SMARTCARE - Joining up ICT and service processes for quality integrated care in Europe

BEYONDSILOS Workshop
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SmartCare Guidelines for deployment

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Guidelines for Integrated e-Care Procurement and Uptake

- *The main aim of the guidelines is **to enable health and social care decision makers in regions other than the SmartCare regions to works towards an implementation of ICT-supported integrated social and health care***

Operational toolkit:

- Each section of the Guidelines aims to give a framework of actions, and has been developed as **a working document** providing details of the issues affecting the different phases of planning and deployment of integrated eCare supported by ICT.

- To achieve this aim, each Guideline section addresses the main phases detected from the SmartCare experience: Assessment and Planning (health and social check), Preparation, Introduction, Operations, Revision.

The main feature: complexity

- With more than three years efforts and a significant number of different profiles of the organisations involved, the SmartCare project has provided a **realistic picture of the complexity of deploying the regional systems**, and how to deal with this.

- This awareness of complexity is the main feature that supported the regions to find step-by-step the local definition of a common process framework for deployment, accompanied by a comprehensive approach to achieve widespread understanding of the opportunities and risks.

- The SmartCare Guidelines come from the joint analysis of the project's methodological and operational elements that took into account the distinctive features of the participating regions' health and social care systems and other relevant contextual information. This information was crucial to **understanding the similarities and differences** in the care delivery systems, organisational approaches, and service provision.

Integrated care deployment as a complex process
# Issues on developing Guidelines

- Strategic planning and care pathways (policy oriented and service oriented)

- Organisational domain and person-centred process (people using services and their carers)

- General principles and evidence-based framework

- Multidisciplinary and multi-agency dimension

- Overall process framework and issues expected at any point along the journey

• Dynamic and circle process, be ready to refine and sustain! (to compare planned care with what was actually delivered, to use gathered information to improve and develop services).
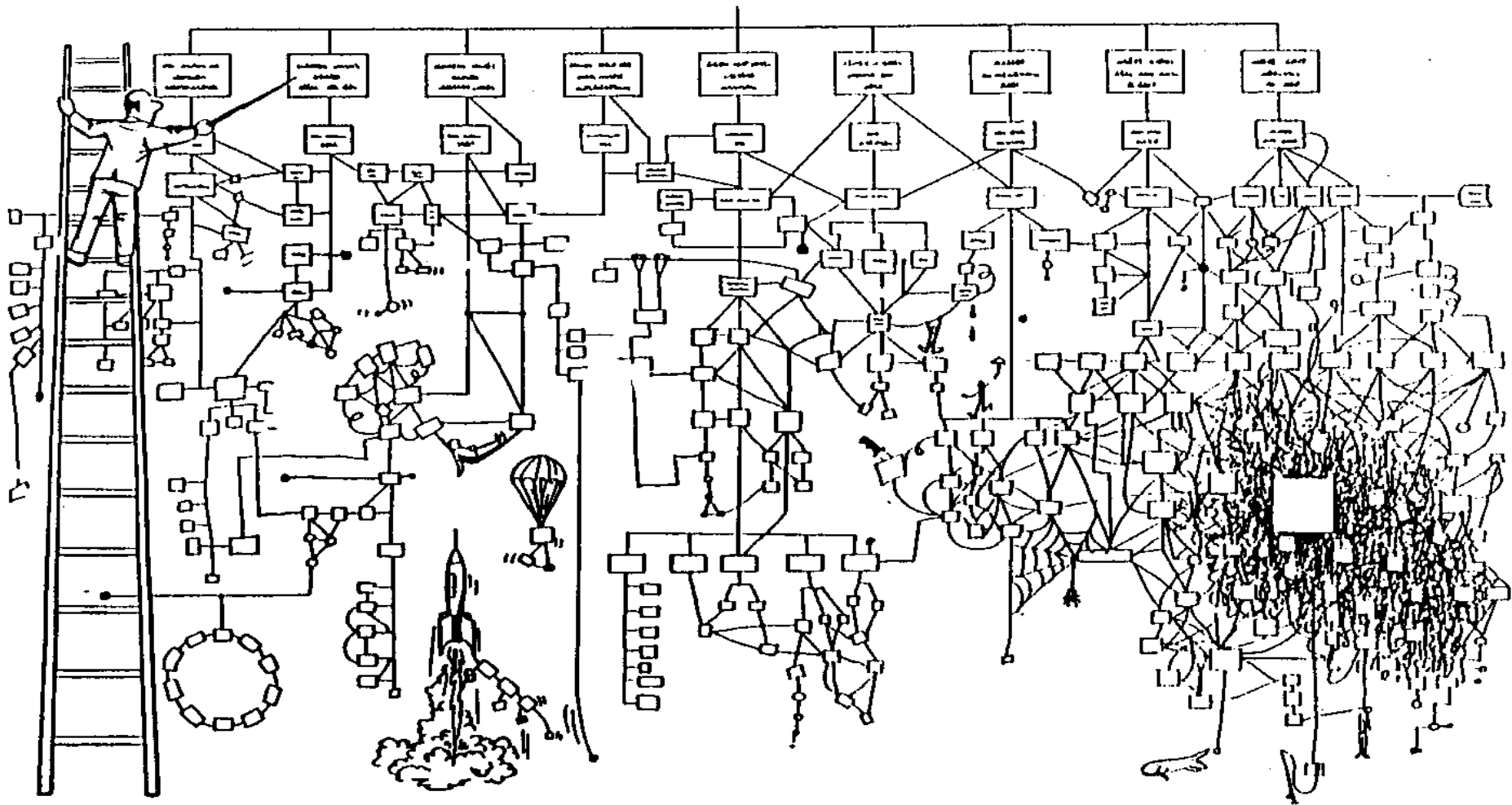
From deployment to Guidelines
Process Mapping

