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Conference Abstract

First results of an action program for integrated services of care, cure and community in the Netherlands

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Abstract

Purpose: The purpose of this action program is to realize an improvement in the quality of health care and welfare services resulting in a healthier and a more self-sufficient population and cost reduction (Triple Aim).

Objectives: The objective is to develop and evaluate an action program focused on the implementation of integrated care and services from the sectors cure, care and community. The program is developed for people with complex and/or multiple problems and limited self-sufficiency in the northern district of Amsterdam.

Background: An alliance was established by ten providers of health care, home care and welfare services, supported by research institute TNO and healthcare insurer Achmea. This alliance has set itself the objective to realize integrated care and welfare services for the target population.

In the Amsterdam northern district, a relatively large part of the population is of low social status. These people are more than average in poor health, often because of complex or multiple (chronic) illnesses and social-psychological problems. In practice, they often have to do with numerous health care professionals and social or municipal workers simultaneously. Every group of professionals or service providers has the inclination to approach problems on their own way, which is enforced by legal regulations and financial incentives. The general practitioners will primarily pay attention to (supposed) health problems; the debt assistance officers will look to financial problems and youth care professionals will especially focus to problems with children's upbringing, etc. As a consequence, many clients receive too much and unnecessary health care and social support with insufficient or even counterproductive results.

TNO supports the implementation of integrated care and services by designing tools and processes for assessing and action planning (based on the multidisciplinary consultation guidelines of Frieslab), outcome based patient stratification (based on an evidence-based self-sufficiency matrix), progress monitoring and training and coaching of professionals. The program is evaluated by a mixed method research design (process-and effect evaluation, impact assessment and shared savings model).

Impact & outcomes: The action program shows promising first results on the Triple Aim dimensions. Self-sufficiency of the target population increased, especially on the field of mental health and income (debt restructuring). This results in a better health for the population. The business case shows that the action program leads to lower costs. We are further discussing the criteria for efficient implementation, based on our process evaluation by continuous quality improvement loops.

Conclusions: This action program explores the opportunities for implementation of a regional, population-based approach to integrate health care and social services in the Netherlands. The first results on population's health and costs are promising, including valuable strategies to sustain changes.

Keywords

integration of health and social care, implementation, integrated care, transition, person-centred, action program