



DISTANCE SPANNING HEALTHCARE

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Introduction to Good Practice

Based upon the regional strategy for distance spanning healthcare

A successive implementation of solutions supporting the clinical use of distance spanning methods between different healthcare facilities to ensure the use of distance spanning technology as an integrated part of the way we conduct healthcare.

Conceptualize to include:

- technology
- routines
- regulations regarding fees
- regulations for documentation
- system/routines for booking equipment and facilities

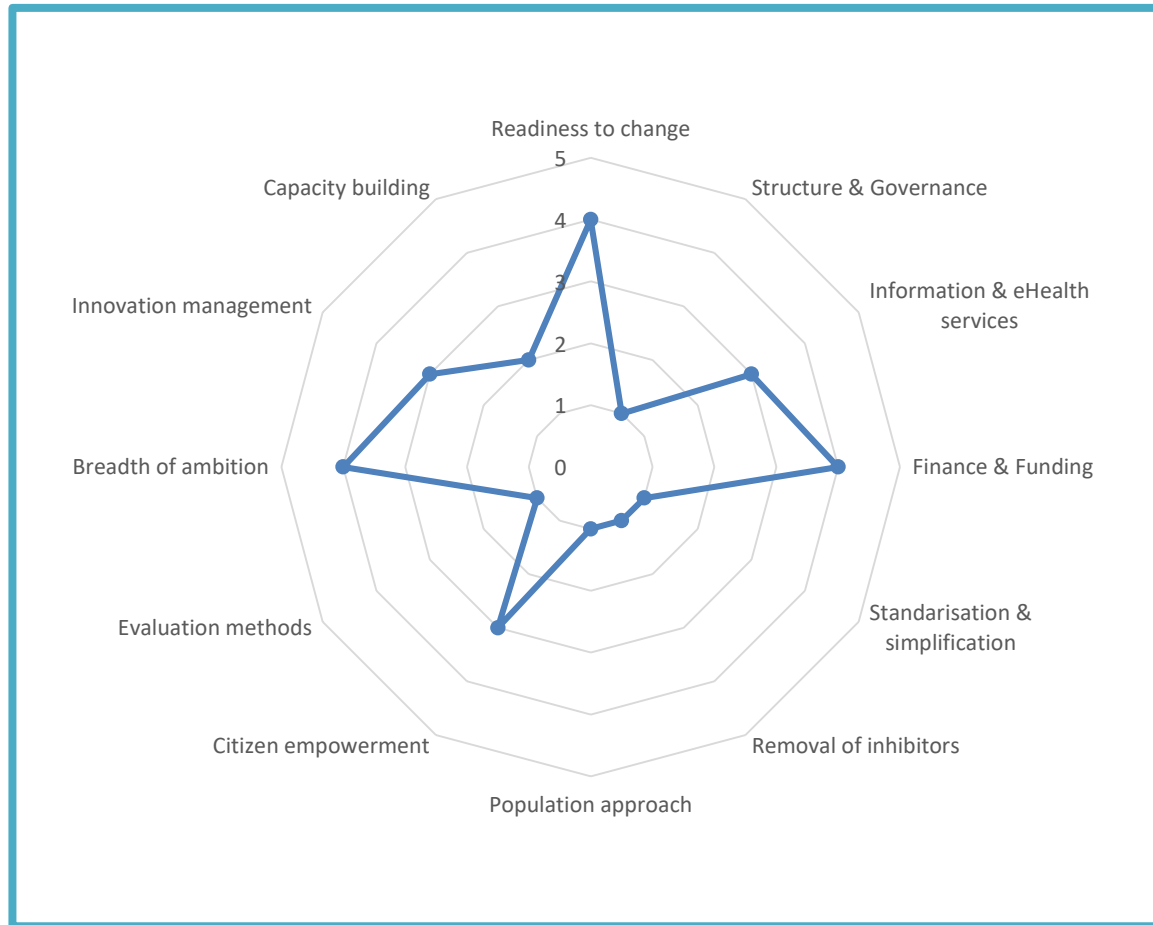
Challenge Addressed by the Good Practice

- ▶ Reducing travel – both personnel and patient
- ▶ Increasing patient participation
- ▶ Ensuring patient safety
- ▶ Spreading knowledge competence change