Setting up the plan for deployment...

Increasing level of detail
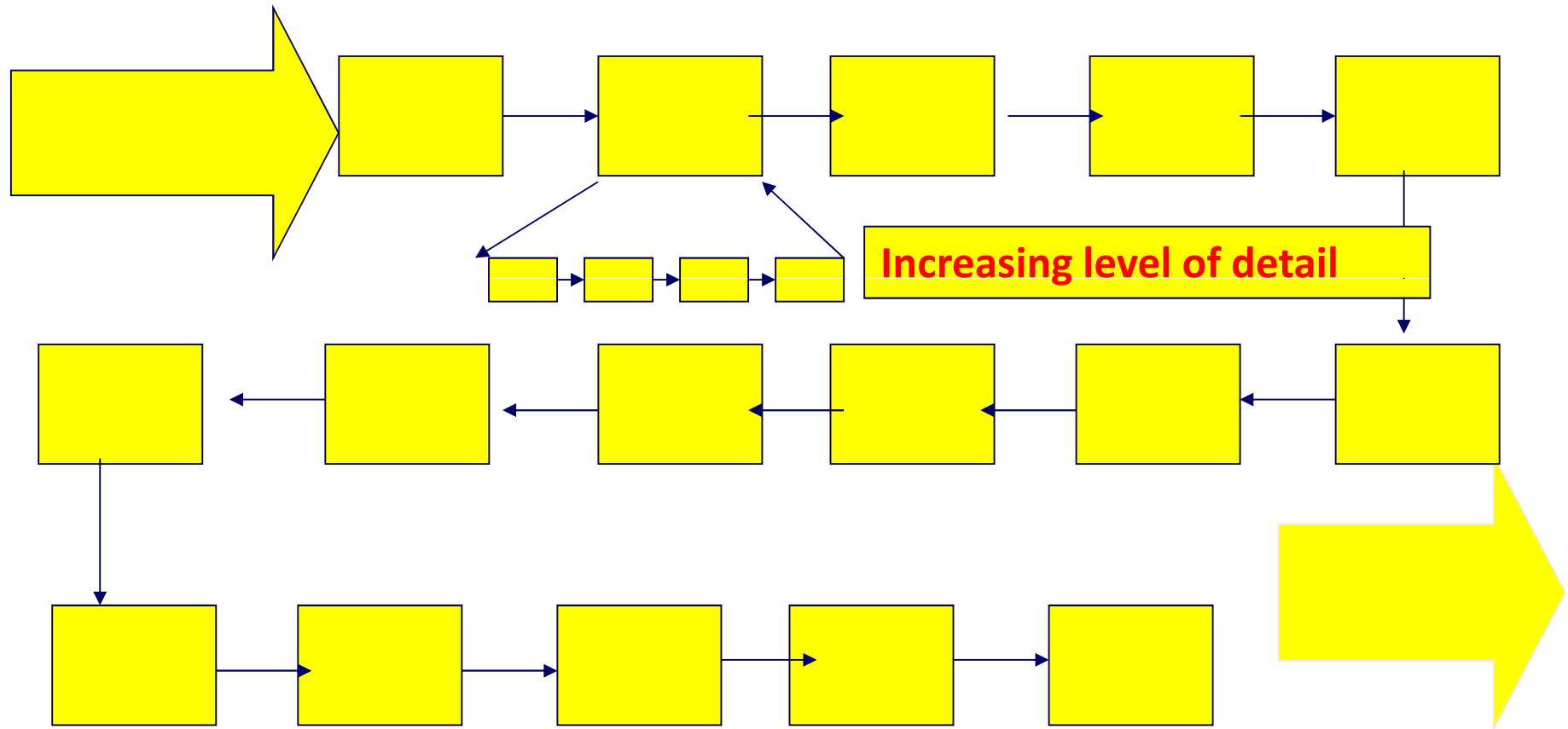
