FROM B3 MATURITY MODEL ON INTEGRATED CARE TO A VALIDATED TOOL

Dr Andrea Pavlickova

TEC & Digital Healthcare Division, Scottish Government

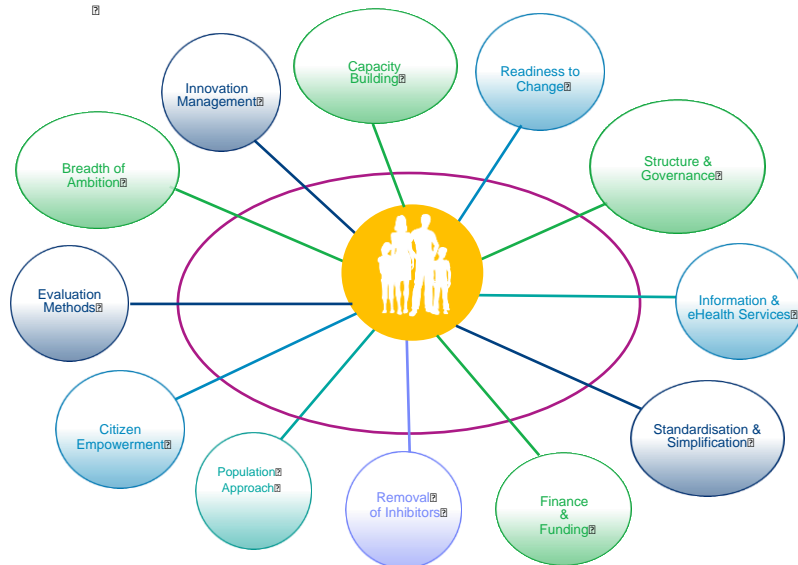Co-funded by
the Health Programme
of the European Union

From B3 Maturity Model to the SCIROCCO Tool
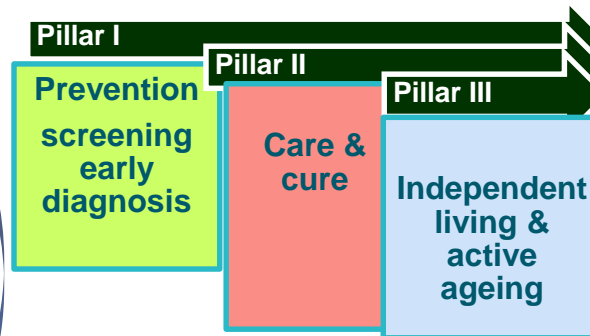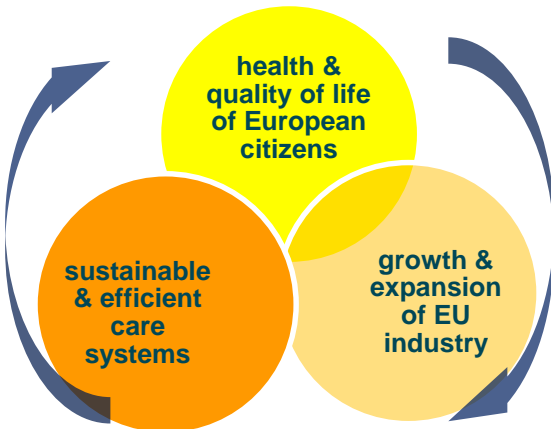
Start of SCIROCCO Journey (2012)
European Innovation Partnership
on Active and Healthy Ageing

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

Specific Actions

+2 HLY by 2020
Triple win for Europe

health & quality of life of European citizens

sustainable & efficient care systems

growth & expansion of EU industry

Pillar I

Prevention screening early diagnosis

Pillar II

Care & cure

Pillar III

Independent living & active ageing

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

EUROPEAN INNOVATION PARTNERSHIP
on Active and Healthy Ageing

European Commission > EIP on AHA > Action Groups > B3

About the partnership | Action Groups | Reference Sites | I2M | Blueprint | MAFEIP | Library | News | Events

A1 Adherence to prescription
A2 Falls prevention
A3 Lifespan Health Promotion [...]
B3 Integrated care
Key documents
Documents of meetings
Achievements
C2 Independent living solutions
D4 Age friendly environments

Action Group B3
Replicating and tutoring integrated care for chronic diseases

The Action Group on integrated care [...] presenting around 120 multi-stakeholde[...] administrations, local o[...]

