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## POSTER ABSTRACT

### PROFESSIONAL EXPERIENCE IN AN INTEGRATED CARE MODEL

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**Introduction:** The study area is considered advanced in the implementation of new pathways and tools and also, with some initiatives like a social and health plan for integration among hospital, primary care centers and nursing homes.

Professional experience is considered the fourth aim to achieve being part of what is called the "Quadruple aim strategic model".

The main objective of our work is to explore the professional experience through the perception of participation, consensus, acceptance, utility and facilitating factors and barriers for the implementation in the Key Staff of this territory.

**Method:** After an informative meeting, 38 professionals were invited to answer an on line anonymous survey. All the participants were working as staff in Primary Care, Hospital and Nursing Homes of the territory. They were considered relevant intermediate responsible staff. The interview included 11 closed-ended questions with multiple options, and 14 open-ended questions. The results have been collected and analyzed. Quantitative data are shown in bar charts. The text of responses to the open questions have been analyzed in detail by identifying and grouping the responses by affinity.

**Results:** a The possibility of identifying and proposing improvements is perceived as high; b The degree of dissemination, training and acceptance is considered good and very good; c Participatory leadership and the possibility of contributing to multiple working groups, the emphasis on multi-way communication, and the existence of communication tools favor participation; d The acceptance by professionals is linked to the ease of implementation, the perception of usefulness and the response to problems, and to the achievement of good results in the early stages; e The perception of utility by professionals is influenced by the ease of implementation, improvement in results, improvement in communication among professionals and the possibility of giving more integrated and patient-centered care; f Among the actions evaluated as most useful are those that favor: the possibility of sharing clinical information, the promotion of non face-to-face communication, and improvements in care during health care transits.

**Discussion:** The survey that we have used was created by the research team to measure the professional experience related to the implementation of an integrated care model in a territory. There are only a few works in this field.

**Conclusions:** Factors that favor implementation: the existence of a common strategic framework shared by the leaders involved, the continuous communication and in multiple ways, the existence of outcomes that respond to the needs, the continuous and visible improvement, the motivation and professional implication and the computer tools, which aid the implementation. Barriers to transformation: the existence of diverse IT structures and resources, sometimes the discrepancy between priorities and objectives, resistance to change, shortage of time to introduce changes, lack of cultural change.

The results have been very useful to improve the integrated initiatives in this territory and in another like this.

**Limitations:** The survey was designed and tested in the same territory.

**Suggestion for future research:** We are extending the sample of participants and going to use the survey in another territories.

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**Keywords:** professional experience; evaluation; integrated care

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