

## **INTERLINKS: Good practice in integrated care across Europe**

**Jenny Billings** | Reader in Applied Health Research  
University of Kent – CHSS



Funded by the European Commission  
under the Seventh Framework Programme  
Grant agreement no. 223037

## Agenda

How the interactive person-centred INTERLINKS Framework for LTC was developed

Consideration of knowledge and evidence in LTC

Examples of good practice

Contribution of INTERLINKS to the evidence-base

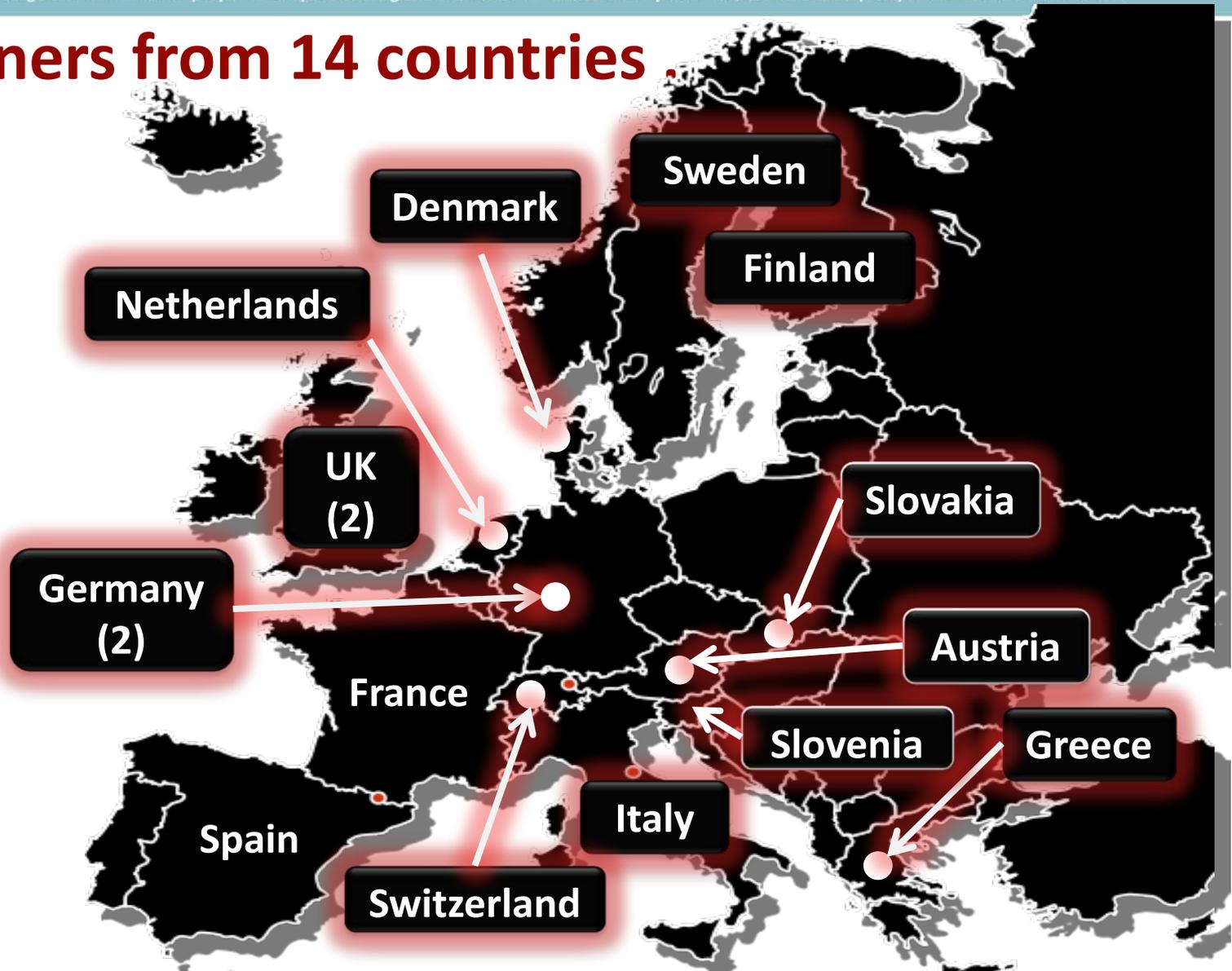
## Background | INTERLINKS Objectives

EU 7<sup>th</sup> Framework Project with 16 partners from 14 countries

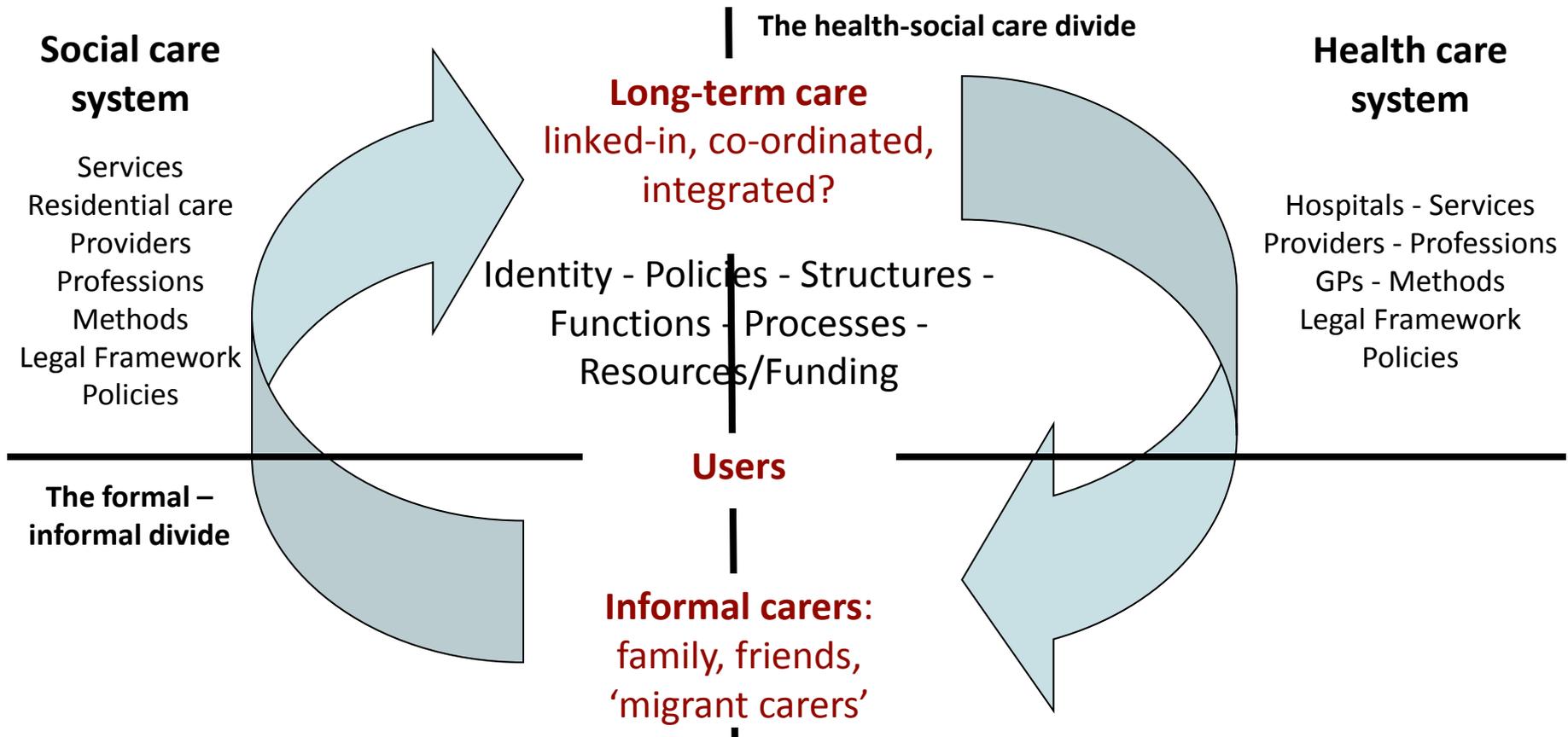
- to develop a method to describe, analyse and improve long-term care and its links with the health system
- to identify practical tools and approaches that are evidence-based

