How we transformed our clinic to become more efficient by implementing web-based workflow solutions

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Disclosure

• Our institute has institutional research agreements with ELEKTA, Philips, Brainlab, RaySearch



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AKH Wien / Medical University Vienna

- Largest radiation oncology clinic in Austria •
 - Head: Prof. Joachim Widder •
 - Head of Medical Physics: Prof. Dietmar Georg •
- The project was a joint, multidisciplinary effort over • several years, some of this is anecdotal and does not represent the full "struggle"

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Allgemeines Krankenhaus der Stadt Wien

Allgemeines Krankenhaus

der Stadt Wien





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Goals:

- No paper Everything digital
- More transparency, better access, better control
- Increase efficiency
- Reduce risks



Challenges:

- "But we always did it like this..."
- No standardized processes across different tumor groups
- Everything was to be done asap this did not happen in reality
- Intransparency... everywhere!
- No adequate software support



Frame conditions

- OIS / HIS / TPS
 - MOSAIQ / AKIM (SAP) / RayStation
- Linux server + NodeJS + Express.js + MariaDB





Rethink current workflows, but do not disrupt everything



Actions:

• Structure the workflows

• Enforce time model





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The process

- MOSAIQ eco-system
 - IQ engine + Careplan triggers + Template prescriptions + Group inheritance



• The tasks are completed in MOSAIQ!

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Timeline

- Rollout in phases
- Latest iteration is operational since mid 2020 (pretty much unchanged)
- We wanted to measure the success



Results – Last min

Δ Days





The heart of it all...

> Digital whiteboard!

- Clear prioritization
- Organized by tumor group
- Comprehensive info in one view

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Dashboard

- Management tool
- Overview of clinic input/output
- Steering tool





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What's going on?

- New patients starting
- Current patients @LINAC
- Breaks + reason
- Performance of planning per group
- Overall workload at LINACs

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Incident reports

- Structured documentation of incident reports
- Risk management

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Roster and scheduling

- Availability of MDs
- Scheduling for patient consultations
- Conflicts and planning

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PROMs

2000+ real world patients









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PROMs

- >250,000 data points from >12,500 questionnaires
- Inherent connection to OID database, accessible in app





• Investigating effect of automation on response rates



Conclusion

- It was a long way.
- It was not always easy.
- It took a lot of effort and resources.
- The key is multidisciplinarity, multidisciplinarity, multidisciplinarity
- Commitment to a highly structured workflow with standards for every single therapy concept

- We are at in a better place today (tools are operative pretty much unchanged for the past 4-5 years)
- Reduced stress
- Reduced chaos
- Reduced un-plannability
- Better work environment
- Higher safety for our patients

 Thanks to all the people that made this possible:

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All RTTs, MDs, administrative staff and the physics team at the AKH Vienna

Happy to take your questions!

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