



EHTEL INNOVATION INITIATIVE MEETING

DONNA HENDERSON

HEAD OF EUROPEAN ENGAGEMENT

NHS 24, SCOTLAND



Co-funded by
the Health Programme
of the European Union

EHTEL, 15 March, 2017



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SCIROCCO Project

EU Health Programme (CHAFEA)

- ▶ **EC funding:** €1,322, 775
- ▶ **Budget:** €2,204,631.21
- ▶ **Start:** 1 April 2016
- ▶ **Duration:** 32 months
- ▶ **Coordination:** NHS 24
- ▶ **10 Partners:** NHS 24, UEDIN, VUB, UVEG, Kronikgune, Osakidetza, ARES PUGLI, FNOL, NLL, EHTEL
- ▶ **5 Healthcare regions:** Basque Country, Norrbotten, Olomouc, Puglia, Scotland.



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SCIROCCO's Objective

“To facilitate the scaling-up of good practices at local, regional or country level by recognising the maturity requirements of good practices and health systems in order to achieve scaling-up and knowledge transfer among European Member States”



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Why SCIROCCO?

❑ 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



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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 developed 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

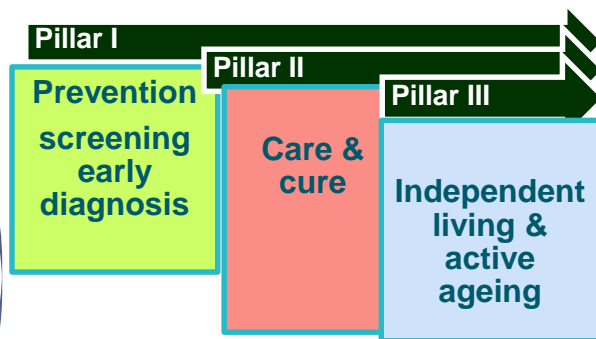
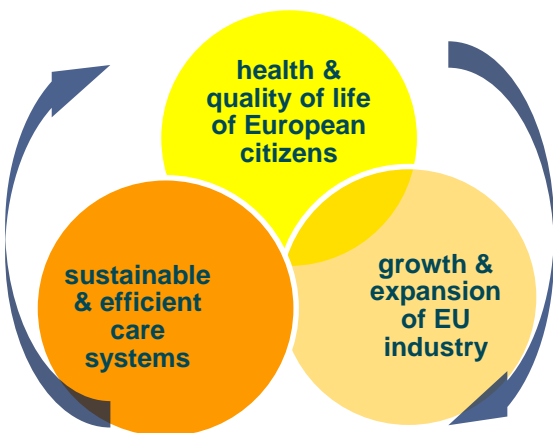
SCIROCCO builds on the achievements of the European Innovation Partnership on Active and Healthy Ageing



crosscutting, connecting & engaging stakeholders across sectors, from private & public sector

