

White paper

Person-Centric Care Pathways

Improving the patient experience
with optimized workflows

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Edition #14



Executive Summary

The concept of patient-centricity has become a driving force as healthcare transitions from a fee-for-service model to a more value-based approach. Simply put, person-centered care tailors treatment to the needs of individual patients in order to achieve the best possible outcomes.¹ Establishing pathways and workflows to deliver personalized care to every patient requires careful organization, consideration of healthcare professionals' needs, and logistical planning.¹

In today's healthcare environment, patients are more informed than ever and consider factors like the convenience of access and the overall cost.^{2, 3, 4} As patients approach their healthcare more like consumers, access, person-centricity, confidence, and reliability are crucial. Much like customers purchasing a service, patients must be able to trust their healthcare organization with decisions about their health and lives.⁵ By developing person-centered care pathways, healthcare organizations can improve clinical outcomes, promote patient and staff satisfaction, and reduce costs to both patients and provider organizations.^{6, 7, 8}

This approach helps establish relationships and builds a more sustainable, community-focused patient base.⁹

As healthcare becomes increasingly personalized, hospitals have embraced communication improvements, technological upgrades, and patient and family advisory councils to guide operations in the shift to more value-based care.¹ Digital solutions also inform care pathways while keeping patients informed so that clinicians can spend less time gathering information and determining logistics and more time treating the patient. Portals, algorithms, and other solutions help integrate new technology and data streams into the electronic health record. These tools allow healthcare professionals to stay connected, up to date, and prepared to treat each patient throughout with an optimized care pathway made just for them—from the initial appointment or referral all the way to prescription orders and facility discharge.^{8, 10, 11, 12}

This paper explores the value of person-centric care pathways for both patients and healthcare providers. Additionally, best practices from healthcare organizations around the world will demonstrate the value of person-centered care pathways.

Contents

Healthcare Trends & Challenges	4
Collecting best practices around the world	10
Cardiovascular Pathway: Lusíadas Saúde, Portugal	11
Oncology Pathway: Hospital de Amor, Brazil	15
Stroke Pathway: Vall d'Hebron, Spain	21
Conclusion	25

Healthcare Trends and Challenges

Around the world, health systems are moving away from compartmentalized, provider-centric models in favor of more-holistic, person-centered models. As healthcare organizations embrace this approach, they are reevaluating their decision-making processes to enable more individually tailored care. Evidence-based care pathways leverage multidisciplinary teams to improve the patient experience. Person-centered care pathways also improve efficiency, clinical outcomes, and staff satisfaction.⁶

The transition to value-based care has been informed by a cultural shift to a more person-centric approach. A key part of this philosophy has been the evolution of how patients are viewed by healthcare professionals and organizations. Provider-patient relationships have evolved into partnerships, with mutually agreed-upon goals for care. Many facilities view person-centered care as essential to the design, management, and delivery of healthcare.^{7, 13}

To remain competitive in this evolving market, healthcare organizations are subsequently prioritizing a person-centric approach. Technology solutions can enhance and enable patient-centric care models by streamlining operations to improve outcomes and patient experiences. They can also help patients navigate the payer system and their own health coverage, remain informed and connected, and even interact with clinical staff via telehealth.¹⁴

As person-centered care has entered the spotlight, healthcare delivery has adapted to this philosophy. Health systems have prioritized ease of access, multidisciplinary teamwork, empathetic care, and safety—all individualized to each person's specific needs. More-customized care has led to more-engaged patients who report a better experience overall.¹⁵

There are also architectural factors to consider when designing the layout of a new facility that optimize patient care. Modern healthcare facilities can integrate optimized care pathways right into a department's floor plan and infrastructure. Siemens Healthineers simulates different workflows and processes to pressure test various room layouts, such as privacy spaces for patients or well-being spaces for staff, and ensure the most-efficient designs are implemented.¹⁶

The democratization of healthcare is improving patient access to data and resources, giving people a voice in their care. As healthcare information has become more readily available, patients are better informed and more empowered in their care.^{17, 18} Not only have delays in care during the COVID-19 pandemic highlighted the value of healthcare data, but healthcare inequities are more widely recognized.¹⁹ For example, the availability of data improves engagement and advocacy among communities affected by risk factors associated with social determinants of health.^{17, 20}

Additionally, shifts in reimbursement and regulatory policies have fostered the transition to person-centric healthcare practices, including optimized care pathways.²¹ New policies have focused on wellness-based care with processes to improve patient experience, outcomes, and safety—as well as programs to promote operational excellence and staff satisfaction. Thanks to rapid adoption in response to the COVID-19 pandemic, telehealth also represents a critical patient resource for the future.^{22, 15}

Person-centric healthcare is tailored to the needs of each individual while working within the realities of an organization. Medical technology companies can help healthcare organizations achieve this aim with evidence-based care pathways supported by artificial intelligence

(AI) to reduce unwanted variability, improve clinical outcomes, increase care team efficiency, and ensure high-quality, person-centered care.

