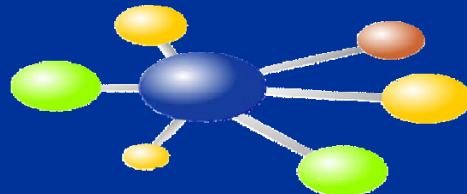


The Italian cardiovascular excellence network



SPEX PROJECT FINAL CONFERENCE

Barcelona, 30th-31st January 2006



SPEX
SPreading EXcellence in healthcare

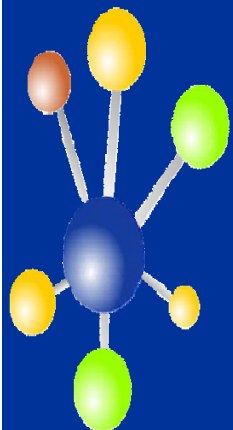
Last slide

**SPEX: From a franchising network
TO
an excellence network**

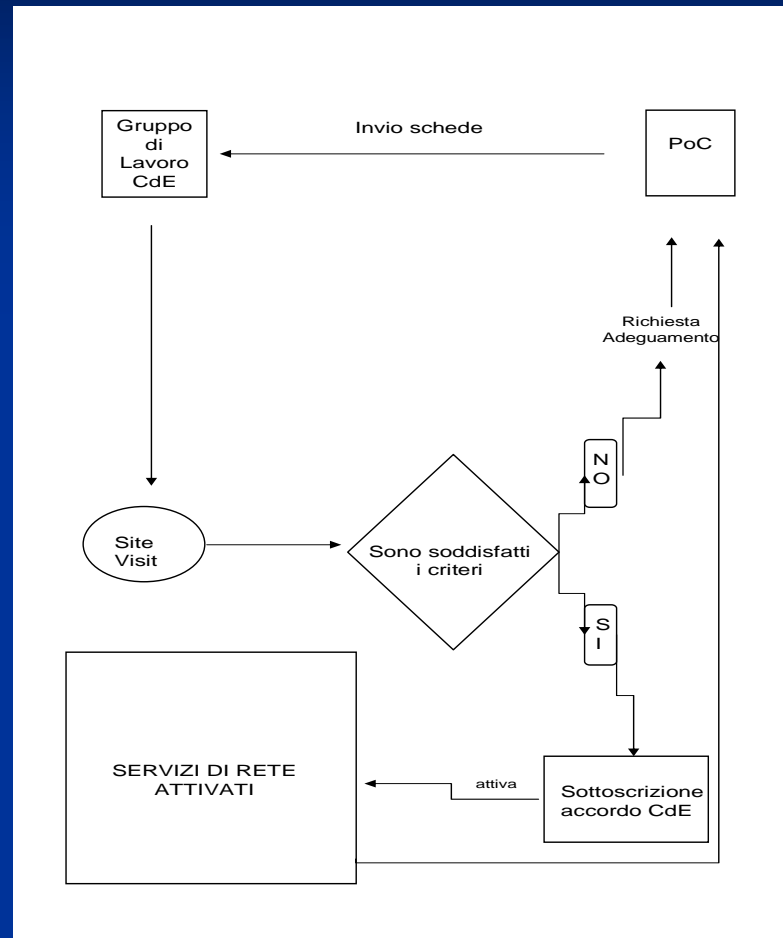


Saving anything from the original idea ?

- The actor profiles:
 - **Centre of Excellence**: a highly specialised third level hospital
 - **Point of Care**: an independent healthcare outlet
- The nature of interrelationship:
 - **Formal accreditation**
 - **Exchange of data**: everything about patients with cardiovascular disease
- The technological platform
 - **TMR software**



