



PRO.M.I.S.

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Programmazione europea: salute pubblica, innovazione e ricerca

Assessing readiness for integrated care Il progetto “SCIROCCO”

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Firenze



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SCIROCCO Project

EU Health Programme (CHAFEA)

- **Budget:** €2,204,631.21
- **Start:** 1 April 2016
- **10 Partners:**



Osakidetza



Co-funded by
the Health Programme
of the European Union

SCIROCCO's Objective

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

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 in order to transform health care systems.
- Sharing of experience of the good practices should lead to their **“easier and faster” adaptation** and implementation in other regions.

Why SCIROCCO?

Challenges of scaling up:

- Systematic use of different types of evidence to maximise the use of existing knowledge and encourage exchange of good practices
- 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

Lack of tools / frameworks that can help us to understand how to move towards more sustainable health and care systems; how to support implementation, scalability and transferability of integrated care solutions in Europe.



European Innovation
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and Healthy Ageing

SCIROCCO Tool for Integrated Care

Development of Sirocco Tool

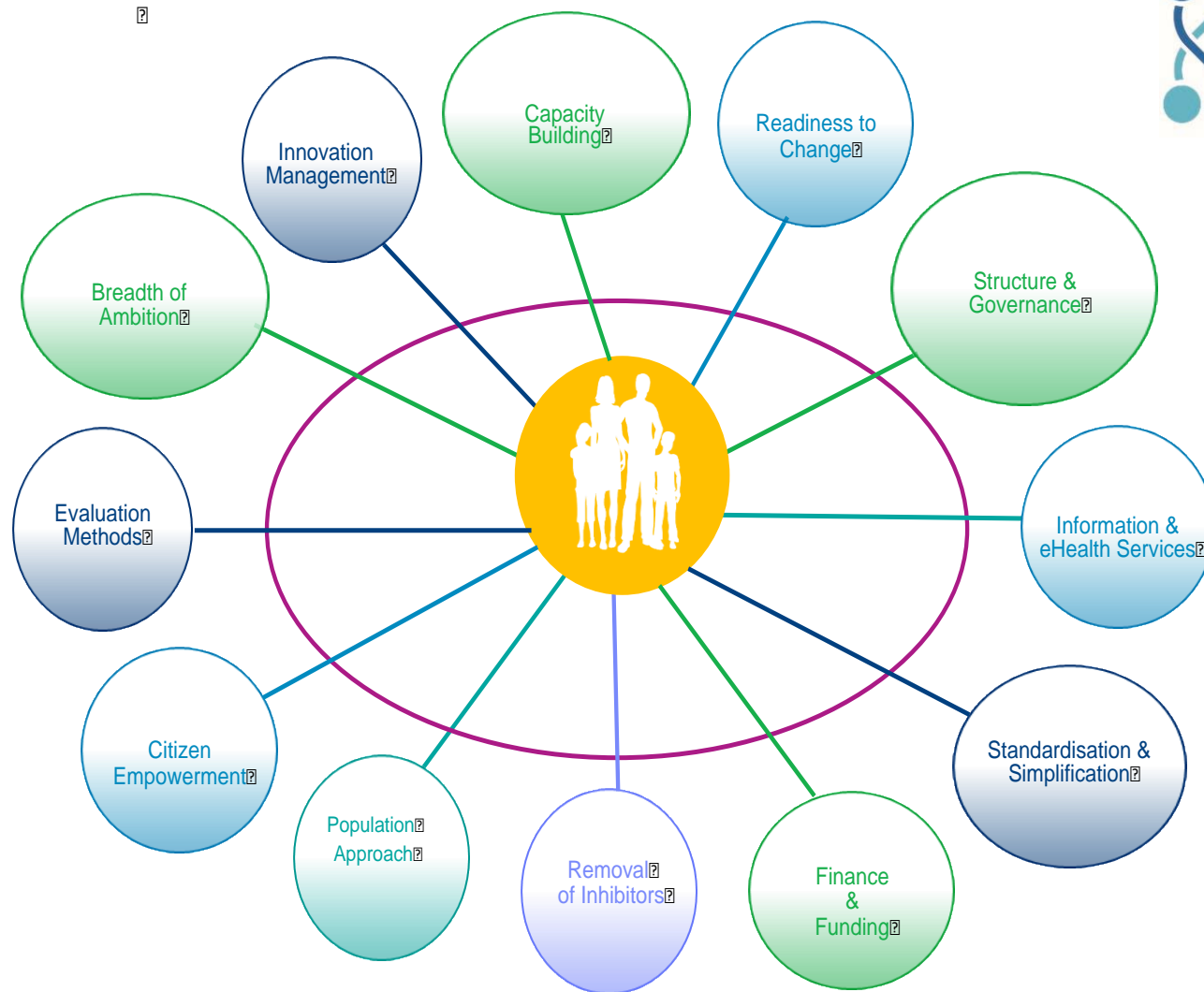
- ▶ Based on the **Maturity Model** developed by the Action Group on Integrated Care of EIP on AHA 