Specific Actions

+2 HLY by 2020
Triple win for Europe



Improving prescriptions and adherence to treatment



Better management of health: preventing falls



Preventing functional decline & frailty



Integrated care for chronic conditions, including telecare

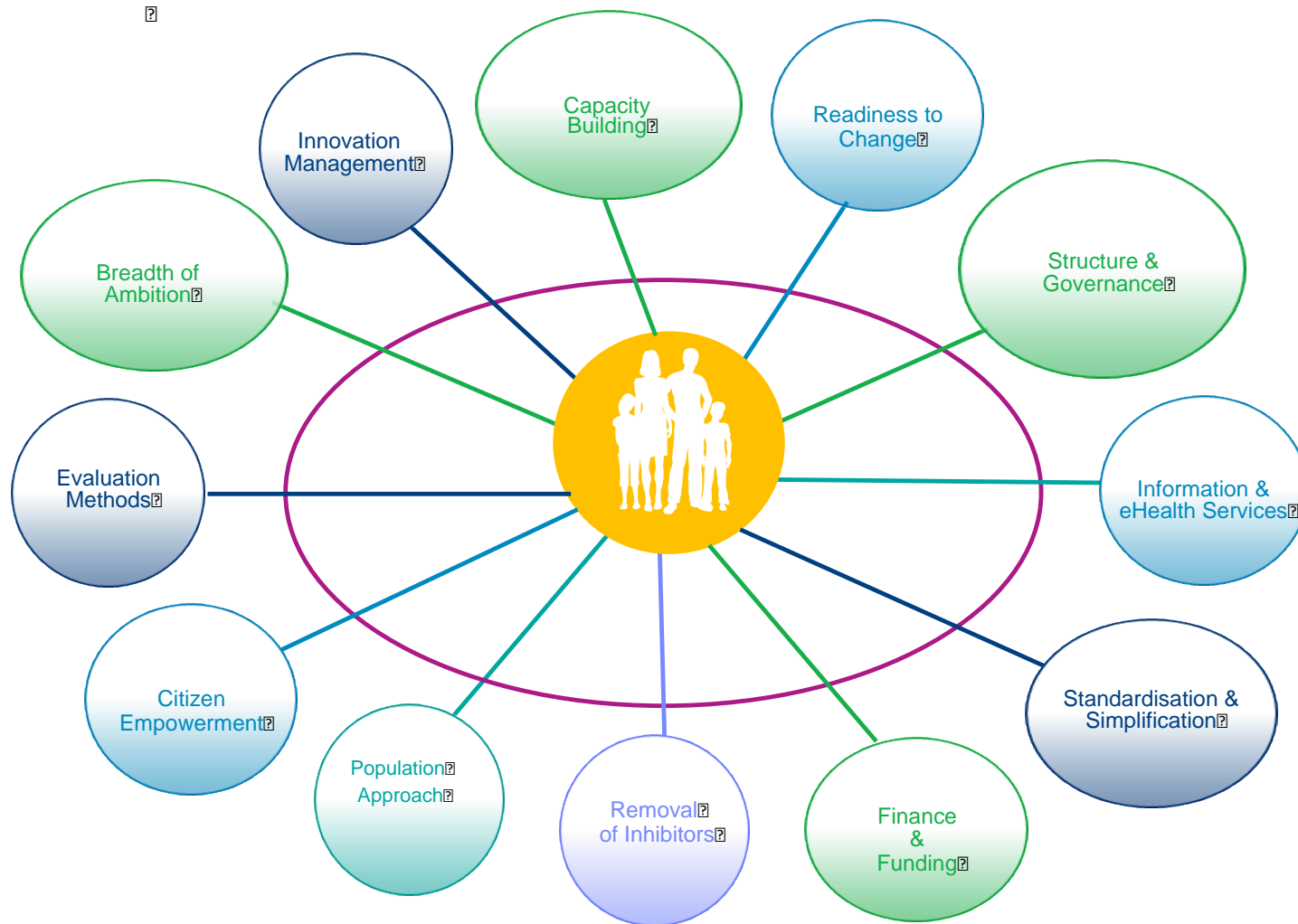


ICT solutions for independent living & active ageing



Age-friendly cities and environments

B3 Maturity (Conceptual) 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.

