
CONFERENCE ABSTRACT

Shifting Paradigms: Developmental Milestones for Integrated Care

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Introduction

Discussions of integrated care have ranged in focus from large-scale health system transformations, to discrete interventions intended to enhance local continuity of care. Beyond these variations in scale and focus, literature on integrated care has used a variety of conceptual frameworks to explain various activities and elements necessary to achieve integrated care. Existing frameworks have helped to advance research and practice; yet the complexity of changing practice required to achieve integrated care across the policy, organizational, and clinical levels complicates efforts to represent or implement these innovations in straightforward ways.

Aims Objectives Theory or Methods

In this paper, we present a novel strategy for conceptualizing integrated care as developing through a series of milestones observable at the organizational level. Based on analysis of four integrated care organizational case studies in Canada and New Zealand, we outline how this approach to conceptualizing integrated care both resolves the tension of crossing the macro, meso, and micro levels of analysis, and generates new practical insights to guide policy and practice. Methods consist of qualitative interviews, observation, and document analysis across cases, and qualitative data were analyzed temporally to identify milestones as indicated by participants over time.

Highlights or Results or Key Findings

We define a milestone as the occurrence of a salient event that is perceived by respondents to facilitate or disrupt efforts towards the development of integrated care. We synthesize these events at the organizational level, suggesting that the organizational level of analysis is the most appropriate level to represent the significance of these milestones. Our analysis identified six categories of milestone:

- (1) Strategic relational milestones, referring to building relationships between stakeholders.
- (2) Strategic process change milestones, referring to efforts to improve quality in practice.
- (3) Structural (intra-organizational) milestones, referring to changes in organizational structure.

(4) Structural (inter-organizational) milestones, referring to changes in the legal, operational, or leadership structures that facilitate relationships between organizations.

(5) Environmental milestones, referring to changes in the social or natural environment.

(6) Political milestones, referring to changes in the control and allocation of resources.

Conclusions

Our results generate a new conceptual framework for understanding the achievement of integrated care as occurring through a series of milestones. This approach enhances the focus on achieving integrated care “in the wild”, in the actual environments in which leaders, clinicians, policymakers, patients, and caregivers work to implement integrated care.

Implications for applicability/transferability sustainability and limitations

Our model emphasizes two practical points. First, that there is no single series of sequential steps that must be taken to achieve integrated care. Second, that policy efforts to support integrated care ought to encourage organizations and their collaborators to work toward milestones that facilitate the development of integrated care.