

Multihospital thoracic surgery project

How to approach high specialization to the community

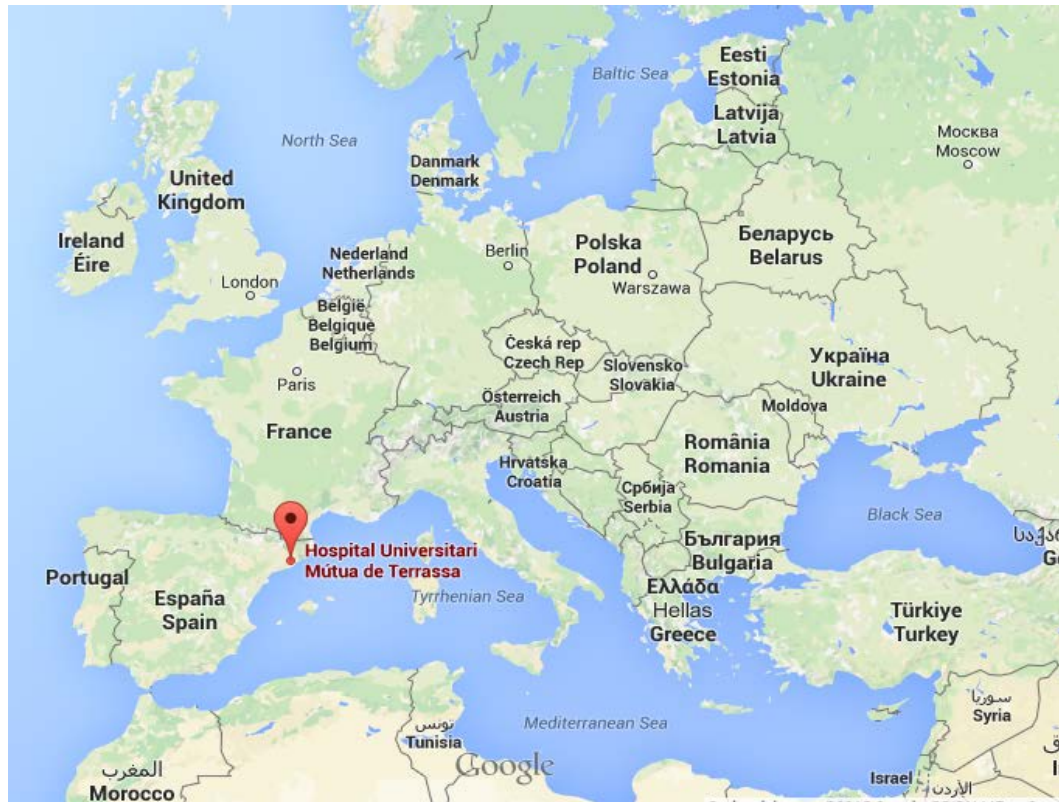


Advancing Global
Health & Health Care

2015 **IHFCHICAGO**
39th World Hospital Congress

Multihospital thoracic surgery project

Mútua Terrassa, where are we?



Mútua Terrassa

Who are we?



- **MútuaTerrassa was founded in 1900** as a Mutual Insurer for work related accidents.
- **3.800 professionals working in** different entities and companies with the aim of protecting and improving people's health.
- **Private non profit entity**. Funds: 80% public funds and 20% private
- **Five Strategic Units**: Health Care, Insurance, Health Logistic, Geriatric Social Healthcare and Private Healthcare Activities
- **Health Care Unit: University Hospital**, 9 Primary Care Centers. Research Foundation .



MútuaTerrassa

Multihospital thoracic surgery project

Introduction

Highly fragmented healthcare public system

Strategic Alliance 5 Hospitals

30 km around Barcelona

Thoracic surgery is a challenge for University Hospitals:

- Expertise
- Staging and surgical treatment of lung cancer
- High-tech training surgical specialists
- Efficiency/Efficacy
- Times of economic crisis.

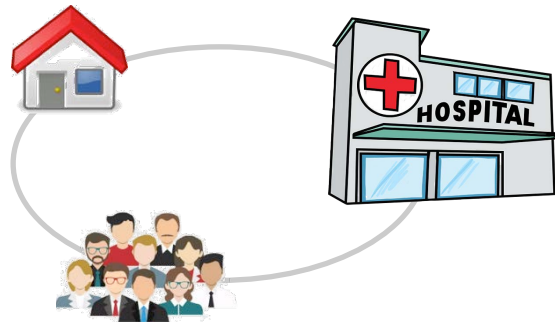
Multihospital thoracic surgery project

Main objectives of the project

- Improve and increase Efficiency and Quality of care.
- Keep the patient close to home throughout the therapeutic process

Our proposal:

- Organize professionals hired by different services belonging to different University Hospitals to maintain close assistance to citizens, with the highest quality of care.