Challenges of Scaling-up

How to use existing evidence?

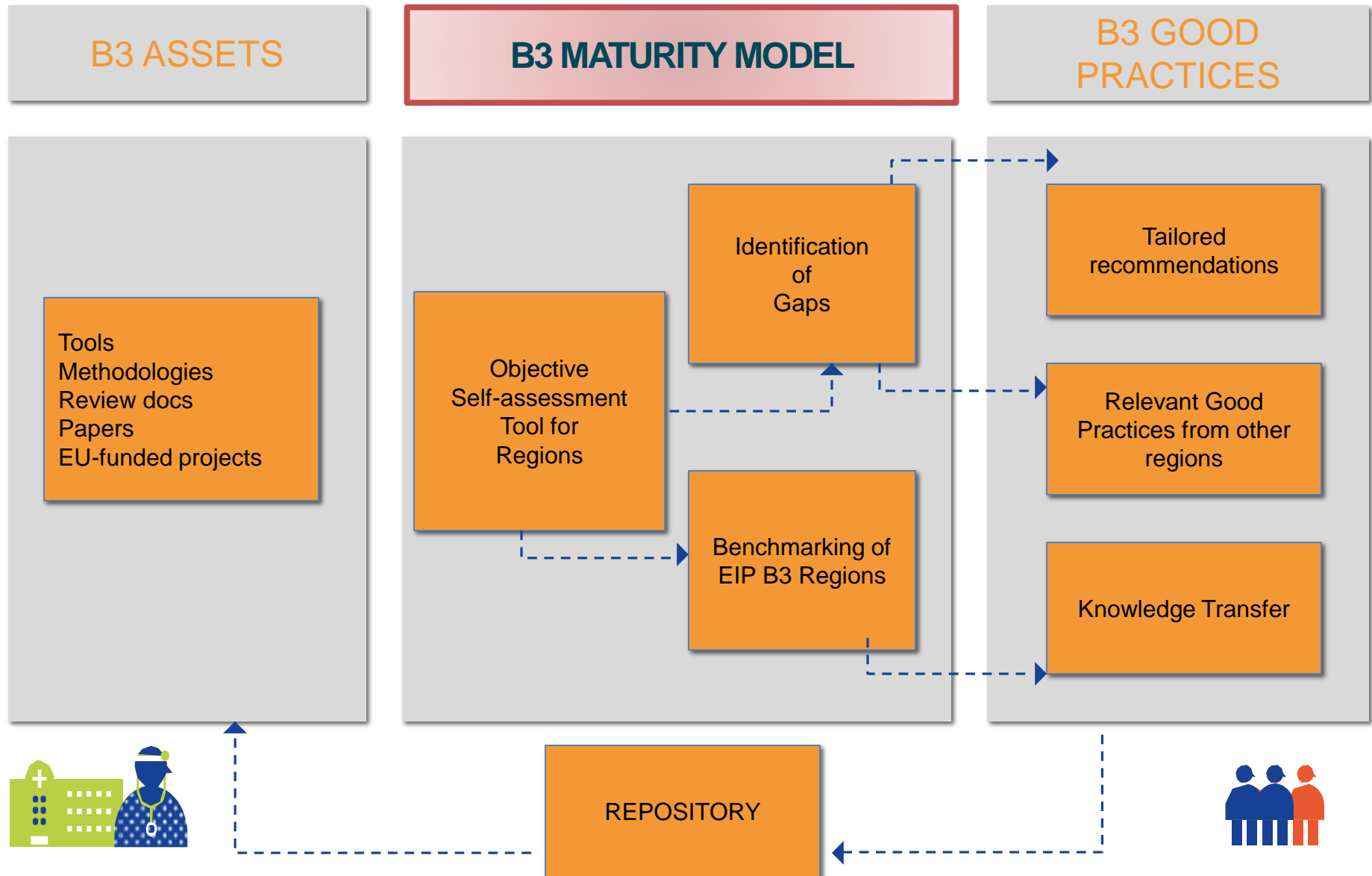**What elements of Good Practice are transferable?**

What is my local environment like?