Three industry trends are key to understanding the needs of health systems as they implement person-centric care pathways. First, patient-centricity has influenced the international healthcare market to an unprecedented degree, and people have become more informed and

selective about their care.² Patients expect not only quality healthcare services, but also more humane and empathetic interactions with providers. Similarly, decentralized care via telehealth and/or satellite locations has increased access and left people with more options for care.³ Combined with patient cost considerations and financial pressures facing healthcare organizations, each of these factors affects and is influenced by the others.²³



Patient and care team voice

The needs and expectations of patients are continuously evolving. Apps, wearables, and other digital platforms have already influenced healthcare, and people have developed specific expectations from their consumer experience with them.²⁴ As such, part of person-centric care is focused on improving the digital healthcare experience.

Digital technology has had an undeniable impact on healthcare. Although many people today have smartphones, there is also a gap for people without access to digital technology that should not be left behind in healthcare.²⁵ Given the ease of use and quality of everyday technologies like wearable fitness trackers, expectations around healthcare technology are justifiably high.²⁶ A trusted partner with knowledge and expertise can help healthcare organizations optimize and tailor digital solutions to meet patient needs.

In addition to technological excellence, patients can expect convenience and comfort throughout their visits to care providers. Transportation, scheduling, and staff interactions all weigh heavily on the patient's perception of a care provider. Organizations must focus on improving the way patient care is delivered and navigated within the health system. By prioritizing outcomes beyond the clinical and focusing on the human aspects of care, a facility can ultimately improve patient experiences and satisfaction.²⁷ When the organization falls short in one of these areas, patients may seek alternative providers or begin to distrust healthcare in general, as happens in communities with limited resources.

Decentralized care

Improved connectivity lies at the heart of the decentralization of healthcare. Technologies like remote patient monitoring, remote radiology services, and virtual visits enable patients and providers to connect without physically being in the same location. In addition, pharmacy-based clinics and health kiosks offer services traditionally rendered at primary care provider offices, often without appointments.^{3, 22} With more points of access to care than ever before, convenient and secure data sharing is crucial. Electronic health records (EHRs) are an important tool to facilitate this on-demand access to patients' health data.²⁸

The impact and importance of decentralized care was magnified by the COVID-19 pandemic, during which health systems organized telehealth services to continue to meet patients' healthcare needs.²⁹ These services are improving and expected to continue playing a major role in caring for patients with poor access to care due to location, lack of transportation, or lack of mobility.³ By embracing decentralization, health systems can reach a larger population. Further, optimized digital solutions help facilities manage the data from these different sources effectively.

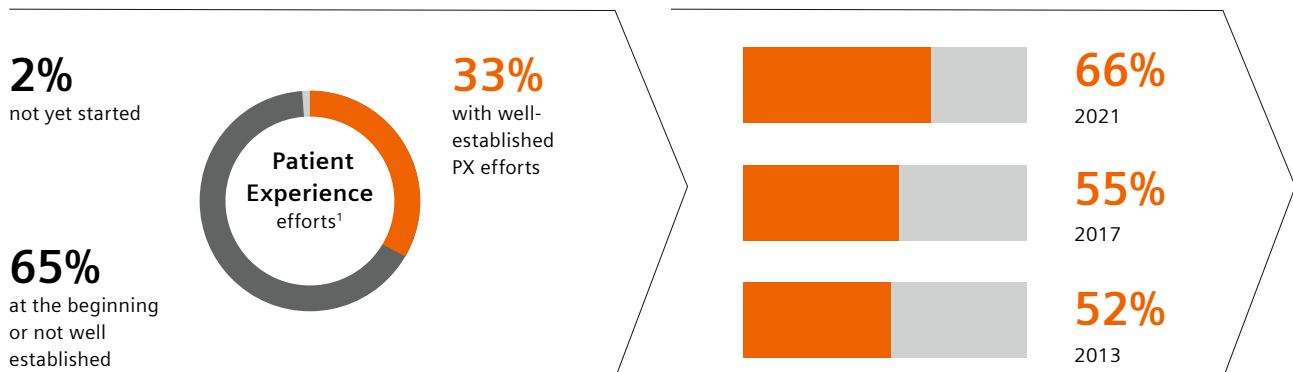
Financial pressures

Healthcare organizations face ever-growing financial pressure. Technology management and digital services play a major role in improving efficiency to balance workloads, increase regulatory compliance, and ensure high standards of care. MedTech partnerships allow providers to streamline operations, thus reducing costs while maintaining consistent, positive clinical outcomes.⁸

Person-centric care practices can deliver financial benefits to both patients and healthcare facilities and offer additional benefits to healthcare locations functioning with limited personnel. An emphasis on early detection and prevention helps improve care and decrease out-of-pocket expenses as well as costs to payers. Providers can also optimize practices to promote efficiency and decrease operational costs by reducing unnecessary or repeat healthcare utilization, potentially improving reimbursement rates.^{8, 7}

Patient-centricity efforts in health systems are in their infancy

Only a few health systems are already advanced ... but the number of formal mandates is rising!



