

New Model of Care Approach at Primary Health Care

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Abstract

A “model of care” (MoC) is defined as a way of the health services delivered by system of care. It outlines the best practices for care and services for people and population groups; At the right place, by the right team, at the right time, and right care plan. MoC aims to transform the prevailing pattern of accessing healthcare services by transforming from: Hospital to home, Activities to results, Treatment to prevention, Institutions to integrated systems, Facilities to virtual services, Fragmentation to integration, Passive individual to active and accountable individual. The six healthcare systems were selected for the new model of care in a way that addresses the primary questions of individuals in the community [1]. Preventive Care System –How does the system help me maintain my health? , Urgent Care System – How does the system help me when I face an urgent health problem? , Scheduled Care System – How does the system help me in achieving better outcomes for planned procedures? , Maternity and Child Care System-How does the system help me safely have a child? , Chronic Disease Care-How does the system help me cope with the chronic illnesses I suffer from? Palliative Care -How can the system provide me with the best level of care? [2].

MoC Adapted at KHN in 2018 by 2 initiatives and increased gradually through years by 2024 it become 23 initiatives they result in increasing the quality of care and outcomes to our population, which will be embedded to the health care system according to Saudi Arabia Vision of 2030 [3].

Keywords: Model of Care, Primary Health Care, Health System Transformation, Vision 2030, Preventive Care, Integrated Healthcare, Chronic Disease Management, Virtual Care, Patient-Centered Care, Quality Improvement

Introduction

From theory to strategy The Vision Realization Office (VRO) has organized its work into seven themes:

- The New Models of Care
- Provider Reforms
- Financing Reforms
- Governance Development
- Private and Third Sector Participation
- Workforce Development
- EHealth development. The first three themes can be understood as enablers of three levels of value: The proposed goals of the Transformation are to

1. Improve health: Increase the length, wellbeing and quality of life of Saudi citizens, which includes the Vision 2030 goal of increasing the life expectancy of citizens to 80 years by 2030 [4].

2. Improve healthcare: By improving the quality and consistency of services and the performance and accountability of healthcare organizations and staff to deliver care that is safe, effective, patient-centered, timely and equitable; and
3. Improve value: by containing costs, improving outcomes, controlling public healthcare expenditure and guiding new investment.

All three transformation goals conform with, and are enablers of, the Vision 2030 strategic objectives for health: access, value and public health. These goals are also informed by international frameworks for the enhancement of health systems

Including

- The World Health Organization health systems framework [5].

- The World Bank Group health systems framework [6].
- The Institute for Healthcare Improvement “Triple Aim” framework [7].
- National Academy of Medicine, “Vital Directions for Health and Healthcare” [8].
- The NHS England “Five Year Forward View” strategic plan [9].

The “New Models of Care” theme as a focal point for enhancing personal value through the improvement of treatment and care modalities at an individual level.

Outlining the transformation strategy through 2017 the MoH made progress in developing the principal elements of its strategy. Links these to the challenges they seek to address, which are common to all pathways, including [10].

- Shortage of medications and available medicines are dispensed inconsistently
- Lack of standardized clinical guidelines and variations in the quality and delivery of care
- Poor pathway management, with inappropriate referrals, and inappropriate presentation by ill-informed patients disrupting patient flow
- Lack of out-of-hospital services for diagnostic, preventative, proactive or follow-up care
- Poorly coordinated care, particularly between MoH providers and non-governmental organizations and
- Poor communication between providers, and between clinicians and patients.

To address these challenges, the MoH has developed a program to design, pilot, and implement a patient centric New Models of Care Program [11]. The program has been designed to answer six key questions.

1. How will the system help to keep me well?

2. How will the system support me when I have an urgent problem?
3. How will the system support me to have a great outcome for my planned procedure?
4. How will the system support me to safely deliver a healthy baby?
5. How will the system support me with my chronic conditions?
6. How will the system support me with compassionate care during the last phase of my life?

These questions resemble the Model of Care’s Six Systems of Care (SoC) that cut across different “service layers” to support people to stay well and efficiently get them well again when they need care [12].

Model of Care: Service Layers

Activated People are at the core of the MoC. This emphasizes the role that individuals and their families will play in keeping well and taking care of their own health through self-care, awareness, and empowerment.

Healthy communities will support activated people by encouraging them to lead healthy lifestyles, providing them with the appropriate information, and providing them with access to community care and wellness facilities [13].

