Executive summary

Context & background

Consumers require health services that meet their needs, are connected and well-integrated. They want to experience ‘one health system’ regardless of service structure, funding or governance. The provider-patient interface is the critical environment in which the needs and expectations of both providers and patients are considered.

Aims

The aim of this report is to identify factors that influence the delivery of integrated services to consumers at the micro level of the primary health care (PHC) system. This report will examine national and international (NZ, England, Canada and the US) strategies to understand the initiatives which lead to improved outcomes and better consumer experiences. Enabling factors and barriers to integrated service delivery will be discussed. Priority areas for governments to consider will also be identified.

Methods

A literature review was undertaken using a range of electronic databases, websites and the grey literature. The timeframe for inclusion of resources for this report was limited to material produced within the past 10 years. A snowballing technique was used to identify additional material. Knowledge exchange/input from experts in the PHC field specialising in integration was an important phase of the search strategy that enabled both the identification of strategies/initiatives in place in Australia and access to evaluation details where possible.

Findings

There are 12 key findings from this review.

1 Continuity of care by specific personnel and teams is welcomed by patients and helps to avoid omissions in records and care
2 After-hours health care and advice is highly valued by consumers
3 Sensitivity to the individual’s personal needs and cultural sensitivity reassures the patient that they are being heard and that their care is a priority
Consumers want to be involved in their medical decision-making

Primary health care organisations have been established to provide support, education, and other infrastructure resources for health professionals to enable delivery of integrated services to patients

Health and social care arrangements are frequently linked for improved integration of services

Resources focused on community- rather than hospital-based services improve the management of transitions between these services (i.e. discharge from acute to primary care) by way of communication (electronic and interdisciplinairy education)

Co-location is frequently identified as a strategy for improved access to multidisciplinary care

Integrated care strategies applied in vulnerable populations can be used to transform care for other populations

Patient-centred medical home approaches are common across many services which deliver integrated care

Physician-led multidisciplinary teams are important for improving patient outcomes

PHC services may benefit from information technology advances.

**Conclusions**

Evidence from successful integration projects at the micro, service delivery level of PHC have demonstrated improved patient outcomes, experiences and satisfaction whilst being cost-effective. However, introducing complex change to complex health systems requires attention to change processes and communication modalities and pathways at the local level, and structural changes that enable easy transfer of information and collaboration may be required. Evaluation of trials of integrated service delivery conducted at the highest level of research design are essential to further knowledge of what works best for integration within the health system and service delivery.