The integration of patient experience efforts into health system has started, yet it must be pursued strategically to lead to sustainable and profound patient-centricity.

Building Better Care Pathways

Trust is key for optimized care. Patients tend to be more satisfied when providers take the time to build relationships and guide them toward more-individualized care.^{30, 31} This builds loyalty and fosters retention—subsequently improving the bottom line.^{8, 32, 33}

Thus, healthcare provider organizations are strongly motivated to focus more closely on the overall patient experience.³ By developing optimized, person-centered care pathways to overcome the limitations of compartmentalized, provider-centric models, healthcare organizations can build a positive patient experience right into their workflows.^{8, 33}

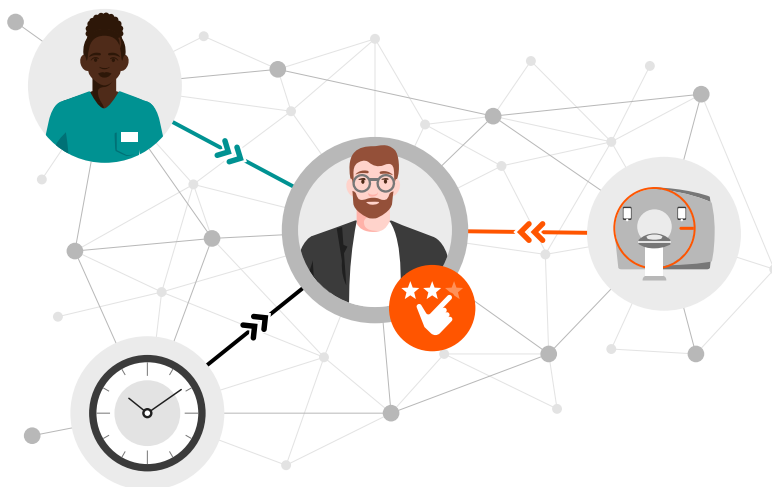
It's important to determine key performance indicators and set goals for improved patient outcomes, optimized clinical procedures, and consistent staff training. As health systems establish evidence-based care pathways tailored to the needs of individuals, here are a few best practices organizations should keep in mind:

- **Experience-centered pathway mapping** to ensure that patient and staff needs are cared for each step of the process
- Facility and infrastructure design to **streamline clinical procedures and standardize care**
- Digitalization, including equipment connectivity and information technology resources, to **improve access and optimize workflows**
- Improved communication among the multidisciplinary team as well as between staff and patients to **better personalize care**
- **Innovative, person-centered healthcare** research focused on pathways innovation, use of AI modeling, and experience design considering the diverse psychodemographic backgrounds of served populations.



By developing person-centric care pathways, provider organizations can improve patient experience, staff satisfaction, and financial performance.³⁴ Additionally, many hospitals have multidisciplinary committees dedicated to researching and implementing sustainable innovations, improving person-centered care, and prioritizing staff education. As they collaborate, these teams can help optimize operations today, expand with new capabilities tomorrow, and advance innovation.

To support these efforts, organizations should look holistically to the management of their technology and screening operations. The technology management services would ideally include asset and capacity analysis, technology optimization, multi-vendor technology management, and change management capabilities. With advisory and transformation services and future-proof design planning, such a partner would be well positioned to co-create person-centered care pathways with and for you.



➤ **Enabling positive patient-staff interactions**
by empowering hospital staff to appropriately address patients' needs

➤ **Utilizing patient-friendly technology**
to increase patients' safety and provide an optimized scanning experience

➤ **Ensuring a pleasant and efficient process**
in an emergency situation as well as in daily routine

Collecting best practices around the world

Below are examples of person-centric care practices in action:

- Cardiovascular: Lusíadas Saúde, Portugal
- Oncology: Hospital de Amor, Brazil
- Stroke: Vall d'Hebron, Spain



Lusíadas Saúde, Portugal

Public/Private:	Private
Population served:	~1,4 Million*



Lusíadas Saúde, Portugal

Lusíadas Saúde, the third-largest private healthcare provider in Portugal, has 15 facilities (nine hospitals and six clinics). The health system prioritizes excellence in care for the best patient experience possible. Lusíadas Saúde partnered with Siemens Healthineers in a hospital and a referring physician's clinic in northern Portugal for a patient experience project focused on cardiology. The program evaluated the whole patient journey in detail and designed more person-centric cardiac pathways to ensure the best experience. Siemens Healthineers examined the organization's processes, including workflow analysis, key performance indicators (KPIs), and staff and patient surveys, to inform improvements and the need for digital solutions.