Virtual Care will be a powerful source of health advice. Virtual care in most instances will serve as people’s first point of contact with medical care providers, improving people’s access to medical advice and guiding them to navigate the healthcare system and seek appropriate care.

Primary Care, Secondary Care, and Tertiary and quaternary care will still be the main source of care beyond virtual care.

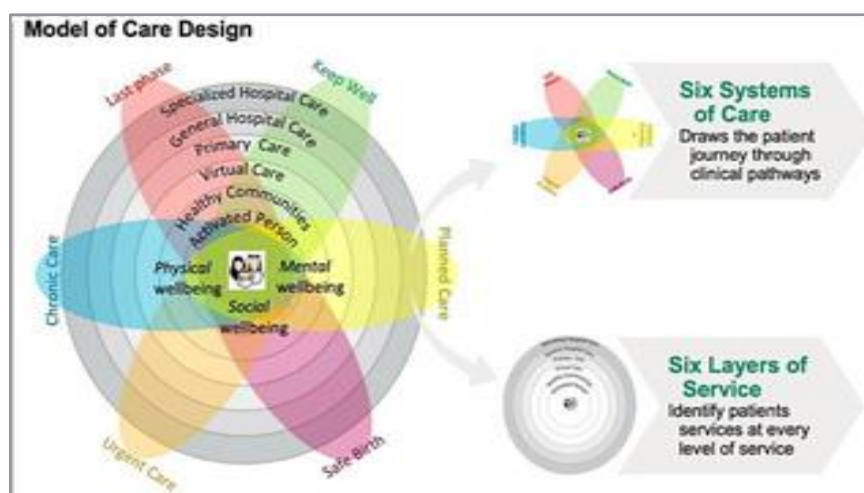


Figure 1: Six System of Care

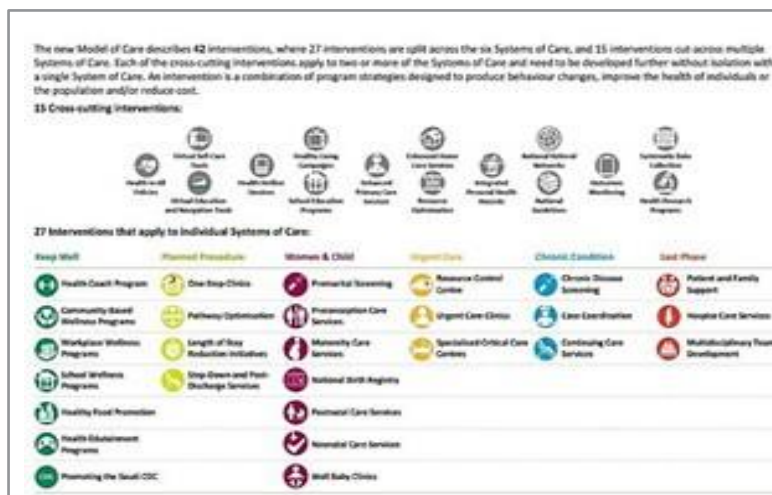


Figure 2: 42 MoC Initiatives

The New Models of Care is designed to support people with their health and wellness needs: physical wellbeing, mental wellbeing and social wellbeing. This aligns with the principles set out in the Constitution of the World Health Organization: “health is a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity”.

The New Models of Care program has been designed based on the following principles:

Providing knowledge to people as part of their treatment, and enabling them to be well-informed and in control of their health. The New Models of Care Program will deliver 42 coordinated interventions, across six ‘systems’ of care by the end of 2030. The prioritized systems of care are: Keep Well, Safe Birth, Planned Care, Urgent Care, Chronic Conditions and Last Phase. The 42 initiatives will include defined patient pathways and key performance indicators (KPIs) including measurement of: safety and quality process metrics, clinical and patient reported outcomes, and financial performance. These New Models of Care KPIs will be incorporated into the KPIs for the Essential

Benefits Package (EPB) to ensure that they are monitored and maintained when achieved [14].

Model of Care in Khobar Health Network: MoC Aim

To increase the health system, reduce the waiting time for services, provide care closer to home, and embed comprehensive care within one system (Cluster) Through the strategic implementation of the MoC Initiatives, we will achieve the optimal goals in health care services focusing on prevention and treatment, provide efficient quality care benefitting from integration and coordination to provide treatment at the lowest cost and facilitate access to care to beneficiaries by digitalize the tools [15].

