The meaning of "integrated care" for children & families in the UK A summary

British Association for Community Child Health Position Statement



"Integrated care" is increasingly being advocated as a means to overcome perceived fragmentation of care within and between organisations that provide health services.

The term integration is derived from the Latin word integer, which means "whole or entire" used in the sense of combining two things into one, or making a group from a combination of parts. Applying integration to health services should create "a state of combination delivers completeness and harmony". A patient focus on coordination, continuity and timeliness is essential.

In practice there are many different definitions of "integrated care" and while there is little formal evaluation of the impact of integration on outcomes, there is universal agreement that all systems consist of interconnected parts and these must come together to serve the best interests of the users of services.

The most recent NHS use of the term integration refers to management integration between health and local authority services, particularly social services providing care of the elderly and services for children and families. Management reorganisation has a long history of failing to deliver the expected benefits in both health and social care systems and so a new approach is required.

This paper reviews the meaning of integration and focuses on the practical aspects that need to come together before management integration can be considered.

Given this complexity BACCH proposes to focus on integrated pathway based networks and whole system thinking to create innovation and learning, leading to improve safety, experience in outcomes. This requires integration of values, systems and evidence across all organisations providing family-based care for children, to ensure the right things, are done to the right children, at the right time, in the right place to achieve the right outcomes at the right cost.

Successful integration requires a patient and family focus, integrating all component parts across the whole pathway. It requires a similar approach to the use of evidence, measurement, information, quality improvement and financial management between all the organisations involved.

Logically this process of integration based on pathway based networks integrates the approach taken by the various commissioners of services and likewise the regulators of services. The evidence base used by commissioners, providers and regulators should be identical and resources should be moved within the network to achieve maximum effect, using program budgeting and marginal analysis type approaches. All providers should share a similar approach to quality assurance and service improvement, supported by information systems that provide regular meaningful measures relevant to the stakeholders involved.

Services are not provided in isolation from the wider determinants of health and lifestyles in a community. Public health approaches at a population level should be aligned to the outcomes that are expected of services to create a synergy and partnership with a far greater emphasis on prevention through both promotion and protection than currently exists.

BACCH supports the process of incremental integration based on best evidence, where it exists, in order to improve the quality of experience in outcomes for children and families across all organisations that provide component parts to their pathway through services.