

## POSTER ABSTRACT

### Intervention study on the effect of integrated care on equity in healthcare

18<sup>th</sup> International Conference on Integrated Care, Utrecht, 23-25 May 2018

Janne Agerholm, Bo Burström, Pär Schön, Nicola Orsini

Karolinska Institutet, Sweden

---

**Background:** Continuity, integration, and collaboration between health and social care providers are essential if we are to adapt to the needs of an ageing population. The aim of this study is to investigate if a comprehensive integrated care system is better at avoiding emergency department visits and hospitalization for ambulatory care sensitive conditions ACSC and increase equity in health care in comparison to “standard care” among older people.

**Methods:** This study is an intervention study based on a comparative interrupted time series design comparing data from Norrtälje, where an integrated care system was implemented in 2006, with other areas of Stockholm county with the standard care system. The time series will consist of register data from 2000-2015, obtained from the Stockholm County Council’s administrative database for analysis and follow-up of healthcare utilization and from the Longitudinal Integration database for Health Insurance and labour market studies from Statistics Sweden.

**Preliminary results:** The preliminary descriptive results based on data from 2000-2011 suggest that the introduction of an integrated care system in Norrtälje did not affect the rate of hospitalization for ACSC. When stratifying on income group we saw that the lowest income group decreased the rate of ACSC after 2006, however income group 2 and 3 increased. Further analytical analyses are needed in order to interpret these trend changes.

**Conclusion:** The integrated care system in Norrtälje seems to have no effect on the rate of hospitalization for ACSC. Whether socioeconomic inequity in rates of ACSC was affected is still to be investigated. The results of the effect on emergency department visits is yet to be performed.

---

**Keywords:** older population; equity in healthcare; ambulatory care sensitive conditions; emergency department visits

---