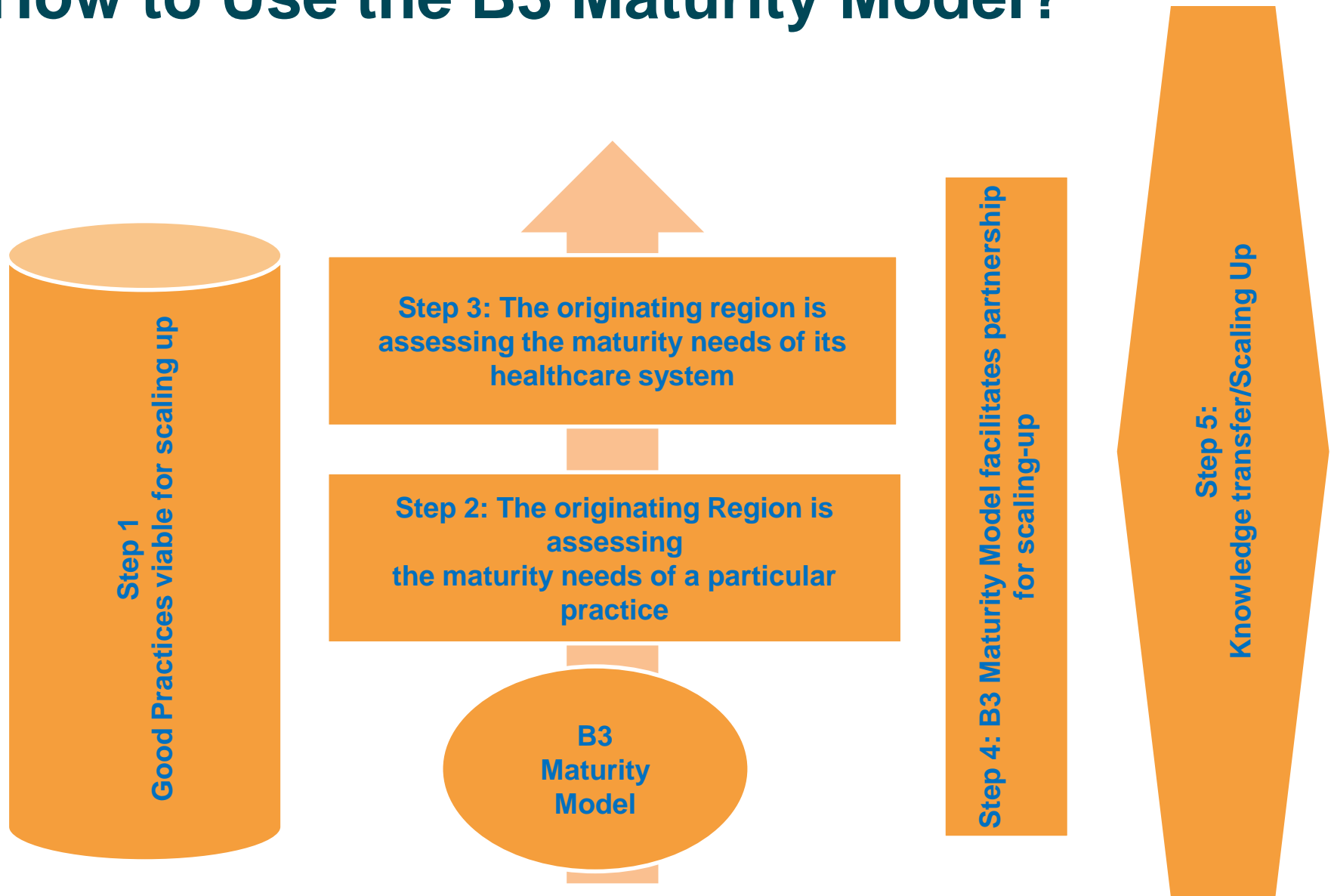


Information & eHealth Services

Assessment:

- 0 – Information systems are not designed to support integrated care
- 1 – Information and eHealth services to support integrated care are being piloted
- 2 – Information and eHealth services to support integrated care are deployed but there is not yet region wide coverage
- 3 – Information and eHealth services to support integrated care are available via a region-wider service but use of these services is not mandated
- 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 the B3 Maturity Model?