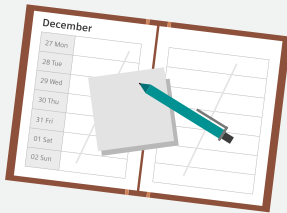
This initiative, dubbed "your experience is our new specialty," established patient committees and advisory boards to enhance scheduling, optimized check-in and check-out, increased accessibility to digital tools, introduced staff training endeavors, and even clarified the signage. The new care pathways led to reduced wait times and an improved overall experience. An expansion of this initial program has been proposed to improve other person-centric care pathways.

Together with Siemens Healthineers, Lusíadas Saúde improved their cardiac care experience by focusing on:

- Listening to the patient voice, to make meaningful change
- Measuring key performance indicators to determine and improve pathways
- Scaling up operations and workflows for a better overall experience
- Continuing education and change management support for the healthcare staff

* Based on consultations provided in 2023

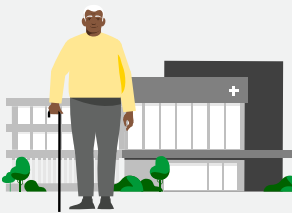
Challenges



Appointments

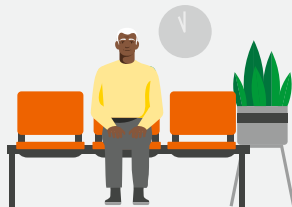
If an appointment was scheduled on-site, the patient received a paper with the date, time, and other recommendations, but if the appointment was scheduled over the phone, the burden was put on the patient to remember the details

- The patient's other conditions weren't considered when planning for an appointment
- If a patient was referred outside the Lusíadas network, securing an appointment may have been challenging



Arriving for appointments

- Patients may have had transportation problems that prevented them from attending their appointment
- Because the hospital is comprised of three buildings with numerous floors, patients frequently got lost, even with maps at the entrance and in the elevators



In the waiting room

- Patients check in at the reception desk
- Physicians were sometimes delayed. If staff didn't communicate with patients, they may have left
- Security and hygiene regulations were not always followed



In the exam room

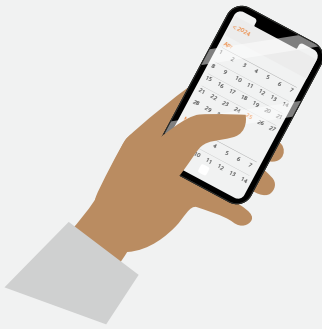
- The exam rooms and the waiting rooms were stark white instead of warm and inviting
- Doctors may not have had access to patient records if they were previously seen at another facility within the Lusíadas network
- Equipment was dated



After the appointment

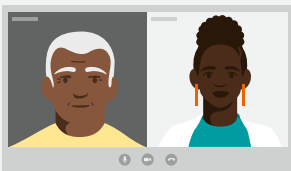
- Some patients felt they didn't receive enough information about their condition and relied on an internet search to educate themselves

Best practices now



Appointments

- Patients can now make appointments over the phone or using an app. They will receive appointment confirmation and exam preparation information via email, and they will get an appointment reminder 48 hours in advance
- *“When I schedule my appointment on-site, the availability and warmth of people at the reception is outstanding”*
- Out-of-network referrals are reviewed to ensure the clinical history meets with the recommended treatment before scheduling an appointment. Otherwise, a cardiac consultation will be suggested



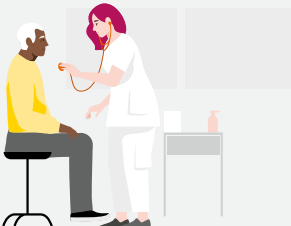
Arriving for appointments

- Patients who have transportation issues now have the options of a teleconsultation or sending another family member to the appointment to explain the issues
- New signage makes navigating the hospital to locate the cardiology department easier



In the waiting room

- Check-in is now fast and automatic
- Security and hygiene regulations are rigorously followed



In the exam room

- *“The advanced technology being used today gives me more confidence in the accuracy of my diagnosis.”*
- Exam rooms and waiting rooms have been redecorated to be warm and comforting
- Thanks to an electronic medical record, doctors throughout the Lusíadas network have access to patient records
- In preparing for a procedure, the technician and physician explain what will happen in order to reduce patient anxiety

To learn more about the patient-centric changes made, read [Delivering Healthcare on Patients' Terms](#) ➔



Hospital de Amor, Brazil

Public/Private:	Public
Population served annually:	1,1 Million*



Hospital de Amor, Brazil

Women from remote areas of Brazil are invited to the breast cancer screening program by mobile and fixed screening diagnostic units from Hospital de Amor. Providing care to 47% of Brazilian cities including indigenous communities, Hospital de Amor system has 7 cancer hospitals, 20 fixed diagnostic units, and 52 mobile units with digital mammography. Hospital de Amor, with the main Hub located in Barretos, São Paulo, is recognized for their high quality and diagnostic breast screening program certified by the European Society of Breast Imaging. The hospital group expressed interest in ensuring their care pathway was person-centered, that care opportunities were available even to those in remote areas, and that the community as a whole was educated about the importance of cancer screening.

