
CONFERENCE ABSTRACT

Impact of Integrated Home care in Catalonia

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Introduction

There is small knowledge in the literature related to people with Home Healthcare (HHC) and Social Home Care (SHC) in the community. Both HHC and SHC are responsibilities and activities performed by different Ministries and Local Government. Very few tools facilitate collaborative practice between different professionals teams and services working in the home care area.

Aims Objectives Theory or Methods

Objectives:

- Analyse and describe population with both Home healthcare and Social home care services
- Analyse impact of Integrated Home Care services in population living at home requiring home care services

Methods:

- PHASE 1: Analysis of the level of deployment and degree of achievement of key contents related to a model of integrated care for the different regions of Catalonia: unique shared assessment instruments, individual single care plan, shared protocols.
- PHASE 2: Evaluate the impact of healthcare on adequacy of use and demand, efficiency and capacity; with indicators of use of services, such as hospitalizations, institutionalization and primary care use

Highlights or Results or Key Findings

Aggregate average score of each of the indicators used in the analysis of the baseline situation of the Integrated Care in home care services was 1.4 out of 5, representing 27.5% of the maximum score.

Integrated Home Care decreases the probability of being institutionalized in a nursing home by 20% and decreases the number of cumulative days of hospitalization in health centres by 2.3%. Primary care visits increases by 2.1%, 6.4% in the case of home healthcare visits and 3,2% virtual visits. No significant impact on hospital admissions was observed.

Integrated Home Care implies that overall increase in social and health spending decreases by 2.2%. There is no significant variation in health expenditure, as the increase in community and outpatient health expenditure by 3.8%, compared to the decrease in inpatient health expenditure (hospitals and social health). There is a significant impact on the increase in social spending by 16.8%.

Conclusions

Among the most valued elements: lack of protocols, culture of little coordination between health and social care, high demanding situation, perception of deficit of political mandate, lack of shared information systems and scarcity of professionals. Among most mentioned facilitating factors: good attitude and recognition of need of Integrated Care.

Implications for applicability/transferability sustainability and limitations

This experience of evaluating the impact of integrated home care is the first time carried out in Catalonia. There is a great challenge of overcoming the barrier in terms of data protection, in terms of work with aggregated health and social data, with highly explanatory potential use.