Accreditation process



Form compilation

Site visit

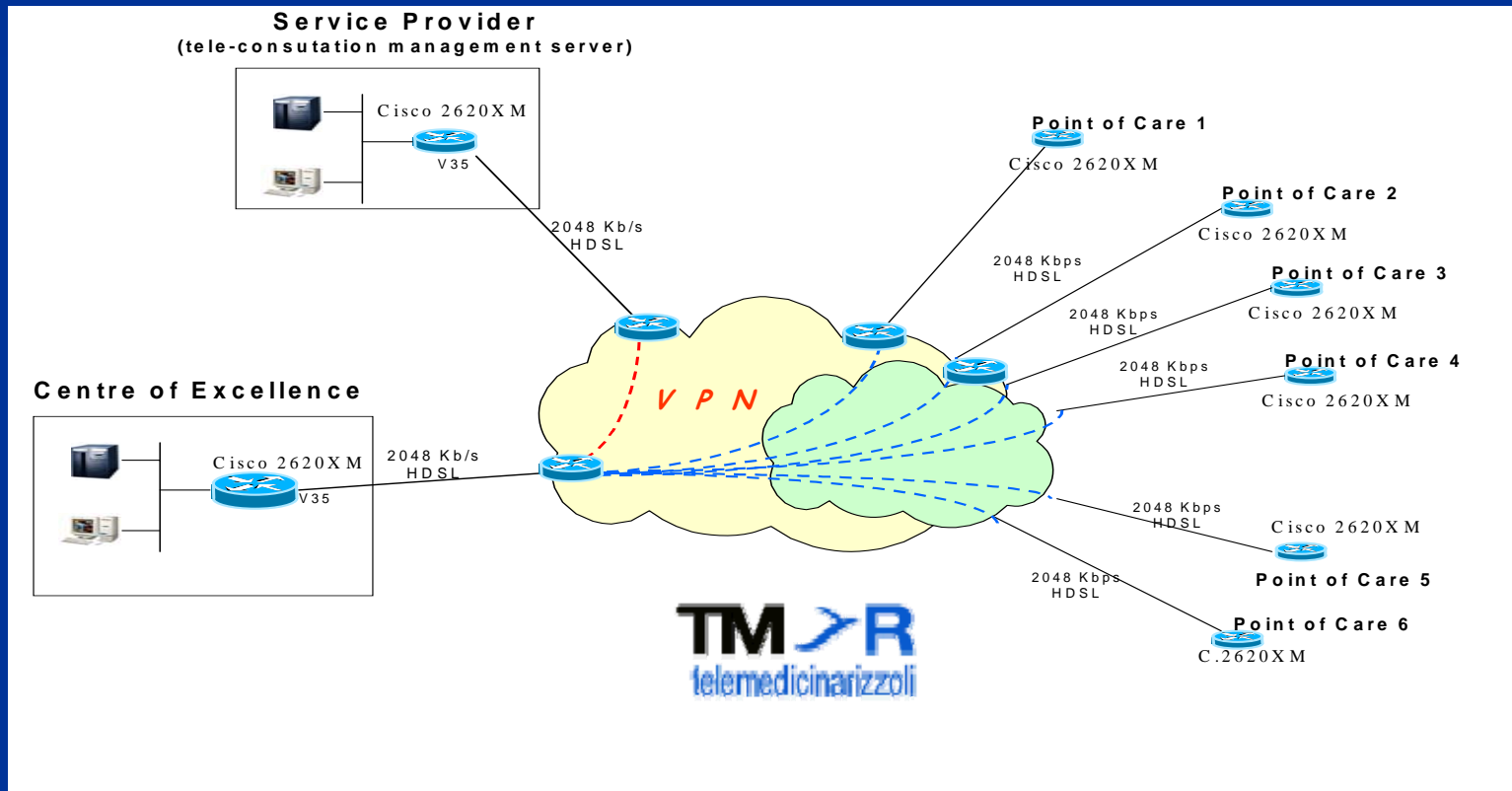
Reversal site visit
(the PoC
cardiologist at
CCM)