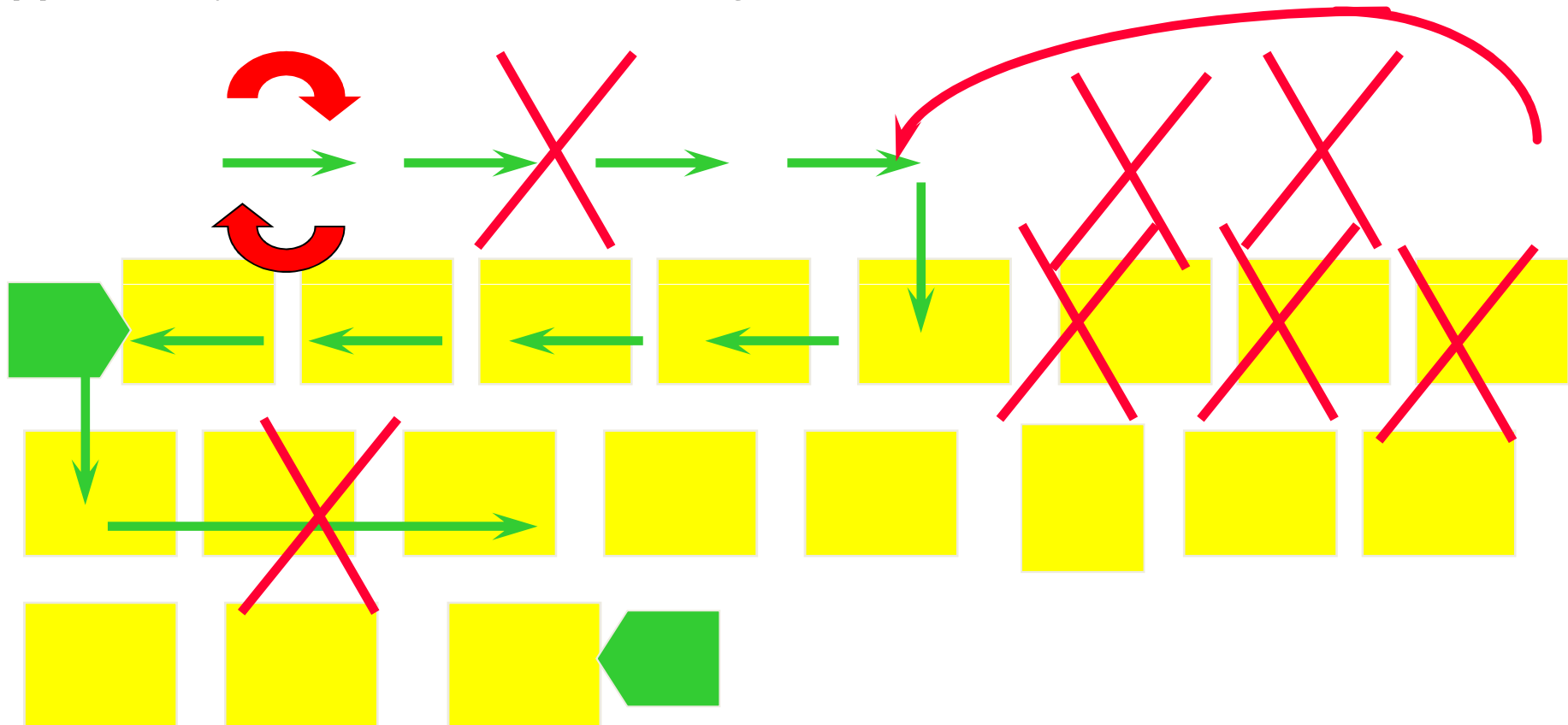**Deployment process from theory to reality**

