

Key finding

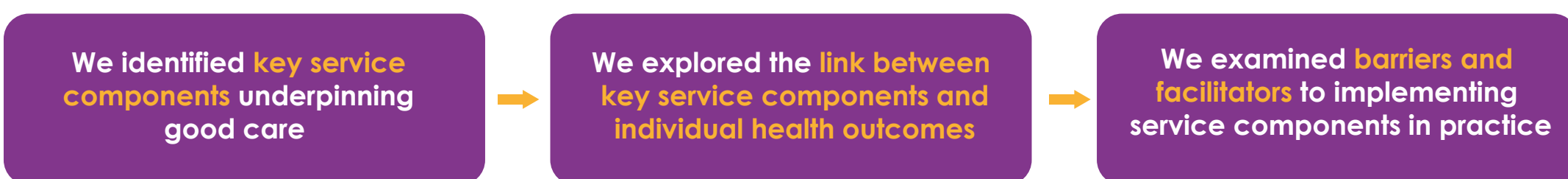
# We have identified key parts of health care services that improve care experiences and health outcomes for people with vasculitis

## Improving care delivery and outcomes for people with rare autoimmune rheumatic conditions

### Why does this matter?

Timely access to care is critical for people with rare autoimmune conditions such as vasculitis. However, **accessing care can be challenging** and there are no evidence-based standards to guide what services should be in place.

### What did we do?

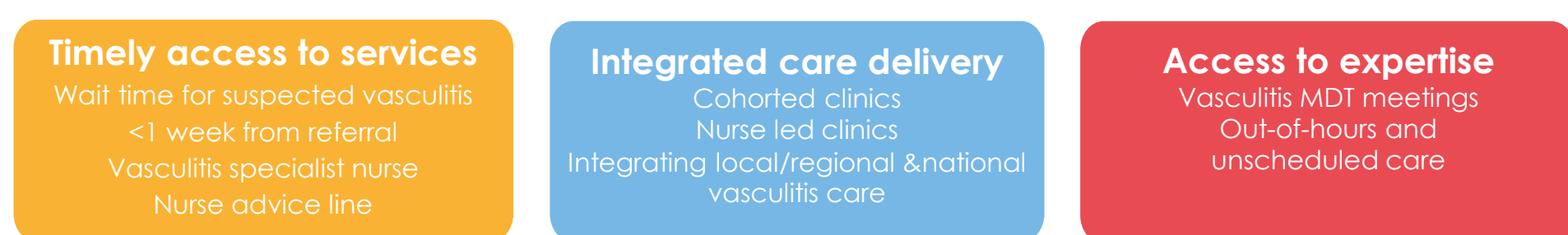


### How did we do it?

In this mixed method study, we carried out **interviews, surveys and case studies** to identify the **key service parts (components)** that enable good care.



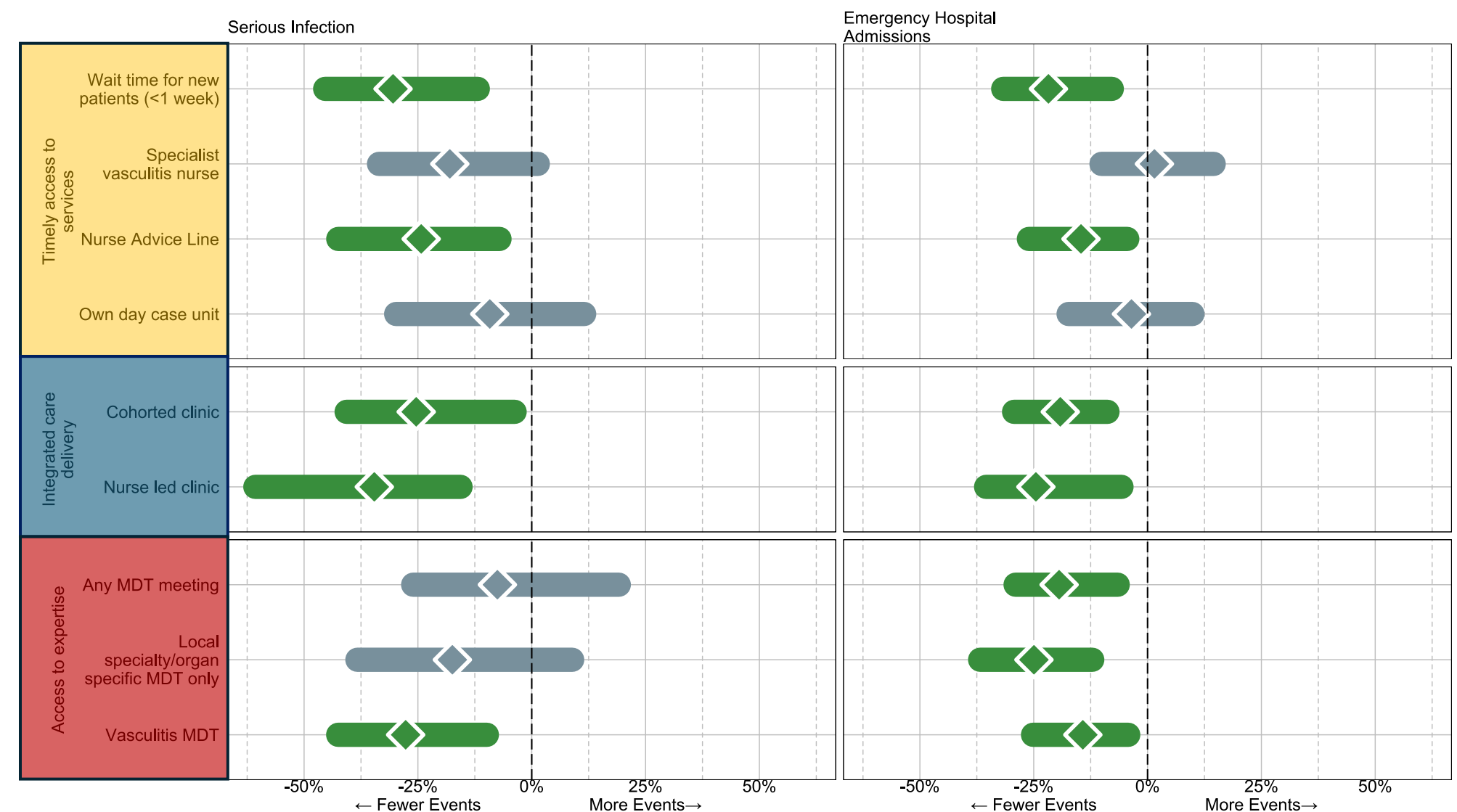
### Key components of service that facilitate good care



