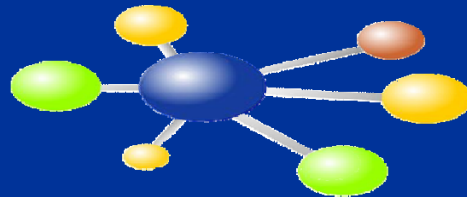
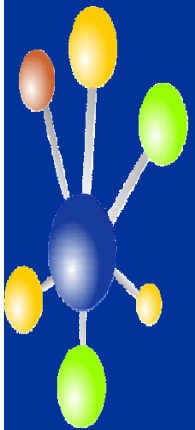


Project Outline



Marco d'Angelantonio
SPEX Conference
Barcelona 30th January 2006

SPEX
SPreading EXcellence in healthcare

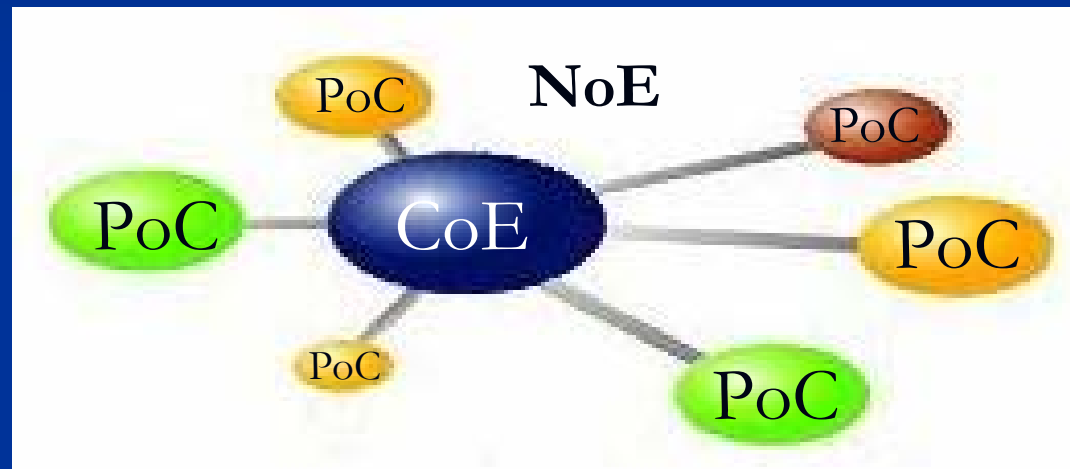


Index

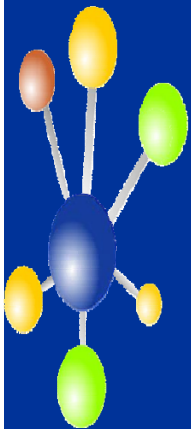
- SPEX is about
- Issues addressed
- Achievements
- The cherries on the cake
- Was SPEX a downhill walk?
- Lessons learnt
- Conclusions

SPEX is about

building healthcare Networks of Excellence (NoEs) which link a Centre of Excellence (CoE) to a number of Points of Care (PoCs) scattered over a wide geographical area.

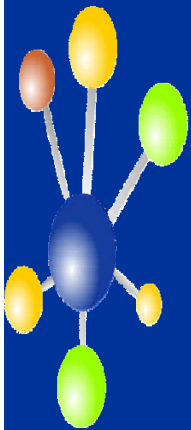


NoE will allow spreading clinical and managerial excellence, providing continuity of care to citizens and optimising the use of the healthcare resources available.



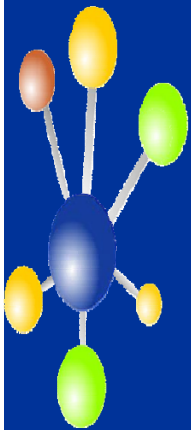
The issues addressed - I

- improving the service offered to patients by providing care to them, whenever possible, where they live or work in order for them to avoid spending money and time on unnecessary travelling;
- filtering the patients treated directly to avoid the risk of misusing the CoEs' highly specialised clinical resources by saturating them with relatively ordinary clinical cases;
- expanding the catchment area for the clinical cases that fall in the CoEs' mission;



The issues addressed - II

- enhancing the financial performance of the CoEs (and of the healthcare system as a whole) by redirecting simple cases towards the peripheral outlets and by focusing all their highly qualified but expensive resources on more complex diagnostic and therapeutic cases;
- guaranteeing the critical mass flow of complex clinical cases to maintain professional skills.



