

Challenges and achievements in integrated care.

Primary care empowerment in achieving efficient integration: Hospital Lleuger de Cambrils ("light" hospital) experience

Anna Riera Membership Director UCH Barcelona.

Lidia Rios, Hospital de Cambrils Director. Izascun Morán, Hospital Cambrils Nursing Coordinator. David Baulenas Medical Healthcare Director Grup SAGESSA. Lluís Colomé Teaching&Innovation Director Grup SAGESSA

Introduction

The main challenges of the Public Health System in Catalonia are the promotion of health and the patient-focused assistance, the continuity of the services and the improvement efficiency at the Health Primary Care, either in acute or chronic pathology

In order to meet this challenge, a transformation of the Primary Care Centres is required as well as the commitment and the integration of the specialized assistance and the availability of diagnostic and therapeutic resources, closer to citizen

Objective

To present the experience of the "Hospital Lleuger de Cambrils" that has been built, both structurally and functionally, to provide integrated health assistance based on the leadership of the Primary Care Physicians, the management system and the assistance quality.

Results

The project was born together with the construction of new facilities and a new philosophy of the healthcare management

Hospital services

- Primary and community care, which covers a population of 23000 inhabitants, is undertaken by Primary Care Physicians and Primary Care Nurses,
- Specialized assistance
 - Specialized physicians coming to the centre: otolaryngology, dermatology, ophthalmology, traumatology, mental health, sexual and reproductive healthcare.
 - Consultant physicians: cardiology and geriatrics
 - The specialized physicians' agendas are scheduled by the primary care physicians who organize their appointments and consultancies
- Casualty Unit for a population of 50.000 inhabitants
- Physiotherapy Unit
- Minor Ambulatory Surgery Unit (MAS)
- Diagnostic equipment: laboratory, radiology, ultrasound and mammography.

Phylosophy of Healthcare Management

- Clinical leadership and management
- Procedures and clinical practice guides are linked to computerized patients records
- Professional empowerment of physicians by means of continuous formation and support from Specialists, (Primary Care Physicians do major ambulatory surgery, ecographies, etc) The role of nurses who take care of chronic patients, within the home care program, is specially outstanding.
- Key indicators allow following up assistance and implementing any improvements if needed
- Important quality models like Joint Commission International accreditation

Results 2015:

Casualty Unit: derivation to hospital	%
Avoidable hospital admission rates:	0.9
Hospital Admission rate for COPD: (<i>Chronic Obstructive Pulmonary Disease</i>)	1.2
Hospital admission rate for CHF: (<i>congestive heart failure</i>)	0.7
Childhood vaccination coverage:	95%
Home care program coverage:	20%

