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Conference Abstract

Initiatives to strengthen the coordination/integration of health services delivery in the WHO European Region: a synthesis of lessons from implementation

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Abstract

Introduction: Across the 53 Member States of the WHO European Region, extending from the most western countries of Europe into central Asia, there are numerous initiatives to strengthen the coordination/integration of health services delivery that remain to be described and catalogued to best leverage these experiences and share lessons from implementation.

Aims: To describe initiatives in strengthening the coordination/integration of health services delivery across the WHO European Region, synthesizing common lessons from implementation through a health systems lens. To identify key areas conducive to the scale-up and sustainability of initiatives to best target efforts for strengthening the coordination/integration of health services.

Methods: A multistage approach to data collection was applied from February 2013 to January 2014 to include: an open access questionnaire disseminated online across Member States as a first scoping of initiatives; a targeted, in-depth study of initiatives selected for further study through semi-structured interviews with key informants including policy makers, senior management, health professionals and patients; and a series of additional semi-structured interviews with policy makers and senior management having led national, policy-driven change. Lessons from implementation drawn reflect a synthesis across these data sources following international consultations and expert review.

Findings: The areas requiring greater attention in the planning, implementation and scale-up of initiatives are context specific. Nevertheless, common across initiatives, a concerted investment was needed to strengthen areas including communication networks, the competencies of the

health workforce and to establish a supportive policy environment. Lessons from implementation call emphasis to key enablers for change, including the need for a clearly articulated challenge or cause to which the initiative has been defined as well as a strong leadership style and managerial competencies to orchestrate change. A normative, value or cultural change to overcome the status quo is found of particular importance for sustained transformations. However, this requires an investment of resources with returns following a time lapse longer than often anticipated.

Conclusions: Despite differences in the initiatives taken to strengthen the coordination/integration of care, in describing the implementation of these efforts common lessons can be drawn and areas consistently requiring a concerted investment, synthesized. Consolidating lessons from the varied data sources and perspectives (policy makers, senior management, health workforce and patients), the commonalities in the conditions for creating change towards coordinated/integrated care identified suggest the transferability of these lessons to inform and apply across initiatives and contexts. In consolidating these experiences it may be possible to better target tools to support efforts in designing, leading and managing changes, moving beyond location or disease specific initiatives and ensuring efforts are sustainable and fully embedded within the health system.

Keywords

delivery of health care, integrated care, coordinated care, disease management, public health
