

iCORE: An innovative experience of resources coordination in mental health

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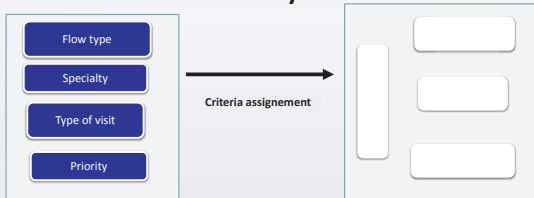
iCORE is a software tool based on the interoperability, that allows automatically schedule a visit between different centers applying defined criteria.

Composed by the modules

- Scheduling rules defined by an authorized user
- Flow rules authorization defined by an authorized user
- Messaging between centers
- Engine to control the compliance of rules
- Statistics

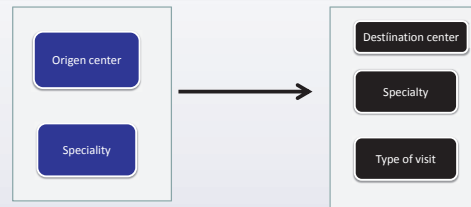
Scheduling rules

Criteria definition that must be met to automatically schedule a visit to another

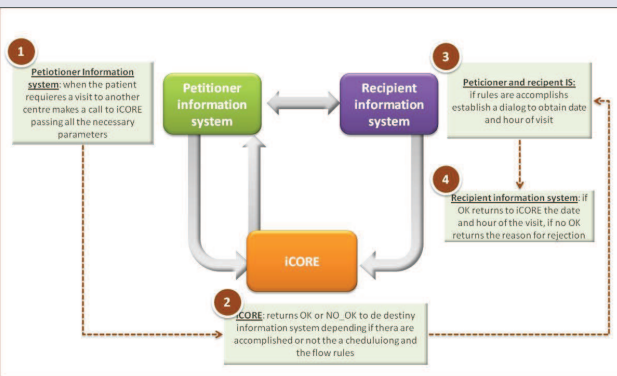


Flow rules authorization

Definició of what types of visits of a center / speciality can be scheduled from another center



Scheduling flow between levels. Control compliance rules



Scheduling criteria by flow, visit type and priority

Scheduling Mental health specialty from primary care depending on visit type and priority		
Type of visit	Criteria	Criteria values
Interconsultation (visits without the residence of the patients. Primary care doctors or specialists are involved)	Clinical criteria: cases with diagnostics and/or therapeutics doubts. 1. It must exist an interconsultation of the patient	Existence of interconsultation = Yes
Must accomplish	Criteria 1	
First visit with priority	1. First visit to Mental Health 2. Suicide risk 10. Aggression risk 11. Vital risk	Criteria 1° visita a Salut Mental • Suicide: Mini-plus: moderate or high • Aggression: value = Yes • Vital risk: value = Yes
Must accomplish	6. Previous interconsultation	• Result of the interconsultation: schedule a visit to the specialist
Must accomplish	• (Criteria 1 + (criteria 2 and/or criteria 10 and/or criteria 11)) or • Criteria 1 + criteria 5 + criteria 6 The date assigned to the visit must not exceed 15 days	
First visits without priority	1. First visit to Mental Health 2. Risks 3. Specific list of diagnostics TM 4. Clinical severity / functional impact 9. Prolonged work absence for mental illness 5. Any diagnostic TM 6. Previous Interconsultation	Criteria First visit to mental health • Suicide risk: low • Specific list of diagnostics ICD-9-CM and CIM-10 corresponding codes • CIE10: F20.xx, F21, F20.8, F25.x, F22.0, F23.8, F24, F06.x, F29 • ICD-9-CM: 295.xx, 301.22, 295.40, 295.70, 297.1, 298.8, 297.3, 293.xx, 298.9 • Global assessment scale activity <=50 and/or • Prolonged work absence due to mental illness (> 2 months)
Must accomplish	• Criteria 1 + criteria 3 • Criteria 1 + criteria 2 + criteria 5 • Criteria 1 + (criteria 4 and/or criteria 9) + criteria 5 • Criteria 1 + criteria 5 + criteria 6	
Priority follow-up visits without risks (advance scheduled visit to CSM / CAS)	7. Existence of a scheduled visit to mental health	Existence of a scheduled follow-up visit to mental health
Must accomplish	Criteria 7	
Subsequent visits (brief interventions)	The profile of the petitioner must be: <u>doctor or psychologist</u>	Petitioner: psychiatrist or psychologist
Must accomplish	Criteria 8	

Messaging between centre

The information systems dialog is done using standard messages

Engine to control the compliance rules

The objective is to control if the compliance rules are accomplished, the results are exploited later. When the rules are not accomplished a message is showed in the screen informing the criteria that are not ok.

Conclusions

The iCORE project is a real opportunity to integrate SSII that facilitates the development of integrated working model AP / SM (basic requirement for the work processes).

Mental health patients to be visited by a specialist out of the primary care consultation with a scheduled a visit with the psychiatrist prioritized with clinical criteria.

Availability of some basic indicators of strategic and operational management should facilitate the integrated management of mental health patients.

Implementation:

Phase I: Development of the project.

Phase II: Pilot implementation at 3 Primary Care Centres at Vallès Occ. Est (EAP's Barbera, Cap Nord, St. Oleguer). Main results: ≥ 80% of first psychiatric appointments from primary care setting is done directly through the iCore platform, taking account the clinical priority.

Phase III: Extension at all Primary Care Centres that are included in the integrated health area of Taulí and, finally others areas of Catalonia.

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