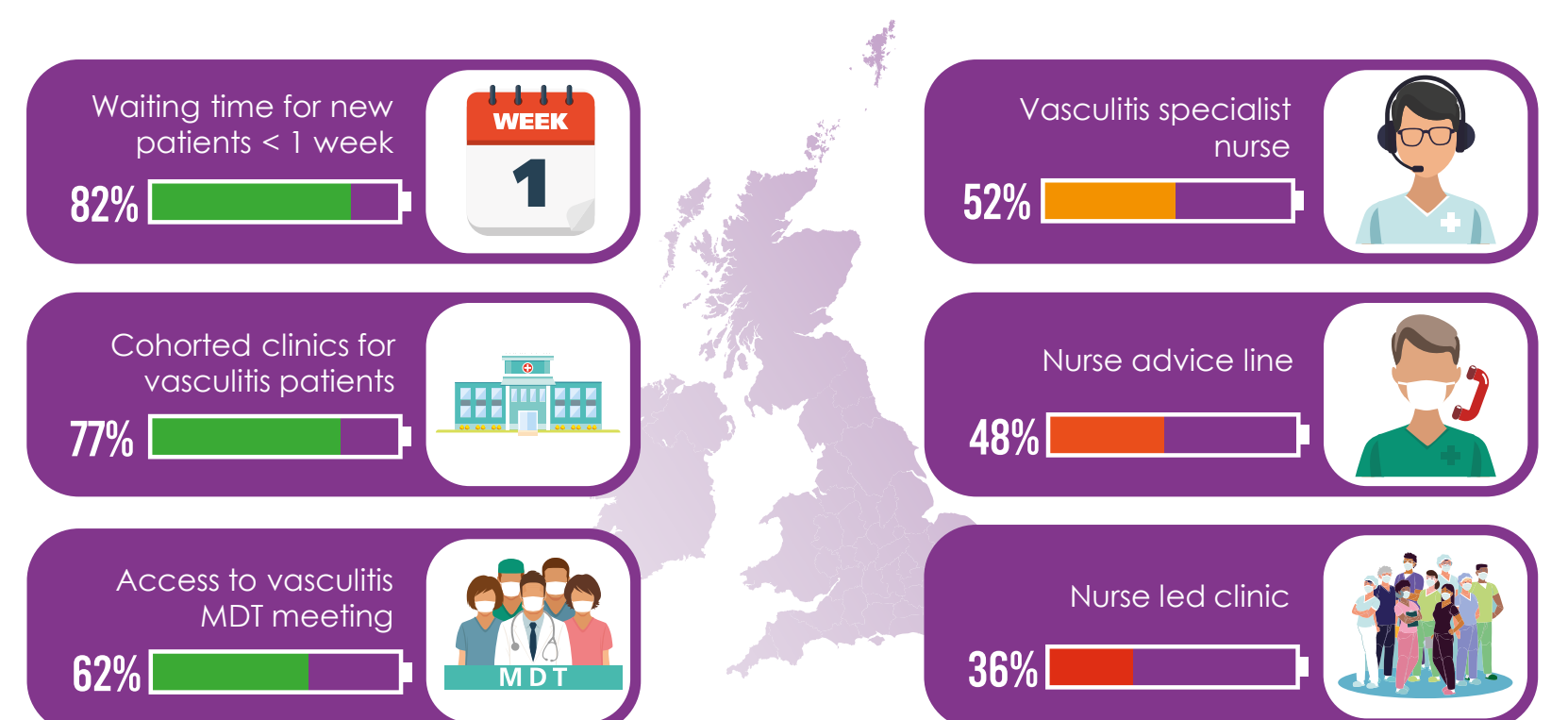
We then analysed national data on hospital admissions and deaths, alongside available survey data, to look at whether some **service components were associated with improved outcomes**.

### What were our key findings?

Rapid access to expertise, nurse-led components of care and specialist vasculitis MDT meetings were associated with fewer infections and hospital admissions.



We explored why key service components are associated with improved outcomes. This included the **ability to overcome jurisdictional boundaries and tensions** between specialties, and to provide **continuity of care**. However, **access to key service components varied**.



### What is the impact of our findings?

- ✓ Addresses key priorities and themes of the UK Rare Diseases Framework
- ✓ Evidence to inform clinical service standards and guidelines and support service change for rare autoimmune conditions