- **quality of care**
- **prevention and rehabilitation**
- **informal carers**
- **governance and financing**

## 16 partners from 14 countries



## Terminology of long-term care



## The INTERLINKS Framework for LTC

Input from the first phase:

- National Reports and European Overviews

Modelling: Themes, sub-themes and key-issues

Validation processes to develop the model and associated tools

- National Expert Panels
- Sounding Board (European stakeholders)

## The INTERLINKS Framework for LTC

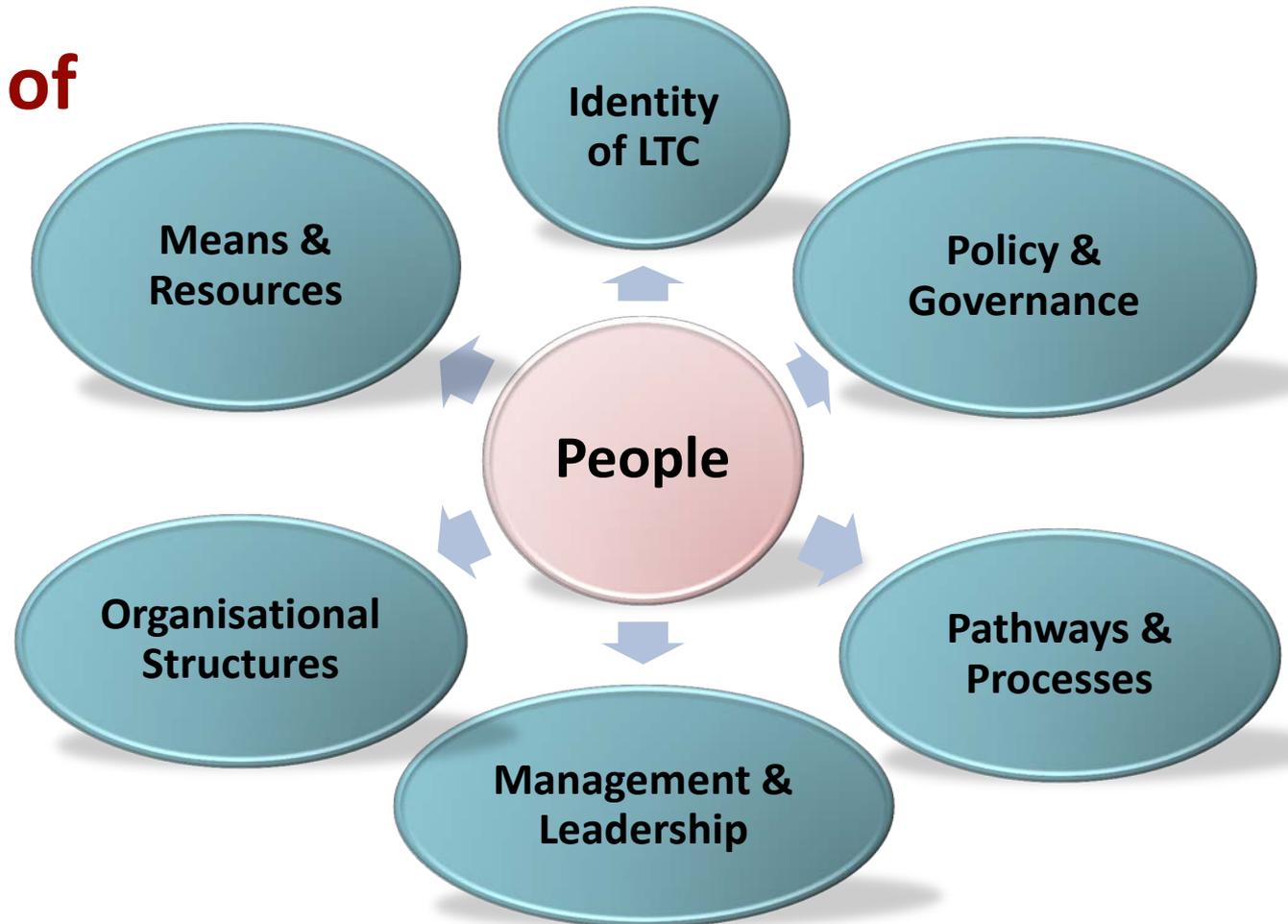
### Input from background papers

- National Reports and European Overviews
- Background papers
- Discussion

### Modelling

- Themes, sub-themes and key issues

## The Themes of a Long-Term Care System





Frail older people  
using LTC have  
multiple needs

**Person-  
Centredness**

Self-care to  
maintain  
independence and  
quality of life

Care provision  
should be  
continuous and  
cohesive

## Describing and analysing individual themes

Themes

6

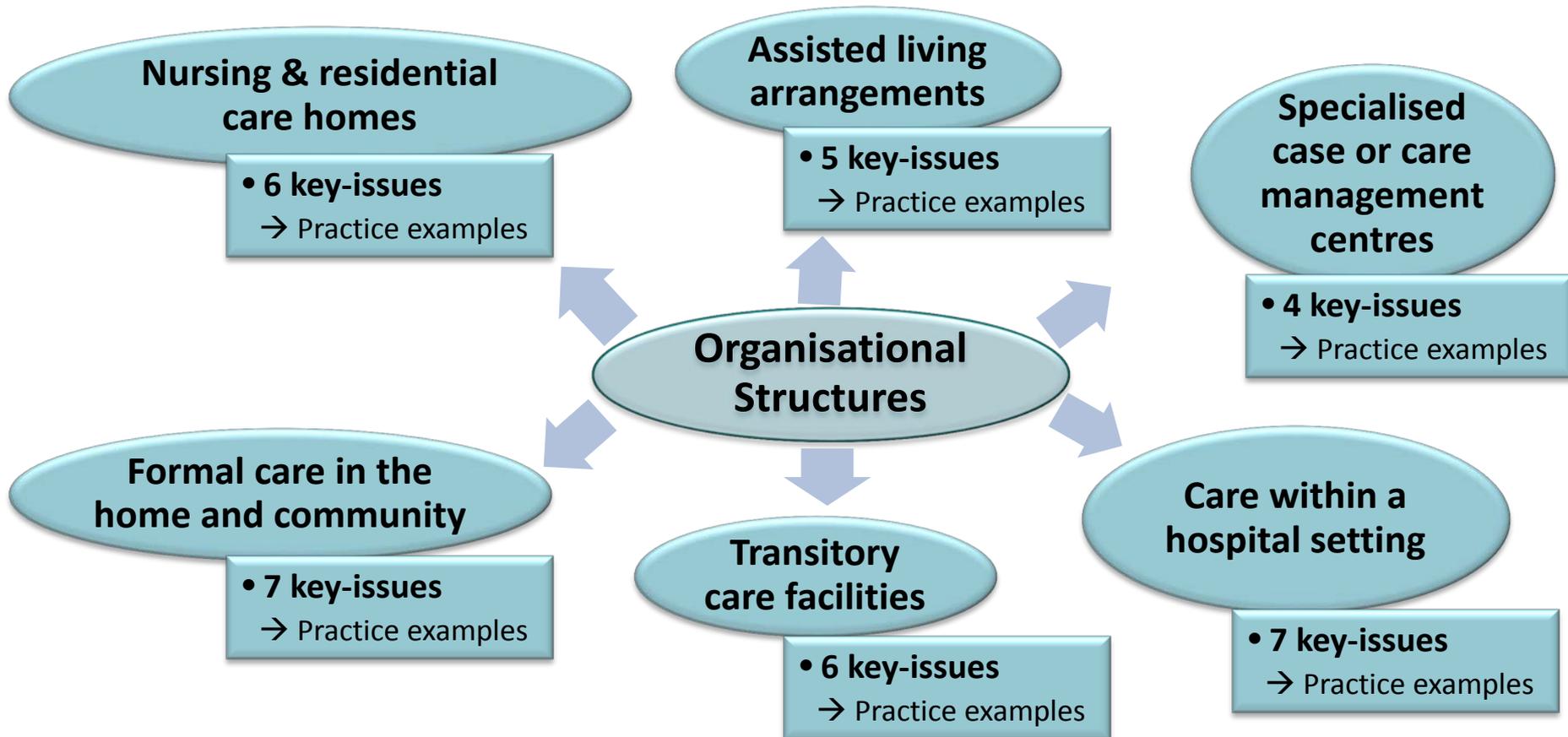
Subthemes: 3-6 in each theme

