

## CONFERENCE ABSTRACT

# From local organisational harmonisation to Global change leader: a story of operational success

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Michelle Kearns, Dorcas Collier, Margaret Curran, Phonsie McCarron

Caredoc, Ireland

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**Introduction:** (comprising context and problem statement) Like many countries, Ireland is facing a rise in chronic disease and the underutilisation of healthcare delivered to patients in the community. Services comprise publicly funded hospital and community services, and independent general practitioners. There is overreliance on hospital services and a lack of community services to provide alternative care.

**Short description of practice change implemented:** CareDoc is a not-for-profit organisation and works as a service providing trusted third party, funded by item-of-service charges. It developed Community intervention team (CIT) services and offered them to move care from inpatient settings to deliver acute care in the community. A CIT is a nurse led service providing acute care to patients in the community, who otherwise would require hospitalisation. There is in house EHR support.

**Aim and theory of change:** The aim is to provide appropriate patients with appropriate care in their community thus preventing unnecessary hospital admission or facilitating early discharge from hospital. The CIT uses strict clinical criteria to accept a patient into the service and must be avoiding a hospital admission or facilitating early discharge.

**Targeted population and stakeholders:** The CIT is for patients over 16 years who require an acute clinical treatment that would usually take place in the hospital setting.

**Timeline:** The first Caredoc CIT model of care concept and design was developed in early 2011 and the first patient accepted in the Carlow and Kilkenny area, covering a population of 145,659, in September 2011. Based on initial success, the Caredoc CIT model of care was extended in:

- 2014 South Wicklow
  - Population 118,379
- 2015 Waterford
  - Population 127,807
- 2016 Tipperary
  - Population 94,136.

**Highlights:** (innovation, Impact and outcomes) The implementation required trusted partnership working with all stakeholders, engaging at an early stage, including management, clinicians, and allied health professionals from both primary and secondary care. The team developed and enhanced the relationships between the hospital, community and primary care settings to support patients and care delivery in the community.

**Comments on sustainability:** The number of patients treated by the CIT service has increased annually with 2,866 treated in 2015 and 3,642 from January – October 2016.

**Comments on transferability:** The Caredoc model of CIT has successfully expanded over 4 regions throughout Ireland.

**Conclusions and Discussion:** (comprising key findings) The Caredoc model was included in “Lessons from transforming health services delivery: compendium of initiatives in the WHO European Region” and as a WHO reference site for Connected Integrated Health Service Delivery. Following on from this the Caredoc team have been asked by the WHO to lead a Global Community of Practice on Change Management.

Lessons learned

- Automatic buy-in not a given
- Communication to all stakeholders is key
- Key leaders and champions are vital
- Do not encroach on clinical time
- Arrange meetings to suit stakeholders
- Fit-for-purpose IT (inter-operable real-time EHR) is essential
- Mutual trust and added clinical value are key enablers

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**Keywords:** change management; community intervention teams

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