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and Healthy Ageing
- ▶ Eases the adoption of Integrated Care by:
 - Defining **Maturity** to adopt Integrated Care
 - Assessing the **Maturity** of Healthcare Systems
 - Assessing **Maturity Requirements** of Good Practices
 - Supporting Twinning and Coaching to transfer good practices

Development of SCIROCCO Tool



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Narratives

1. Readiness to Change (to enable more integrated care)

If the existing systems of care need to be re-designed to provide a more integrated set of services, this will require change across many levels, the creation of new roles, processes and working practices, and new systems to support information sharing and collaboration across care teams. This will be disruptive and may be viewed negatively by workers, press and public, so a clear case needs to be made for those changes, including a justification, a strategic plan, and a vision of better care.

- Creating a compelling vision, with a real sense of urgency, and enlisting stakeholder support including political leadership, management, care professionals, public and press.
- Accepting the reality that care systems are unsustainable and need to change.
- Publishing a clear description of the issues, the choices that need to be made, and the desired future state of the care systems, stating what will be the future experience of care.
- Creating a sense of urgency to ensure sustained focus, and building a 'guiding coalition' for change.

Rating Scale

1. Readiness to Change (to enable more integrated care)

0 – No acknowledgement of compelling need to change

1 – Compelling need is recognised, but no clear vision or strategic plan

2 – Dialogue and consensus-building underway; plan being developed

3 – Vision or plan embedded in policy; leaders and champions emerging

4 – Leadership, vision and plan clear to the general public; pressure for change

5 – Political consensus; public support; visible stakeholder engagement.

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



Using the SCIROCCO Tool

<http://scirocco-project-msa.inf.ed.ac.uk/login/>

New Maturity Model Questionnaire

Please reply to all of the questions

Q1 Q2 Q3 Q4 Q5 Q6 Q7 Q8 Q9 Q10 Q11 Q12

2. Structure & Governance * Required

- ☐ Fragmented structure and governance in place
- ☐ Recognition of the need for structural and governance changes
- ☐ Formation of task forces, alliances and other infrastructure
- ☐ Governance established at a regional or national level
- ☐ Roadmap for a change programme defined and agreed
- ☐ Full, integrated programme established, with full implementation

If someone asked you to justify your rating here with short sentences:

How confident are you of your rating?

Who do you think could provide a more confident judgement?

Questionnaire name: *

ALEC DEMO

Save questionnaire

Q2. Structure and Governance: Objectives

The broad set of changes needed to deliver integrated care at a regional or national level presents a significant challenge. It needs multi-year programmes with excellent change management, funding and communications, and the power to influence and (sometimes) mandate new working practices. This means alignment of purpose across diverse organisations and professions, and the willingness to collaborate and put the interest of the overall care system above individual incentives. It also means managing the introduction of eHealth services to enable integrated care in a way that makes them easy to use, reliable, secure, and acceptable to care professionals and citizens alike.

- Enabling properly funded programmes, including a strong programme, project management and change management; establishing ICT or eHealth competence centres to support roll-out; distributed leadership, to reduce dependency on a single heroic leader; excellent communication of goals, progress and successes.
- Managing successful eHealth innovation within a properly funded, multi-year transformation programme.
- Establishing organisations with the mandate to select, develop and deliver eHealth services.

Ok



New Maturity Model Questionnaire

Your questionnaire was successfully saved

Q1 Q2 Q3 Q4 Q5 Q6 Q7 Q8 Q9 Q10 Q11 Q12

1. Readiness to Change (to enable more integrated care) * 

- ☐ No acknowledgement of compelling need to change
- ☐ Compelling need is recognised, but no clear vision or strategic plan
- ☐ Dialogue and consensus-building underway; plan being developed
- ☐ Vision or plan embedded in policy; leaders and champions emerging
- ☒ Leadership, vision and plan clear to the general public; pressure for change
- ☐ Political consensus; public support; visible stakeholder engagement

If someone asked you to justify your rating here what would you say (please provide a few short sentences):

There are policy documents in place, the minister is prepared to speak on this matter. However the organisations who will implement have not fully adopted the approach and it is patchily represented in their plans

How confident are you of your rating?

