







Maturity Model for Integrated Care Dr Andrea Pavlickova NHS 24, Scotland

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Scaling-up Integrated Care In Europe

- Integrated care is being adopted at different rates and in diverse ways across regions in Europe
- Recognition of the need to maximise the use of existing knowledge and encourage exchange of good practices and knowledge transfer in Europe
- Sharing of experience of the good practices should lead to their "easier and faster" adaptation and implementation in other regions.
 - Building of European networks & repositories





HOWEVER

The challenge remains how to best leverage this existing body of evidence and utilise the good practice catalogue to make the learning embedded in the practices more readily and accessible to potential adopters.

- √What actions have the more progressive regions taking in order to be successful?
- ✓ What can we learn from these pioneers about how to overcome barriers and accelerate results?
- ✓ Can these *lessons* be *structured into a conceptual 'maturity model*' that could help aspiring regions to speed their own adoption?





Challenges of Scaling Up

- Systematic use of different types of evidence;
- Understanding the context of scaling-up features of the intervention need to "fit" into the context appropriately;
- Identification of transferable elements of good practice/intervention for scaling-up;
- Flow of appropriate information between adopting and transferring entities



Framework models/tools for scaling up are needed





Framework Models for Scaling Up

- The majority of frameworks explicitly focus on scaling up health action in low and middle income country contexts but not so much on long-term care innovations that have been scaled up in developped healthcare systems;
 - The Scaling Up Management Framework (Kohl, R. 2015)
 - The WHO Framework (WHO, 2015)
 - Framework and key success factors for scaling up global health initiatives (Yamey G.2015)



EIP on AHA B3 Maturity Model





What is B3 Maturity Model?

- An initiative driven by the B3 Action Group on Integrated Care of the EIP on AHA;
- Conceptual model intended to show how healthcare systems are attempting to deliver integrated care services for their citizens and what is their capacity to adopt integrated approaches to deal with challenges of ageing;
- The Model helps a particular region / organisation to identify possible gaps and areas that need attention in health and care systems;
- Provides an opportunity to share good practices.





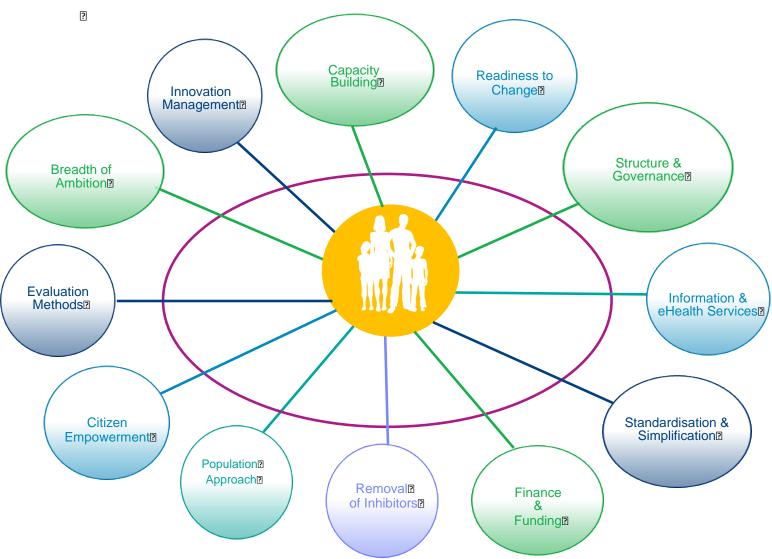
Development of B3 Maturity Model

- Bottom-up approach
 - Face-to-face interviews with regional & local authorities;
 - Phase 1 (February April 2014)
 - Athens, Basque Country, Catalonia, Galicia, N Ireland, Saxony.
 - Phase 2 (January March 2015)
 - South Denmark, Scotland, Puglia Region in Italy, Medical Delta (Delft), Olomouc Region in Czech Republic.
- Extract common themes to build a "maturity model"





B3 Maturity Model









Information & eHealth Services

Objectives:

Integrated care requires, as a foundational capacity, sharing of health information and care plans across diverse care teams that leads progressively to systems for enabling continuous collaboration, measuring and managing outcomes and enabling citizens to take a more active role in their care. This means building on the existing eHealth services, connecting them into new ways to support integration, and augmenting them with new capabilities, such as enhanced security and mobility.