Multihospital thoracic surgery project

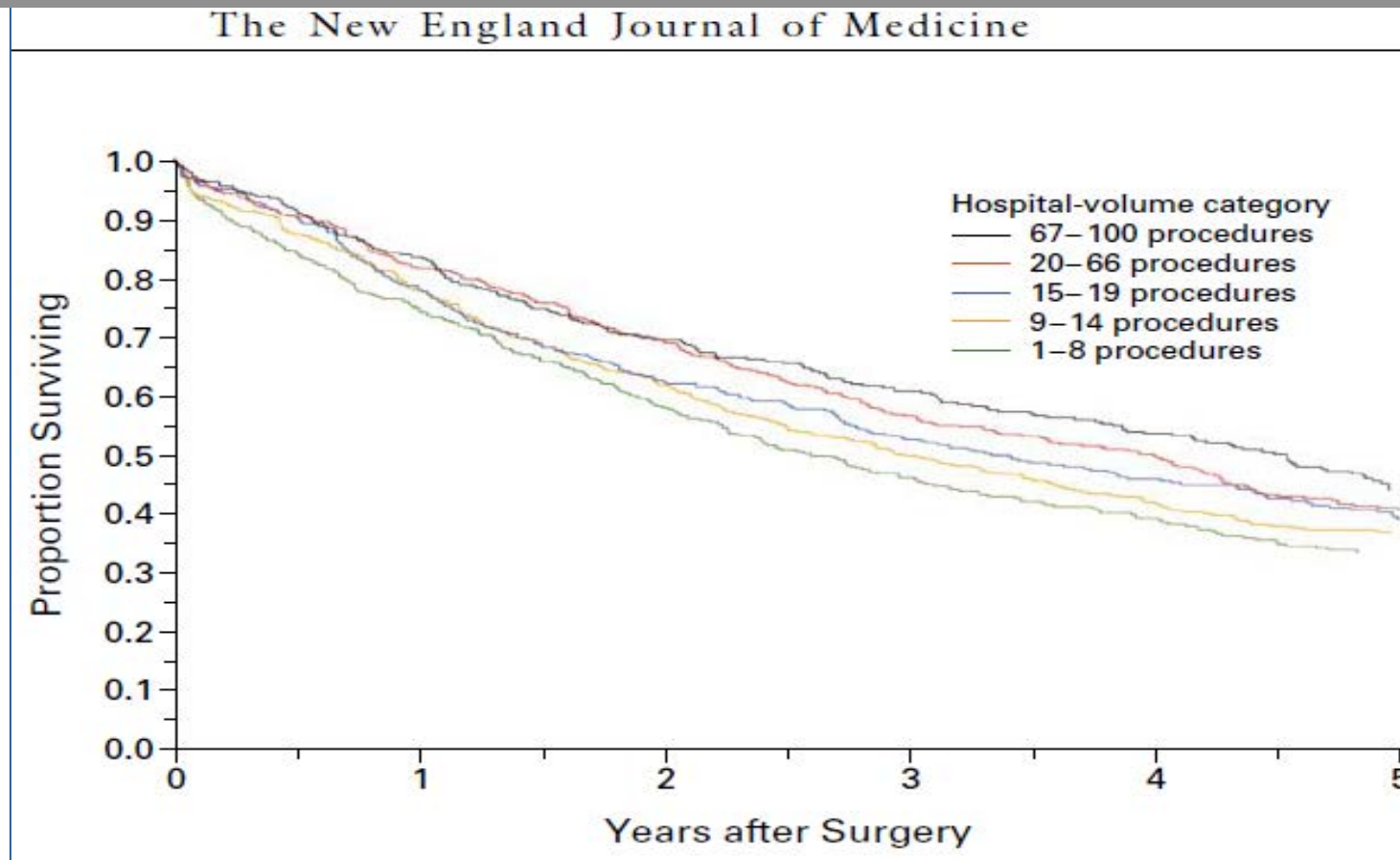
Rational

The quality of surgery and treatment has direct relation on:

- The number of procedures performed
- The resources' availability
- The application of the best scientific evidence
- The environment:
- Treated population
- Health organization model

Multihospital thoracic surgery project

Study: 2118 lung-resection in 76 hospitals (1985-96)



Bach PB. The influence of hospital volume on survival after resection for lung cancer. NEJM 2001; 345:181-8. Memorial Sloan-Kettering Cancer Center. Departments of Epidemiology and Biostatistics

Multihospital thoracic surgery project

Why?