Moderately confident

Who do you think could provide a more confident judgement?

XXX who leads on Change Mar



Questionnaire name: *

ALEC DEMO

Update questionnaire

Planning for Self-assessment Process

1. Identification of regional/local stakeholders

Outcome: XY experts

2. Self-assessment survey

Outcome: Stakeholders' perceptions on current state of art in integrated care

3. Data collection/data analysis

Outcome: Spider diagrams – weakness and strengths in integrated care

4. Stakeholder workshops

Outcome: Consensus on spider diagrams

5. Summary of results and feedback on the process



How can we benefit?

Tool to Assess Maturity Requirements of Good Practices

“Building Healthier & Happier Communities” – Scotland

“SCIROCCO tool has already proven its worth. It has helped facilitate round table discussions on evaluating our understanding of good practice development and also prompted focussed discussion on our perception of progress toward achieving strategic objectives around health and social care integration.”



*Ian Mathieson
Coordinator,
Health and Social Care*



Tool to Assess Maturity of the Healthcare System

"The SCIROCCO tool is useful to drive discussions during brainstorming: sometimes in meetings it is easy to miss the focus". It also provides a clear vision of the strengths and weaknesses of the regional context. If used properly, it is an extraordinary participatory policy tool."



Giovanni Gorgoni
CEO, Regional Strategic
Agency
for Health and Social Affairs
(AReSS Puglia)

"The SCIROCCO tool could also be used in the validation of other regional policies, not just related to chronicity."