From deployment to Guidelines

Process Mapping

Lessons learnt from deployment
Opportunity for review and re-design

SmartCare Guidelines –
Overview of the process

smartcare
www.pilotsmartcare.eu

| Health check | → | Preparation phase | → | Final countdown phase | → | Take off phase | → | Course corrections |

Health check
- Ready for launch?
- Learning what needs to be done
- Planning what will be done

Preparation phase
- Consulting with stakeholders
- Specifying the service
- Procuring the IT
- Setting up the operational protocol/process

Final countdown phase
- Reviewing systems and processes
- Training staff and informal carers

Take off phase
- Introducing the service to clients/patients
- Operating the service
- Monitoring and evaluating systems and processes
- Refining systems and processes

Course corrections
- Addressing immediate problems
- Reviewing service performance
- Taking key decisions on future operation

How to design the Guidelines Development Steps

- Setting up of an editorial group, led by task leader, and supported by work package leader

- Developing an initial structure (basic process map)

- Sharing initial structure, assigning responsibilities, agreeing on time plan

- Revision of initial structure

- Agreement on editorial process defining responsibilities and a detailed time planning for the production of the guidelines

- A draft version of the Guidelines be available at least three months before the end of the project, to be reviewed and commented on by all project partners and others as appropriate.

Guidelines for deployment
Final steps

- Draft finalisation of all chapters (two month before the end of the project)

- Presentation and plenary discussion (at project final conference)

- Revision and finalisation of document by the end of the project

- Submission and discussion with EC/reviewer at final review meeting

How to design the Guidelines
Tasks within the consortium

- Small coordination group + involvement of project WPs leaders

- Assignment of authors with primary responsibility for a chapter, plus further authors to be involved as contributors / reviewers

- Autonomy of the primary authors in deciding when and how to involve the further authors and also get in touch with them (within the given framework and deadlines)

- Inclusion of specific "hooks"
  - for ICT procurement
  - for the EIPonAHA B3 Maturity Model

- Contribution from specific project content:
  - evaluation methodology and outcomes
  - User Advisory Board inputs and review

Sources for the Guidelines

Different sources used, *including:*

- **The compilation of lessons learned** from: requirements analysis and use case definition (including Pathway development); service process definition; system specification, implementation and testing; deployment preparation and execution; evaluation; and exploitation and value case development.

- **The reports on deployment** preparation and operation from all regions, including the contents of the deployment operation reporting tool, an online database allowing deployment regions to log issues encountered in the technical operation of the SmartCare services, and how these have been resolved.

- **The project's evaluation framework**, together with key results of the evaluation of service deployment.

- **The methodological toolkit** and practical guidance for value case development and socio-economic impact assessment (within exploitation activities).

Guidelines for deployment

How to use these guidelines:

- SmartCare Guidelines are built around **a rocket launch analogy** that is reflected in the title and in the names of the five phases that we divided the process into.

- The analogy is supposed to help you navigate through the Guidelines and make them easy to understand and remember

