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Poster Abstract

A systematic literature review of the implementation of integrated care for people with diabetes mellitus type 2: context, mechanisms and outcomes

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Abstract

Introduction: In discussing the importance of the relationship between what is being studied and how this is studied, various researchers have called for an increased focus on examining the implementation process of integrated care interventions and its relationship to the outcomes achieved instead of a narrow focus on outcomes only. Therefore, this study has two objectives: First, to examine the international scientific literature for current evidence on the impact of the implementation of integrated care for type 2 diabetes mellitus on its outcomes, and second, to investigate the extent to which the CMO model (context + mechanism = outcome) can be applied to the analysis of this relationship.

Methods: A systematic literature search was conducted in PubMed and Cochrane for the period 2003-2013. We operationalised the components of the CMO model as follows: mechanism was defined as intervention type, context as barriers and facilitators encountered in the implementation process, and outcomes as intentional and unintentional effects of the intervention. Wagner's Chronic Care Model (CCM) was used to identify intervention types and the implementation model by Grol and Wensing was used to categorise barriers and facilitators.

Results: 44 articles met the inclusion criteria. Overall study quality was acceptable, except for four studies to be treated with caution. We found that the CMO model could be applied to all included studies. Regarding mechanisms, most studies reported interventions including all four CCM components and a variety of sub-components. Regarding context, most barriers were related to the organisational context and most facilitators to the social context. Regarding outcomes, most studies reported positive patient, process and health services utilisation outcomes. The information on costs was limited and inconsistent. We found no association between mechanism, context and outcomes.

Discussion/Limitations: The CMO model proved to be applicable to the analysis of international scientific literature on integrated care for type 2 diabetes and helped to identify rich evidence on all three components of the model. However, the very low number of articles adequate for quantitative analysis as well as the low number of articles reporting useful qualitative insights made it extremely difficult to make meaningful statements about the presence or absence of associations between mechanism, context and outcomes.

Conclusion/Lessons Learned: The CMO model is a useful tool for the analysis of the implementation of integrated care for chronic diseases. However, based on research conducted without specific focus on the CMO model, a retrospective analysis of the relationships between mechanism, context and outcomes is not possible.

Suggestions for future research: Future research should explicitly incorporate the CMO approach in its research design so as to make it possible to study the relationships between intervention type, implementation context, and outcomes of integrated care.

Keywords

integrated care; diabetes mellitus type 2; chronic care model; systematic literature review; cmo model

PowerPoint presentation

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