Information & eHealth Services

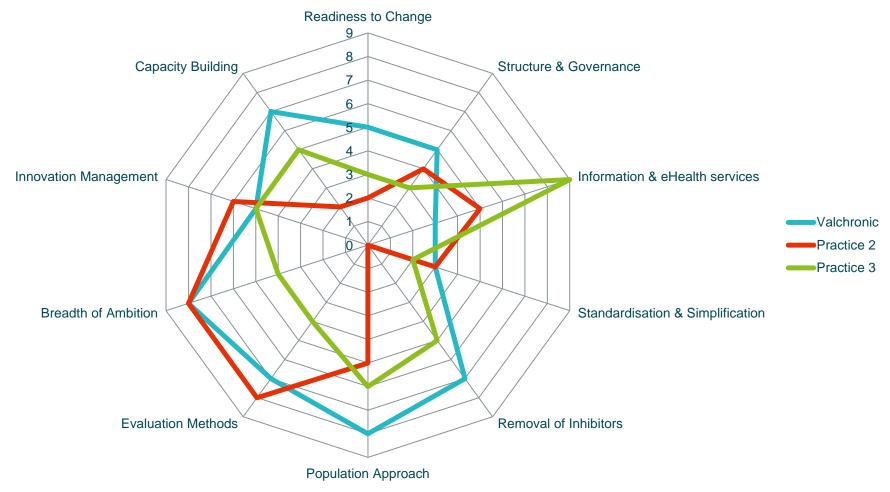
Assessment:

- 0 No connected health services, just isolated medical record systems
- 1 No integrated health services used, only pilots/ local services
- 2 eHealth deployed on some areas, but limited to specific organisations or patients
- 3 Voluntary use of regional/national eHealth services across the healthcare system
- 4 Mandated or funded use of regional/national eHealth infrastructure across the healthcare system
- 5 Universal, at-scale regional/national eHealth services used by all integrated care stakeholders





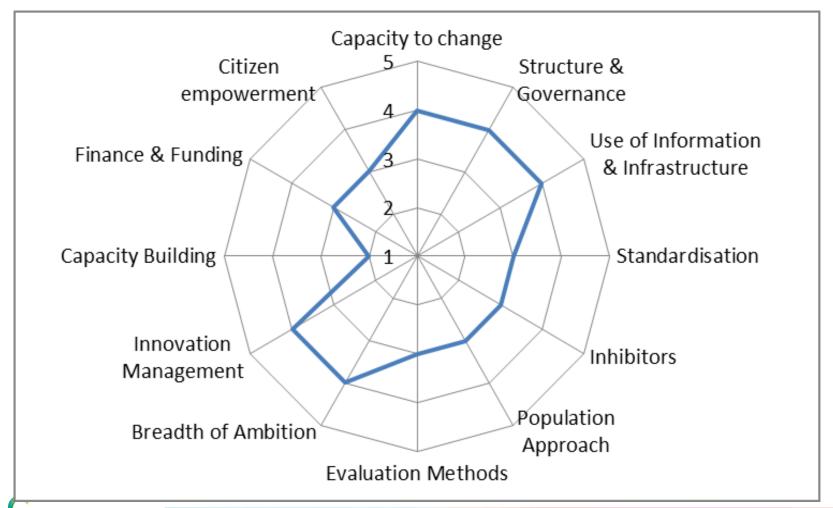
How to Use Maturity Model?







