Planning of the local innovation process for the development of Population Intervention Plans in an integrated health system

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Abstract:

Introduction: Local Integrated Health Systems In the Basque country and elsewhere, a necessity of change regarding the management of the national health system has been identified. The current structure centered model needs to evolve to local integrated health systems (LIHS), able to provide continuity of care, be proactive and empower patients. A transformation of system-wide delivery was made in the Basque Country, promoting and planning the local innovation process.

Methods: Planning the Innovation The following actions were taken during the planning phase: a) reserve of a bottom up innovation space in the funding system, defining subject and objectives, b) reserve of time for the LIHS to develop experiences and care provision organizational models for pluripathology (PP) patients, c) Collaborative sessions, d) identification of key elements and success factors and e) elevation to Population Interventional Plans (PIPs).

Results: Deployment Process The deployment process consisted in the following steps, (which used the above methodology): 1) Promotion of Bottom Up (BU) experiences 2) Identification of interventions targeted to homogeneous groups and sharing common objectives: in 2010, 6 LIHS had developed new ways of intervention on PP patients and by 2011, this number was elevated to 8. 3) BU project analysis focusing on organizational and personnel related key elements. 4) Elevation to PIPs: selection of specific population using population stratification tool, design of a care pathway, coordination and communication tools, and evaluation framework. 5) PIPs deployment: in 2012, PIPs were displayed all over the Basque Health Service, subjected to continuous benchmarking (e.g analysis of the detected needs, continuous improvement, adaptation and anticipation of the macro system to the necessities of the LIHS).
Conclusions: Lessons learned PIPs are able to induce positive crosstalk between different LIHS looking after the same population, leading them to define and decide how to organize specific PIP related tasks (e.g. where to locate the resources and access mechanisms for patients) and allowing the extension of the PIPs all over the LIHS. Results show that the innovative route chosen is successful and thus, this kind of initiative should be kept, encouraging the leading projects.

Keywords
planning, innovation, population interventional plans, Basque Country

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