عنوان مقاله: Value-Based Integrated Care : A Systematic Literature Review

محل انتشار: مجله بین المللی سیاست و مدیریت بهداشت, دوره 13, شماره 1 (سال: 1403)

تعداد صفحات اصل مقاله: 17

نویسندگان:

Evelien S. van Hoorn – Department of Public Health, Erasmus MC, Erasmus University Medical Centre, Rotterdam, The Netherlands Lizhen Ye – Department of Public Health, Erasmus MC, Erasmus University Medical Centre, Rotterdam, The Netherlands

Nikki van Leeuwen - Department of Public Health, Erasmus MC, Erasmus University Medical Centre, Rotterdam, The Netherlands

Hein Raat - Department of Public Health, Erasmus MC, Erasmus University Medical Centre, Rotterdam, The Netherlands

Hester F. Lingsma - Department of Public Health, Erasmus MC, Erasmus University Medical Centre, Rotterdam, The Netherlands

خلاصه مقاله:

Background Healthcare services worldwide are transforming themselves into value-based organizations. Integrated care is an important aspect of valuebased healthcare (VBHC), but practical evidence-based recommendations for the successful implementation of integrated care within a VBHC context are lacking. This systematic review aims to identify how value-based integrated care (VBIC) is defined in literature, and to summarize the literature regarding the effects of VBIC, and the facilitators and barriers for its implementation. Methods Embase, Medline ALL, Web of Science Core Collection, and Cochrane Central Register of Controlled Trails databases were searched from inception until January Y·YY. Empirical studies that implemented and evaluated an integrated care intervention within a VBHC context were included. Non-empirical studies were included if they described either a definition of VBIC or facilitators and barriers for its implementation. Theoretical articles and articles without an available full text were excluded. All included articles were analysed qualitatively. The Rainbow Model of Integrated Care (RMIC) was used to analyse the VBIC interventions. The quality of the articles was assessed using the Mixed Methods Appraisal Tool (MMAT). Results After screening \YYA titles/abstract and FAA full-text articles, YF articles were included. No articles were excluded based on quality. One article provided a definition of VBIC. Eleven studies reported-mostly positive- effects of VBIC, on clinical outcomes, patient-reported outcomes, and healthcare utilization. Nineteen studies reported facilitators and barriers for the implementation of VBIC; factors related to reimbursement and information technology (IT) infrastructure were reported most frequently. Conclusion The concept of VBIC is not well defined. The effect of VBIC seems promising, but the exact interpretation of effect evaluations is challenged by the precedence of multicomponent interventions, multiple testing and generalizability issues. For successful implementation of VBIC, it is imperative that healthcare organizations consider investing in adequate IT infrastructure and new reimbursement models. Systematic Review Registration: PROSPERO $.((CRD \mathbf{f} \mathbf{f} \cdot \mathbf{f}) \mathbf{f} \mathbf{a} \mathbf{q} \cdot \mathbf{f} \mathbf{a}$

كلمات كليدى:

Value-Based Healthcare, Delivery of Healthcare, Systematic Review, Integrated Care, Facilitators & Barriers, Effects Evaluation

لینک ثابت مقاله در پایگاه سیویلیکا:



https://civilica.com/doc/2047532

