

## CONFERENCE ABSTRACT

# Developing a Core Set of Indicators to Assess the Quality and Impact of Integrated Care for Older Persons Living with Complex Health and Social Care Needs and Family/Friend Caregivers: a Delphi consensus study

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### *Introduction*

Indicators of healthcare quality for older persons typically measure aspects of care that are in keeping with acute care ideals. However, these indicators continue to entrench outmoded approaches to care. If we intend to transform services to better meet the health and care goals of older persons and caregivers, we must establish appropriate performance measures, aligned with the goals and intentions of integrated care. Provincial Geriatrics Leadership Ontario undertook a systematic process to achieve consensus on a core set of indicators of integrated care for older persons living with complex health and social care needs and their family/friend caregivers.

### *Aims Objectives Theory or Methods*

The selection of a core set of indicators was informed by a systematic process that included: i) literature review, ii) stakeholder consultation, iii) scan of existing data sets, iv) ranking pre-selected indicators, and v) achieving consensus on a core indicator set. Throughout the project, we sought to emphasize the voice of older persons (including caregivers) and to reduce the impact of power dynamics. We did this by purposefully over-sampling older persons; holding separate meetings to prepare older persons to participate as equal partners; analyzing the data provided by older persons separately to identify differences in ranking patterns between groups.

### *Highlights or Results or Key Findings*

Consensus was achieved across relevant stakeholder groups on a core set of indicators. This indicator set can be used to holistically measure the quality and impact of integrated care for older persons with complex needs and caregivers, across the continuum of care. The findings represent a departure from traditional indicator sets, in that they are intended to be applied across types and levels of support. Moreover, they enable micro, meso and macro levels of analysis across short, mid and long-term timepoints. Several novel indicators are included in the core set. These are indicators, proposed by older persons, caregivers and health professionals, that they believe ought to be collected. Finally, A number of lessons were learned about the best ways to optimize the

participation of older persons and caregivers in a consensus-building exercise to select a set of core indicators.

### ***Conclusions***

The proposed set of indicators is informed by the voices of older persons, caregivers and health professionals. We hope to encourage a shift away from the use of more traditional indicators, that overlook the impact of integrated care in domains of importance to older persons and caregivers.

### ***Implications for applicability/transferability sustainability and limitations***

The proposed indicators can be used by programs, organizations and systems across the continuum of care to evaluate integrated care for older persons with complex needs and caregivers. The indicator set will be validated as part of a future verification study.