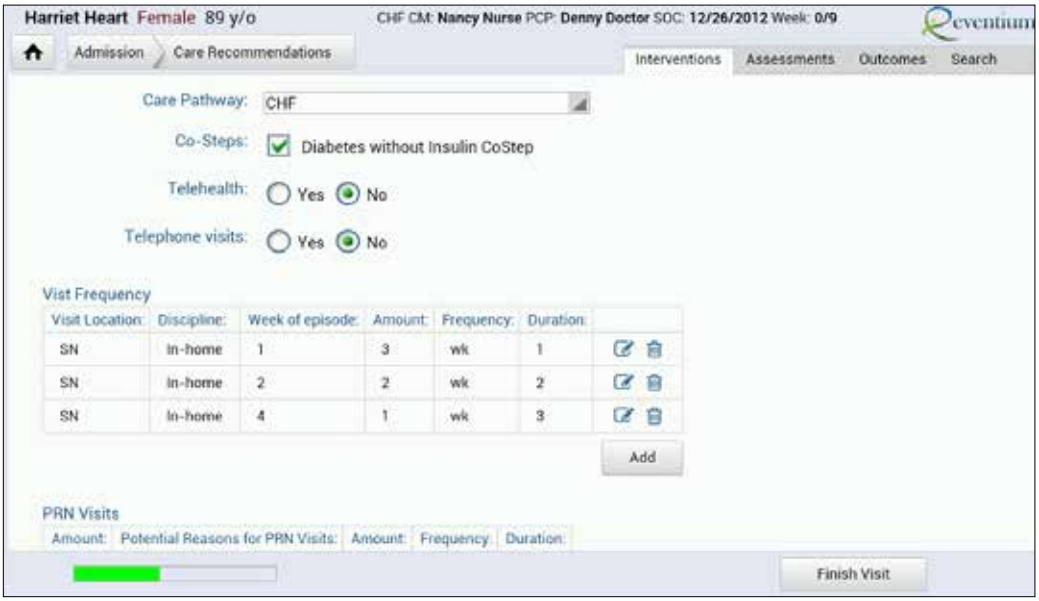
Clinical pathways tool can increase productivity, improve outcomes

The following DecisionHealth tool shows two screen shots of Milwaukee-based Eventium's Latitude™ Clinical Decision Support Software that demonstrate a portion of the software's integration of standardization and best practices into the workflow (*see related story, p. 4*). The module is EMR vendor-agnostic and is available in Android, iOS and iPad, and Windows. Here are a few screen shots demonstrating the integration of standardization and best practices into the workflow, says Lisa Van Dyck, RN, MSN, vice president of clinical product development at Eventium. This clinical module offers both clinical pathways and care plans for acute and chronic conditions for the post-acute space.



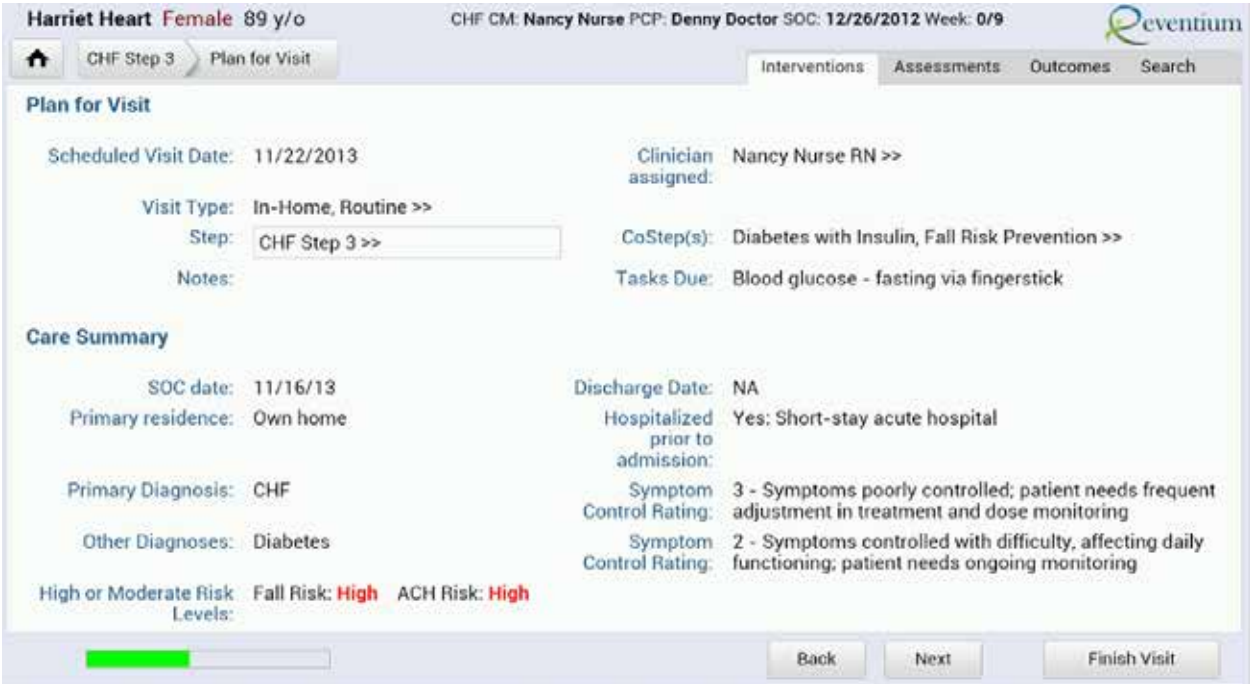
During admission process, interventions are completed and a few additional observations are documented in Latitude, Van Dyck says. Then Latitude analyzes this information and scrubs the start of care (SOC) assessment from the EMR to produce care recommendations that can be accepted, edited or rejected.



