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Project INTEGRATE

# BUILDING SYSTEMS OF INTEGRATED CARE: LESSONS FROM FOUR EUROPEAN CASE STUDIES ?

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# Geriatrics Research Group


FG GERIATRIE

## Multi-disciplinary hospital-based team care for people with geriatric condition at a geriatric center in Berlin

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# Agenda

- Integrated Care in Germany
- Case Site
- Results of a qualitative analysis
- Lessons learned

# Integrated Care in Germany

- Integrated Care programs can be organized as a contract between health provider(s) and health insurance company since 2004
- Covering special indications or populations
- Content and payment of IC programs are subject to negotiations between provider and HIC
- Until end of 2008 new contracts were partially funded by contracting health insurance company

# Development of IC in Germany

- §140 SGB V
- the right of health care providers to
  - negotiate direct contracts with health insurance companies
  - multidisciplinary (horizontal integration) *or* intersectoral health (vertical integration) care concepts
  - No necessity of horizontal *and* vertical integration

# Integrated Care in Germany

- 2008: over 6.000 contracts
- Continual rise of contracts every year (2004-2008)
- Mostly disease-specific contracts
- Majority of contract partners were hospitals, rehabilitation centres and outpatient MDs (Grothaus 2009)

Grothaus (2009): Gemeinsame Registrierungsstelle zur Unterstützung der Umsetzung des § 140d SGB V Bericht zur Entwicklung der integrierten Versorgung 2004 - 2008

# Integrated Care in Germany

## Evaluation of existing programs is difficult

- No central registration since 2009
- 73% of contracting HICs do not or only partly evaluate their own programs
- Nearly 90% of contracting HICs do not or only partly publish their own evaluations (SVR 2012)
- Due to a lack of experience in IC, many programs have to be looked at as pilot programs

SVR: Sachverständigenrat zur Begutachtung der Entwicklung im Gesundheitswesen

# Clinic

One of Germany‘s largest geriatrics specialty clinics (152 beds)

Integration of several facilities

- Clinic
- Day Clinic
- Day Care Unit
- Nursing Home
- Information Centre
- Research Centre
- Academy


