

CONFERENCE ABSTRACT

Defining indicators for assessing integrated care (2012-2014): Lessons learned on methodology and the evolution in assessment approach

17th International Conference on Integrated Care, Dublin, 08-10 May 2017

Noemi Robles^{1,2}, Laia Domingo^{1,2}, Mireia Espallargues^{1,2}

1: Agència de Qualitat i Avaluació Sanitàries de Catalunya, Spain;

2: REDISSEC (Red de Investigación en Servicios de Salud en Enfermedades Crónicas), Spain

Introduction: Integrated care interventions are extremely complex as they tend to involve multiple actors and different care levels. When evaluating such programmes indicators provide several benefits in comparison with other approaches. The Agència de Qualitat i Avaluació Sanitàries de Catalunya, through a new collaborative approach, has been working on the development of indicators specifically aimed at assessing integrated care. Our aim is to present the methodology developed and review the evolution of the prioritized indicators in three different projects aimed at assessing chronic integrated care initiatives.

Methods: AQuAS's approach combined different methodologies across three stages: 1) Establishing a conceptual framework of reference to define the dimensions, attributes, key areas and target population. 2) Identifying indicators based on literature review to ensure scientific evidence and both construct and criterion validity. 3) Collecting opinions of experts and patients/caregivers using highly participative techniques (metaplans, online Delphi, focus groups). Participants' opinions were obtained in relation to relevance and/or feasibility of the indicators. This approach was used in three projects which aimed to define a core set of indicators to assess and benchmark integrated chronic care interventions in Catalonia (Project 1; 2012) and Spain (Project 2; 2013) and to assess collaborative programmes in Catalonia (Project 3; 2014).

Results: A core set of indicators covering a range of dimensions and attributes of health services and the quality of care was defined for each project. Project 1 produced a list of 18 indicators mainly focused on the assessment of both the effectiveness and the hospital settings (i.e. re-admissions, days of hospitalization). Project 2 prioritized 11 indicators, some of them previously identified in Project 1 (i.e. re-admissions); but also incorporated indicators associated with patient experience, (i.e. quality of life of patients/caregivers, patients' lifestyles). Project 3 resulted in 23 indicators, including some effectiveness/hospital centred ones and those that consider the experience of patients/caregivers/professionals; and added a new set of indicators that emphasized the evaluation of coordination between healthcare and social services (i.e. avoidance of duplicities; co-joint professionals' visits).

Discussion: Prioritized indicators were biased towards effectiveness and hospital performance. This could be mainly attributed to: Professionals and patients still considering hospitalization as the core of care interventions; and the perception of feasibility being influenced by current practices in which effectiveness indicators are widely implemented.

Conclusions: Although integrated care is mainly assessed in terms of effectiveness and hospital settings, professionals tend to consider new evaluation more person-centred indicators and on assessing the interactions between the agents involved in providing care.

Lessons learned: The involvement of a significant number of participants in reaching a consensus on indicators reinforces the embeddedness of the assessment strategy and furthers the adoption and implementation of the indicators. Some of the chosen indicators are not feasible for assessment, as they are not being collected by professionals in medical records.

Recommendations: Integrated care initiatives should incorporate indicators as assessment tools.

Person-oriented indicators and indicators related to workflows among care providers should be included in the assessment plans.

Organizational and structural aspects must be also considered when interpreting indicators.

Keywords: indicators; conceptual framework; literature review; consensus
