

Press release

The implementation of PTAs: what are the strategical and operational challenges?

Paris, September 27, 2017 - Faced with situations of increasing complexity¹, healthcare professionals are in need of support to better coordinate their patients' journeys. Alcimed, a consulting company specializing in innovation and the development of new markets, shares the lessons it learned from the work with ARS Bourgogne Franche-Comté on the implementation of territorial support platforms (Plateformes Territoriales d'Appui - PTA), which aim to provide an appropriate response to this issue.

PTAs: a new regional asset for the coordination of the healthcare pathways of patients in complex situations

The implementation of the PTAs, following the law on the modernization of the healthcare

system, provides regions with support mechanisms for healthcare professionals, in particular primary care teams, to coordinate the healthcare pathways of patients in complex situations.

This follows the efforts made by the Regional Health Agencies since 2012 to streamline coordination and develop health networks towards greater versatility. As a result, improvements are expected in terms of efficiency, readability, and quality of service for professionals and patients.

Choices to be made at strategic and operational levels

What are PTAs?

Decree n°2016-919 issued on July 4th, 2016 implementing article 74 of the law on the modernization of the health system, relating to the support functions for professionals in coordinating complex health pathways, provides that Regional Health Agencies may constitute one or more territorial platforms on their territory. These platforms have three missions:

- Informing and guiding professionals towards the health, social and medico-social resources of the territory.
- Providing support for the organization of complex pathways, for a duration adapted to the needs of the patient.
- 3. Encouraging professional practices and initiatives in terms of organization, career security and access to care.

This development, however, raises many questions: should existing territorial structures serve as a basis or should new ones be created? How to identify the right carriers? What is the relevant level of care (regional, departmental, intradepartmental)? How to include PTA in the dynamics of the integration of support and care services, driven in particular by the Methods of Action for the Integration of support and care services in the field of Autonomy (MAIA)²? How can we ensure versatile care by supporting the attending physicians?

Marie-Sophie Ferreira, a Public Health Policy Project Manager at Alcimed, points out that "while some guidelines are set by the decree, such as the priority given to initiatives by city health professionals, the main choices of governance, implementation and financing are left to the discretion of the ARS (Regional Health Authorities)".

¹ Elderly, poly-pathological patients, patients in a situation of dependence or disability, those with cumulative social and medical difficulties, etc.

² Learn more at: http://www.cnsa.fr/parcours-de-vie/maia



At a strategic level: create appropriate governance and provide funding

The governance model choices, the size of the territories where the PTAs are exercised and the ability to include the PTA in the integration process promoted by the MAIAs and the Health Pathways for Seniors at Risk of Loss of Autonomy (Paerpa³) programs are little mentioned by the decree but are crucial for the system's success. With this in mind, there is a need for:

- Strategic management of the ARSs, in close collaboration with the Departmental Councils,
- Decompartmentalization of services for autonomy and disability
- Involvement of all stakeholders in governance primarily city health professionals.

One of the challenges to ensure the sustainability of the system is to design a new financing model that encourages efficiency of structures and better provision of care. To do this, it is then necessary to evaluate the PTAs on their activity and their impact on health pathways.

At an operational level: support the evolution of practices

The success of PTAs entails continuing the process of opening up health networks to versatility, initiated in 2012, with strong organizational challenges at stake: creation of call centers, merger/reorganization of regional and local structures, closer collaboration with medical and social teams and departmental council teams, creation of appropriate legal structures, etc.

It also seems necessary to develop "expert" teams to provide first-line support services through professionalization, acknowledgment of in-service coordination, organization of training and practice sharing, as well as the formalization of appropriate procedures and tools (identification, multidimensional evaluation, and Personalized Health Plans). In this sense, some good practices should be promoted. This may include i) informing and involving the attending physician, particularly when they are not the initiators of the use of PTA, or ii) providing information and obtaining patient consent, an essential condition for the successful implementation of the Personalized Health Plan.

All these developments must be supported by the deployment of appropriate information systems, which enable the creation of patient files and the secure sharing of data between professionals, in compliance with the legislation in force.

³ Learn more at: http://solidarites-sante.gouv.fr/systeme-de-sante-et-medico-social/parcours-des-patients-et-des-usagers/le-parcours-sante-des-aines-paerpa/article/le-dispositif-paerpa



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Press contacts:

Marie-Caroline Saro | mcsaro@comcorp.fr | +33 1 58 18 32 58 | +33 6 88 84 81 74 Sabrina Russo | srusso@comcorp.fr | +33 1 58 18 32 48 | +33 6 82 92 94 45