E-Mail: info-geriatrie@charite.de
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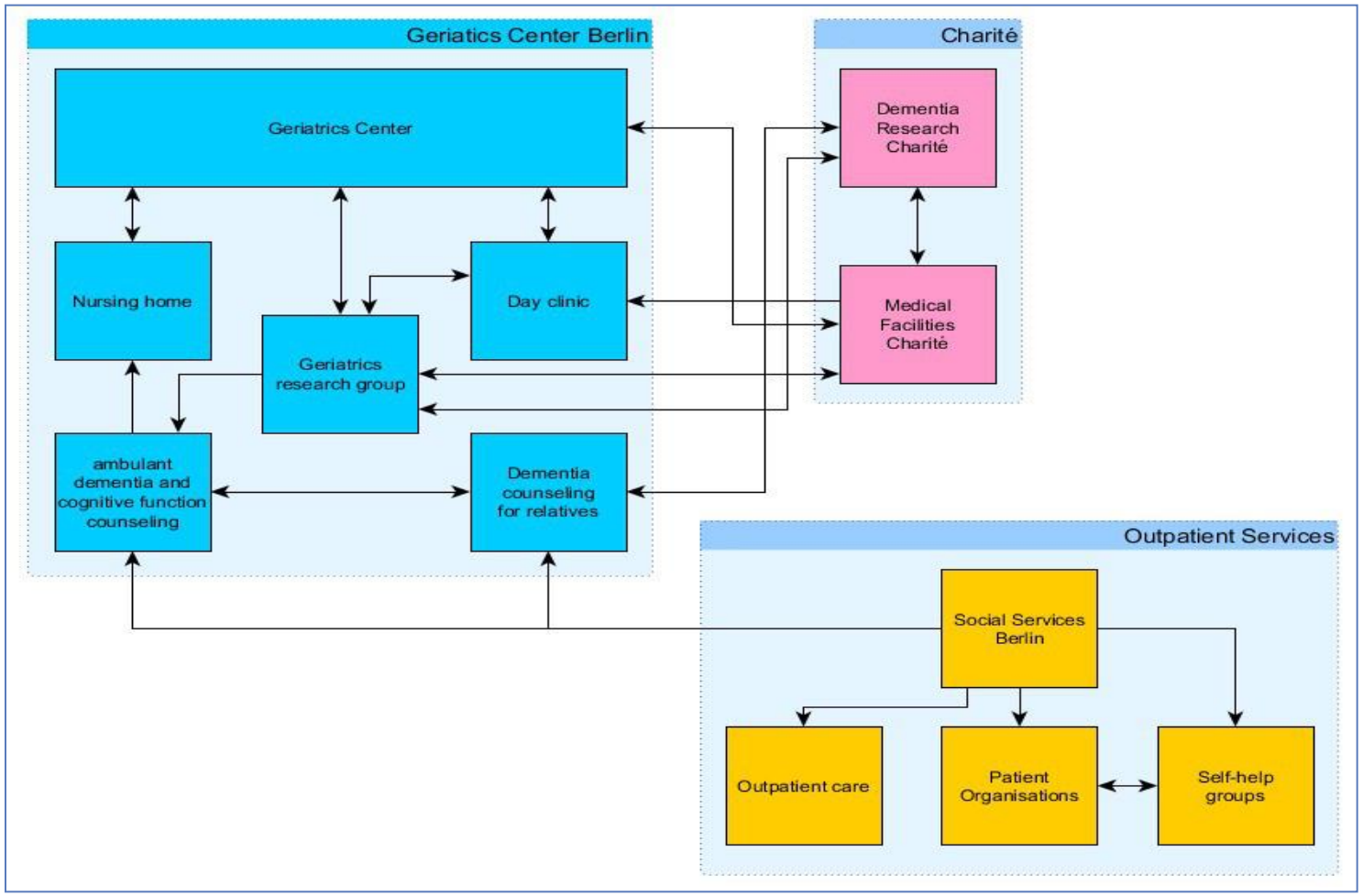
# Organizational structure

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# Methodology

- semi-structured interviews with health professionals
  - Medical doctors
  - Neuropsychologists
  - Occupational therapists
  - Physical therapists
  - Nurses

# Implementation history

## Facilitating factors

- Willingness of the Charité to establish a geriatric centre
- Focus of national and local politics on the importance of geriatrics
- Personal experience of the appointed professor