Contract signature

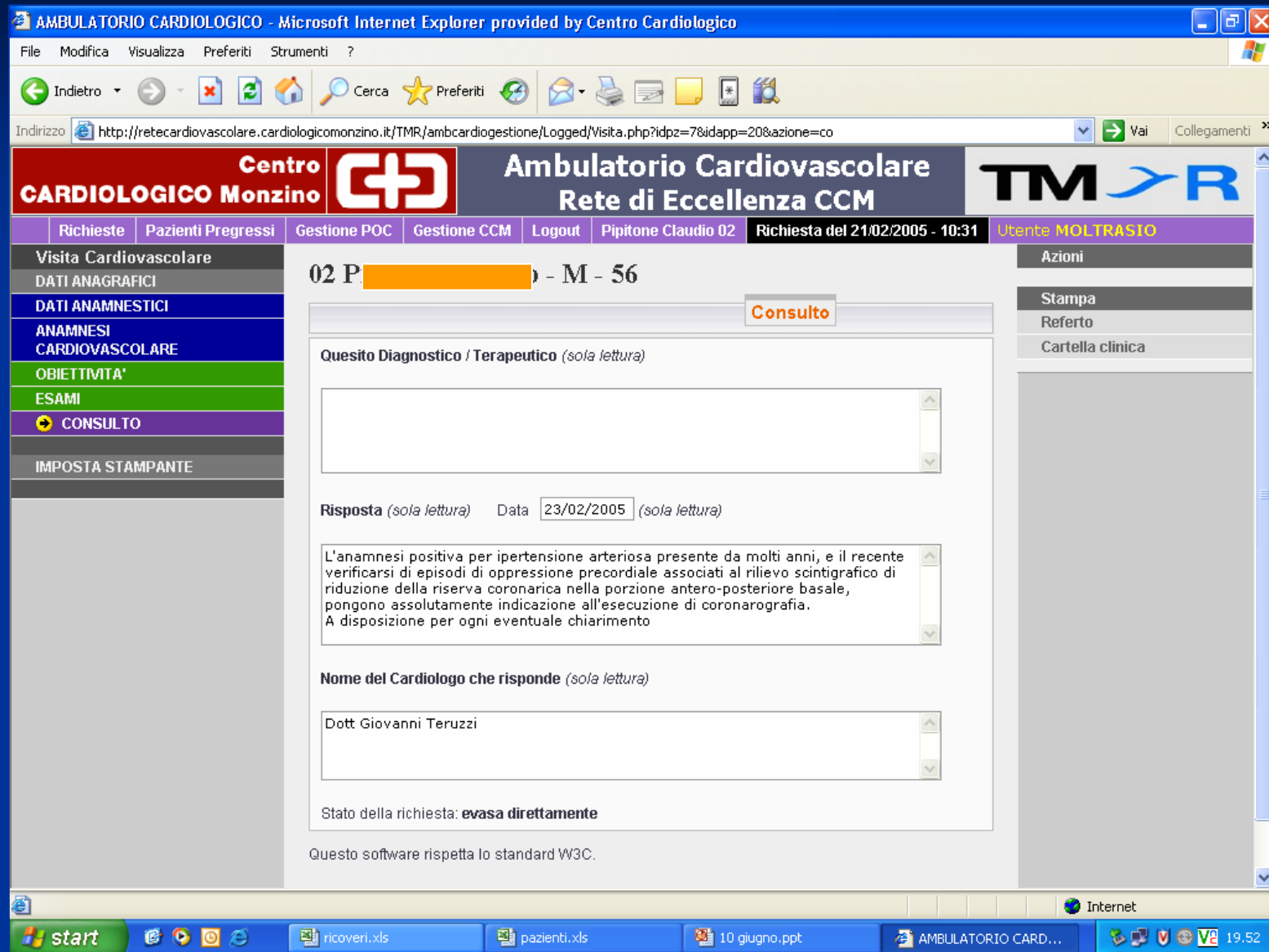
Technological backbone

The model of healthcare delivery network called Network of Excellence, relies on a **hub & spoke telematic network**:

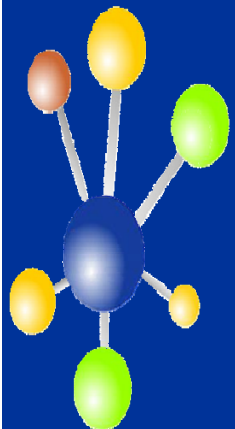
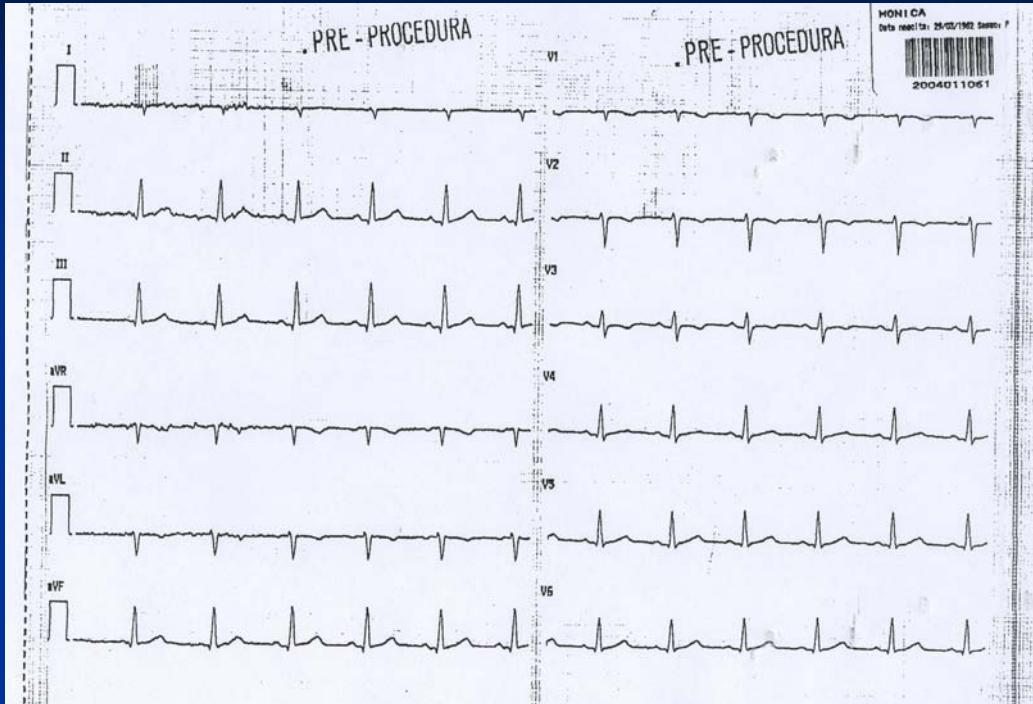
- the Centre of Excellence plays the role of hub
- the healthcare outpost that of spokes.



Tele consultation software



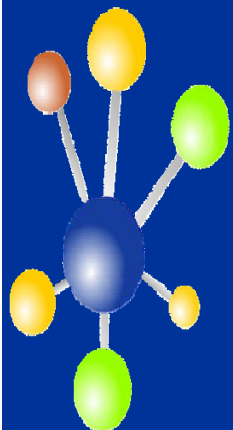
Long distance connection



The rules remained the same

The CoE in exchange for a fee:

1. “certifies” the clinical quality of the Point of Care
2. gives authorisation to use its “brand”
3. provides services centred around:
 - Professional development of medical personnel (through eLearning applications but also through “traditional” face-to-face training activities) leading to the fast spread of medical knowledge and early adoption of innovative diagnostic and treatment techniques;
 - Sharing of clinical guidelines, clinical protocols and patient records;
 - Remote consultancy services:
 - second opinion
 - interactive tele-consultation applications



The final network



Barcelona 30-31 january

Italian network PoCs

1. Enrolled

- Centro Diagnostico Plinio, Ercolano (Napoli)
- Gruppo Bios, Roma
- Poliambulatorio Le Ville, Modena

2. Evaluated

1. Torino
2. Padova
3. Gioia Tauro (Reggio Calabria)

How many Points of Care are necessary to build a network ?

- The more the better !



But how difficult to increase membership !

The ANISAP role:

not so bad at the end of the trial.....

The non ANISAP proposals:

we wont your cardiologists !!

Centro CARDIOLOGICO Monzino, Milano



A 205 beds hospital with Casualty Department, OPD, and research facilities, focused on cardiac and vascular medicine.

