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Conversations on Integrated Care: Perceptions Among Direct Care Professionals

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ABSTRACT

Integrated care has become an important topic in health psychology, medicine, and other related fields since the endorsement of the Affordable Care Act (ACA). Integrated care (health care professionals working in teams) is expected to lower health costs, improve overall health and well-being, provide more preventive care opportunities, increase quality of care, increase ease of access to care, and decrease the stigma attached to some services such as those associated with mental health. Integrated care models and strategies vary by site and offer different levels of integration in every area of care management. The integration of practitioners from various training backgrounds and perspectives is difficult and practitioners often resist changing the ways that they conceptualize their roles and implement their services. The majority of current research of satisfaction with integration health care appears to seek and to explain the patient's experiences with integrated care models. There seem to be fewer studies interested in the perceptions of health care practitioners. In the medical and health fields in particular, there is a need for qualitative research that explores the experiences of participants in-depth to support the volumes of existing quantitative data. The purpose of this phenomenological qualitative study is to explore direct care practitioners' perceptions of and experiences with integrated care in Midwest University, pediatric diabetes and endocrinology clinic.

Health care reform in the US has introduced terms such as 'the patient-centered medical home' and 'integrated care' that are often unclear and unfamiliar to patients. This study explored patient experiences with the functional domains of integrated care.

THEORY AND METHOD

Patients first wrote their definitions of integrated care and then participated in focus group discussions about their experiences with the health care system. Transcripts were analyzed for thematic content.

RESULTS

Forty-four patients participated in one of seven focus groups in San Francisco, CA in English and Spanish. Many patients were not clear about the meaning of the term integrated care. However, patients described experiences largely reflected in an existing conceptual model of integrated care and the importance of coordination within and across teams and with community resources, continuity and sharing of information, and patient engagement. Patients with high medical needs described the ubiquitous challenges they faced in experiencing coordinated care.

CONCLUSIONS

Patients may not understand the term integrated care but are relatively clear on what the concept of integrated care entails and support its successful implementation. Patients and their families are at the center of integrated care, and health systems need to support and empower them to successfully navigate the medical neighborhood.

Our results suggest that the jargon-laden terms of integration and coordination may not be patient friendly. While these terms may serve ably as code words in communication among experts in the field, they are unlikely to function well in efforts to communicate with patients and the public about delivery system reform and the goals of accountable care organizations and other related reforms.

In conclusion, our study emphasizes the need for continued work in patient-centered communication strategies for evaluation and monitoring of health delivery system reform. Although many patients do not appreciate the full meaning of the term integrated care, most are relatively clear on the concept and value coordinated care across the medical neighborhood. We could have explored with the participants a substitute term for integrated care that would represent a 'catch-all substitute' for integrated care. A term other than coordination is needed to communicate the concepts of integrated care among patient populations. A subsequent study could explore a patient-centered term for integrated care. Patients and their families are at the center of integrated care, and medical homes and health systems need to support and empower them to successfully navigate the medical neighborhood. Future research should validate instruments to more systematically measure patient experience of integrated care. This study can inform ongoing work that leverages the patient voice in future measurement development.