Is my environment ready to adopt a Good practice?

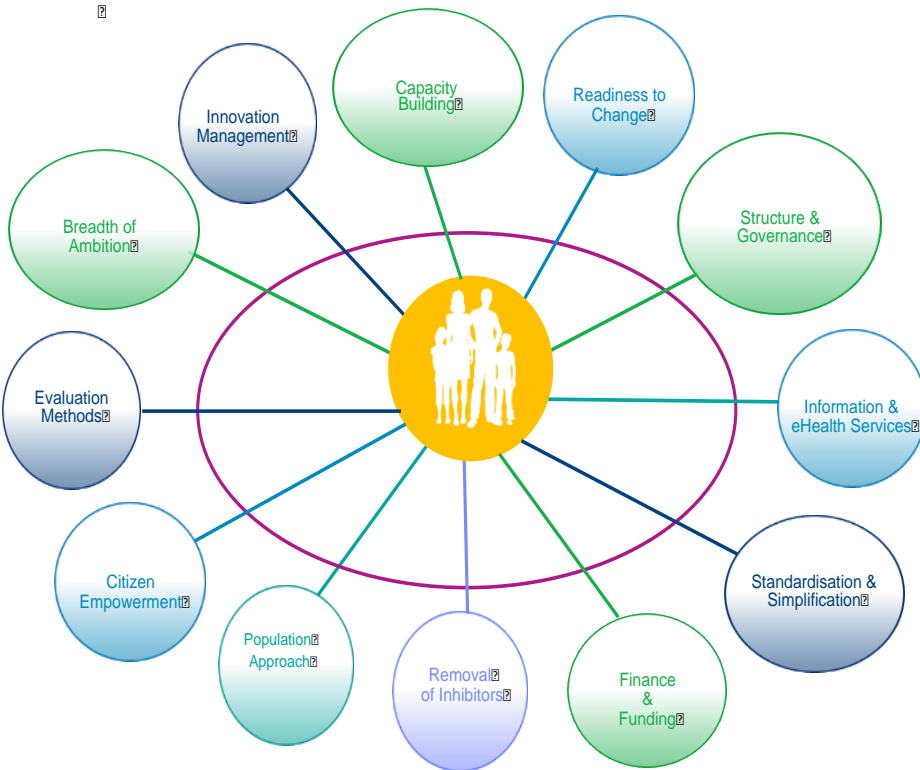**What information do I need to enable the adoption of Good Practice?**

How to create local conditions for the adoption of Good Practice?

scirocco
Scaling Integrated Care in Context

4

From Challenges to Opportunities

B3 ASSETS

Tools
Methodologies
Review docs
Papers
EU-funded projects

B3 MATURITY MODEL

Objective Self-assessment Tool for Regions

Identification of Gaps

Benchmarking of EIP B3 Regions

B3 GOOD PRACTICES

Tailored recommendations

Relevant Good Practices from other regions

Knowledge Transfer

REPOSITORY

B3 Maturity Model for Integrated Care

Qualitative assessment based on interviews and desk research

Phase 1: Interviews with 6 regions involved in EIP AHA (Feb – April 2014)

Athens; Basque Country; Catalonia; Galicia; N Ireland; Saxony

Phase 2 Interviews with 6 regions involved in EIP AHA (Jan– March 2015)

S Denmark; Skane; Scotland; Puglia; Medical Delta (Delft); Olomouc

Scirocco
Scaling Integrated Care in Context

6

Further Development of B3 Maturity Model

Finance & Funding

Objectives:

Changing systems of care so that they can offer better integration requires initial investment and funding; a degree of operational funding during transition to the new models of care; and on-going financial support until the new services are fully operational and the older ones are de-commissioned. Ensuring that initial and on-going costs ca uses the full range of mechanisms from regional/nation Union investment funds, public-private partnerships (PPP)

Indicators of maturity:

Use of regional/national stimulus funds; innovative procur multi-year contracts for IT service provision).

