

Understanding new models of integrated care in developed countries: a systematic review

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Plain English summary

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New models of integrated care aim to make services more streamlined and encourage different services to work together better. This study looked for research literature on new models of care in a systematic way, and brought together the findings into an overall summary.

We found that new models of care could include many different types of activities. We looked at all of the different outcomes to find areas in which research was more or less in agreement regarding how new models might make a difference to the delivery of services. We found weaker agreement that discharge planning and the flow of care may be improved, that staff would be more likely to share expertise with colleagues and that differences in practice may be reduced. However, more staff time may be required.

Factors that may influence the success of new models include levels of patient and staff engagement, professional roles, workforce stability, the provision of training to staff, effective leadership, resources available, information technology, organisational culture, the policy context and organisational procedures.

We identified three outcomes in which the research was more in agreement: (1) that new models may increase patient satisfaction, (2) that staff believe that the quality of care is improved and (3) that new models may increase patient access to services. There was some suggestion that patient waiting time and the number of outpatient appointments may be reduced. The research studies did not agree regarding outcomes such as length of stay in hospital, numbers of admissions and appointments and whether new models might increase or reduce the cost of health-care provision.

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