In Al Khobar City, we have more than 650,000 people within a total area of 571 km². We serve those populations within 20 medical facilities, with 11 Primary healthcare centers and the rest supporting medical services. We started the MoC initiatives in Al Khobar in 2018 and we implemented till now 24 pathways within 5 systems of care according to the strategic goals of the cluster.



Accordingly, we monitor the performance of each pathway monthly through agreed KPIs below table summarizes the achievements of Khobar Health Network after implementation of new model of care.

System of care	Pathway	Achievements
Chronic	System	of
Care	Hypertension screening/controlling	Increased by 67% / 20% in sequence
	Type 2 Diabetic screening/controlling	Increased by 48% / 66% in sequence
	Obesity	Detect 5.3% of the targeted population
	Chronic Kidney Disease	We follow-up 50 Pts in CKD Clinic
	Breast Cancer Screening	Increased by 89 % in the last 2 years
	Colorectal cancer screening	Increased by 84 % in the last 2 years
	Cervical cancer screening (just launched)	Increased by 15% of the targeted woman
	Wellness Visit program	(new initiatives)
	Psychological care	PHC screened population: 2291 Patients Referred to the specialist in Mega Center: 438 Diagnosed: 80 Patients
Urgent care centers	Urgent care visits	Duty: 16 hr. 3 Clinics – Average Patients: 7000/month (percentage of reduced burden to ER under study)
Safe birth	Anti-natal Care low risk	Increased by 37% to become 83% of completed 4 antenatal visits
	Anti-natal intermediate risk	Reduced to 60 % of visiting
	Well baby- low risk	Vaccination Rate 100 %
	Wellness baby intermediate risk	Reduced to 60 % of visiting 80%
	Pediatric Ophthalmology screening	(new initiatives)
	Premarital screening	We decreased the waiting time by 20 % from result to consultation for non-compatible couples.
	Preconception care	Family physicians provide care in all KHN PHCs we achieved 100% of targeted married women who received preconception care counseling
	Postnatal care	A new pathway started in October / link between Hospitals and PHC.
Keep me well	Health Coach	11 Health coaches
	Community wellness	4 annually initiatives/beneficiaries of more than 2000/year
	Workplace wellness	4 annually initiatives to all staff
Cross-cutting intervention	Team-Based Care approached	63 Teams 16 Care-Coordinator 405,861 Beneficiaries

As a Result of Implementation of Model of Care the Network Accomplish the Following Success

Implementation of work place wellness result on accreditation of Khobar health network as best place to work by Great place to work company.

- 100 % of PHCs accredited from Saudi central board for accreditation of Healthcare institute.
- Excellence award to Khobar Health Network from Eastern Health Cluster Headquarter.
- WHO accreditation of Al Khoabr as A healthy City.
- Recognition of 3 health centers as baby-friendly hospitals from WHO & UNICEF.

References

- KSA Vision 2030. (2024). Strategic Objectives and Vision Realization Programs, pdf, undated.
- KSA MoH VRO. (2017). Ministry of Health Transformation Journey, Supervisory Committee.
- https://en.wikipedia.org/wiki/Hajj#Number_of_pilgrims_per_year
- KSA MoH VRO. (2017). Business Case for the Health System Reform Component of the Kingdom of Saudi Arabia's Vision 2030 Program, Version 2.0.
- http://www.wpro.who.int/health_services/health_systems_framework/en/

6. <http://siteresources.worldbank.org/HEALTHNUTRITION-ANDPOPULATION/Resources/281627-1095698140167/HealthSystemsAnalysisForBetterHealthSysStrengthening.pdf>
7. <http://www.ihl.org/Engage/Initiatives/TripleAim/Pages/default.aspx>
8. <https://nam.edu/initiatives/vital-directions-for-health-and-health-care/>
9. <https://www.england.nhs.uk/five-year-forward-view/>
10. http://www3.weforum.org/docs/WEF_Insight_Report_Value_Healthcare_Laying_Foundation.pdf
11. <https://www.phc.ox.ac.uk/research/value-based-healthcare>
12. Saltmann R. (1998).
13. KSA MoH VRO. (2017). Model of Care, .ppt presentation.
14. KSA MoH VRO. (2017). Corporatization Update Meeting.
15. <https://openknowledge.worldbank.org/handle/10986/15145>