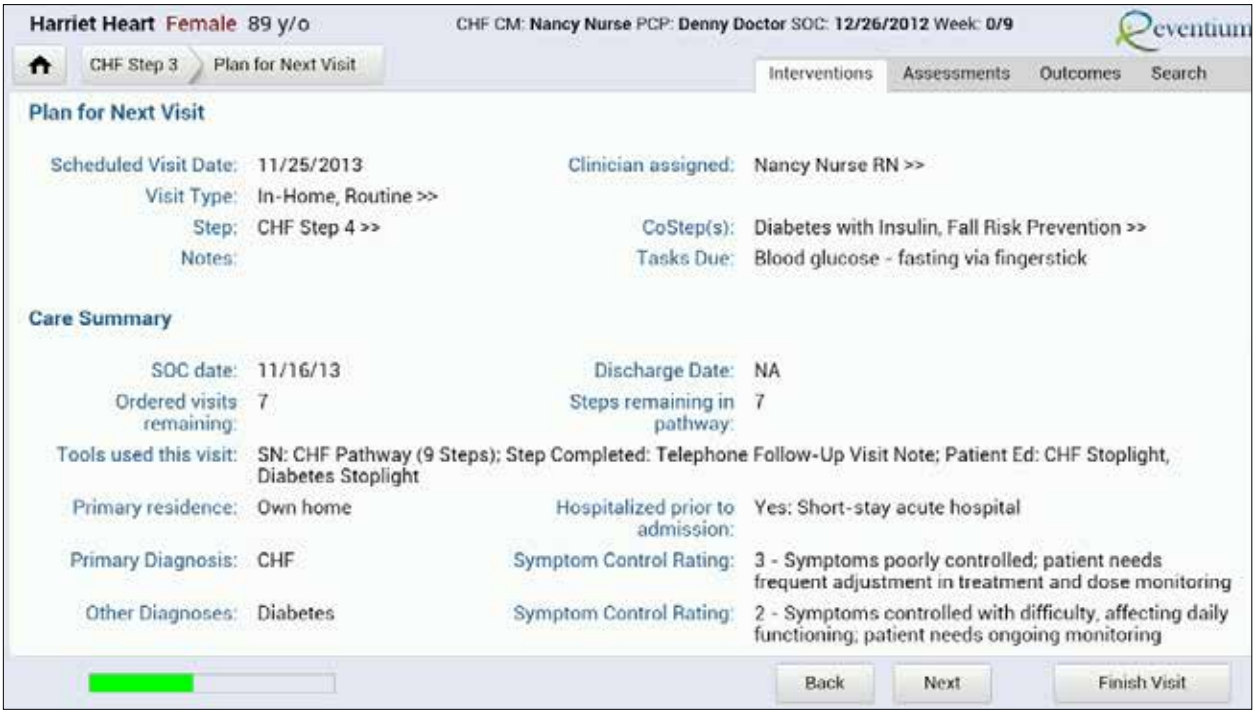
Care recommendations include:

- Clinical pathway or care plan
- Co-steps for significant other conditions
- Telehealth
- Telephone visits
- Visit frequency
- Focus assessments unique to patient
- Care planning components (problems flagged as actual problems or potential at-risk problems; goals for the episode, etc.

More information is at: *http://www.eventiumusa.com/ihtml/mainFrame.2.ihtml?PAGETOLOAD=qpuserpage_eventiumusa.ihtml&MENUITEMTOLOAD=16700*.



Along with standardized episode management, standardized care is promoted at the visit level with targeted interventions and outcomes, says Van Dyck. Standardization is further enhanced by an automated plan for visit and plan for next visit. The plan for visit is generated from the previous visit based on outcomes achieved and other factors, she says.



An auto-generated clinical summary is included with every generated plan for next visit, says Van Dyck. This includes a brief history, current problems, high risk levels for adverse events, clinical alert summary from current visit, focus assessment summary and status, current progress in planned care including outside resource used, disease management level, and lastly, a list of skilled (ordered) care provided for this visit.