









Good Practice

Plaietile: supporting carers in the care of patients with chronic and/or complex wounds

Detailed information on the "Plaietile" good practice, inspired by the Interreg Europe Good Practice template

1. Author contact information				
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Are you involved i Europe project?	n an Interreg Yes			
Please select acronym:	the project CARES	: Remote Healthcare for Silver Europe		

2. Organisation in charge of the good practice

Organisation in charge: Association Plaietile Nouvelle-Aquitaine

3. Good practice general information					
Thematic objective of the practice:	Increased availability of telecare and telemedicine services for the European population, making care fairer within the region				
Geographical scope of the practice:	Regional				
	Country	France			
Location of the practice	Region	Nouvelle-Aquitaine			









CARES



Practice image



Title of the practice

Plaietile: supporting carers in the care of patients with chronic and/or complex wounds









4. Good practice detailed information

Short summary of the practice:

Plaietile is a support, expertise and coordination service for wound and healing care providers in the Nouvelle-Aquitaine region.

Detailed information on the practice:

Why?

Chronic and/or complex wounds - facts:

>A major public health issue

- 2.5 million patients with wounds each year in France, including 700,000 with chronic and/or complex wounds (Source: Meaume S, Kerihuel J, Fromantin I, Téot L. Prévalence et charge en soins des plaies dans la population générale ambulatoire: Vulnus, une initiative française. JPC. Journal des plaies et cicatrisation. 2012, num 84, p 34-43.)
- Average healing time of more than 6 months (leg ulcers and bedsores) (Source: Caisse Nationale d'Assurance Maladie. Améliorer la qualité du système de santé et maitriser les dépenses: propositions de l'Assurance Maladie pour 2014.)
- Chronic wounds are mainly linked to age and dependency, and as dependency increases, so does the level of incidence.

>Health professionals in difficulty

- Poor initial training for doctors and nurses
- Few good practice guidelines
- Difficulty accessing specialist care: territorial inequalities, lack of visibility of care on offer

>Lack of inter-professional coordination

- Complex medico-social environment for chronic wounds
- Cross-disciplinary care, with recourse to numerous specialists and professionals
- Compartmentalisation of outpatient care, hospital care and the medico-social sector

>Lack of structure in care provision

- Territorial disparities in terms of expert skills and technical platforms
- Limited deployment of telemedicine

For whom?

Patients with chronic and/or complex wounds (more than 80/90% of patients treated under the project are older adults)

Area:

Nouvelle-Aquitaine region

What is it for?

Created by healthcare professionals and supported by the association 'Plaietile Nouvelle-Aquitaine', the project **brings together volunteer doctors and nurses from the region who contribute their telemedicine expertise in addition to their usual clinical work**. It forms a virtual community, with no change in the location or type of practice of the healthcare professionals involved. Part of the team is dedicated to supporting the coordination of patient care and ensuring that the system operates smoothly.

Version: 12/2024 Good practice template | 3 / 6









The system is set up at the request of carers experiencing difficulties in managing patients with chronic and/or complex wounds. Remote practices are favoured (tele-expertise, assisted teleconsultation, remote teleassistance, remote monitoring) to enable patients to be cared for in their own homes by their usual healthcare team. When the complexity of the wound and/or the medical situation requires recourse to a specialist care service or an appropriate technical platform, patient referral is facilitated within referral establishments in the region.

The Plaietile service was launched in March 2022 and validated as a Specialised Wound and Scar Care Team in September 2022 by the Regional Health Agency (ARS) Nouvelle-Aquitaine (a Specialised Care Team is a virtual community made up of expert doctors and nurses linked by a national cooperation protocol and practising on separate sites, sharing telemedicine time in addition to their usual activity to improve access to care). In 2024, the project received two rounds of funding, from the Nouvelle-Aquitaine Region and then from the ARS Nouvelle-Aquitaine, with a view to rolling out the project across the region.