However,

TESTING & VALIDATION IS NEEDED

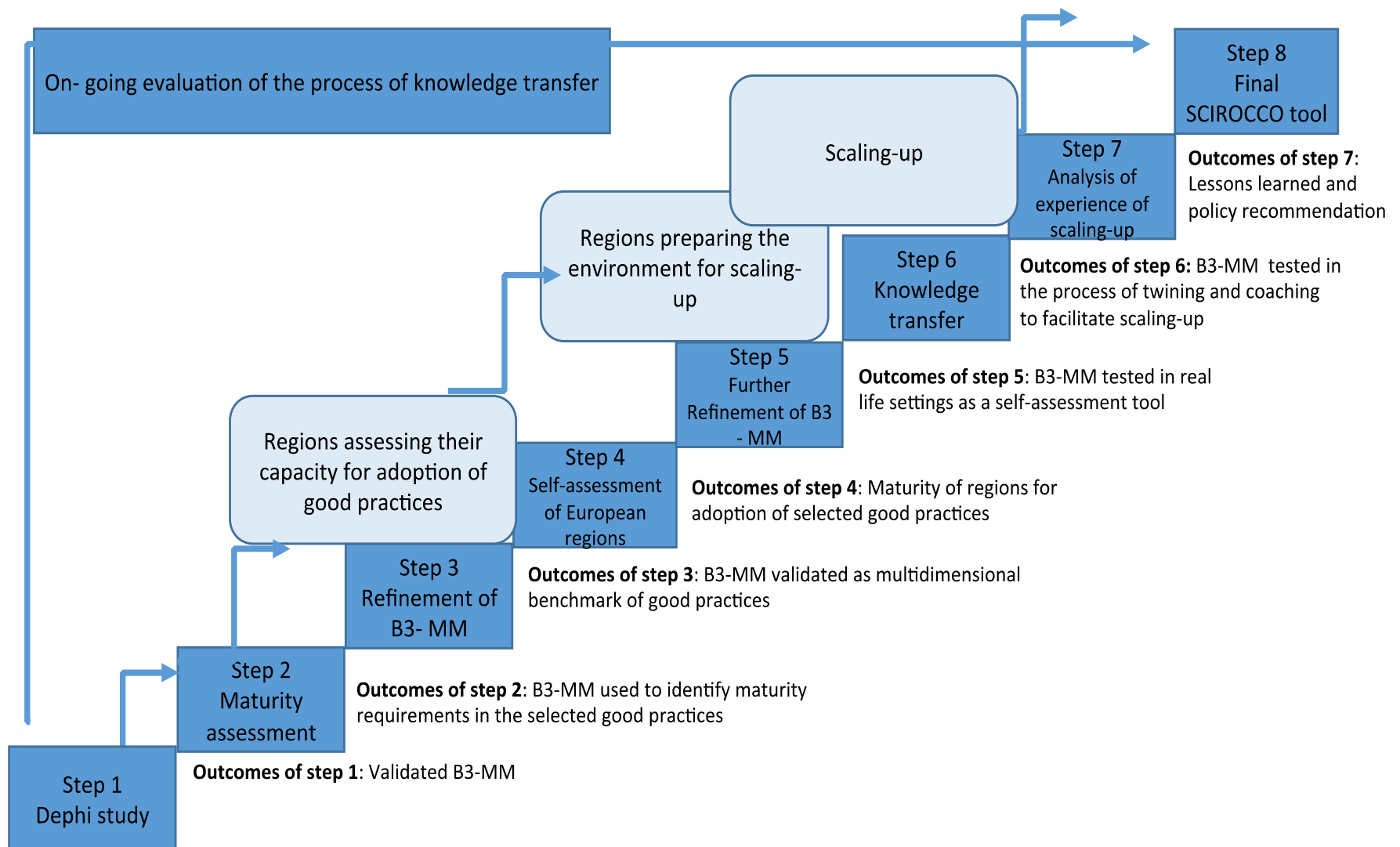


SCIROCCO

From Conceptual Model to an Online Self- Assessment Tool for Integrated Care



SCIROCCO's Strategy to Implement the Project





THANK YOU!

www.sciocco.eu

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