Social Welfare
Regional Manager

STRENGTHS

WEAKNESSES

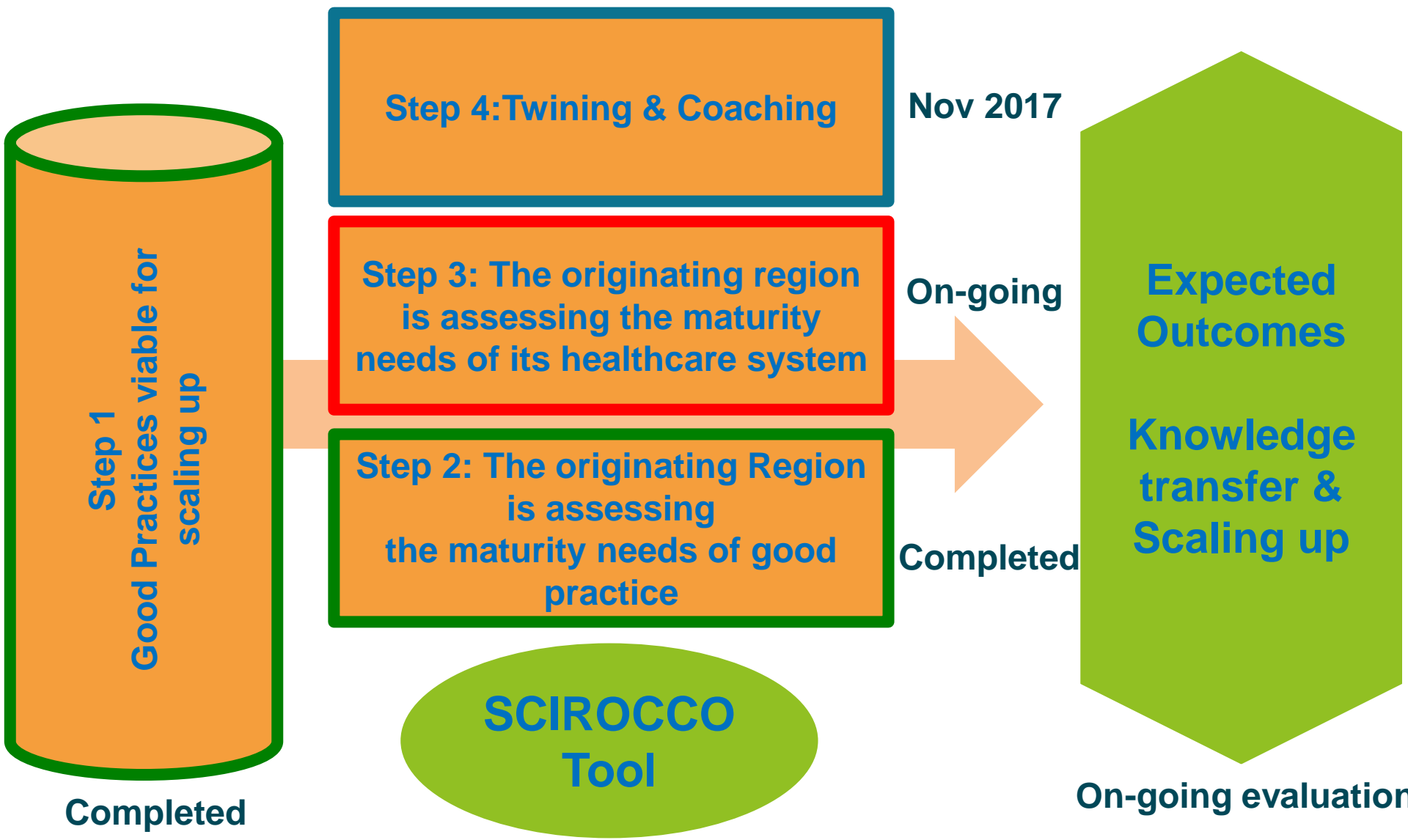
Active Citizenship

"The SCIROCCO tool helps us to understand the level maturity of eHealth in our regions. It is also useful as it provides information on the different views of regional stakeholders and for the provider to better understand patient needs."



Self-assessment Tool for Integrated Care

Progress so far...



Next steps: Comparing the regional context

Region 1



Region 2



Q5 Q6 Q7 Q8 Q9 Q10 Q11 Q12

Health Services

Systems are not designed to support integrated care
eHealth services to support integrated care are being piloted
eHealth services to support integrated care are deployed but there is not
coverage
eHealth services to support integrated care are available via a region-
of these services is not mandated
ed use of regional/national eHealth infrastructure across the health-
ional eHealth services used by all integrated care stake-

to justify your rating here what would you say (please provide a few

This uses a shared record that is accessible widely across agencies.
So far there is no plan to develop a shared record but there is some experimentation