How to Use Maturity Model? Example from Scotland

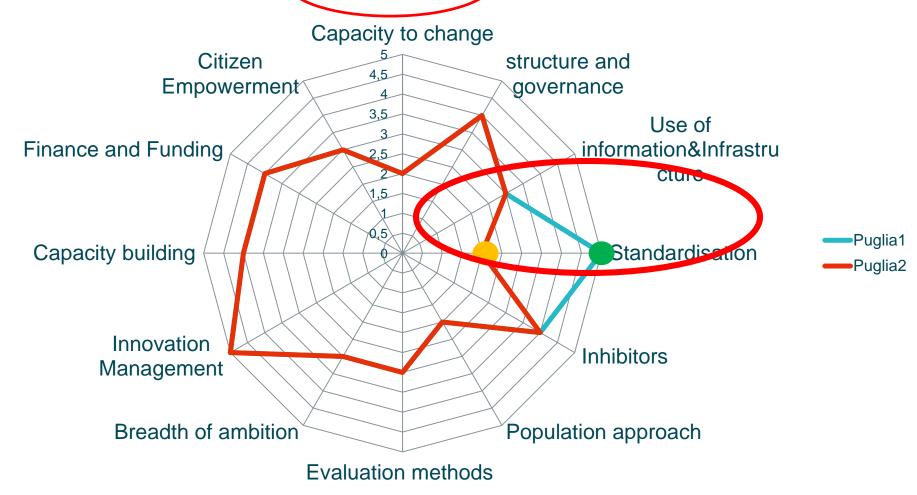






Example from Puglia Region, Italy

One example







Experience of Regions so far...

- "The B3 Maturity model is an effective tool to analyse the state of the art of the context. It enables easy and quick detection of areas of improvement, gaps, and strengths. It is a great tool to drive and facilitates multidisciplinary discussions" – Puglia region, Italy
- "This is a very valuable tool, useful for all stakeholders to reveal weaknesses, make comparative evaluations and orientate efforts to the most effective collaborations" – Attica region, Greece
- "This is an easy to use model that is understandable to a broad spectrum of stakeholders and beneficial for interregional and international comparison of integrated care" – Olomouc region, Czech Republic
- "The B3 maturity model gives a clear list of aspirational goals to aspire to, has allowed systematic consideration and could also be considered for assessment at a local level" - Scotland





However,

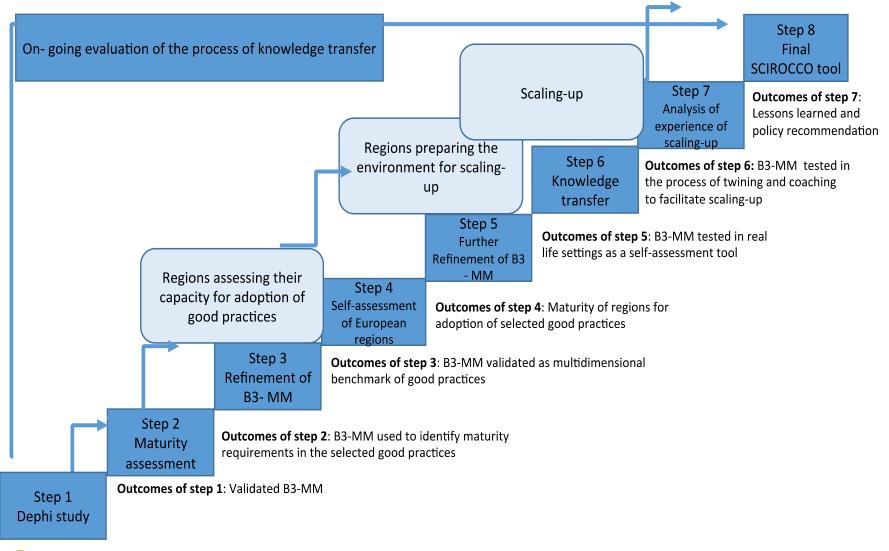
Further testing & validation of the B3 Maturity Model is needed to demonstrate its full potential as a tool for helping regions to understand the preconditions for successful scaling-up







