

Volume 11, 1 August 2011

Publisher: Igitur publishing

URL: <http://www.ijic.org>

URN:NBN:NL:UI:10-1-101523 / ijic2011-86

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Conference abstract

Integrated community teams – promoting continuity of care for people with long-term neurological conditions (LTNCs)?

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Abstract

Purpose: The SDO funded study ‘*Integrated services for people with long-term neurological conditions: evaluation of the impact of the National Service Framework*’ aimed to identify what helps or hinders integrated services and identify models and practice for delivering continuity of care for people with LTNCs.

Theory: People’s experiences of integrated services were explored by thematically analysing the data using Freeman et al.’s [1, 2] definitions of continuity of care as a conceptual framework.

Methods: Qualitative in-depth case studies of six neurology ‘service systems’, with varying levels of social and health care integration, using non-participant observation, in-depth interviews and documentary analysis. The findings reported here derive from in-depth interviews with people with LTNCs and the professionals who supported them.

Results and conclusion: The research identified three service models that promoted continuity of care: community interdisciplinary neuro-rehabilitation teams, day opportunity services and nurse specialists. This presentation focuses on the community interdisciplinary neuro-rehabilitation teams and how they promoted continuity of care. Inter-professional teams and those that were flexible about where and when services were provided were particularly important to people with LTNCs. This was especially the case where support could be provided in the person’s home.

Discussion: Community interdisciplinary neuro-rehabilitation teams can be successful in promoting service integration and continuity of care and for people with LTNCs, but many do not have access to these services. People’s continuity of care appeared best served by teams that were able to provide support in people’s homes, and comprised a range of professionals able to bridge the interface between health and social care, and indeed, other pertinent services. In a climate of financial austerity, how can we ensure equity of coverage and access to these types of ‘good-practice’ services?

Keywords

integration, community-based support, home-based support, continuity of care, inter-disciplinary

References

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PowerPoint presentation available from: <http://www.integratedcare.org/Portals/0/uploads/congresses/Aspinal%20Integrated%20Community%20Teams.pdf>