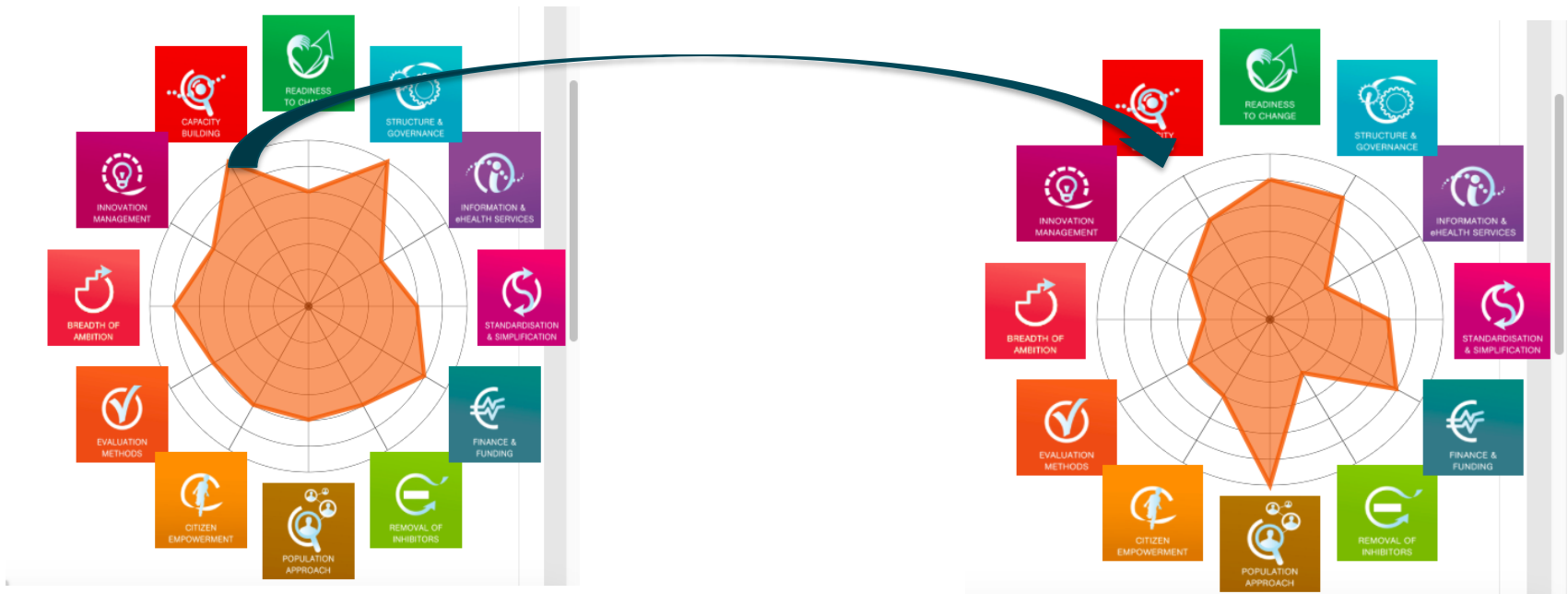


(Twinning and coaching of Regional contexts)

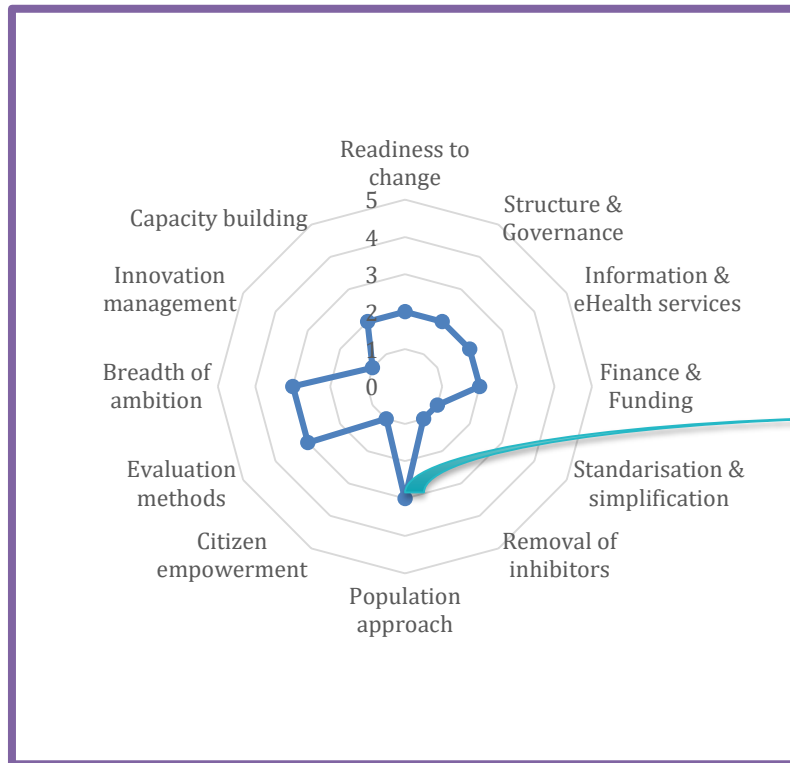
The Maturity Model can be used by Policy makers of two regions to analyse weaknesses and strengths between regions and activate coaching processes

