



Implementierung und Evaluation von IV-Modellen

FMC Webgespräch,
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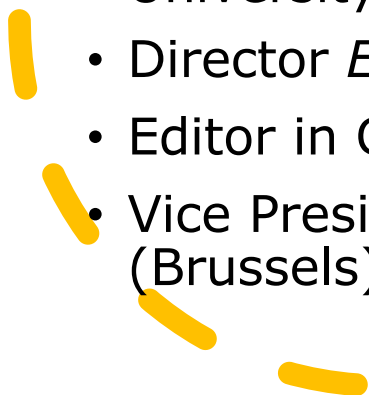
Übersicht des Gesprächs

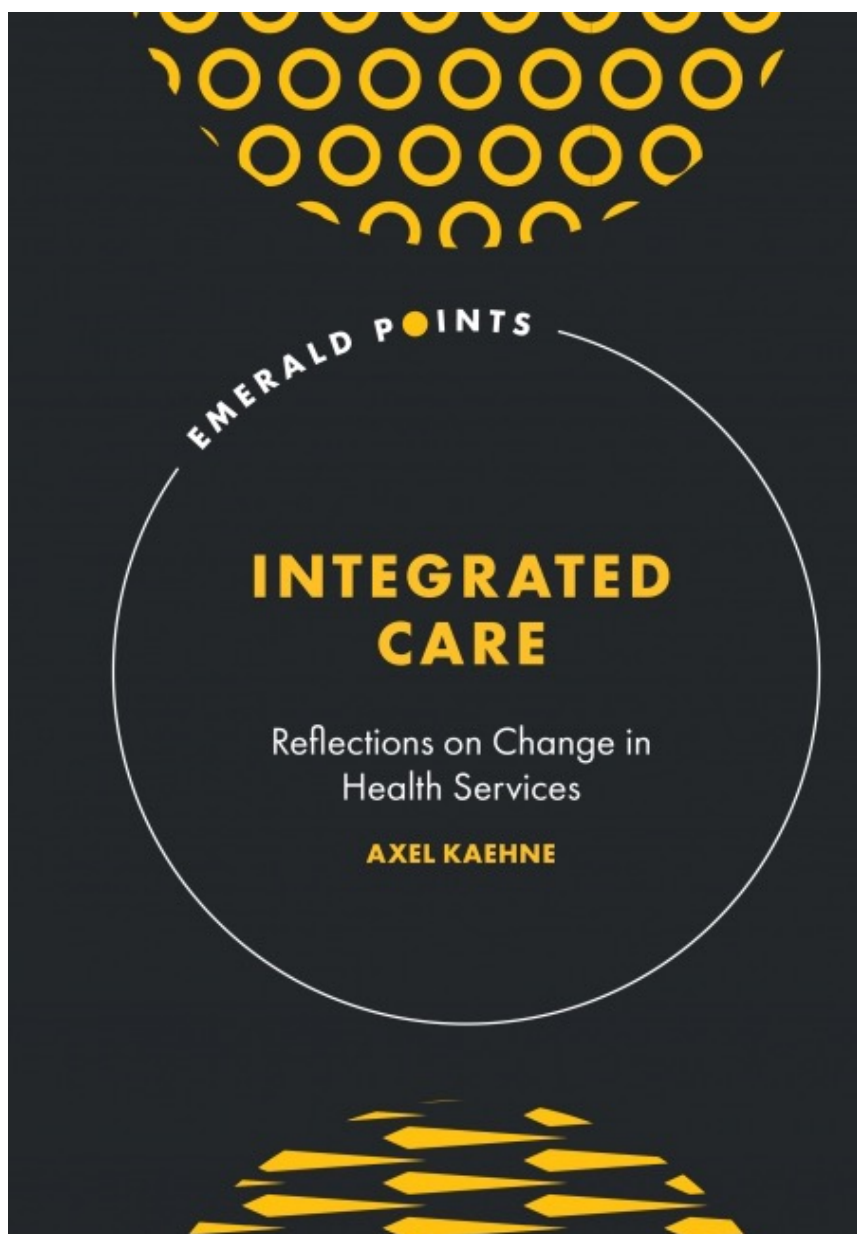
- 
- Welchen Herausforderungen begegnen wir in the Implementation von integrierter Versorgung?
 - Wie sollen wir integrierte Versorgungslösungen erforschen oder evaluieren?
 - Was kommt auf uns in der Zukunft zu?
 - 4 Phasen der integrierten Versorgung



Kurz über mich selbst...