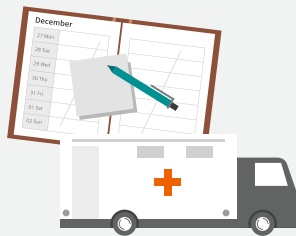
The program, free-of-charge for the women within risk age, counted 321,000 mammographies in 2022. Serving the population is possible through agreements and consortia between service provider, socially responsible private supporters, government, county or state authorities. Hospital de Amor has a clear mission of providing access to health services while empowering communities to take care of their own health proactively. Therefore the program prioritizes overcoming socio-cultural barriers and providing education for the women including their communities.

Together with Siemens Healthineers and Varian, Hospital de Amor analyzed the breast health program by focusing on:

- Integrating the voice of the patient to learn what challenges there were and what concerns they had about getting mammograms
- Working with staff to understand how the current program worked, what problems existed, and how the staff experience was
- Increasing the community engagement in breast health and annual cancer screenings

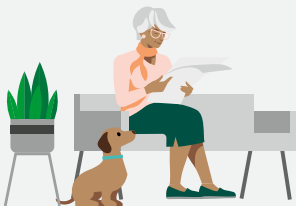
* Based on registries from 2022.

Challenges



Engagement

- There is limited community understanding about the importance of breast health and early detection
- In remote areas, only 30% of women in need of follow-up attend their appointment in the town of Barretos
- There are challenges to recruiting & retaining nurses and technicians



Waiting at home

- Women in remote areas may have no or limited phone or internet connection
- Local physicians may not have the resources for breast cancer screening education



Planning the screening

- There are limited community agents to schedule screenings
- A registration form must be completed in advance of the appointment



Mobile screening truck arrives in town

- Community agents and staff personally remind women of their appointment, yet 10% of those scheduled still miss their appointment



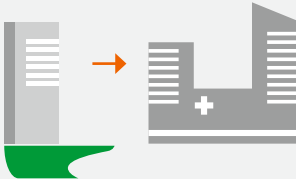
Scan sent to reading unit

- In remote areas without satellite, it can take four to six weeks for scans to be uploaded



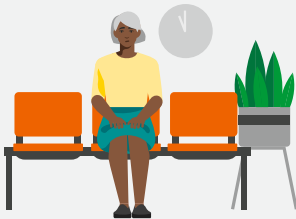
Waiting for screening results

- Women in need of additional screening are contacted for follow-up; however, understanding of the procedure may be limited
- *"I was not sure what was meant in the call I received about my results. They said I had to come to the fixed unit"*



From home to clinic

- For some women, the trip to Barretos is a long journey
- It is difficult to measure the experience—Net Promoter Score: 37% response rate online* The hospital group recently implemented a new scheduling KPI: faster exams for women with B4-lesions (suspicious for malignancy) and B5-lesions (malignancy)



Waiting at the clinic



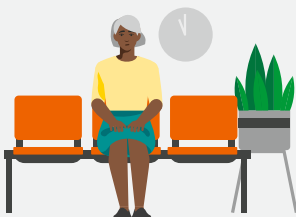
Patients sometimes arrive in a group

- They come with the same bus from the towns nearby.



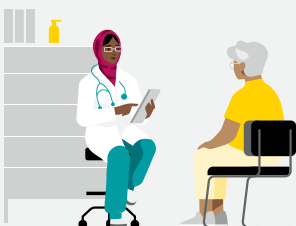
During the exam

- The exam room, although beautifully decorated, may still be uncomfortable for some patients
- *“It’s cold in the examination room”*



Waiting for exam results

- The long waiting period to receive screening results can create anxiety



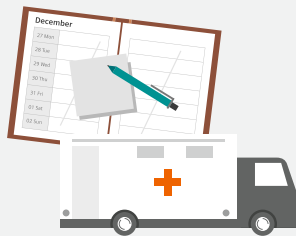
Cancer diagnosis

- Patients are very stressed, particularly if they come to the appointment alone
- Staff who were highly trained in quality and human rapport aren’t equipped to ease fears. This type of training is still unusual in the medical profession

* According to Bain & Company, higher than 20% is a favorable result, 50%+ is considered excellent, 80%+ is considered “world class”