①	③	③	④	⑤
Health Check	Preparation	Final Countdown	Take-off	Course Corrections
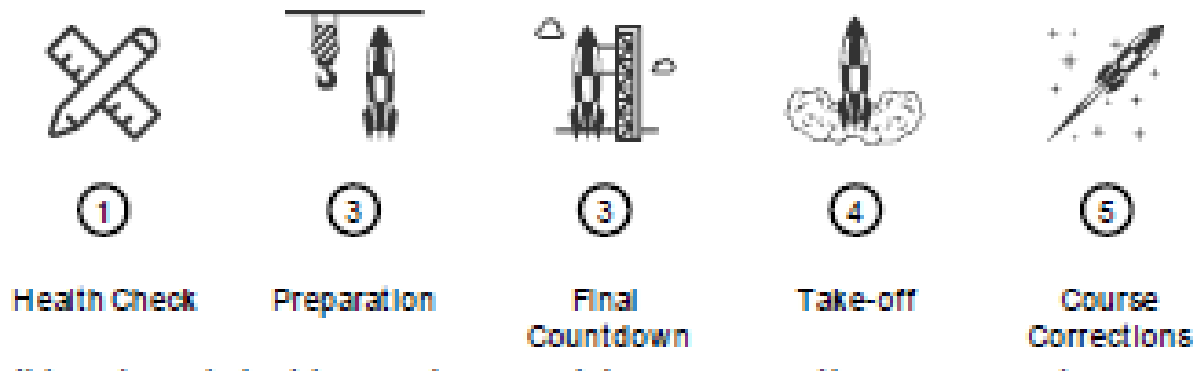
Guidelines for deployment

Countdown to integration

The SmartCare Guidelines
for the implementation
of integrated e-care service

The SmartCare project is co-funded by the European Commission within the ICT Policy Support Programme of the Competitiveness and Innovation Framework Programme (CIP) .
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①	③	③	④	⑤
Health Check	Preparation	Final Countdown	Take-off	Course Corrections

Guidelines for deployment
Table of contents

Guidelines for deployment
Document structure

- Draw together knowledge and experiences gained throughout the project (from service development to deployment)

- The document has two introductory chapters and then five thematic chapters, taking the reader through the *five phases of the implementation process* by using our rocket ship analogy

- Each phase begins with an introductory text and is then divided into a **number of activities.**

Guidelines for deployment Document structure

Fixed structure for each activity

- Start with a **number of objectives** relating to the overall activity

- Followed by a text describing the activity

- Then there is a **number of tasks** for each activity

- For each task there is a short text, **key questions** supposed to guide the reader and **some tips or lessons learned** from SmartCare deployment experiences

The SmartCare Guidelines include 202 questions and 140 tips!

Guidelines for deployment

Key question on the situation in your organisation or region:

- **What** exactly will you have to do in each phase?
- **Who** will have to be involved in what capacity?
- **How** many and what type of resources will be needed?
- **When** should the process be completed and when does each phase have to start and end to achieve this?

- In this context we think it is important to formulate a structured set of objectives, distinguishing between primary and secondary objectives.

What is to be achieved overall?

What is to be achieved in each phase and the steps that constitute it?

4 Preparation phase

Now is the time to make sure that you have all the components available to assemble them in the right way. A lot rides on this phase, and fundamental mistakes now may lead to fundamental consequences later on. At the same time, you can now lay a solid foundation for later success. Above all, make sure to build flexibility into your system, because from here on there will be new challenges and unforeseen developments with every step you take.

In the preparation phase, you finalise your initial plans, making them concrete in order to then translate them into action. More than ever, it is important for you to realise that you are not (and cannot be) working alone. In any integrated care service, many people come together, and each one of them will have their own expectations, aspirations, requirements and objectives. You are looking at a twofold goal: on the one hand, you will want to achieve as much buy-in from relevant stakeholders as you can, to avoid people turning into veto players working against you. On the other hand, if you manage to achieve a broad network now, you will be able to distribute the workload much wider, avoiding overburdening yourself or others later on.

While you may well be breaking ground when it comes to your own organisation or region, you may not be the first one trying to do what you are trying to do. Others may have gone this way before, and have information and advice to offer. Therefore we recommend spending some time searching for similar initiatives. You can start from the sources that we mention in the introduction; a literature or web search might yield even more results.

The principle activities in this stage cover:

- Consulting with stakeholders.

- Specifying the service.

- Procuring the ICT.

- Setting up the evaluation.

"A beginning is the time for taking the most delicate care that the balances are correct."

Frank Herbert, Dune

4.1 Consulting with stakeholders

4.1.1 Objectives

- Achieve consensus through co-design.

- Help older persons, their informal carers and health and social care professionals understand the added value of integrated care.

- Build public understanding.

- Cultivate trust.

- Promote change management within organisations and communities.

- Make integrated care a social learning process within a person-centred approach.