Region 1

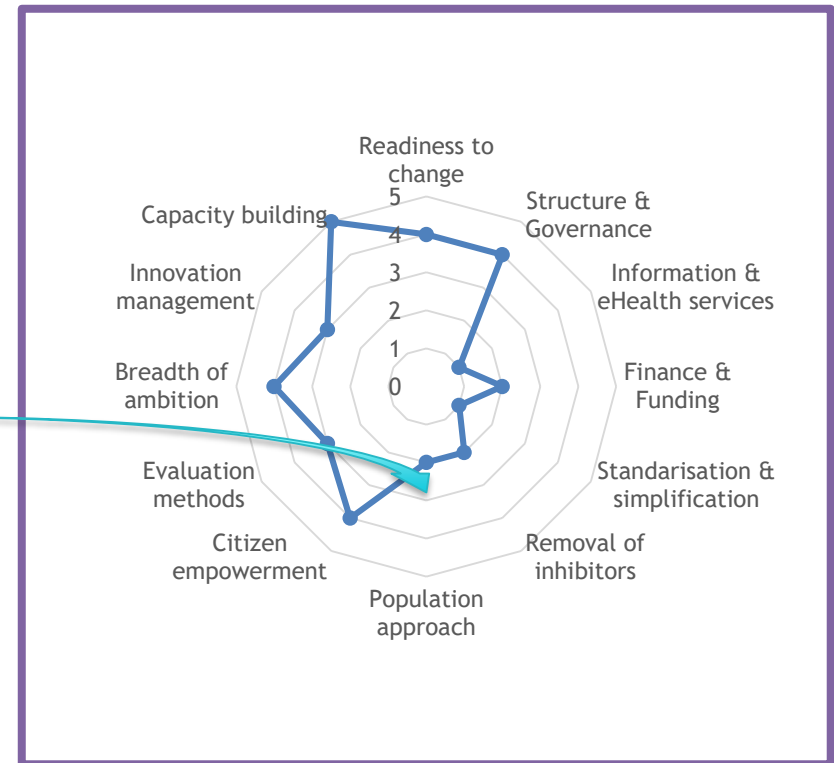
Region 2



GP1



GP2

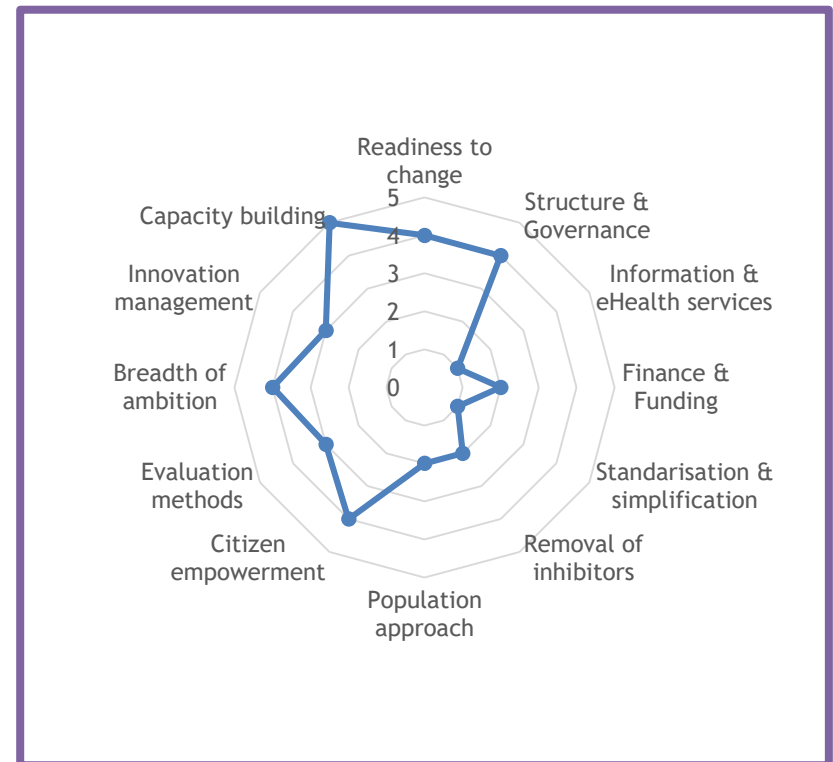


Assessment of a Good Practice versus the Regional Context

Region 1



Good Practice in Region X



Key Messages

- ▶ “SIROCCO tool 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 and **orientate efforts to the most effective collaborations**” – Attica region, Greece
- ▶ “A good way to reflect “**where we are**” and a good basis for structured discussion on “**where we want to be**” – Norrbotten region, Sweden

Key Messages

- ▶ “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
- ▶ “SCIROCCO tool 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

SCIROCCO Engagement & Sustainability



@ SCIROCCO_EU



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- Flanders, Belgium
- Catalonia, Spain
- Skane, Sweden
- Wales, UK
- Attica, Greece
- Saxony, Germany
- Iceland
- Lombardy, Italy
- Kaunas, Lithuania
- Netherlands
- Stawanger, Norway
- Lodz, Poland
- Region of South Denmark
- Asturias, Spain
- Northern Ireland, UK
- Amadora, Spain
- Gesundes Kinzigtal, Germany
- Murcia, Spain
- Valencia, Spain
- Extremadura, Spain
- Carinthia, Greece
- Badalona, Spain
- Sofia, Bulgaria
- Campania, Italy

Grazie per l'attenzione



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