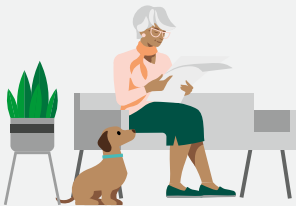
Reference here [↗](#)

Best practices now:



Engagement

- A mobile unit travels to remote areas to conduct screening there, and the addition of food, games, and music incentivize more women to attend
- Screening is promoted with television and radio advertising
- As part of the educational component of the campaign, children learn about cancer in school and encourage their mothers to attend the screening
- *"I learned about the screening from the Pink October campaign in the city"*
- *"My cousin recommended the screening, so I traveled to where the truck is"*
- *"I'm excited to do the exam and to show others how to take care of themselves"*



Waiting at home

- The air-conditioned mobile unit where the screenings take place is connected to a network of treatment providers through the health security system to reduce time to diagnosis and treatment



Screening

- LRCB certification† is mandatory for all the screening centers**
- A majority (95%) of the staff has been trained to conduct excellent standardized positioning in the digital mammography imaging machine and can have results in under five minutes



Scan sent to reading unit

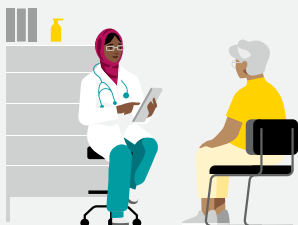
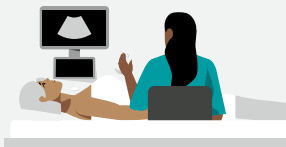
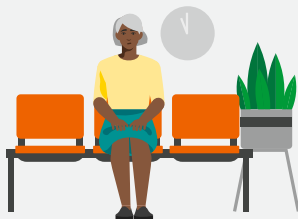
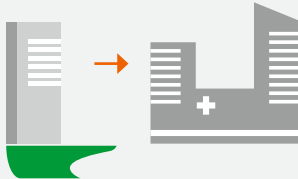
- Scans are sent digitally to the reading unit and undergo a triple check to ensure accuracy in mammography results



Waiting for screening results

- Normal scans do not trigger a patient call
- If a scan is abnormal, staff contacts the woman about the need for her to receive a diagnostic mammogram and connects her with the Ministry of Health for added support

** An annual international training program in digital breast cancer screening in cooperation with the European Society of Breast Imaging



From home to clinic

- The clinic offers walk-in and same-day appointments for follow-up mammography
- *“The clinic is clean and organized, and the staff really try to make people comfortable”*
- The clinic continues to track scheduling KPIs to ensure that more women in need of follow-up appointments have scheduled



Waiting at the clinic

- The waiting room offers music and spiritual activities to help ease the wait
- The Rio Branco-Amazon clinic features a garden with a swing



During the exam

- The private diagnostic exam room is separate from the one used for screening
- Aroma therapy and calming videos are used during the examination



Ultrasound/Biopsy

- The biopsy equipment uses aurora landscape technology, and positioning is controlled remotely with cameras across all fixed units
- For privacy, the biopsy room offers a separate waiting and recuperating area
- Women are offered ice and a cushion to ease discomfort after the exam



Cancer diagnosis

- If cancer is detected, a psychologist supports physicians on-site in relaying the news to the patient



Planning cancer treatment

- Treatment is conducted in a separate part of the clinic with its own entrance. This way the “health pathway” is separate from the “disease pathway”

The same patient experience optimization framework used here can be duplicated in other regions where access to care is scarce.



Vall d'Hebron University Hospital, Spain

Public/Private:	Public
Population served:	430,000*



Vall d'Hebron University Hospital, Spain

For stroke patients, every minute counts, as “Every minute an artery is clogged, two million neurons die,” emphasizes Dr. Manel Escobar, Imaging Diagnostic Manager at Vall d'Hebron University Hospital in Catalonia. As Spain's leading general university hospital, Vall d'Hebron covers all medical and surgical specialties and is committed to enhancing citizens' health and quality of life through innovation and knowledge transfer. Understanding that saving 30 minutes from door to treatment for patients with high stroke scores (NIHSS > 7) can significantly improve the chance of positive outcomes by 10%³⁵, the hospital recognized the need to accelerate initiation of care and enhance the prognosis and well-being of stroke survivors. Their goal was to provide a superior, person-centered patient experience driven by data and key performance indicators (KPIs).

