SCIROCCO SELF-ASSESSMENT TOOL FOR INTEGRATED CARE

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SCIROCCO Project – Who we are?

EU Health Programme (CHAFEA)

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

![Logos of the project partners]

Co-funded by the Health Programme of the European Union
SCIROCCO Community – Who do we work with?

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
Why SCIROCCO?

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?
Why SCIROCCO?

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.

SCIROCCO Tool for Integrated Care
Objectives of SCIROCCO
From B3 Maturity Model to SCIROCCO Tool
SCIROCCO
Self-assessment tool
with an objective to
assess
maturity/readiness for
the adoption of
integrated care and
facilitate knowledge
transfer and learning.
SCIROCCO self-assessment tool is an **online tool**

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
- Formation of task forces, alliances and other initiatives
- Governance established at a regional or national scale
- Roadmap for a change programme defined and explicit
- Full, integrated programme established, with full buy-in

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

Interested to test?

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

SCIROCCO tool addresses the challenges of adoption and scaling up of integrated care by:

- 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

**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.
SCIROCCO tool addresses 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 adopting and transferring entities.
What is next?

SCIROCCO Exchange
“Under GA negotiation”
1 January 2019

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