

Summary: Integrating health and social care from an international perspective

The full version of this report is available on the International Longevity Centre Global Alliance website: www.ilc-alliance.org

This ILC-UK report, drawing on the ideas, issues and challenges of integrating care raised at the Conference on Integrated Care for Frail Older People, examines the potential benefit of integrating health and social care services for frail older people in a global context. It highlights that while financial, cultural and logistical barriers exist, countries should continue to work towards integrating health and social care services given its possibilities for cost-efficiency, freeing up acute healthcare facilities and benefits for service users.

This report covers:

- the need for integrated care;
- the current global context of care for frail older people;
- the benefits and challenges of integrating health and social care services for this group;
- priorities for action in advancing the issue of integrated care worldwide.

What is integrated care?

Integrated care is a mechanism for ensuring joined up service responses and safeguarding the quality of care received by patients. The term 'integrated care' describes a variety of approaches to these issues, for example some schemes have used care coordinators; and others joint meetings with professionals from different aspects of health and social care to manage care pathways for patients.

Older people have 'complex and interacting needs, and they often require treatment and care from a range of professionals and carers, services and agencies at the same time', and as such would benefit from increased integration in their service provision.

Key benefits of integrating health and social care services

For service users - reduces complexity in their service provision, enhances the quality of services they access.

For service providers – cost effective, reduces lengths of hospital stay; inappropriate hospital admissions and decreases long term care admissions.

Key barriers to integrating health and social care services

Finance - a lack of financial provision available despite efficiency benefits in costs and resources through service integration.

Practicality - integration requires communication and cooperation between existing health and social care services, potentially causing fractions in shared responsibility for patients.

Culture – some countries report a greater focus on the health of younger rather than older people; others suggest that state provision of health and social care can lead to a culture of dependency.

Conclusions

Integration should take place on all levels

Integration should occur on multiple levels: primary and secondary healthcare and all facets of social care, to ensure success and also avoid barriers between systems; initiatives should take place at a national and local level.

Integration should include all players, but be patient-focussed

There are many different informal and formal actors in health and social care, all of whom have a role to play in promoting integration. Discussions should include participants in health and social care pathways from professionals to families, but should fundamentally be rooted in the needs and desires of the patient.

Cost-effectiveness should be communicated clearly

Finance will always be a key issue in discussions of care for an ageing population, and critically models of integrated care have been found to be more cost-effective than alternative systems. These savings include reduced demand for resources such as hospital beds as well as lower costs of care through integrating services. These savings need to be articulated to policy makers and commissioners of services to encourage further integration of health and social care.

Worldwide culture of caring

Moving towards integration should be fortified by a worldwide culture of the importance of caring for older people. High quality of care should be expected by patients and families, and seen as standard by service providers.

Dignity and respect for older people must be protected

Crucially, we need to see older people as simply adults, some of whom are frail and some of whom are not frail. Education to improve perceptions of this group as well as understanding of the rights of older people, particularly those suffering from frailty, should be targeted at all levels; medical professionals, families, carers and the patients.

Care as a starting point

Well-integrated care is one part of a larger picture, where integration of transport, housing and product design can all contribute to easier and better quality standards of living for frail older people. Integration and the general principle of holistic care should be spread across many other areas of service provision.