28

Key issues: 2-8 for each subtheme

135

## Theme 5: Organisational Structures [\(<http://interlinks.euro.centre.org/model/structures>\)](http://interlinks.euro.centre.org/model/structures)



## Key-issues: Example from 'Organisational Structures'

5.5

### • Formal care in the home and community

a)

- access points (referral, one-stop-shops)

b)

- flexible and adaptable services to suit individual needs and individual lifestyle

c)

- multi-professional teams (eg preventive/rehabilitative measures)

d)

- structures that facilitate coordination and cooperation with other formal and/or informal care (including mobility and transport)

e)

- structures that facilitate communication, planning and care delivery with informal carers

f)

- practitioners in independent practice as gate keepers and/or personal case and care managers

g)

- diversity-friendliness: recognition of the specific care needs of hard-to-reach groups

## Collecting good practice knowledge: What evidence do we have on LTC?

Hierarchical view of knowledge and evidence - RCTs or 'nothing'

Many 'successful' experiments fail to transfer to much larger populations

**Search for the benefits of integrated care ...**

Benefits for whom and in what context? What and how do we measure?

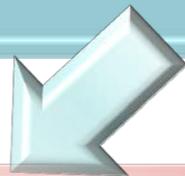
Problems of design, intervention, measure

## Judging 'good practice' in long-term care

Decisions about complex health and social care issues need multiple approaches to getting evidence



Call for knowledge accumulated through pluralistic methods



Tacit and experiential knowledge of professionals



Personal knowledge, experiences and preferences of patients, clients and carers

## Template structure

### Status

#### Summary

Benefit for user?  
Message for policy/practice?

#### Key Words

#### Why implemented?

Which gaps/target group?

#### Description

What is it, who is involved?  
How does it work?  
What resources?

Theme

Sub-theme

Key issue(s)  
addressed

Description and  
assessment

#### What are the effects?

What evidence?  
What effects for users?  
How sustainable and  
transferable?

