

Book review

Integrating health and social care services for older persons: evidence from nine European countries

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This book contains a series of chapters by various authors, which describe the challenges associated with integrating community care services across professional boundaries and potential methods of addressing those challenges. The book also addresses to a limited degree integration across the health and long-term care sectors. The evidence the authors tap for their observations comes from a large qualitative study that examined 18 innovative integrated care models in nine European countries—Austria, Denmark, Finland, France, Germany, Greece, Italy, the Netherlands, and the United Kingdom. The book broadly describes this research, as it has been covered more extensively in other publications.

The book provides introductory and methods sections; seven chapters on various topics including: definitions of integrated care, access to care, systems of care, role of the family, outcomes of integrated care, and working conditions under these systems; and a concluding section.

Conclusions from those chapters are as follows. Integrated care involves vertical and horizontal integration of services, a common understanding of what integrated care means, tools that facilitate exchange of information, and having a client-centered view of care. Appropriate access to care includes comprehensive services that meet clients' health and social care needs, understandable, simple procedures for accessing care, and avoidance of excessive burden for care staff. Integrated systems of care have an effective legal, policy, and structural framework in place, as well as financial and other resource investment. Innovative integrated systems have multi-dimensional assessment instruments which are critical to developing an

individualized care plan, multi-professional teams or a case manager, and data sharing arrangements. Family caregivers are a critical part of the care provision to frail elderly people, but there is uneven recognition and support of family caregivers across the nine countries. Best practices for integrated care systems involve acknowledging and supporting the contributions of family and informing carers about the advantages of and resources available from integrated care systems. Outcomes of integrated care should address the viewpoints of users of services and their carers but it is very difficult to elicit the viewpoint of the users of services because they rely heavily on carers to arrange services for them. Integrated care systems suffer from the same poor working conditions as other long-term care providers—low pay, few advancement opportunities, and time pressure, among others. Working conditions that foster integrated care include support by open-minded management, equality among workers, shared information, and staff education and accessibility to one another.

The book does a very thorough job of describing the factors that foster integrated care as described above. What is even more interesting is the book's analysis of barriers to integrated care that must be overcome for these systems to be successful. There is much rich detail in each chapter about these barriers and how the 18 integrated care models have addressed these barriers. This book will be very useful for providers, professionals, and policymakers who are planning to develop their own integrated models for community care systems that work together to meet the varied needs of users of services and their carers, including those who have health care needs.

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