- Geboren in Berlin (Ost)
- Magisterabschluss an Humboldt- und Freien Universität Berlin 1996
- PhD Political Science an der **University of Wales**
- Post-Doc Anstellung an der Medical School Cardiff University bis 2013
- Professor Health Services Research an der Medical School/Edge Hill University (Liverpool)
- Director *Evaluation and Policy Analysis Unit*
- Editor in Chief des **Journal of Integrated Care** (Emerald)
- Vice President **European Health Management Association** (Brussels)

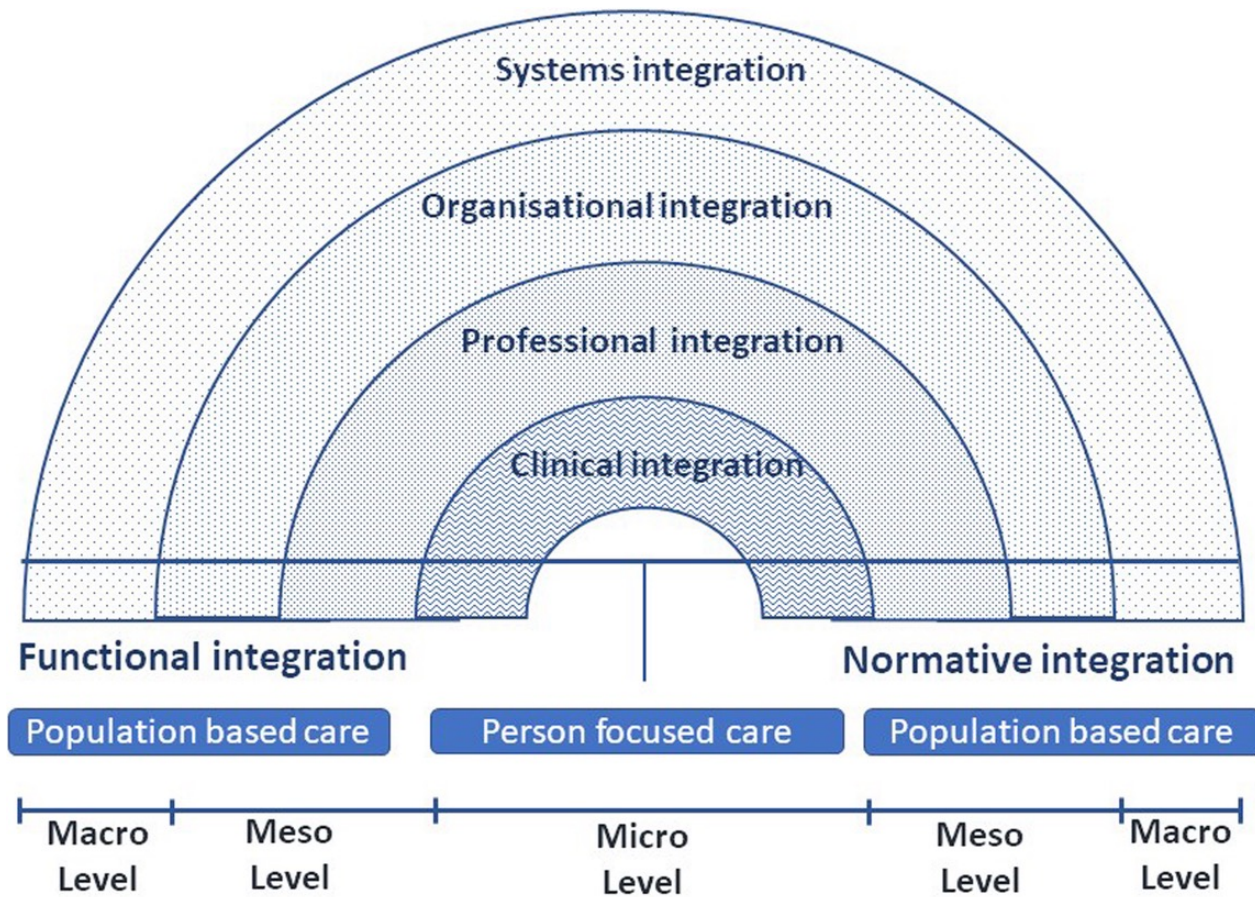




<https://books.emeraldinsight.com/page/detail/integrated-care/?k=9781801179799>

CONTENTS

<i>About the Author</i>	<i>ix</i>
Chapter 1 Introduction – Why Integrated Care Is So Hard to Achieve	1
Chapter 2 The Future of Integrated Care	7
Chapter 3 How Organisation Theory May Help Us Understand Integrated Care	13
Chapter 4 Integrating Care as Organisational Design	19
Chapter 5 Complexity in Integration Studies	31
Chapter 6 Care Integration as a Liminal Moment	45
Chapter 7 Tacit Assumptions in Care Integration	57
Chapter 8 The Politics of Integrating Services	63
Chapter 9 Is Integration a Science or a Craft?	81
Chapter 10 Reconciling the Practice, Research and Reality of Integrated Care	95
Chapter 11 Integrated Care as a Research Paradigm	109
Chapter 12 Patient-centred Care and Integration	125
<i>Index</i>	<i>139</i>



Based on Valentijn, P. (2015).

	Problem	Benefit	Beneficiaries	Mechanism	Lens	Research paradigm
Phase 1	Organisational fragmentation	Better patient care	Staff and patients	Improved collaboration	Naïve Idealism	Barriers and Facilitators research; Qualitative
Phase 2	Organisational fragmentation	Cost savings (system wide)	Tax payer	Models (off the shelf application)	Structure	Mixed methods; Black box research (RCTs; matched control studies; comparison studies)
Phase 3	Professional fragmentation	Care processes	Staff and patients	Practice	Agency	Implementation research
Phase 4	Patient journey	Smooth patient transition (Continuity of Care)	Patients	Customer focus	Individual	Market research

Beispiel: England

- Department of Health (England) hat eine Dekade alte Geschichte integrierte Gesundheitsversorgung zu fördern