Assessment:

0 – No special funding allocated or available

1 – Fragmented innovation funding, mostly for pilots

2 – Consolidated innovation funding available through competitio

3 – Regional/national (or European) funding or PPP for testing an

4 – Regional/national funding for scaling-up and on-going operati

5 – Secure multi-year budget, accessible to all stakeholders, to en

European Innovation Partnership on Active and Healthy Ageing

B3 Action Group on Integrated Care

**Maturity Model for Adoption of Integrated Care Enabled by ICT**

Quick Start Guide

The B3 Maturity Model is a conceptual model intended to show how healthcare systems are attempting to deliver more integrated care services for their citizens. It has been derived from interviews with 12 European countries, or regions within a country, responsible for healthcare delivery. The many activities that need to be managed in order to deliver integrated care have been grouped into 12 'dimensions', each of which addresses a part of the overall effort. By considering each dimension, assessing the current situation, and allocating a measure of maturity within that domain (on a 0-5 scale), it is possible for a country or region to develop a 'radar diagram' which reveals areas of strength, and also gaps in capability. Using these insights, and comparing the radar diagram with those of other regions/countries that have conducted the same exercise, it should be possible to find expertise to fill the gaps in capability, and to offer to others knowledge and experience from the sites' areas of strength.

This Quick Start Guide is intended to provide a simple description of the model and its dimensions, along with guidance on how to measure maturity, so that an assessment can be quickly carried out.

Scirocco
Scaling Integrated Care in Context

HOWEVER,

VALIDATION & TESTING IS NEEDED
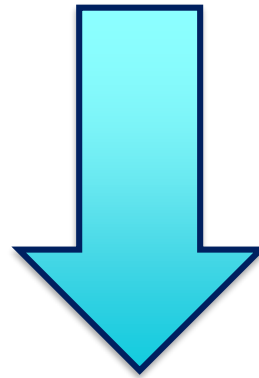
2016
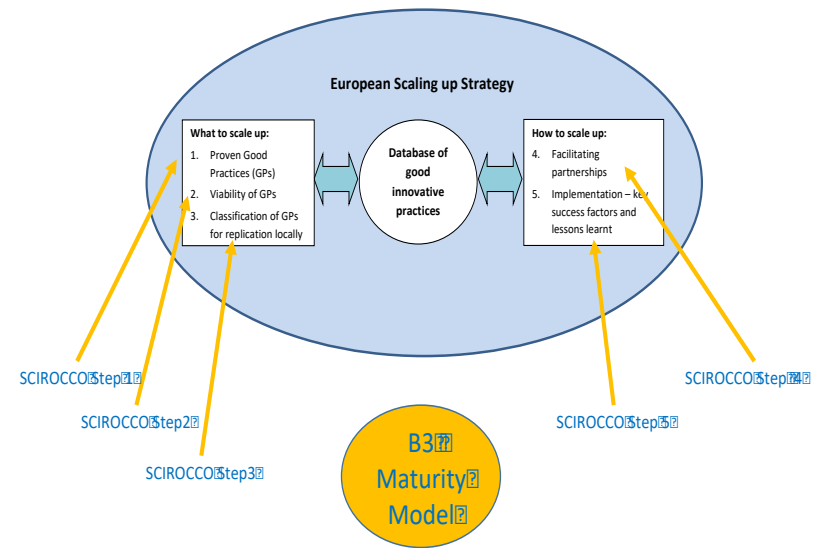
SCIROCCO Project – Who are we?

EU Health Programme (CHAFEA)

➢ **Budget:** €2,204,631.21

➢ **Start:** 1 April 2016

➢ **10 Partners:**

SCIROCCO Community – Who do we work with?

