

The influence of integrated home and community care programs on Quadruple Aim and Health Equity outcomes across the health care system

Health system transformation requires an understanding of how each sector within the system interacts and influences other settings and the broader system. As Canada looks to transform health care to better meet the needs of its aging population, it is crucial to understand the influence of integrated home and community care programs on the health system.

We are conducting a scoping review to map the quantity and type of evidence about the influence of integrated home and community care on various components of the health system including acute care, emergency medical services, primary care, informal care, and facility-based long-term care. Through this review, we hope to better understand if, and how, integrated home and community care programs influence Quadruple Aim (population health, care experience, cost of care, provider well-being) and Health Equity outcomes across the health system and identify any potential gaps in the knowledge base.

Project Overview

As the aging population continues to grow, the health system must recognize the changing care needs of society, such as an increasing number of people are requiring continuing care for chronic and medically complex conditions. Countries with publicly funded health systems, such as Canada, are looking to transform their health and social care systems to ensure their citizens receive the right care, at the right time, in the right place, ensuring available resources are maximized. The expansion of home and community care has been identified as a key driver for system transformation that can support the provision of medical, functional, cognitive, and psychosocial care, while meeting the

desire of the aging population to live, age, and receive care at home.

The Quadruple Aim is an internationally recognized framework which takes a multi-faceted approach to system redesign and improvement. According to the Quadruple Aim, improvement efforts should focus on the following four goals:

1. improving population health;
2. enhancing the care experience for both clients and caregivers;
3. reducing the costs of care; and
4. improving the work life of care providers.

More recently, Health Equity was added as a guiding principle to ensure that improvement efforts benefitted all individuals, regardless of their socioeconomic or demographic characteristics.

What are we doing?

We are conducting a scoping review of the published research literature to better understand what the evidence tells us about the influence of integrated home and community care programs on acute care, emergency medical services, primary care, informal care and facility-based long-term care.

We started by searching three databases to gather literature using keywords relevant to home and community care, health system settings, and the Quadruple Aim and Health Equity outcomes. Then, we hand searched major integrated care journals to identify any articles that may have been missed during database searching.

We assessed 5,656 titles and abstracts and 568 full text articles for inclusion in our review. Currently, we are summarizing and analyzing the findings of included articles, and we plan to consult with study collaborators for feedback following completion of data analysis and completion of the review.

What will we find?

Preliminary findings are showing:

1. Most articles investigated effects of integrated home and community care on hospital or emergency medical service utilization (i.e., readmission rates, length of stay, and emergency department visits) with few articles including cost details.
2. Most articles report population health outcomes, with few articles investigating economic, patient/ provider experience or equity outcomes.

What is the anticipated impact?

Findings from this scoping review are anticipated to:

- Increase the understanding of the influence of integrated home and community care programs on the health system
- Identify gaps in the quantity and types of evidence assessed in existing research to inform future research on integrated home and community care programs

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