- Integration Pioneers 17 sites
<https://www.england.nhs.uk/integrated-care-pioneers/>
- Vanguard Programme (£330k) 50 sites
https://www.england.nhs.uk/wp-content/uploads/2015/11/new_care_models.pdf
- Reports und relevante Publikationen
 - [http://www.piru.ac.uk/assets/files/IC and support Pioneers-Indicators.pdf](http://www.piru.ac.uk/assets/files/IC_and_support_Pioneers-Indicators.pdf)
 - <https://doi.org/10.1186/s12961-021-00711-3>
 - 10.1186/s12913-021-06692-x
 - 10.5334/ijic.5631



Was ist das Problem?

- Integrierte Versorgung erfreut sich politischer Unterstützung und finanzieller Förderung
- Die Beweislage ist entweder schlecht (Patient outcomes) oder mässig (Vorteile für klinisches Personal)
- Kosteneinsparungen realisieren sich erst im langen Zeitraum von 5 bis 8 Jahren und sind oft nur *Reduktion der Kostensteigerungen*
- Effekte hervorgerufen von integrierter Versorgung sind schwer von anderen Effekten zu trennen (attributability problem)
- Das führt dazu dass die Versorgung **'project rich'** ist aber **'system poor'**



Zeit für eine Weichenstellung...

'No single programme has been able to distil key, generalisable 'lessons' that have then been applied subsequently.' (p10)

'It might also be argued that the design and implementation of at least some integrated care initiatives have tended to be dominated by professional views of effective care, not always focusing on engaging with patient/user-defined needs.'

'Conceptualising integration as a form of work done by staff in collaborating may be a useful way of shifting focus from designing models to looking for simple fixes that make day-to-day work easier.'

Lewis, R. Q., Checkland, K., Durand, M. A., Ling, T., Mays, N., Roland, M., & Smith, J. A. (2021). Integrated care in England – what can we learn from a decade of national pilot programmes? *International Journal of Integrated Care*, 21(4), 1–10. <https://doi.org/10.5334/ijic.5631>



Die Weggabelung...

'Integrated care is best understood as an emergent set of practices intrinsically shaped by contextual factors, and not as a single intervention to achieve predetermined outcomes.'