BLOCKS

TOOLS AND METHODOLOGIES TO ASSESS INTEGRATED CARE IN EUROPE

Report by the Expert Group on Health Systems Performance Assessment

European Innovation Partnership on Active and Healthy Ageing

euregha
European Regional and Local Health Authorities

AER
Assembly of European Regions

optimity
ADVISORS

Australia
Alberta, Canada
Flanders, Belgium
Sofia, Bulgaria
Region of Southern Denmark
Gesundes Kinzigtal, Germany
Saxony, Germany
Attica, Greece
Carinthia, Greece
Iceland
India
Campania, Italy
Lombardy, Italy

- Kaunas, Lithuania
- Amadora, Portugal
- Asturias, Spain
- Badalona, Spain
- Catalonia, Spain
- Extremadura, Spain
- Murcia, Spain
- Valencia, Spain
- Skane, Sweden
- Northern Ireland, UK
- Scotland, UK
- Wales, UK

ACT@Scale

smartcare

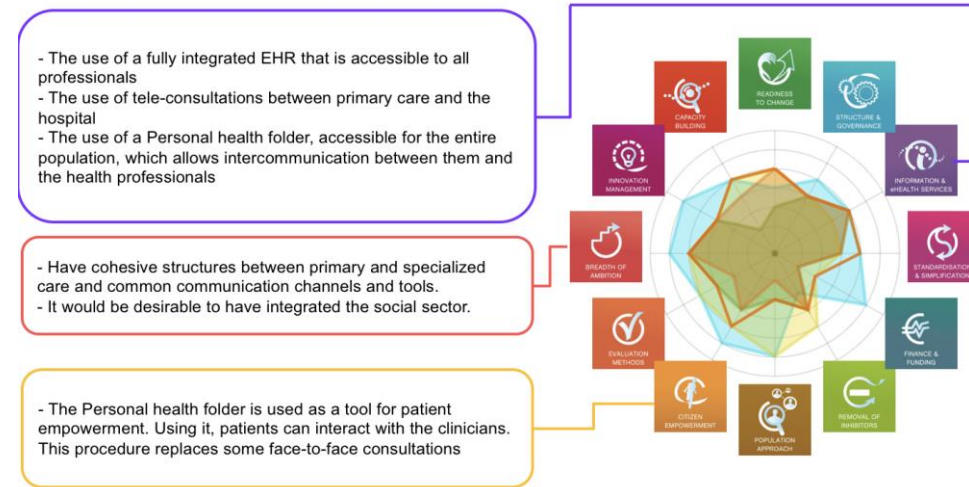BeyondSilos

Scirocco
Scaling Integrated Care in Context

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

The ambition is to address the challenges of adoption and scaling up of integrated care by:

1. Assessing:

- Maturity requirements of the Good Practice in order to understand transferable elements of the Good Practice/intervention for the adoption and scaling-up.

- Maturity of healthcare system for the adoption of integrated care solutions in order to understand the local context/conditions enabled the implementation of integrated care.

- The use of a fully integrated EHR that is accessible to all professionals
- The use of tele-consultations between primary care and the hospital
- The use of a Personal health folder, accessible for the entire population, which allows intercommunication between them and the health professionals

- Have cohesive structures between primary and specialized care and common communication channels and tools.
- It would be desirable to have integrated the social sector.

- The Personal health folder is used as a tool for patient empowerment. Using it, patients can interact with the clinicians. This procedure replaces some face-to-face consultations

Final Spider Diagram after the Consensum workshop

Strengths:
Structure & Governance
Finance & Funding
Capacity Building

Weaknesses:
Citizen empowerment
Information & eHealth services
Population approach

These results are not surprising but in line with other evaluations. The region has invested heavily in governance and financial terms. The next step will be to develop a capillary service across the entire regional territory.

cirocco
Scaling Integrated Care in Context

The ambition is to address the challenges of adoption and scaling up of integrated care by:

2. Facilitating

- Better understanding of the **strengths and weaknesses and areas of improvement** in the local healthcare systems in order to adopt integrated care.

- **Multi-stakeholder discussions** and consensus-building.

- Knowledge transfer and **effective learning** through the **systematic flow of appropriate information** and evidence between the between adopting and transferring entities.

