

## CONFERENCE ABSTRACT

### **Qualitative exploration on evaluating the benefits of health and social care integration: views of professional and lay stakeholders**

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#### ***Introduction***

Integration has the potential to ease increasing pressures faced by health and social care systems. Integration is difficult to achieve, especially in systems with a long-standing separation between health and social care such as in England. Currently, there is no consensus about how to measure the benefits of integration. As such it is challenging to effectively evaluate the success of integration. This study explores the views of professional stakeholders and service user representatives on approaches to measuring the benefits of integration of health and social care.

#### ***Theory and methods***

An exploratory qualitative study was conducted involving semi-structured in-depth interviews with 25 participants (nineteen professionals and six lay stakeholders (patient, service user and/or carer) representatives). The interview topic guide was developed following a review of relevant literature. Interviews focused on the benefits of integrated care and the best approaches to evaluate these benefits. Interviews were audio recorded and transcribed verbatim. Data was analysed using framework analysis in NVIVO 12 software.

#### ***Results***

Three themes emerged from the data: (1) integrated care and its benefits; (2) potential measures for evaluating integration; and (3) broader considerations for evaluating integration. In the first theme, stakeholders explained that they define integration mostly from the patients' or service user perspective i.e. a person-centred approach that coordinates services around patients to fulfil their needs. The main benefits were thought to be better experiences of care and improved patient outcomes. As such, in the second theme, the main potential measures were thought to be patient experiences and outcomes of care. There was some limited knowledge of validated patient-reported measures that could be used in evaluating integration. Benefits in terms of system effects were also discussed, and although they were thought to be frequently measured, they were considered less important than patient benefits. In theme 3, participants reflected on the need for transparency when evaluating integration; potential tensions between national and local evaluations; and the use of qualitative methods for evaluating integration (NB. A few participants included patient surveys in the term 'qualitative').

### ***Discussion***

There was consensus among stakeholders that the main benefits of integration are better patient experiences and outcomes. It follows that they agreed that patient experiences and outcomes were the best measures for evaluating integration. There was broad agreement that currently mainly system integration is evaluated, and that patient benefits are mostly not directly assessed.

### ***Lessons learned***

When evaluating health and social care integration, more voice needs to be given to patients and service users. Validated health status measures are available, however, a substantial shift in practices is required before their use becomes commonplace.

### ***Limitations***

A potential limitation is the sample size. A wide array of stakeholders have an interest in integration of health and social care and this study may not have included the full diversity of stakeholders.

### ***Suggestions for future research***

Further work is needed to include the views of additional stakeholders. Additionally, patients, service users and informal carers should be central to developing or selecting appropriate measures for evaluating integration.