Combination of a Population Health Management Model and Chronic Care Model

**The National Care for the Elderly Programme**

*Embrace, a model for integrated elderly care: study protocol of a randomized controlled trial on the effectiveness regarding patient outcomes, service use, costs, and quality of care*

Sophie LW Spoorenberg, Ronald J Uittenbroek, Berrie Middel, Berry PH Kremer, Sijmen A Reijneveld, and Klaske Wynia
New care model  Since January 2012

www.samenoud.nl
Health and well-being of elderly people (75+)

Elderly can continue to live at home longer
Chronic Care Model

Community

Health Systems
Organization of Health Care

Self-Management Support
Delivery System Design
Decision Support
Clinical Information Systems

Improved Outcomes

Informed, Activated Patient
Prepared, Proactive Practice Team

Productive Interactions

Developed by the MacColl Institute
Embrace = connecting

1,500 Elderly people

Insurance company

3 Municipalities

3 Hospitals

Elderly associations

15 General Practitioner Practices

3 Welfare organizations

Health care provider
- Home health care
- Homes for the elderly
- Nursing homes
CCM key- elements

• Elderly Care Team in the GP-practice
  › General Practitioner and elderly care physician
  › District nurse and social worker (casemanagers)

• Self-management & prevention program

• Decision support instruments
  › History taking form (ICF-based), protocols, etc.

• Web-based Electronic Elderly Record system
Population Health Management Model

Kaiser Permanente Triangle
Risk profiles
Annual screening

Development and measurement properties of the self assessment version of the INTERMED for the elderly to assess case complexity

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Measurement Properties of the Groningen Frailty Indicator in Home-Dwelling and Institutionalized Elderly People

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... and triage: Three risk profiles
Risk profiles

Robust 64%

Frail 16%

Complex care needs 20%

Please note: No medical diagnoses
Suitable care intensity levels

Complex care needs
Case management: District nurse

Frail
Case management: Social worker

Robust
Group Activities

All three profiles
Prevention

Self-management support
Individual level

Self-management support
Group level

Care Management

Case Management

5%

15%

16%

64%
Hypotheses Randomized Controlled Trial

- complexiteit van zorgbehoeften
- kwetsbaarheid
- welbevinden
- kwaliteit van zorg
- kosten
Qualitative studies

1. **Elderly people** (n=23, 3 profiles):
   Appreciated the structural attention of the Elderly Care Team → felt save and secure → had the confidence that they could continue to live at home longer

2. **Casemanagers** (n=12)
   The structural contacts created a trustfull relationship → CMs gained a better insight in the needs of the elderly and their situation → CMs were better able to fit the needs of the elderly and to prevent for escalations
Embrace Business Case

Expected annual savings per person: € 274

› Complex care needs profile € 599
› Frail profile € 285
› Robust profile € 169

Including the costs for Embrace

Confirmed by the health care insurance company
Developments

• Moving towards integrated and structural funding
  › Approved ‘Policy rule for innovation’

• Valorisation of Embrace to other regions
  › Province of Drenthe: since this month (±1250 elderly)

• Preliminary plans to broaden the model to other vulnerable groups
  › Youth, chronic diseases, mental health, etc.
Movie Embrace
www.samenoud.nl
And: Youtube
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