

Coordinated Care

Group 1: Health care professionals (HCP) who are committed to a coordinated care model / approach but do not know where to start

Members

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Proposed project: Collaborate MDT

Name the project and outline the purpose and objectives of the project.

Clarify the target audience and geographic scope.

Project Title	Collaborate MDT (Multi-disciplinary team)
Purpose	To provide a blueprint for multi-disciplinary collaborative care model that can be used in any healthcare system to prevent, halt and reverse complications
Objective(s)	<p>A collaborative team approach including the patient to get the best outcomes</p> <p>An ongoing exchange of communication between all members of the multi-disciplinary team</p> <p>Ensure patient feels confident that each member of the multi-disciplinary team knows everything they need to know about their entire case</p> <p>Patient has access to their data/evidence and is empowered in the management of their diabetes</p>

The who and the whom:

Clarify the stakeholders of the project and the target audience.

<p>Stakeholders</p>	<ul style="list-style-type: none"> -Clinical Lead/Hospital Chief (funding and time allocation) -Providers of Care – HCPs (part of MDT – primary and secondary), patient, caregivers -Ministry of Health -key NGOs -Public Health Organizations (WHO) -pharma companies -local diabetes foundations
<p>Target Audience</p>	<p>Primary responsible clinician HCPs (primary and secondary) – all members of the MDT Patient/patient advocate Family/caregivers</p>

Actions:

Determine actions for each objective, and when and how these will be implemented and who is responsible.

Timeline	Steps
TBD	Systematic Review Publication - identifying the need for change (measures of poor performance) as rational for project initiation
3 months	Literature review on MDT models – successes and failures
3 months	Develop “blueprint of success” based on existing MDT models <ul style="list-style-type: none"> - How to identify primary responsible clinician - How to identify MDT members - Rationale for a patient advocate - How to establish once a month MDT meetings - Provide sample agenda and discussion guide for meetings (Prevent, Halt, Reverse complications) - Outline milestone timeline for the patient’s care - Identify key measures and means for follow-up reporting (short and long-term measures of improved care in MDT patient population)

Actions:

Determine actions for each objective, and when and how these will be implemented and who is responsible.

Timeline	Steps
3 months	Identify pilot sites for implementation and evaluation
	Identify Clinical Leader/Champion
	Identify Primary responsible clinician
	Meet with Hospital Management Team to gain buy in (time and funding for implementation)
	Hire a “patient advocate” to be part of MDT meetings
	Identify and onboard the MDT team and patient (sharing of health records, comments, questions) **assess online apps as tools for this exchange of info
6 months	Implement and track the Collaborate MDT blueprint
2 months	Evaluate and report pilot findings
	Adjust blueprint based on learnings
	Expand pilot to other locations

Evaluation and Impact

Outline mechanism for evaluating progress and how the impact of the program will be measured.

<p>Evaluation Mechanism</p>	<p>Implementation success – adoption of model, milestones</p> <p>Patient satisfaction survey – includes experience, “confidence in care”, willingness to share data, etc.</p>
<p>Impact Measurement (targets, indicators, etc.)</p>	<p>Auditable improvements in care – morbidity, mortality, and patient satisfaction</p> <p>Affordability</p> <p>Ease of implementation</p>

Sustainability, Replicability, and Scalability

<p>Is the program a once-off, or does it require sustaining?</p>	<p>Requires sustaining post-pilot</p>
<p>Can the program be replicated in other contexts?</p>	<p>Yes</p>
<p>Can the program be scaled up (expanded)?</p>	<p>Yes</p>