Stages of care:

- Carers facing difficulties submit a request (via a digital solution - checking the patient's eligibility and creation of the medical file)
- First tele-expertise opinion (referral of the request to an expert who will intervene via telemedicine within 48 hours; if necessary, a teleconsultation can be organised)
- Assisted teleconsultation (if necessary, a teleconsultation at home in the presence of the patient's usual nurse is carried out via a secure platform)
- 4. Sending of a care plan (after the teleconsultation, the expert draws up a care plan that includes the local protocol, the recommended examinations and specialist opinions, and the follow-up - the document is shared with the GP and the nursing team)
- 5. **Telemonitoring** (follow-up arrangements decided by each expert, new teleconsultations/tele-expertise may be scheduled)

Patient pathway coordination means that, from the moment the patient is referred and throughout the entire care episode, all the healthcare professionals needed to provide care are mobilised around the patient (support in organising the patient pathway, sharing information, helping professionals to use digital technology).

3 main objectives: to improve patients' quality of life, to make the organisation of care more efficient and to harmonise professional practices.

Perspectives:









	>Regional deployment to address regional inequalities in healthcare provision and the challenges of medical deserts		
	>Carrying out an environmental impact study (medical transport)		
Timescale (start/end date):	Since March 2022/ongoing		
	Financial resources:		
	 Medical coordination: financed by private funds from carers (project start-up) and public subsidies Telemedicine acts: national pricing / remuneration set by the National Health Insurance (fr=Assurance Maladie) Support from the Nouvelle-Aquitaine Region Support from the ARS Nouvelle-Aquitaine 		
	Human resources:		
	Plaietile brings together 24 healthcare professionals:		
	 The pathway coordination team includes 3 part-time doctors (non-salaried), 2 salaried nurses (1 FTE) and a secretary (1 FTE). 		
Resources needed:	 The pool of wound experts (doctors and nurses) and doctors specialising in pathologies related to wounds (vascular doctors, dermatologists, diabetologists, geriatricians, vascular surgeons and orthopaedic surgeons) share medical time in addition to their usual clinical activity and are paid as usual (they choose their dedicated time, which is therefore only part- time). 		
	Tecnological resources:		
	 Digital solution for sending requests for treatment and access to the tele-expertise and teleconsultation solution (<i>Omnidoc</i>) Use of a secure health messaging system (<i>MS Santé</i>) Digital coordination tool for sharing and exchanging information (<i>Paaco-Globule</i>) Medical software for patient files (<i>Doctolib Médecin</i>) 		
	- Optimised care for patients with chronic and/or complex wounds		
	 Improved coordination between public and private stakeholders involved in wound and scar management Maintaining patients at home 		
Evidence of success (results achieved):	 Increasing the skills of care teams (multidisciplinary courses are also offered by videoconference). 		
•	Between March 2022 and September 2024:		
	- +600 patients were integrated		

assisted TLC)

+300 healthcare teams supported

+1000 telemedicine procedures (tele-expertise and home-









	 Area covered in the region: 95% of Landes and Pyrénées- Atlantiques departments. The remainder: other departments in the Nouvelle-Aquitaine region. 	
Challenges encountered	 Funding difficulties and lack of long-term funding (prospects for public funding) Many healthcare professionals are afraid of new forms of organisation (telemedicine, etc.). 	
	This project could be transferred to other European regions thanks to a number of innovative key success factors, in particular Plaietile's organisational model:	
Potential for learning or transfer:	 A central point of contact via a digital access platform accessible to all requesting doctors in the region A centralised pathway coordination team whose role is to mobilise all the region's human and technical resources A multidisciplinary and multi-professional coordinated care team > a virtual community made up of expert doctors and nurses linked by a national cooperation protocol and practising on separate sites, sharing telemedicine time in addition to their usual activity to improve access to care in areas where the supply of wound and scar specialists is low, leading to longer delays in access to care. Partner referral centres and establishments that can receive patients for specialised care as part of a graded approach to care (specific expertise and/or appropriate technical facilities). The use of telemedicine practices such as tele-expertise, assisted teleconsultation and tele-assistance will enable patients to remain at home and improve the care they receive. 	
External website (optional):	>Website: plaietile.fr >Video "Plaietile – How does it work? (in 2 min)": https://youtu.be/JJFugN9iuT4	
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