







Assessing the digital health transformation with the SCIROCCO Exchange tool in Puglia Region

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Maturity Model for Integrated Care

B3 Action Group

SCIROCCO Project

SCIROCCO Exchange Project











SCIROCCO Exchange

EU Health Programme

Budget: €2,649,587

9 Health and Social Care Authorities:

- Flanders Agency for Health and Care, Belgium
- Optimedis, Germany
- AReSS Puglia, Italy
- Vilnius University Hospital, Latvia
- National Health Fund, Poland
- Scottish Government, Scotland (Coordinator)
- Safarik University, Slovakia
- Ministry of Social Affairs, Slovenia
- Osakidetza, Basque Country, Spain

3 Universities and Competence Centres

- University of Edinburgh, Scotland
- University of Valencia, Spain
- Kronikgune, Basque Country, Spain

2 Membership Organisations

- EHTEL (European Health Telematics Association), Belgium
- AER (Assembly of European Regions), France







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Objective of the Assessment in Puglia

The objectives of the assessment process:

- Capture the perceptions of stakeholders on maturity and readiness of their healthcare systems for the adoption of integrated care;
- Identify strengths and weaknesses of LHAs in adoption of integrated care;
- Facilitate multi-disciplinary discussions and dialogue of stakeholders involved, including consensus on the current progress towards integrated care and future actions to address the gaps;
- Provide basis for further improvement of a particular domain of integrated care, as digital transformation, through knowledge transfer and twinning and coaching activities.

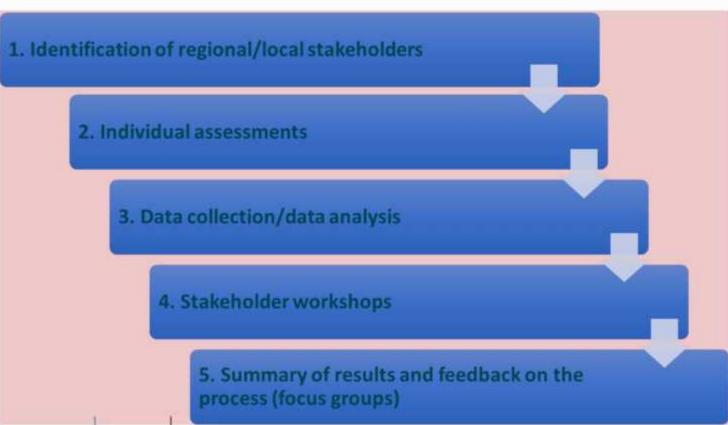








Maturity Assessment Process











Local Stakeholders (x 6 LHAs)

The engagement process has been based on:

information, consultation, participation, and feedback for each LHA.

Each LHA has offered a team of 5 stakeholders (7 in two LHAs). The local stakeholders comprised:

- Top management (e.g. CEO, CMO, CAO);
- Representative of the H&SC District;
- Representative with medical background (e.g. Care Manager, Chief Nurse);
- Representative of the ICT Team; and
- Patients' group Representative.











Foggia

Andria Trani

Taranto



Assessments - Process







Consensus stage





























Example of Brindisi Local Health Authority



Brindisi Local Health Authority final spider diagram







The strengths emerged across BR LHA, on which majority of the stakeholders agreed, are: Q1 - Readiness to Change; Q2 - Structure & Governance; Q10 - Breadth of Ambition; and Q11 - Innovation Management.

All the stakeholders agreed that the greatest weakness of the organisation BR LHA is the lack of information and communication.

Culture has emerged as a relevant factor for an effective change and modernisation of the LHA integrated care model. As more information devises and e-health services will be available for citizens in the further months and years, it is important to work on the resistance to change. The participants identified training and information as levers of change.

The TeleHomeCare Project













Summary of Spider Diagrams



Bari Local Health Authority final spider diagram



Foggia Local Health Authority final spider diagram



Brindisi Local Heath Authority final spider diagram



Lecce Local Health Authority final spider diagram



Barletta-Andria-Trani Local Health Authority final spider diagram



Taranto Local Health Authority final spider diagram







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Summary of Maturity Dimensions

	Tool Dimensions												
Organisation	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12	
BA LHA	3	3	2	4	1	2	3	4	3	4	3	3	
BR LHA	3	4	4	3	3	3	3	4	3	4	3	3	
BTLHA	3	2	3	4	1	1	4	2	2	4	3	3	
FG LHA	4	2	3	2	3	4	4	3	1.	1	2	2	
LE LHA	2	2	4	3	4	3	3	3	3	3	2	3	
TA LHA	2	2	3	3	.0	1	3	3	2	1	2	3	

Dimensions						
Q1	Readiness to Change	Q7	Population Approach			
Q2	Structure & Governance	Q8	Citizen Empowerment			
Q3	Digital Infrastructure	Q9	Evaluation Methods			
Q4	Process Coordination	Q10	Breadth of Ambition			
Q5	Finance & Funding	Q11	Innovation Management			
Q6	Removal of Inhibitors	Q12	Capacity Building			











Conclusions - 1/2

- The level of maturity of each LHA health and social care system varies from medium to high, in line with the Puglia Region status of 4-stars Reference Site in the EU Innovation Partnership on Active and Healthy Ageing.
- Regional managers and clinicians tend to score higher on the maturity progress in relation to each LHA individual context more than citizens' representatives, as information is not shared consistently.
- Major strengths include: Q3 Digital Infrastructure; Q4 Process Coordination; Q8 - Citizen Empowerment; and Q7 - Population Approach.
- The dimensions Q6 Removal of Inhibitors; Q5 Finance and Funding; and Q9 -Evaluation Methods still have room for improvement.









Conclusions - 2/2

- The emerging picture reveals a dynamic scenario in which several e-Health good practices are on the verge of being scaled up as a result of a positive assessment by the Regional HTA centre.
- A lot of resources have been invested in integrated care delivery, nevertheless cultural and infrastructure gaps may result in barriers.
- Inhibitors are still present among Puglia LHAs, and require systematic and organised action to be successfully removed (i.e. knowledge sharing and training).
- Funding approaches need to support the delivery of integrated care in a smoother way, so that the timeline is reduced and investments can be more dynamically made within a structured delivery plan.











Take home message...s

- The implementation of integrated care models is the only viable way to offer improved QoL to ageing population and efficiently respond to chronic care patients' needs in Puglia.
- Mutual learning and knowledge transfer are key if we want to achieve a sustainable and resilient care model for the future, given the constraints that many EU countries are currently facing.
- SCIROCCO Exchange Tool can work as enabler for the implementation process of the existing integrated care model Care Puglia 3.0, and multiple good practices disseminated across the Region.









Take home message...s on the SE Tool

- SCIROCCO Exchange on-line Tool has enabled multiple stakeholders to provide ratings and justifications on 12 specific dimensions relevant to integrated care and digital transformation.
- SCIROCCO Exchange on-line Tool has enabled the stakeholders with diverse backgrounds and job roles to share and discuss their perceptions on the given dimensions.
- SCIROCCO Exchange on-line Tool has enabled to fulfill information gaps and needs.









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