
CONFERENCE ABSTRACT

CITIZENS' CO-DESIGN FOR IMPLEMENTING VALUE-BASED IN INTEGRATED CARE

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Introduction

Value-based health care is a delivery model in which providers, including hospitals and physicians, together with citizens/patients aim to reach the best citizen health outcomes (NEJM Catalyst, 2017). Under value-based care agreements, providers are rewarded for helping citizens improve their health, reduce the effects and incidence of chronic disease, and live healthier lives in an evidence-based way. It is also a way of realising patient engagement in healthcare and give them the freedom to control their own health. However, to become truly influential, a focus on value would need to reach more broadly than health services to offer Integrated Care.

Theory

In this framework, the VALUECARE project recently funded by the H2020 programme aims to deliver efficient outcome-based integrated care to older people facing cognitive impairment, frailty and multiple chronic health conditions to improve their quality of life (and of their families) as well as the sustainability of the health and social care systems in Europe.

Results

As part of the work to be done, the VALUECARE concept will be designed together with end-users following an Experience Based Co-Design approach. For that, authors are analysing the co-creation value through the DART model (Dialogue, Access, Risk/Benefit and Transparency) to develop guidelines on how to co-design the VALUECARE solutions with end-users (older people and their families, health and social professionals and managers). Those guidelines will be used in the 7 pilot sites to implement national seminars, focus groups and World Café.

Discussion

Older citizens need to feel that they have the possibility and the power to influence their actual and future care pathway and tailor the service they receive. For that, the co-design activities will be implemented during the first stages of the VALUECARE project and will

be repeated at least two times during the project implementation as part of the iterative co-creation process.

Conclusion

Engaging older citizens in the design of the care they receive will increase their participation and adherence to treatment. Practical guidelines on this field will improve the service provided and the quality of life of end-users (patients and professionals).