Implementing the Chronic Care Model for the Management of Noncommunicable diseases (NCDs) in the Primary Care Setting

Lecture: Applying Components of the Chronic Care Model

In this brief video lecture, we will discuss the first element of the Chronic Care Model, the Health System Organization, in which we want to establish a health system that prioritizes safe and superior care.

The plan of this system focuses on a dedicated implementation of the CCM throat.

Clinician leaders play an active and visible role within the team advocating for improvement at every organizational level.

The emphasis is on fostering effective improvement strategies that drive extensive system wide changes. Encouragement is given to openly and systematically address errors and quality issues, seeking to enhance the quality of care. Incentives are designed based on the quality of care and agreements are developed to streamline care coordination within and across organizations.

Healthcare System Organization refers to the structuring or organization of the healthcare services. The four main features are supportive leadership, quality assurance, incentivization, and optimizing communication.

Now, looking at the first feature, *supportive leadership,* this focuses on providing leadership for securing resources and removing barriers to care. The effort to improve care should be woven into the fabric of the organization and aligned with a quality improvement system. Senior leadership must identify the effort to improve chronic and preventive care as important work and translate that into clear goals reflected in the health centers policies, procedures, business plan and financial planning. Senior leaders and clinician champions should provide support by being visible and committed members of the team and provide personnel with needed resources and support. They should visibly support leaders, which is critical for ongoing success. Leaders should visit clinic sites reviewing monthly reports provide resources and assist teams with problem solving. They should also ensure that the entire organization is engaged in the improvement effort.

The second feature of the health care system organization is *quality assurance*. This involves creating a culture within the organization and mechanisms that promote safe high-quality care. Safety has been a rallying cry for inpatient care and is becoming a concern in outpatient care. The system should encourage open and honest systematic handling of errors in care, as well as issues with quality assurance in order to improve care. This support of change in pursuit of better-quality care becomes part of the culture of the organization and everyone has a role in quality.

Thirdly, the *provision of incentives*. Care teams should be rewarded for quality care, not just productivity. Rewards should not always be monetary. Well, it should also involve recognition. Incentives should not just be for physicians, but all healthcare workers. There should also be consideration of bonuses for quality care and rewards for developing new systems or programs. For example, rewards can be given for establishing a registry, providing patient education, and providing regular follow-up.

The fourth and last feature of the health care system organization is *optimization of communication*. This involves ensuring coordination and communication, developing agreements that facilitate care coordination within and across organizations, and working with the local hospitals and social service agencies in an open and coordinated manner.

Now let's look at a case study. This case study analyzes Alberta system's approach to chronic disease management and prevention, utilizing the expanded chronic care model. Alberta's integrated approach to chronic disease management programming embraces client centered care, support self-management and facilities care across the continuum. This paper presents strategies implemented through collaboration with primary care to improve care of individuals with chronic conditions. There is also evaluation of evidence supporting success and lessons learned from the Alberta perspective.