To achieve a critical number of patients suffering complex diseases: experience, research, results.

Reference population 2.2 million people

Rate incidence of lung cancer in Catalonia:

45 cases/100,000 inhabitants  1,000 new cases /year.

Rate of resecability 30%=300 lung cancer resections/year.*

* The European Society of Thoracic Surgeons considered a highly specialized service who performs 350 major procedures/year.



Multihospital Thoracic Surgery Project

2.100.000 people

CST
CONSORCI SANITARI DE TERRASSA

250.000 people

Corporació
Parc Taulí

450.000 people

 **MútuaTerrassa**

500.000 people

390.000 people

420.000 people

 **HOSPITAL DE LA SANTA CREU I SANT PAU**

Multihospital thoracic surgery project

PROS

Model centered in Patient and Quality Care:

- Patient treated in their community:
No displacements, comfortable for the patient and family
- High degree of patient satisfaction.
- Professionals belong to a big Team
- Unification of lung cancer Guides and protocols.
- Complex clinical research.

CONS

Complex organization:

- Leadership of the Team
- Professionals (mobility...)
- Circuits of care
- Legal issues between organizations
- 4 Hospitals linked to 2 dif. Universities
- Multidisciplinary Cancer Committees in each center

Multihospital thoracic surgery project

How do we do it

- 2007: MT shared thoracic service with CST
- 2008: MT shared thoracic service with Hospital de Sabadell
- 2009: MT, H. Sant Pau and H. Mar formalized the agreement with the support of the Catalan Health Service.

All the hospitals, although being autonomously managed entities, are part of the network of public healthcare providers in Catalonia

Multihospital thoracic surgery project

Organizational model

Transversal (all hospitals)

Team of 13 thoracic surgeons and 2 residents in training with one leader

– Head of Service.

Use of Common protocols and clinical Guidelines to reduce variability in making decisions

Continuous education of surgeons

Specific research projects favored by the high number of patients

Common Quality clinical evaluation criteria

Surgeons share guards

Members of Cancer Committees

Vertical (single in each)

Management features the care process.

Internal implementation of protocols

Organization of OR programs and surgeries.

Concentration in one center (Mútua Terrassa) highly complex and scarce procedures

Multidisciplinary Cancer Committee

Economic sustainability of its structural template.

Multihospital thoracic surgery project

Team: 