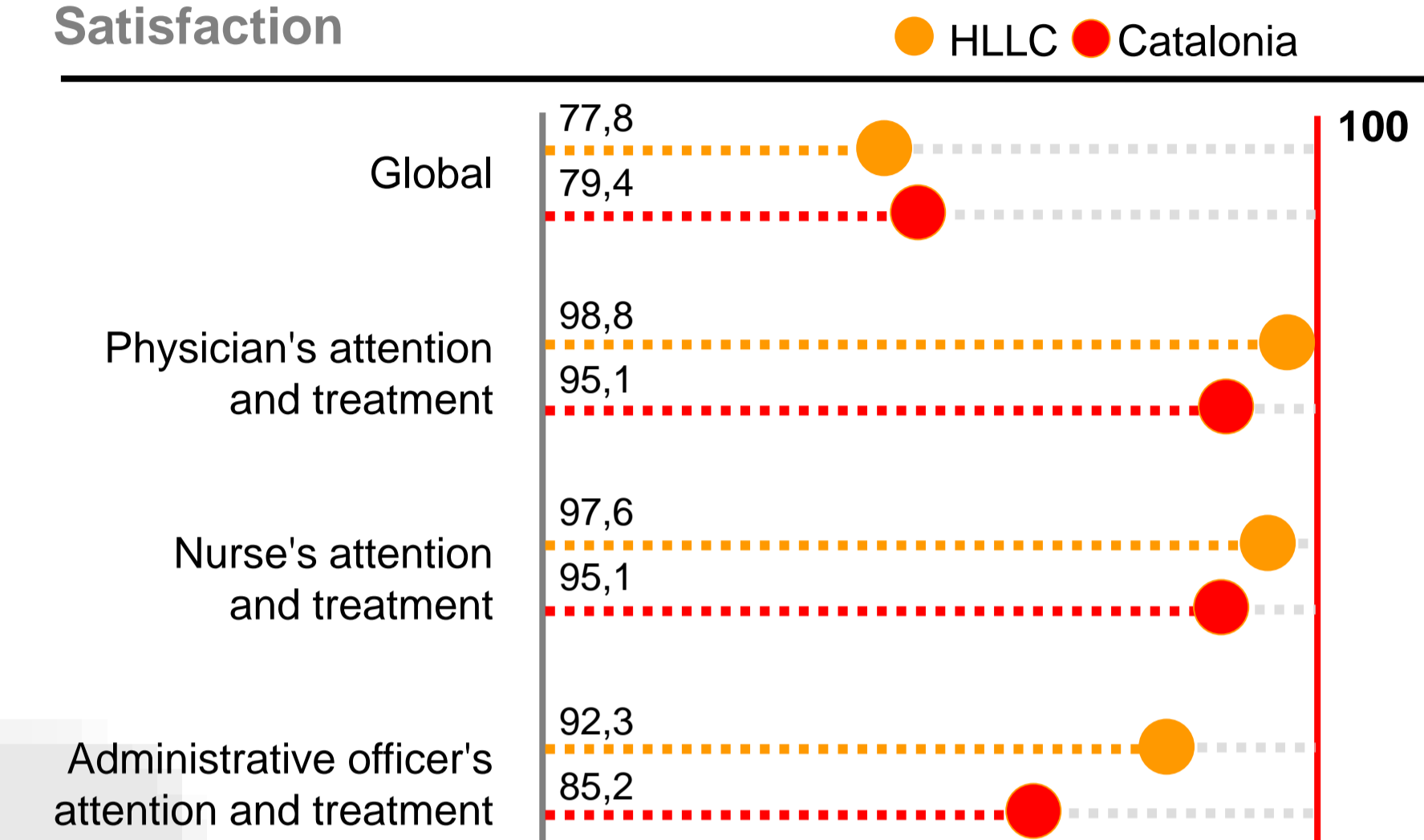
Care activity

% Derivations to emergency unit form reference hospital	3,10%
Ecographies performed by physicians	551
Number of operations (MAS)	103
Number Laboratory	18.616
Number Radiology	13.607
Physicians visit	108.473
Pediatrics visit	22.564
Nurse visit	81.369

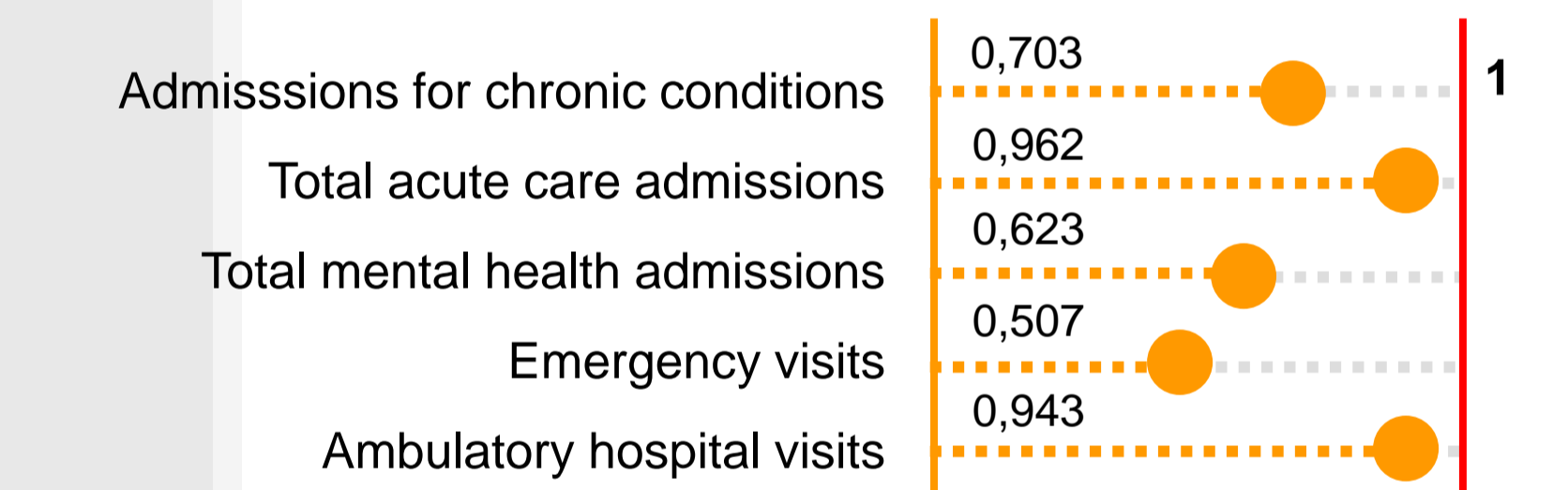
Conclusion

A patient-focused model of primary care, well coordinated with specialized attention, together with the abilities of primary care physicians and nurses, gives good healthcare and efficiency outcomes as well as users' satisfaction

Satisfaction



Standardized Rates



Derivation specialist

ORL	792
Ophtalmology	707
Dermatology	839
Traumatology	1.537
Mental healthcare	159