Transferability of the Good Practice

- ▶ Resources required for deployment, budget, implementation and sustainability of practice
 - ▶ **Step1 - Education – medical and technical. Technical equipment in particular video equipment, a functional and customized space, information and marketing (internal and external)**
 - ▶ **Step 2 - Make sure all equipment is in place and that there are suitable environments in both hospital and health care center for the practice. Time and funding for education and information campaigns. For increased use a more long-term education plan needs to be in place and development resources are needed (personnel)**

MATURITY REQUIREMENTS OF THE GOOD PRACTICE



Maturity Requirements of the Good Practice

► Readiness to Change to enable more Integrated Care

► Assessment:

1. No acknowledgement of crisis
2. Crisis recognized, but no clear vision or strategic plan
3. Dialogue and consensus-building underway; plan being developed
4. Vision or plan embedded in policy; leaders and champions emerging
5. Leadership, vision and plan clear to the general public; pressure for change
6. Political consensus; public support; visible stakeholder engagement.

► Evaluation Methods

► Indicators of maturity:

Academic institutes and agencies with experts in health economics and HTA; published health impact measurements; measurable care cost/quality improvements.

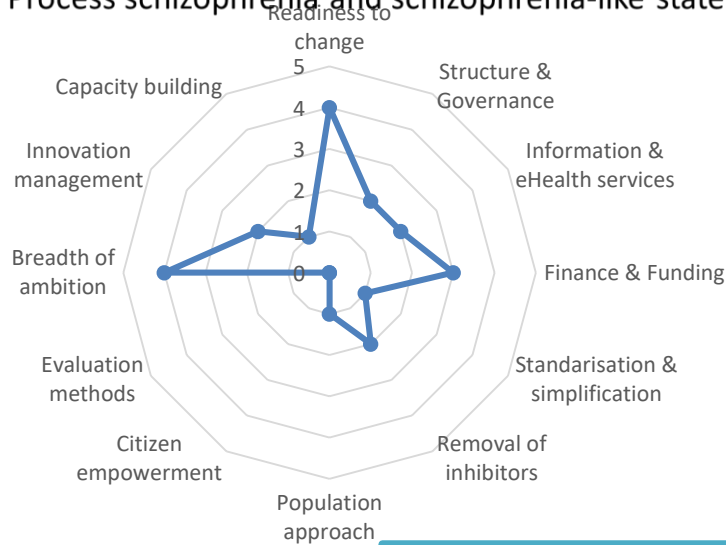
► Assessment:

1. No routine evaluation
2. Evaluation exists, but not as a part of a systematic approach
3. Evaluation established as part of a systematic approach
4. Some initiatives and services are evaluated as part of a systematic approach
5. Most initiatives are subject to a systematic approach to evaluation; published results
6. A systematic approach to evaluation, responsiveness to the evaluation outcomes, and evaluation of the desired impact on service redesign (i.e., a closed loop process).

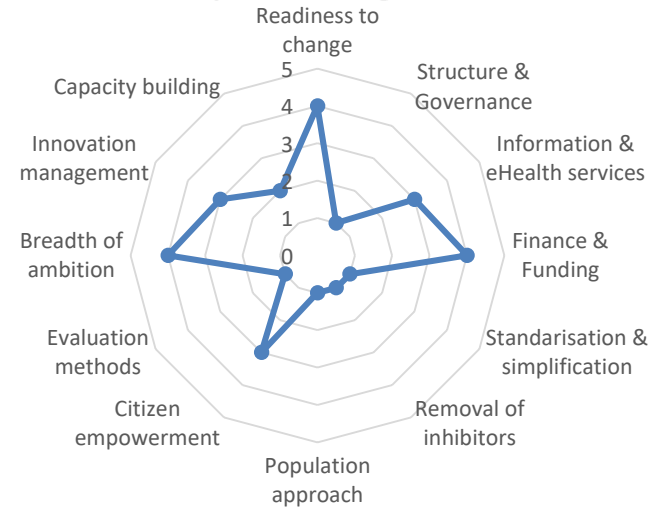
Conclusions

Confirming what we already “knew” or suspected

Care Process schizophrenia and schizophrenia-like state



Distance spanning healthcare



Shoulder rehabilitation via distance technologies

