Delivering Integrated Care on a National Scale: Future Health and Wellbeing

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Introduction

In November 2012 Ireland’s Department of Health issued Future Health: A Strategic Framework for Reform of the Health Service 2012 – 2015. Future Health states that “The current hospital-centric model of care cannot deliver the quality of care required by our people at a price which the country can afford. For this reason the Government is determined to create a new integrated model of care that treats patients at the lowest level of complexity that is safe, timely and efficient, and as close to home as possible. The aim of increasing integration is consistent with initiatives in other countries that seek to shift the emphasis from episodic, reactive care to care based on citizens needs which is evaluated as to its impact on outcomes.”

Aim

Five ICPs have been established, which are being introduced on a phased basis in 2015 and 2016. These are the Integrated Care Programmes for Prevention and Management of Chronic Disease: Older Persons; Patient Flow; Children and Maternity.

ICP Underlying Principles:

- Disease or condition currently affects significant population
- Potential to reduce burden of illness is high
- Potential to alleviate service pressure points/waiting lists/delays is significant
- Vulnerable groups (socially deprived/young/old/those with disabilities) are greatly affected by their condition
- Outputs will result in appropriate care delivered closer to preferred location and at an appropriate level of acuity
- The model should result in better quality of care
- The theme is considered appropriate by patient advocacy representatives
- Potential to obtain better value for money within health budget is high
- The services delivered by at least 3 Operating Divisions would feature in the associated Model Framework

Key Findings

The Integrated Care Programmes have adopted the following key features to promote the vision of developing the health service of the future for Ireland:

- Designed by clinicians, with formal structures agreed with the medical training colleges for input and sign-off. Similar structures in place with nursing & midwifery and with health and social care professionals
- Take a cross-organisational view – basing models of care and patient pathways around the needs of the patient rather than organizational structures
- Each Integrated Care Programme is chaired by an executive lead with deep knowledge and experience of the challenges of implementation of integrated services.
- Given the complex nature of integrated clinical reform, ensuring that the appropriate governance is in place is vital at all levels. The proposed governance ensures sound clinical design, approval, implementation at scale and sustainability into the future.

Improvement

The World Health Organisation (WHO) defines Integrated Care as “a concept bringing together inputs, delivery, management and organization of services related to diagnosis, treatment, care, rehabilitation and health promotion. Integration is a means to improve services in relation to access, quality, user satisfaction and efficiency” The vision for the establishment of Ireland’s ICPs is to improve quality, access and outcomes for patients and their families through the design of integrated models of care developed by clinicians, social care professionals and management working together sharing innovative solutions and evidence based practice.

Next Steps

- Establishing the appropriate Programme governance arrangements
- Programme scoping to identify 3-5 year priorities
- Developing and communicating the vision, mission and objectives for each of the Programmes
- From the outputs of the benefits realisation workshops developing project plans for Workstreams
- Establishing the 5 National Groups