Together with Siemens Healthineers, Vall d'Hebron University Hospital analyzed their stroke service by focusing on:

- Integrating patient-centric measures:
 - Door-to-needle time
 - Time to stroke unit admission
 - Average risk-adjusted hospital stay
 - Percentage of patients with favorable functional prognosis
 - Patient-reported outcome measures (PROMs)
- Collaborating with stakeholders to evaluate the current workflow, identify issues, implement improvements, and refine KPIs
- Testing the feasibility of a new person-centered care model

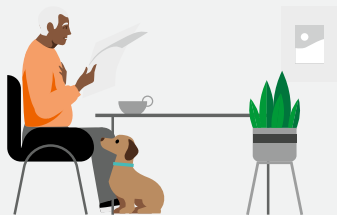
* including highly specialized services and internationally recognized medical research.

Challenges



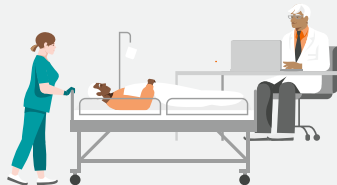
Measuring the whole pathway

- Interest in placing the patient at the center of care and to operate according to patients' needs
- Missing knowledge and transparency to improve stroke care provision and to optimize acute treatment KPIs
- Need to increase efficiency and to redefine processes and pathways



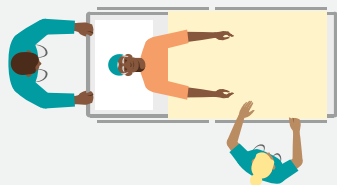
At home

- Difficult to assess patients at risk of stroke
- Disconnection between health center and emergency service



Arrive to Emergency

- Working under pressure, speed and expert personnel are essential
- The hospital group needed to reduce time wherever possible, including:
 - Transfer times from the ambulance to diagnosis and intervention
 - Patient waiting times
 - Patient time to CT for critical information
 - Patient transfers between departments



From diagnosis to treatment room

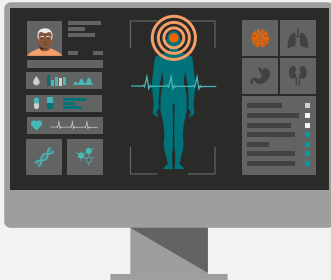
- Patient may be too unstable for transfers
- CT diagnostic room may be far from interventional room where patient is treated next
- Tools needed for high precision thrombectomy



Recovery

- Need improved spaces with a design centered in patient care
- Need to define patient flows where time can be saved and reduce wasteful activities that do not add value to the patient

Best practices now:



Measuring the whole pathway

- Patients are sent directly to the new one-step stroke program and then to the stroke unit, reducing transfers by half
- New patient flow allows better patient recovery and a potential decrease in readmissions (less than 15%)
- Using ActExcell™, a tool which turns workflow data into insights about patients with high ischemic stroke risk, the team can measure:
 - Time spent on every step of the care pathway, including wait times
 - Utilization of medical technology along the patient pathway
 - Analysis of KPIs including PROMs



At home

- Remote patient examination to identify patients at risk of stroke
- Information shared between health center and emergency service for first decisions
- *“The emergency team immediately came to me when the health center saw I was in trouble: ‘Let’s see you move your arm, Josep’”*



From emergency arrival to treatment room

- Reduced the time to the first intervention
- The new one-step stroke program offers a collection point for the stroke patients, personalizing and qualifying them for the best-suited pathway
- Patient is moved directly to the specialized treatment room without passing through the emergency, saving precious time and brain health
- New space design offers faster transfer and separation of internal and public areas



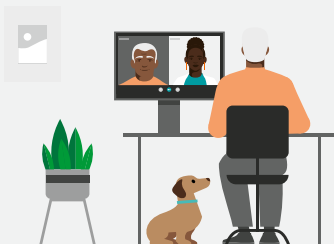
In the 2-in-1 treatment room

- Dedicated 2-in-1 Nexaris room for acute stroke patients assures availability of resources for diagnosis and therapy
- The room combines an angio biplane system and a CT scanner on rails to save door-to-groin time and uses just one room
- The operating room provides comfortable space for interventionists, anesthesiologists, nursing, and support
- Reduced risks and complications in the acute disease phase
- Access to the latest advances and innovations in therapeutic technologies
- It doubles the probability of a good psycho-functional prognosis for patients



Recovery

- Reduce average hospital stay of the patient and better patient recovery
- Continuous patient follow-up
- Empowerment of patients and families
- *"Nobody would say that just two months ago, Josep had a stroke"*



At home

- Patient monitoring via app and integrated digital platform for higher percentage of favorable functional prognoses and PROMS
- Reduced costs due to fewer readmissions and better patient prognoses
- *"I can move everything well, I can dance"*

Conclusion

The shift to person-centered care has resulted in the development of more tailored solutions to deliver the right care, at the right time, and at the right location. Each healthcare organization has key performance indicators that inform care delivery, just as each individual has unique needs and priorities in their healthcare journey. By developing person-centric care pathways, healthcare organizations can improve the quality and efficiency of care at their facilities.

