POSTER ABSTRACT

The Family and Community Nurse (FCN) as a vehicle for co-created healthcare interventions in poorly accessible micro communities, a Tuscan case.

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Introduction

This is the case of a micro community living in the woods of Tuscany, Italy, from the beginning of the 1980s called “The Elves”, that counts about 400 members on a total of 1200 inhabitants of the area. They took over abandoned houses scattered throughout the forest and have been living there since then in self-isolation, rejecting technology and living accordingly to nature. Nobody has medical knowledge and any form of prevention or disease management has to come from outside. The NHS was able to address this community’s needs through the synergistic work of a GP and a dedicated FCN.

Aims Objectives Theory or Methods

Addressing this community’s healthcare issues while improving their health and subsequently extend the protection of the whole community living in the area from communicable diseases was crucial. The Elves come in contact with society as they started little businesses. Furthermore a reducing of health inequities was needed: regardless of the causes of distancing, “The Elves” did not have access to care. After the creation of two clinics and the non-judgmental attitude of the FNC, the Elves were given access to healthcare education, prevention of diseases and medical interventions from the GP that was always interfacing with the FCN.

Highlights or Results or Key Findings

The strategy of approach to this micro-community was embodied by the FNC that was able to engage the members of the community by co-designing the timing and ways of treatment and education, so as to ease the effective responsiveness of the community. These communities, typically aloof, require bespoke offers of healthcare intervention: one of the major achievements in this case was represented by the vaccination of all the children of the community. In Italy strong actions are undertaken to counter the progressive decline in vaccination, both mandatory and recommended. This attitude of distrust has led to an average vaccination coverage below 95%, the threshold recommended by the WHO to guarantee the herd immunity. In this community all the
children were vaccinated because they understood the importance of safety for themselves and for the rest of the population with which they now are in closer contact.

**Conclusions**

Investigations in this topic revealed the existence of a widespread phenomenon at national level, that of the communities that have isolated themselves. Delivering at the microlevel is a task of the NHS and the success of holistic value-creating interventions is key to the general welfare of the population.

**Implications for applicability/transferability sustainability and limitations**

These interventions are sustainable and transferable, as all they take belong to the soft skills’ domain: active listening, open mind, a non-judgemental attitude and the will of the management to organise the work around a societal structure that doesn’t work according to common rhythms.