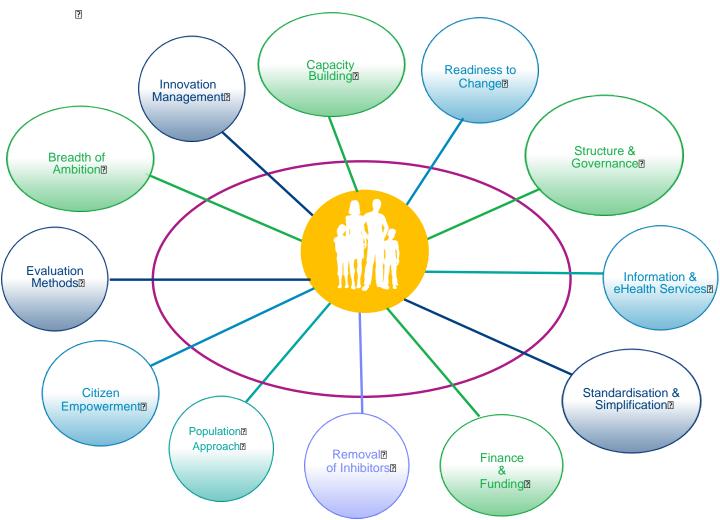
Refinement of the B3 Maturity Model







From B3 Maturity (Conceptual) Model...







...To an
Online SelfAssessment
Tool for
Integrated
Care







SCIROCCO Tool will help regions to identify:

- The context requirements of a good practice that is considered for adoption;
- The level of maturity required for the health and social care system to adopt a particular practice;
- The actions that more progressive regions have taken in order to be successful;
- Lessons learned from these pioneers to overcome barriers and accelerate results;
- ► The process of information sharing on lessons learned to help other aspiring regions to speed up their own adoption.





Expected Use of SCIROCCO Tool in Practice

Good Practices viable for scaling up

Step 3: The originating region is assessing the maturity needs of its healthcare system

Step 2: The originating Region is assessing the maturity needs of a particular practice

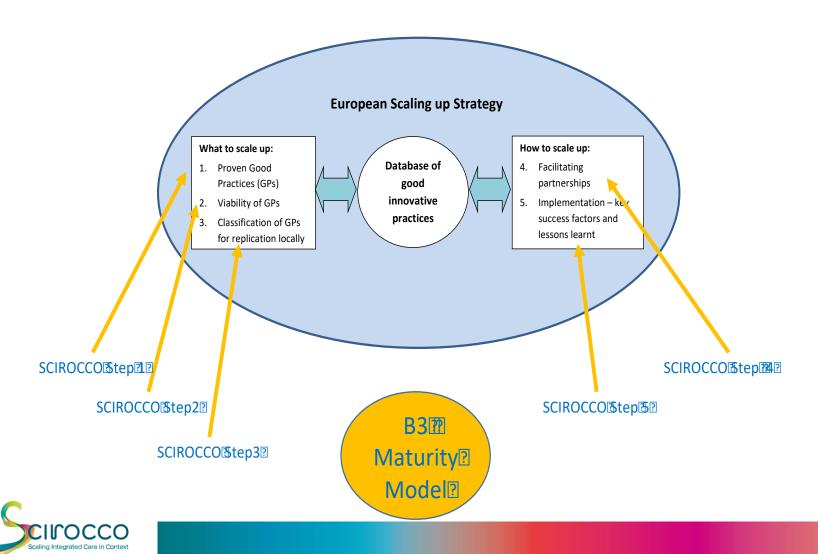
B3 Maturity Model Step 4: B3 Maturity Model facilitates partnership for scaling-up

Step 5: Knowledge transfer/Scaling Up

Expected



"B3-MM to become a key tool in facilitating exchange of good practices and scaling-up processes in Europe"





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