Achievements - I

- The Business Model
 - We started the Market Validation phase with a model in mind;
 - We realised in the early stages of the phase that the model was not appropriate for all the healthcare systems and for all the types of healthcare providers;
 - We have reviewed the model and we have better attuned it to the specificities of the various settings

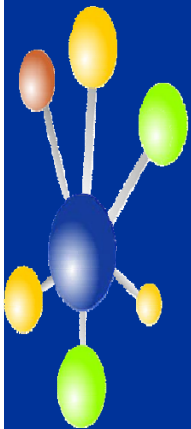
From Franchising Network ⇒ Network of Excellence

Achievements - II

- The organisation
 - organisational aspects have been discussed between CoEs and PoCs to optimise the use of resources and optimise the quality and timeliness of the services
 - organisational recommendations have been structured in a single document for others to adopt them if they wish
 - the recommended organisation has been actually put in place in the participating CoEs and PoCs for the trials

Achievements - III

- The services
 - Specifications of the services have been refined;
 - The specific implementation of the services have been tested in the real-life trials and improved throughout the phase
 - Priorities in their deployment have been discussed and agreed.



Achievements - IV

- Accreditation and contractual framework
 - Accreditation criteria have been defined in Italy
 - Model contracts have been drafted in Italy and Sweden to:
 - Define rights and obligations of the Parties
 - Establish the financial aspects of the relationship.

Achievements - V

- Impact assessment and business plan
 - Economic and the clinical indicators have been defined and measured to assess the impact of the SPEX services on economics and quality of care
 - A Business Plan has been prepared which summarises the outcome of the Market Validation for the Management of the participating organisation

The cherries on the cake

- The SPEX network centred around the University Hospital of Uppsala has crossed the national boundaries to reach a country as far away as Kyrgyzstan
- On the eve of this Conference a contract was signed between the University Hospital of Uppsala and the General Hospital of Eskilstuna to govern the relation between the two entities beyond the end of the Market Validation phase
- SPEX has been nominated to become “eTEN Project of the month” for the month of February 2006
- ...

Was SPEX a downhill walk?

- Not at all!
 - The Italian part of the Consortium needed to be reshaped
 - Over half of the original Italian PoCs disappeared by the side
 - Trials were slow to start
 - Volume of virtual referrals/tele consultations was low compared to expectations

Lessons learnt

- A single, rigid business model cannot accommodate the variety of situations which characterise the healthcare industry in the EU
- Telematic networks only work if their are built upon existing networks among professionals
- Any change in the healthcare system require time, patience and obstinacy

Conclusions - I

- The Market Validation has demonstrated that specialty Networks of Excellence
 - Are a valuable complement to the inter-level healthcare networks which are already in place
 - Improve the continuity of care offered to the patient
 - Give the treating physician visibility/control on the overall diagnostic and therapeutic path of his/her patient



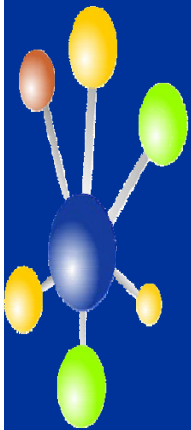
Conclusions - II

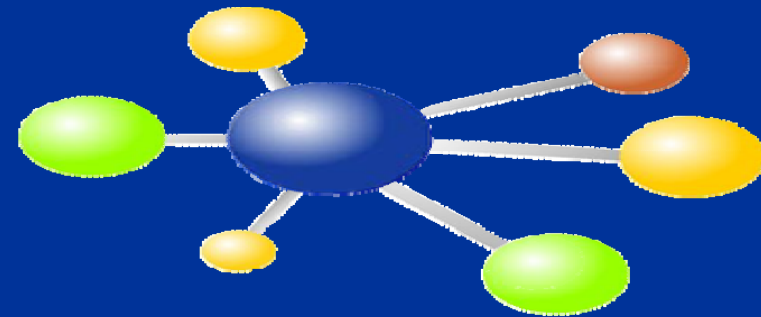
- Enhance the problem solving capability of the PoCs professionals
- Make better use of the healthcare resources by solving problems at the lowest possible level within the healthcare system
- Reduce the overall healthcare expenditure to cater for a number of clinic conditions
- Need new financial mechanisms to rebalance costs and benefits among CoEs and PoCs



I had never thought about it ...

- My friend Valerio Sanguini tells me that SPEX has operated a miracle:
 - It has created a path for the patient who, tired of the long waiting lists of the public healthcare system in Italy, has decided to go private for an initial specialist consultation or a simple (and relatively inexpensive) diagnostic exam, to come back for expensive exams/treatments or surgery to the public system without being penalised





S P R E X
SPreading EXcellence in healthcare