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## CONFERENCE ABSTRACT

### Learning from integrated care top performers in Spain

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**Introduction:** An adequate understanding of the features and dynamics of the organizations that systematically perform better in integrated care metrics can provide useful lessons.

In the Spanish context, several regions are working on an explicit agenda to promote healthcare integration, most of which are supported by Strategies for Addressing Chronicity and Multimorbidity. Previous research has mainly focused on three Spanish regions; Catalonia, the Basque Country and Madrid. But there is a richness of experiences in other regions that are potentially relevant for an international audience.

**Theory/Methods:** This study is supported by theories coming from organizational learning and the Chronic Care Model. We have carried out this research project using a "positive deviance" approach with the following sequence:

- Identifying organizations that present positive deviations, that is, those that consistently demonstrate an exceptionally high performance in the area of interest, in this case, hospitalizations avoidable due to ambulatory care sensitive conditions in chronic or frail patients. This is an integrated care metric accepted in the literature (also characterized as a Triple Fail metric) and it presents a high variability being, therefore, a relevant metric for the study.
- To study these organizations in depth using qualitative methods to identify practices that allow organizations to achieve this superior performance. The information has been structured in the form of comparative case studies elaborated from semi-structured interviews with managers of the organizations and the available documentary sources.

**Sample:** Eight organizations have been selected following these criteria: being top performers in the chosen metric, being from different regions, being a different type of organizations (vertically integrated or not). The selected sample comes from the whole 203 health areas of the 17 Autonomous Communities in which healthcare is articulated, through the Atlas of variations in medical practice of the Aragonese Institute of Health Sciences [www.atlasvpm.org](http://www.atlasvpm.org).

**Results:** Organizations deemed top performers have been identified through an open ranking complemented with expert opinion (to identify cases that can be potentially irrelevant, eg remote or rural areas, etc). Qualitative and quantitative data have been triangulated to

provide a more holistic understanding of the organizations. The fully analyzed results framed under the “organizational learning” management theory will be presented in the Congress.

**Discussion:** The positive deviance method has proven effective to identify integrated care top performers organizations. Some of the identified organizations have been completely neglected in the integrated care literature in Spain, even though they outperform more popular ones.

**Conclusion:** We have extracted key lessons from top performers in a systematic way and using relevant theories.

#### f) Lessons learned and Limitations

The richness of integrated care cannot be captured with a single metric and the use of other alternative metrics is needed, however, the findings and lessons learnt from the analyzed organizations are still highly relevant from an integrated care perspective.

#### g) Suggestions for future research

A similar study including a larger set of metrics based on the Triple Aim and with a paneuropean scope will provide relevant insights for the integrated care literature.

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**Keywords:** integrated care; top-performers; avoidable hospitalizations; chronic conditions; organizational learning

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