Stakeholder engagement as a concept goes beyond consulting and participation, because co-design and co-decision ensures that consensus must be achieved. Engagement in policy design and implementation, such as developing integrated care, creates space to build public understanding of a value-driven policy.

Engagement can provide opportunities to: improve the substance of policy input; cultivate trust between government and the public; and increase the legitimacy of policy action and implementation.

Recent research provides evidence that the absence of an effective stakeholder engagement approach to designing health system reforms and new policies leads to a lower level of acceptance of the change.

An important element of the consultation is getting to know the existing skills of professionals, and the services that each organisation could deliver better, and could benefit more from, with the integration of care.

4.1.2 Task 1: Mapping stakeholders

Stakeholders include health and social care professionals, older people and informal carers, top management and political leadership.

Effective stakeholder engagement implies mapping the formal/informal stakeholders' roles during the design and implementation process, including their interests and their patterns of interaction and influence alongside their potential to reach the objectives. Only then can stakeholder engagement lead to successful outcomes.

Key questions

Q30. Who are the formal/informal stakeholders in your region/community?

Q31. Why are they important to the successful outcome of the project?

Q32. Will different stakeholders come into play at a later stage of the project?

Q33. How can each stakeholder contribute meaningfully to the design of the service?

Q34. What are specific stakeholders' skills/roles?

Q35. Are stakeholders already used to working together? If so, within which organisational structure(s)?

Tips

T24. Collect as much information as possible on the present structure/roles of stakeholders in your region/community.

T25. Check and see whether changes in the present stakeholders' structure and/or organisation are expected to take place within the medium-long term.

T26. Whenever a target group is not organised formally, e.g. older persons and their informal carers, they should still be recruited via other stakeholders or directly through a public call.

T27. Find out what is the present level of integration within and among stakeholders' groups.

4.1.3 Task 2: Mapping stakeholders' needs: Provider organisations

When involving health and social care organisations, is it essential to take all their needs on board: the design and implementation of integrated care is most successful when it adopts a bottom-up approach, meaning that all elements in the service, i.e. ICT elements, distribution of roles, criteria for inclusion of patients, etc., match the real needs of people.

Key questions

Q36. Are formal/informal stakeholders' needs already known?

Q37. How can integrated care better meet stakeholders' needs?

Q38. Do we have a system to monitor stakeholders' satisfaction?

Q39. What are the health and psychological needs of those who provide care?

Q40. How can integrated care better meet these needs?

Tips

T28. Organise focus groups with different stakeholders.

T29. Identify the emerging needs and how they can be supported by integrated care.

T30. Keep monitoring emerging needs and involve stakeholders' groups in providing feedback.

T31. Make every person feel important.

T32. Identify your formal stakeholders and collect information on if and how their needs are presently met in your region/community.

T33. Identify your informal stakeholders and collect information on if and how their needs are presently met in your region/community.

T34. Promote healthcare and social integration and inclusiveness through interventions supported by ICT platforms and technology, not led by technology alone.

Dissemination of the Guidelines

The *Guidelines will be produced to be available at the end of the project.*

They will be disseminated in line with the project's communication plan, in particular through:

- the central project channels, such as www.pilotsmartcare.eu;
- the channels available to the deployment regions;
- the various interest organisations involved as project partners, Advisory Board or Committed Region Board members;
- the B3 Action Group of EIP AHA.

Each partner is asked to disseminate the Guidelines through its communication tools and networks, inside and outside its region

Guidelines to whom it may concern

- **Are these Guidelines really for me?**

The short answer to this is 'yes'. The (slightly) longer answer is that we have taken great care to make these Guidelines useful to you, no matter what your position is in the implementation of an integrated eCare service.

However, you will notice very soon that **you will not be able to work alone**, no matter what your position.

Integration means collaboration; this means that you will have to get many other stakeholders on board: patients, family carers, nurses, social care workers, doctors, call centre staff, ICT staff, middle and upper management, and policy makers, etc.

The 3 "i":
involve, include, integrate

Since it is the beginning of a big project: **be inclusive**.

Further along the way you will be happy for all the support that you get.

Also you should become clear about who is going to drive this process and be the champion of your integrated eCare service implementation

THANK YOU!

www.pilotsmartcare.eu

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