## Barriers

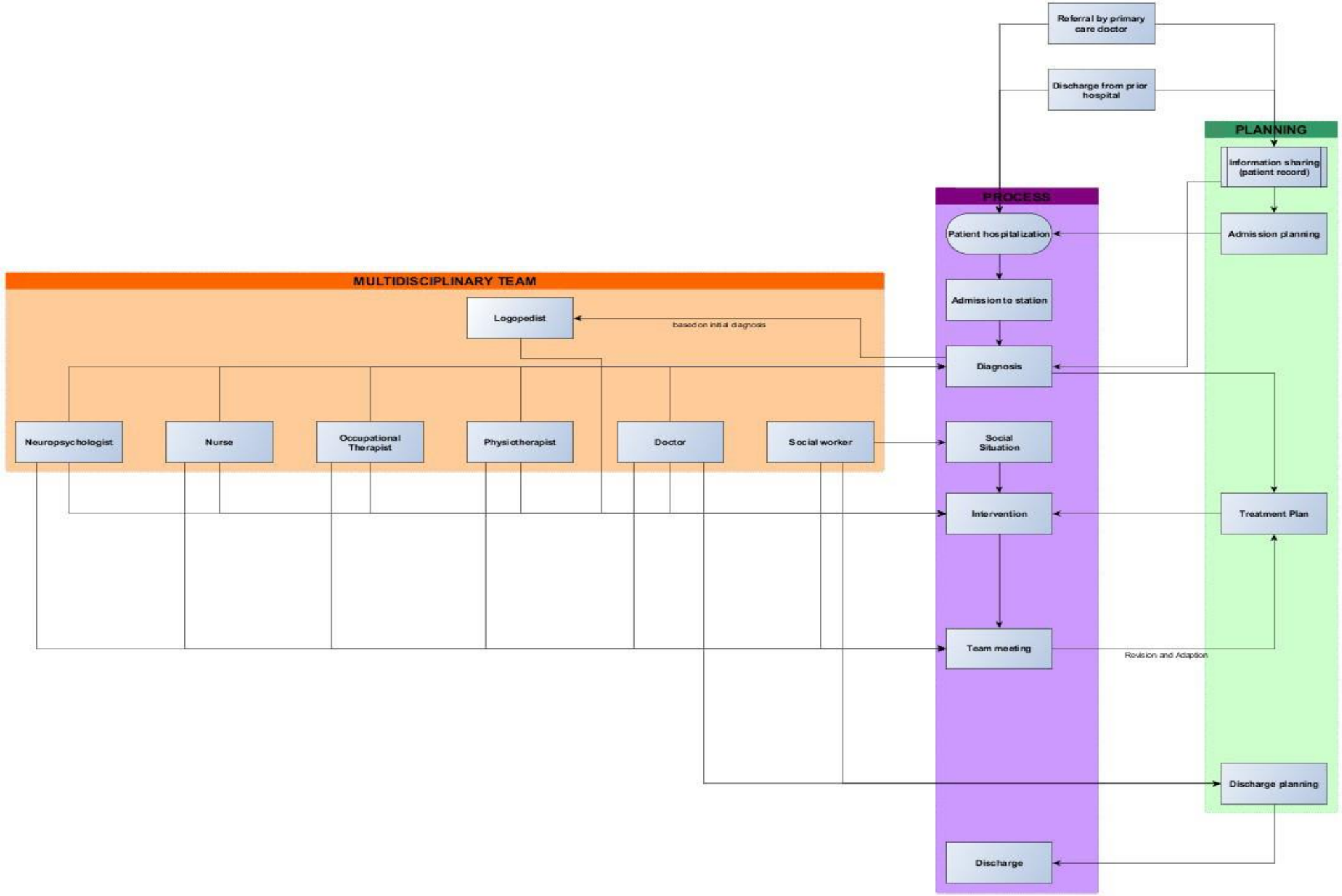
- Health policy framework
- Health profession education
- Strict borders between health care sectors

# Understanding of IC

- No clear and defined understanding of IC
- IC was understood as “the normal way” to teat patients due to the demands and complexity of geriatric patients

# Care Intervention and Care Coordination

- Multidisciplinary team as the core center of IC
- Channels for communication to facilitate multidisciplinarity
  - Formal team meetings
  - Informal sharing of information based on need
- Team structure
  - Only limited concordance on the structure and the specific responsibilities of the team

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# Results

## Access of information

- In principle, all information were accessible by all health professions
- Access through the computer system was limited
- The free and fast gathering and sharing of all relevant information was stated by all health professions

# Results

## Assessment and care planning process

- The level of using structured assessments varied from HP to HP
- Conflicting statements on the purpose of using assessments

# Lessons learned

The following factors seem to be central for a successful implementation and sustenance of an integrated care concept for geriatrics:

- Multidisciplinary teams
- Implementation of formal and encouragement of informal communication channels
- A clear team structure with defined responsibilities
- A suitable process of information sharing
- A suitable ICT system for speeding up bureaucratic tasks
- Care-Coordination and planning based on the expertise of the multidisciplinary team and structured assessments
- A constant process of change taking into account experiences of those at the executional level