

CONFERENCE ABSTRACT

What are the regional governance structures at early stages of Integrated Care design and management in a LMIC Region under economic crisis?

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Objectives of the study: To set the institutional and organization base at regional and community level so as to foster further the development of an integrated care model for elderly care in rural and outermost areas of LMIC and most particularly in Greece. The activities would aim at shifting to community- based care bundle in personalized care management, community nurse based care and at home model, rehabilitation and assisted living services by creating Health Ecosystems that would favor the creation of spin-off structures for their autonomy at local level.

The specific objectives of this study phase were:

1. Comprehensive outpatient care needs assessment mapping and care services integration for the elderly in the remote pilot area
2. Alignment of the healthcare and social care professionals of the area with the aim of designing the appropriate clinical integration and health and care provision organization
3. Creation of a Living Lab that would supervise, design and manage the institution and capacity building activities for the care service and resource integration in the area
4. Creation of a nurse managed Patient Advocacy Center (PAC) with a public private partnership and a commercial spin – off as a result of the Living Lab that would centralize sustainably management and delivery of integrated and long term care in the region .

METHODS used per Specific Objective

1. Collaboration with the National team that conducts the 1st first National Study of Morbidity and Risk Factors Assessment <http://emeno.gr/> to collect data on the pilot areas. Create a self-assessment CGA questionnaire and conduct structured interviews for CGA to the pilot areas if needed, to the priority target population to map the needs and design service integration
2. Stakeholder consultation meetings with the aim of building the foundation of clinical and professionals integration in the area e.g. primary healthcare delivery alignment and integration with social workers and so forth

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3. Setting a Living Lab with selected cohorts of the area to raise awareness, trial and test health technology and assisted living innovation products, provide business opportunities for investors, conduct clinical trials for rehabilitation efficiency, provide the platform for scientific exchange in supporting the region in integrating care and LTC and treating external interventions in the same field for the region

4. Setting the administrative and institutional structure of a nurse- managed PAC that will assure health monitoring, act as an E-healthhub, service management and organization center, health and care professional's focal point and commercial activities management seat.[note - due to the financial crisis this will unlock from the moment that the capital controls of the banks will be lifted]

There is a need for regional HC policy coordination, to scale up on-going innovative solutions adapted to a regional context in order to reduce budgetary costs for elderly care at regional and national level and to provide with the organizational model at community scale to assure the delivery of care in a sustainable manner and integrated into the administrative and institutional setting of the region.

The research question was how to deliver a Design – for – All Integrated Long Term Care model in LMIC Regions with reverse availability ratio of budgetary resources to the rising needs of elderly care in a co-morbidity context of an ageing population –that is a challenge for the majority of the European Regions today with remote areas specially those under budgetary discipline.

The question is what regions and municipalities can do to integrate health and care delivery when financial means are scarce and when know how and awareness on how Integrated Care should be organized and what the benefits of it are, is missing.

This pilot research project was stemming from the McKinsey study "Greece 2020" suggestion for a Greek National Strategy for Integrated Elderly LTC in Greece as opposed to in-hospital episode based care, one of the 6 Rising Stars for GDP rise until the year 2020.

Results obtained: 1) Hybrid Health Ecosystems have been created in pilot areas with the participation of all related social care givers, health providers, GP and nurses, hospitals and clinics and health resorts as well as local administrations and public and private companies related to healthcare provision.

2) One Living Lab is being promoted by the Universities and Development Companies of Municipalities coordinating Assisted Living Solutions.

Conclusions reached: Knowledge and state financial and human resource means are the apparatus by which Integrated Care is fostered in strong economies.

In weak economies that usually are in need of structural reforms and that do not favor knowledge sharing and innovation, the only stepping stones to integrate care services, clinical services and professional alignment are by setting structures that do not depend on financial means.

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Instead, the resource value is on the institutions set (PPP, Living lab, PAC) that will produce the service added value by political consensus, establishing clusters and managing change in a way that distributes the responsibilities and benefits equally throughout the entire network of integrated care at regional and community level (e.g. for instance the budget for community based LTC is not run separately but by a common pot run by the PAC but supervised by the Board of Mayors). At the end these structures have to generate income, thus maintaining sustainability of the structure and service provision.

References:

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