#### Strengths & Limitations

SWOT-analysis

#### Links to docs/website

#### *External Feedback*

## The INTERLINKS Framework for LTC

Input from background papers

- National Reports and European Overviews
  - Prevention & Rehabilitation
  - Quality Assurance & Quality Management
  - Informal Care
  - Governance & Finance of LTC

Modelling

- Themes, sub-themes and key issues

Validation processes to develop the framework  
and associated tools

- Internal process
- National Expert Panels
- Sounding Board (European stakeholders)
- Peer reviewing

## The Validation Process

Sufficient high quality input through peer review, NEP and Sounding Board consultations

Guiding questions for feedback by experts

The Framework as an interactive website with practice examples

Interactive exchange with interested public:  
“Post your practice example”



## A brief glimpse at the website

The screenshot shows a browser window with the URL <http://interlinks.euro.centre.org/>. The page features the Interlinks logo and a navigation menu with the following items: THE PROJECT, THE FRAMEWORK FOR LTC, COUNTRY INFORMATION, NEWS, and CONTACT. The main heading is "INTERLINKS - A Europe-wide resource that aims to improve long-term care for older people". Below this, a sub-heading reads "Health systems and long-term care for older people in Europe - Modelling the INTERfaces and LINKS between prevention, rehabilitation, quality of services and informal care". A circular button on the right says "Contribute! Propose and register your example". On the left, there is a sidebar with a list of links: USING THIS WEBSITE, PROJECT OUTPUT, REPORTS, PROJECT PARTNERS, GETTING INVOLVED, and DISCLAIMER. Below the list is a search bar with the text "Search entire site" and a "Search" button. At the bottom of the sidebar, there is a "Username: \*" field. The main content area includes a paragraph about the project's goal to help people in Europe who work with and represent older people in need of long-term care (LTC). It lists three bullet points: work towards integrated systems of LTC; improve planning and delivery of services for frail older people at the interfaces between formal and informal care, and between social and health care; and integrate prevention, rehabilitation, quality management, governance and finance in the toolbox to develop LTC systems. A "Mission" section follows, stating that older people and their carers want to be independent and have some control over their care, and that Interlinks aims to fill gaps in LTC pathways to improve care.

INTERLINKS - A Europe-wide resource that aims to improve long-term care for older people | Interlinks

http://interlinks.euro.centre.org/

Reader ECAS

INTERLINKS - A Europe-wide res...

interlinks

Health systems and long-term care for older people in Europe. Modelling the interfaces and links between prevention, rehabilitation, quality of services and informal care

THE PROJECT THE FRAMEWORK FOR LTC COUNTRY INFORMATION NEWS CONTACT

**INTERLINKS - A Europe-wide resource that aims to improve long-term care for older people**

Contribute! Propose and register your example

■ USING THIS WEBSITE  
■ PROJECT OUTPUT  
■ REPORTS  
■ PROJECT PARTNERS  
■ GETTING INVOLVED  
■ DISCLAIMER

Search entire site

Search

Username: \*

**INTERLINKS - A Europe-wide resource that aims to improve long-term care for older people**

Health systems and long-term care for older people in Europe - Modelling the INTERfaces and LINKS between prevention, rehabilitation, quality of services and informal care

The **INTERLINKS project** helps people in Europe who work with and represent older people in need of long-term care (LTC). We want to inspire health and social care professionals, policy makers, people from administrative agencies, and people working in non-governmental organisations (NGOs) to:

- work towards integrated systems of LTC;
- improve planning and delivery of services for frail older people at the interfaces between formal and informal care, and between social and health care;
- integrate prevention, rehabilitation, quality management, governance and finance in the toolbox to develop LTC systems.

**Mission**

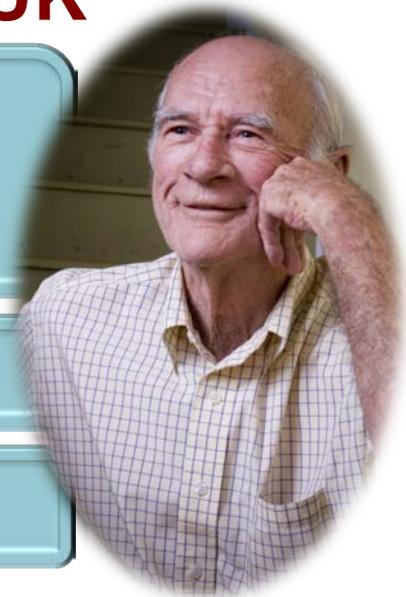
Older people and their carers want to be independent and have some control over their care. But gaps in LTC pathways often lead to poor quality care in which they cannot make the right choices. **INTERLINKS** looks for ways to fill these gaps and improve care. We aim to point planners and those who provide services towards improved ways of supporting older people. We take particular notice of older people who may be difficult to reach.