MútuaTerrassa



CST
CONSORCI SANITARI DE TERRASSA



Corporació
Parc Taulí



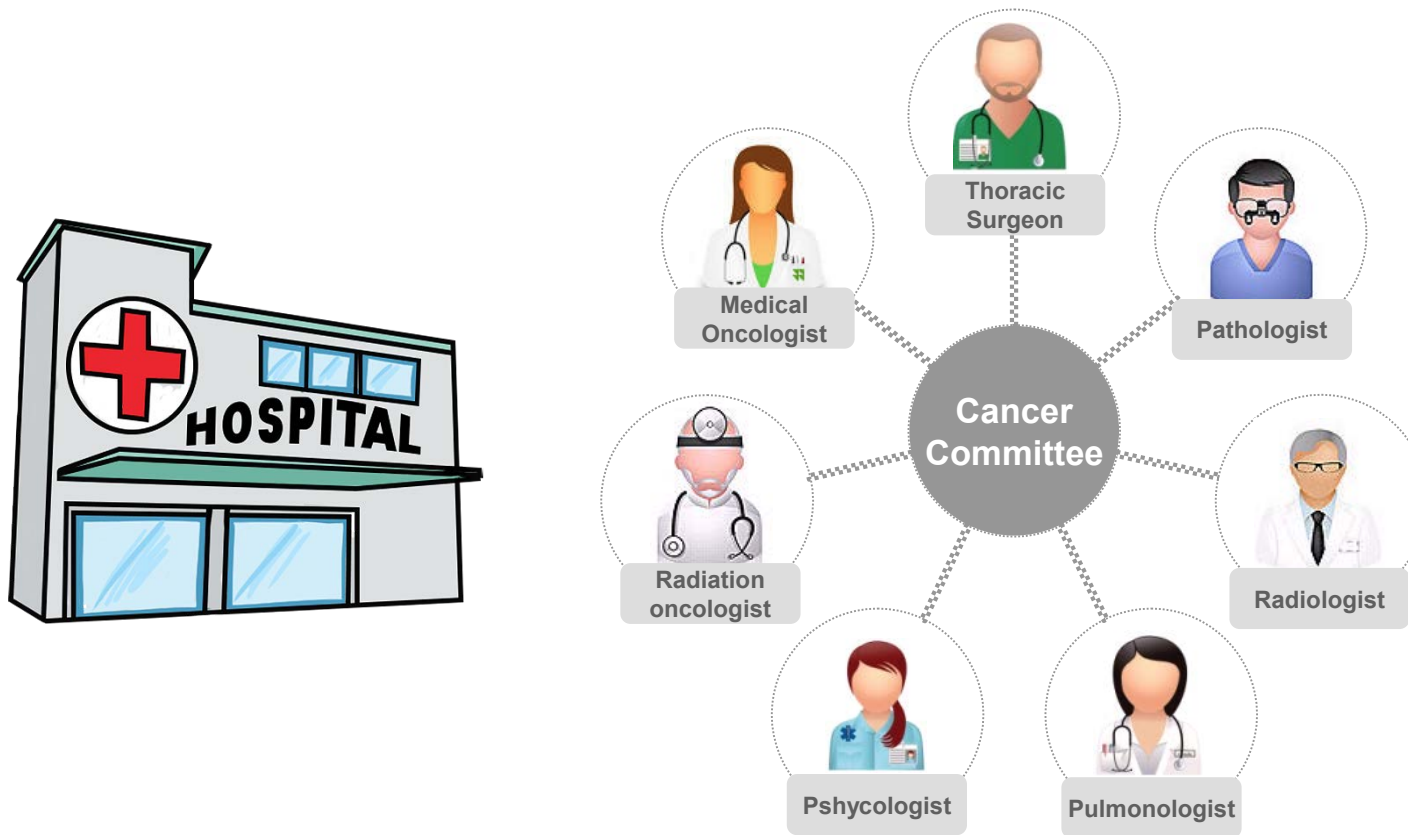
HOSPITAL DE LA
SANTA CREU I
SANT PAU
UNIVERSITAT AUTÒNOMA DE BARCELONA



Hospital
del Mar



Multihospital thoracic surgery project: Organizational model



Multihospital thoracic surgery project

Results: Surgical activity 2014

	Surgical Resections for lung cancer	Surgical resections for metastasic cancer	pN2	Postoperative mortality	Number Total of surgeries
H. U. MútuaTerrassa	86	20	5 (5,8%)	6 (6,9%)	336
H. de Sabadell	53	13	2 (3,7%)	5 (7,5%)	161
H. del Mar	39	11	5 (12,8%)	3 (7,7%)	151
H. de Sant Pau i la Santa Creu	53	51	5 (9,4%)	0	218
Multihospital thoracic service	231	95	17 (7,4%)	14 (6%)	866

Multihospital thoracic surgery project

Discussion 5 years experience

- It is a model that keeps patient in their community and minimizes transfers allowing start and continue treatment at the center closest to him.
- It's a flexible model: Hospitals share decisions, actions and goals. Are independent in management and implementations of the protocols and structural template.
- It has allowed us to gain advantages sustainably competitive
- It achieves criteria of the organization of tertiary services in Catalonia: Evaluation of clinical results , networking between centers, equity, quality and accessibility.

Multihospital thoracic surgery project

Difficulties

- Leadership. Coordination of the team.
- New organization model: the analysis and knowledge of the strengths of each member of the team is the key to success.
- Legitimate individual ambition of the professional serving as a team common goals.
- Mobility of the professionals: legal cover for activity in other centers.
- Other difficulties arising from the environmental conditions of economic crisis in which this project was created.

Multihospital thoracic surgery project

Conclusions

After 5 year experience:

- Our organizational model has been implemented successfully.
- Our patients receive high tech assistance in their community with high degree of satisfaction and quality.
- It has allowed us to gain advantages sustainably competitive.
- This model is better than the one we had before, although we work to get the best in our health system.

Multihospital thoracic surgery project

The Team