'We found that conceptual models of integrated care assumed alignment of patient and system perspectives and of multiple strategies into a coherent, decontextualized whole' (p34)

Greenhalgh, T., Shaw, S., & Hughes, G. (2020). Rethinking integrated care: A systematic hermeneutic review of the literature on integrated care strategies and concepts. *Milbank Quarterly*, 00(0), 1–47.
<https://doi.org/10.1111/1468-0009.12459>

Implementation Problem

- Wir unterschätzen wie schwierig Veränderungen in der Versorgungslandschaft sind
 - Fragmentierte Versorgung – Koordinationsproblem über Professions- und Organisationsgrenzen hinweg
 - Veränderungen verlangen dem Personal kognitiv und organisationspraktisch enorme Leistungen ab
 - ***Organisatorische und Konsumer-Rationalitäten unterscheiden sich von Programmrationalitäten (Programme klingen leicht plausibel; die Plausibilität hält jedoch oft den Komplexitäten vor Ort nicht stand)***

Fazit: Integrierte Versorgung benötigt dezidiertes **Change Management**

Forschungs- und
Evaluationsproblem

Wie untersuchen wir integrierte
Versorgung?

Black box research

Fazit: Wir brauchen Mixed Methods
Research Approaches einschliesslich **Logic
Model/Effect Model** Entwicklung und testen
derselben durch *Realist Evaluation*

Black box Research

- Methods: prospective propensity score (PS) matched controlled trial evaluating the effectiveness of the PACT service
- Description of service intervention: The PACT team is a cross-organisational (hospital and municipality) multi-disciplinary geriatric team. The local PACT team includes nurse coordinators, physio- and occupational therapists, geriatric nurses, pharmacists, medical secretaries and a medical doctor.
- Integrated care: multi-disciplinary team
- Person centred care: PACT team delivery
- Findings: Compared with propensity score matched controls, the care process of frail multi-morbid elderly who received the PACT intervention had a reduced risk of high-level emergency care, increased use of low-level planned care, and substantially reduced mortality risk.

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article | [Open Access](#) | Open Peer Review | Published: 03 October 2019

Person-centred, integrated and pro-active care for multi-morbid elderly with advanced needs: a propensity score-matched controlled trial

[Berntsen](#) , [M. Dalbakk](#), [J. S. Hurley](#), [T. Bergmo](#), [B. Solbakken](#), [L. Spansvoll](#), [J. O. Skrøvseth](#), [T. Brattland](#) & [M. Rumpsfeld](#)

[Health Services Research](#) 19, Article number: 682 (2019) | [Download Citation](#) ↓

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Was die Zukunft bereit hält...

- Integrierte Versorgung in England hatte wenig beizutragen zur Pandemiebekämpfung... dabei war sie doch das Vorzeigebispiel für Kooperation über Organisationsgrenzen hinweg
- Integrierte Versorgung schloss bisher nicht die Öffentliche Gesundheit ein (Public Health) – das war ein Fehler...
- Die neuen Ansätze sind geprägt von **Populationsanalysen** (Population health management; Segmentation, risk stratification, decision making for resource allocation) und **digital technology**
- Integrierte Versorgung hat dazu bisher nichts beizutragen in England (und in der Schweiz...?)

Fazit

- Um integrierte Versorgung flächendeckend einzuführen müssen wir **robustere Implementationspläne** entwerfen die mit Komplexität und Ungewissheit (uncertainty) besser umgehen können
- Wir müssen eine **bessere Beweislage** produzieren um der Politik die Mittel zum Wandel in die Hand zu geben
- Wir müssen unsere Wissens- (und Interessenlücke?) zu den digitalen Technologien und der Populationsanalyse schliessen

European Health
Management in Transition



How to Deliver Integrated Care: A Guidebook for Managers

Edited by
Axel Kaehne and Henk Nies

<https://books.emeraldinsight.com/page/detail/How-to-Deliver-Integrated-Care/?k=9781838675301>

Chapters on how to implement integrated care, values and leadership, digital technology, financing and how to evaluate integrated care...



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Journal of
Integrated Care

Practical evidence for service improvement

- https://www.emerald.com/insight/publication/issn/1476-9018?_ga=2.35989024.1060798127.1638553209-1420976278.1638553209

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