No common/systematic approach. Fragmented evaluations when services are implemented

No specific model used for projects or scaling up where you can find support to overcome known inhibitors. Different models have been used with different results

We do have a somewhat fully integrated health and social care service with collaboration on all three levels but there are still parts that can be improved

Everyone has access to their own EHR, lab-results, open comparisons, quality registers, specific national registers. Person-centered approach, strategy and action plan for citizen involvement

Maturity Requirements of Advance care planning

Maturity Assessment of Norrbotten Region

Easy/ Possibly/ Showstopper

cirocco
Scaling Integrated Care in Context

Expected Outcomes vs Achievements

➢ Improved access to learning embedded in Good Practices

- B3-MM and its Tool tested to assess the maturity requirements of Good Practices

➢ Improved capacity of regions for adoption of Good Practices

- B3-MM and its Tool tested in the process of assessing maturity of healthcare systems for integrated care

➢ Faster adoption and scaling up of Good Practices in the provision of integrated care

- B3-MM and its Tool tested in the process of twinning and coaching in order to facilitate knowledge transfer

scirocco
Scaling Integrated Care in Context

Expected Outcomes vs Achievements

➢ Improved informed decision-making on European, national and local level

- SCIROCCO has captured the lessons learned from using the B3-MM and its tool, including policy recommendations

➢ Increased use of the B3-MM and its Tool in the process of scaling-up

- SCIROCCO has provided validated and refined Tool

FROM B3 MATURITY MODEL ON INTEGRATED CARE TO A VALIDATED TOOL

Prof Bert Vrijhoef & Liset Grooten, MSC

Vrije Universiteit Brussels

Co-funded by
the Health Programme
of the European Union

Complexity of Integrated Care

- Challenge to obtain valuable insights.

- Need to understand the context and environment of integrated care interventions.

Testing the B3 Maturity Model / SCIROCCO Tool

- Our objective: To systematically test the validity and reliability of the B3-MM/ SCIROCCO tool.

- Does the B3-MM assesses what it is designed for, namely the maturity for integrated care?

1

2

3

4

5

Content Validity of B3-MM

Step 1: *Does the content of B3-MM, reflect what it is intended to?*

| 1 |
| 2 |
| 3 |
| 4 |
| 5 |

Methods: Literature review and Delphi survey.

Outcomes: The wide range of dimensions and measurement scales reflect the maturity for integrated care.

Grooten L, Borgermans L, Vrijhoef HJM. An Instrument to Measure Maturity of Integrated Care: A First Validation Study. International Journal of Integrated Care. 2018;18(1):10.

Structural validity of SCIROCCO tool

Step 2: *Do all the 12 dimensions contribute to assessing maturity for integrated care?*

| 1 |
| 2 |
| 3 |
| 4 |
| 5 |

Method: Quantitative analysis to examine the structure of the Tool in the dataset.

Outcomes: All 12 dimensions contribute to assessing maturity for integrated care.

Scirocco
Scaling Integrated Care in Context

Convergent Validity of SCIROCCO tool

Step 3: *Does the SCIROCCO tool show a relation with another tool which is supposed to assess a similar concept?*

Method: Comparing the SCIROCCO tool to another test that assesses a related concept.

Outcomes: Some support for convergent validity was found.

| 1 |
| 2 |
| 3 |
| 4 |
| 5 |

scirocco
Scaling Integrated Care in Context

Reliability of SCIROCCO Tool

Step 4: *Are the responses by stakeholders to the 12 dimensions on the tool consistent with each other?*

Method: Quantitative analysis to examine the reliability of the tool in the dataset.

Outcomes: The SCIROCCO tool showed good internal consistency.

Step 5: *Test-retest assessment is in progress.*

| 1 |
| 2 |
| 3 |
| 4 |
| 5 |

cirocco
Scaling Integrated Care in Context

In short

- We found initial support for the SCIROCCO tool in assessing the maturity for integrated care.

- Further testing aspects of validity and reliability is recommended.

Take Home Message

The SCIROCCO tool offers regions a tailored approach, facilitating progress in integrated care.

THANK YOU!

@ SCIROCCO_EU