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Conference Abstract

How to spread a best practice within a Regional Healthcare System? The case of diabetic foot in Tuscany

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Abstract

Purpose: This work aims to describe the experience carried out for the diabetic foot pathway in Tuscany in order to identify the determinants of the best performance and to share among providers how to organise patient pathway to achieve better outcomes.

Theory: Despite overall regional good performance, also at national level, results related to diabetic foot show great variability among Tuscan Local Health Authorities (LHAs): LHAs diabetes-related major amputations rates per 1 million residents in 2012 range from 11,44 to 97. Yet, data across years show persistent good performance in some context, in particular for "Arezzo" LHA.

Methods: We analysed different settings for diabetic foot care in Tuscany through questionnaires and interviews to professionals in charge of diabetic foot LHAs outpatient clinics in order to understand how they organise the care-pathway.

Findings: We found out that the best performers showed higher level of integration in the different phases of the patient's flow. The health professionals proposed how to re-organise pathway in order to enhance integration, improve performance and reduce variability among LHAs.

Discussion: Mapping different organisation in patient's pathway and involving practitioners to discuss data and organisational variability represent a methodology to understand how to enhance integration among providers in order to meet patients' need.

Keywords:

best practice, diabetic foot, integration, diabetes, benchmarking, variability

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