Integrated Care: The National and International Scene

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Why change?

CHALLENGES...

Ageing population

Chronic disease and obesity

Hospital-centric MOC

Money

Fragmented
Lourdes Trolley figures top the national table

HSE head of surgery slams ‘self-serving’ politicians who stifle reform

Varadkar says extra staff will not fix crisis

Hospital’s overcrowding continues at record level

Nurses to vote on strike action as overcrowding becomes ‘intolerable’
david oliver @mancunianmedic
Also back to the future. Before the 4 hour target lengthy stays on trolleys in A&E corridors were normalised. Its happening all over again

1h
3 likes

david oliver @mancunianmedic
in two decades as a consultant geriatrician i have never seen so many delayed transfers of care - soul destroying for everyone in the system

1h
5 likes
6 loves

david oliver @mancunianmedic
faster assessment & discharge from acute front door & huge DTOC mean wards just like old long-stay wards i remember. Back to the future.

1h
1 like
2 loves
Do you ever notice how it's usually sick people that end up in hospitals?
High resource individuals

2% of the population

Use 50% of acute hospital and community prescribing resource

And 77% of bed days

Source: Information Services Division Integrated Framework. Data from 20/12/13
“If we do not learn to look after and to respect our elderly, we will be treated in the same way. The quality of a society, I mean of a civilization, is also judged by how it treats elderly people and by the place it gives them in community life.”

– Pope Francis
“WE SHALL REQUIRE A SUBSTANTIALLY NEW MANNER OF THINKING IF MANKIND IS TO SURVIVE.”

ALBERT EINSTEIN

© Lifehack Quotes
From heroic to effective and realistic medicine

Heroic Medicine ➔ Effective Medicine ➔ Realistic Medicine

Jacob Bigelow (1787–1879)
- "the amount of death and disease suffered by mankind would have been less if all disease were left to itself"

Austin Bradford Hill (1897–1991)
- British epidemiologist and statistician who pioneered the randomized clinical trial (e.g., streptomycin as treatment for tuberculosis, 1948, BMJ)

Scotland CMO report (2016)
- A move to:
  - Personalised approach to care
  - Shared decision making
  - Reduce unnecessary variation
  - Reduce harm and waste
  - Manage risk better
  - Become improvers & innovators
High Reliability Organisations

- Supportive Leadership
- Philosophy of quality as everyone’s responsibility
- Individual accountability
- Clinical champions
- Effective Feedback
The dimensions of quality

Safe
Avoiding harm to patients from care that is intended to help them.

Effective
Providing services based on evidence and which produce a clear benefit.

Timely
Reducing waits and sometimes harmful delays.

Efficient
Avoiding waste.

Person-centred
Establishing a partnership between practitioners and patients to ensure care respects patients’ needs and preferences.

Equitable
Providing care that does not vary in quality because of a person’s characteristics.
WHY SHOULD I FILL OUT THIS FORM? IT WOULD TAKE AN HOUR AND IT DOESN'T EVEN APPLY TO ME.

I DON'T MAKE THE RULES. I JUST APPLY THEM WITH A HELPLESS AND DEFEATED ATTITUDE.

YOU'RE DOING AN EXCELLENT JOB.

SEVEN MORE HOURS UNTIL QUITTING TIME.
National Clinical
& Integrated Care Programmes
Person-centred, co-ordinated care

FIVE DEMING PRINCIPLES
THAT HELP HEALTHCARE PROCESS IMPROVEMENT

1. Quality improvement is the science of process management

2. If you cannot measure it, you cannot improve it

3. Managed care means managing the processes of care, not managing physicians and nurses

4. The right data in the right format at the right time in the right hands

5. Engage the "smart cogs" of healthcare
NOW THESE ARE SMALL BUT

THE ONES OUT THERE ARE FAR AWAY...
Before you judge me, walk a mile in my shoes...
• The professionalism of Freidson:
  • Knowledge
  • Altruism
  • Self regulation

• The professionalism of Berwick:
  • complexity
  • Interdependence
  • pervasive hazard
  • a changing distribution of power and control, and
  • borne on the back of technology, distributed, democratised capacities
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<th>Tip</th>
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<td>Patients first</td>
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<td>Stop restructuring</td>
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<td>Strengthen the local health care systems– community care systems–as a whole</td>
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<td>To help do that, reinvest in general practice and primary care</td>
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<td>Don’t put your faith in market forces</td>
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<td>Avoid supply-driven care like the plague (institutional self interest)</td>
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<td>Develop an integrated approach to the assessment, assurance, and improvement of quality</td>
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<td>Heal the divide among the professions, the managers, and the government</td>
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<td>9</td>
<td>Train your health care work force for the future, not the past</td>
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<td>Aim for health not care</td>
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Our Vision

PERSON-CENTRED, COORDINATED CARE
National Clinical Programmes: Mission & objectives

Improve Quality

Improve Patient Access

Value
Figure 2. The Fourth (missing) Aim is improved clinician experience.
Key principles

- Clinically led: Empower clinicians to lead the change
- Structured: Structured programme management approach
- Nationwide: Nationalise existing best practice
- Patients: Engage patients at every level
- Stakeholders: Align stakeholders i.e. Government, Management, Colleges, Unions, Patients, etc
Partnerships

How?

- Partnership between HSE and Clinicians through the Forum of Postgraduate training colleges
- Partnership with Irish Association of the Directors of Nursing and Midwifery and the Therapy Professions
- Partnership with Patients
IF THE WORLD SHOULD BLOW ITSELF UP, THE LAST AUDIBLE VOICE WOULD BE THAT OF AN EXPERT SAYING IT CAN’T BE DONE
“Why don’t people just do what we say?”
SUCCESS
WHAT PEOPLE THINK IT LOOKS LIKE

SUCCESS
WHAT IT REALLY LOOKS LIKE
Cognitive Dissonance

“Sometimes people hold a core belief that is very strong. When they are presented with evidence that works against that belief, the new evidence cannot be accepted.

It would create a feeling that is extremely uncomfortable, called cognitive dissonance.

And because it is so important to protect the core belief, they will rationalize, ignore and even deny anything that doesn't fit in with the core belief.”

-Frantz Fanon
IF YOUR NUMBERS ARE CORRECT, MY STRATEGIC PLAN IS IRRATIONAL.

COGNITIVE DISSONANCE TAKES OVER

YOU SURE ARE BAD WITH NUMBERS.

WHAT WAS THAT NOISE?
Calvin and Hobbes

How come we play war and not peace?

Too few role models.

I'll be the fearless American defender of liberty and democracy.

...and you can be the loathsome godless communist oppressor.

We're at war, so if you get hit with a dart, you're dead. And the other side wins, OK?

Gotcha.

Wap! Wap!

Kind of a stupid game, isn't it?
Unless someone like you cares a whole awful lot, nothing is going to get better. It’s not.

— Dr. Seuss
Successful integrated care is primarily about patient experience

- FRONTIER ECONOMICS 2012
“Wait! Wait! Listen to me... We don’t HAVE to be just sheep!”
life is defined by the choices you make.

so make the right ones.
His few friends had told him he could never buy it, but Mr. Crawley surmised that they just didn’t know where the store was.
You're making a difference!
She just kept swimming...
Thank you

Visit our website:
www.hse.ie/integratedcare/
Interact with us on:
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nationalcsp@hse.ie