Data related to 2005



Admissions	7671
Cath lab patients	3450
Electrophysiology study and/or ablation	1816
Cardiac surgery procedures	860
Vascular surgery procedures	370
OPD visits (first – second)	10175 – 21015

Inside CCM cardiovascular medicine

Hyper specialistic fields	MD
Cath lab	Dr Teruzzi
Arithmology (electrophysiology)	Dr Fassini
3D radiology (CT multislice scan)	Dr Pontone
Heart Failure	Dr Cattadori – Dr Andreini
Echocardiography	Dr Celeste
Vascular surgery	Dr Trabattoni
Cardiac surgery	Prof Alamanni – Prof Polvani
General cardiology	Dr Pesoli
Hypertension	Dr Alimento

Activity summary 2005

PoC	Consultations
Gruppo BIOS	10
Centro Diagnostico Plinio (Napoli)	28
Poliambulatorio Le Ville (Modena)	4
Total activity	42

Summary of CCM consultation

Sub-speciality	Consultations	Percentage
Cath lab	14	33,3%
Aritmology	8	19,0%
CT scan	1	2,4%
Heart Failure	4	9,5%
Ecochardiography	1	2,4%
Vascular surgery	1	2,4%
Cardiac surgery	2	4,8%
General cardiology	11	26,2%
Hypertension	-	0,0%

Point of Care: Bios Roma



Locations: 9
 OPD consultations: 1.080.093
 (cardiology: 11.114)
 Lab exams: 3.050.000



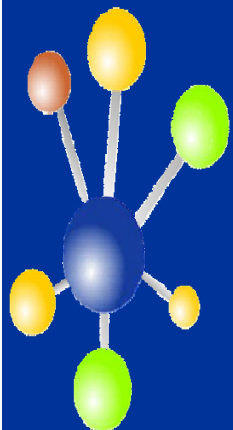
Activity	Patients = 10	
CCM admission	5	
	Cath lab	1 diagnostic CoroX 2 ptca
	Arithmology	2 el mapping - ablation
Therapeutical modifications	5	

Point of Care: Centro Diagnostico Plinio Ercolano

Locations: 3
 OPD consultations: 2400
 (Cardiology: 1200)



Activity	Patients = 28	
CCM admission	0	
Teleconsultation	28	(5 admission suggested)



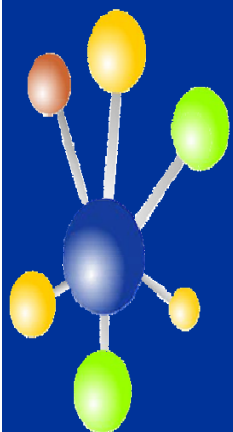
Point of Care: Poliambulatorio Le Ville Modena



Locations: 1
OPD consultations: a brand new outlet



Activity	Patients = 4	
CCM admission	2	Heart failure dpt
Tele consultation	2	5



Third level cardiology and OPD filter

From 12.314 local PoC consultations
to
42 tele consultations

Judging the win – to – win approach

- *Centre of Excellence advantages:*
 - *Widen the catchments area*
 - *Increase appropriateness through OPD filtering*
 - *Increase case mix complexity*
 - *Obtain continuity of care for extra regional patients*
- *Points of Care advantages:*
 - *Increase of image and reputation (CCM logo after accreditation)*
 - *Third level support for complex cases*
 - *Network services (teleconferences, GPs forum,..)*
- *Patient advantages:*
 - *Top level health care delivery at their home for 1st and 2nd level care (following best profiles of care,...)*
 - *Quick access to 3rd level treatments at CoE*



Profiles of Care development

Profile of care for outpatient and useful tools

Hypertension Profile of care and the patient
Spex meter (fat measurement)

Conclusion

A two level experience

- 1) The medical professionals point of view: a full success !! We rebuild the same interrelationship present inside CCM with highly qualified cardiologists far from Milano
- 2) The administrative point of view: are we arrived too early ? Selling services is so difficult ? But aren't they so chip ? The role of a real useful ITC platform.