## Partnerships for Older People Project: UK

Developed services with older people focused on promoting health, well-being and independence, delaying need for institutional care

Involved 29 localities working in partnership

Advisory panels of users and carers



### Effects

Increase in development of LTC services from low-level community initiatives to case management

Increased user-involvement and knowledge of and about services

Increased inter-organisational co-operation

## Integrating care including AAL technology and volunteering (Equinoxe): France

A nationwide home alarm system that supports frail people living at home alone and enhances their quality of life

Based on high-tech call centre operating 24 hours a day with trained people and a 'neighbourhood committee'



### Effects

98% of users were satisfied or very satisfied

Urgent calls to falls and anxiety during the day, and to respiratory problems at night

About 112,000 overall calls per year (2009); 80% of issues resolved by 'local committee' when triggered by call centre



## **The Buurtzorg Model: better home care at reduced cost: Netherlands**

Care delivered by small self-managing teams of 12 community nurses working together, promoting self-care in the neighbourhood.

Integrate with other local carers and formal caregivers, mobilise and reinforce client's resources.  
Organisational costs low

### Effects

Number 1 amongst all care organisations in user satisfaction

High satisfaction among GP's and local authorities regarding cooperation

Alleged large decrease of cost

Staff grew from 2007-2011 to 4,000 professionals; Netherlands Employer of the Year 2011

## Meeting cafes (Netherlands)

Venue for all types of dementia for families and friends

A place to share experiences

Hosts independent events and meetings



Anecdotal  
Effects

Has been scaled up, high levels of attendance and informal evidence of high levels of satisfaction

## INTERLINKS practice examples and their 'evidence base' (n=58)

### Category 1 (n=7)

pluralist mixed method evaluation of differing scientific merit, results contributed towards the evidence-base and in some cases could be generalised

### Category 2 (n=17)

strong elements of evaluation where evidence was generalisable or could be used for local improvement

Cont'd...

## **INTERLINKS practice examples and their 'evidence base' (n=58)**

### **Category 3 (n=4)**

initiatives to develop and implement assessment tools and methods, to contribute towards the evidence base or to improve LTC practice by generating comparable evidence

### **Category 4 (n=31)**

minimal, incomplete or no evaluation, but the project had been rolled out or was on-going

## User involvement



In  
determining  
effects

23 examples contained user perspective, 13 of those included informal carers

Mostly satisfaction surveys, quality of life, or seeking feedback, two had total involvement

In  
developing  
interventions

Very little involvement, some policy initiatives had user groups

Needed in Advanced Assisted Living technology

## Conclusions

Detailed delineation of activity in integrated long term care  
- a complex picture

Makes comparison and identification of generalisable and  
successful person-centre pathways of care difficult

Not full representation across Europe  
- transferability issues

Cont'd ...

## Conclusions

In LTC, evidence still reliant upon more 'informal' sources but user input still patchy

Interventions becoming more complex. Pluralist approaches needed but sophisticated in design with robust evaluation framework

High quality evaluation becoming 'an expensive luxury'

Need for in-built evaluation methods, service investment from the onset



## Further information and further reading

**Website:**

<http://interlinks.euro.centre.org>

**Contact:**

[j.r.billings@kent.ac.uk](mailto:j.r.billings@kent.ac.uk)

**Publication:**

Leichsenring K, Billings J, Nies H (eds) (2013)  
*Long-term Care in Europe - Improving Policy and Practice.*  
Basingstoke: Palgrave MacMillan