Here are a few tips for the creation of person-centric care pathways:

- Enlist the right partners to help and have them at the table from the very beginning
- Ask questions of staff and patients, and really listen to the responses
- Streamline the process to ensure it meets the needs of both patients and staff
- Ensure staff are well trained to handle difficult interactions, use scanning equipment, and care for their own well-being

As a MedTech partner, Siemens Healthineers is ideally positioned to enable healthcare organizations to establish and optimize their patient pathways.

Transform your business and improve the patient and employee experience with an Enterprise Patient Experience program:

- Experience-centered pathway mapping to understand and enhance the patient/staff journey
- Strategy & governance direction set with aligned vision, mission, and key performance indicators
- Digitization & workflow optimization tools to help bring your vision to life
- Experience-centered layouts & design to create a positive and supportive environment
- Research and innovation to provide your patients the best possible experience
- Cultural change & person-centered communication

Acknowledgements

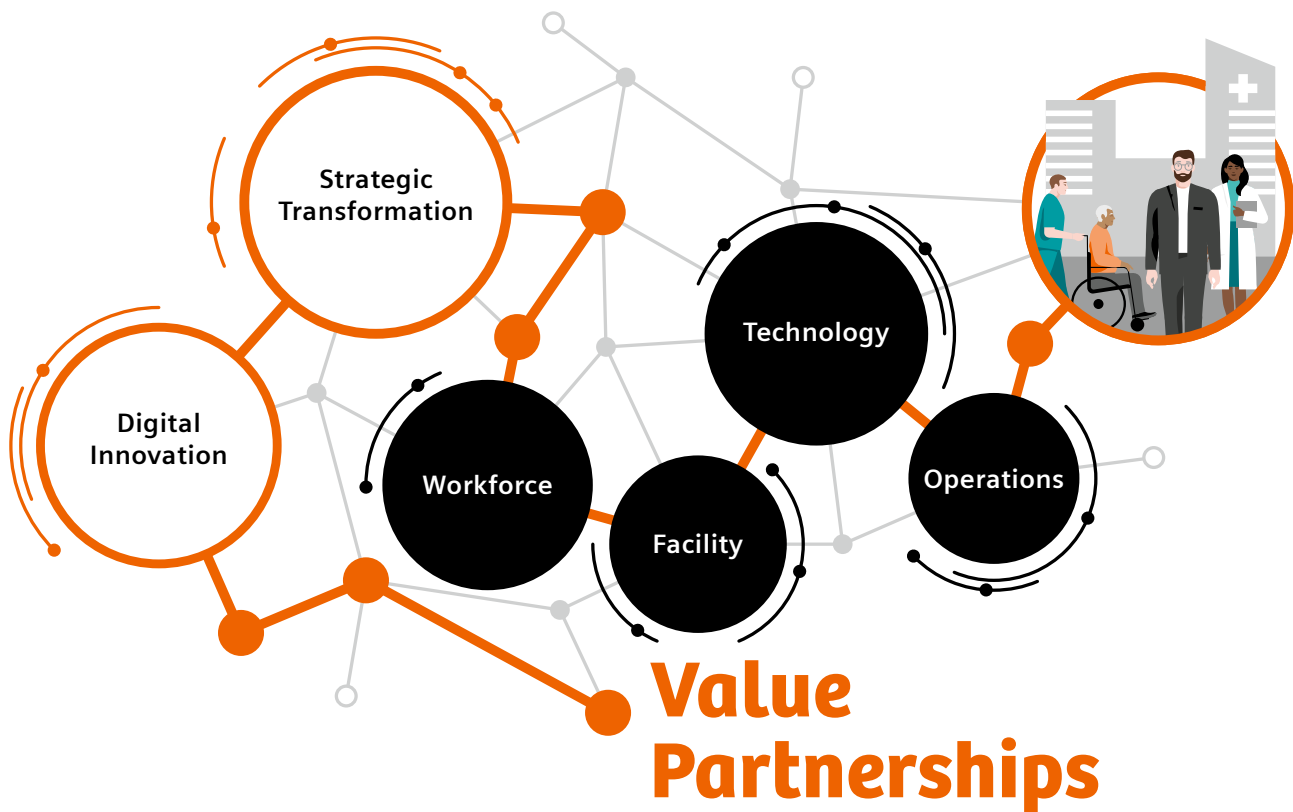
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Siemens Healthineers Value Partnerships are long-term, performance-oriented, collaborative engagements. We bring a combination of clinical insight, medical technology innovation, strategic vision, implementation expertise, and operational excellence to the table for you. As trusted partners, we help you formulate and achieve your strategic goals, increasing enterprise-wide value.

Value Partnerships drive value across your entire enterprise with focus on four domains: Technology, Operations, Workforce and Facility. Furthermore, together we enable breakthroughs through holistic and transformative initiatives such as Strategic Transformation and Digital Innovation.



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