



Mapping service delivery models that optimize quality of life and health services use among older people with advancing chronic diseases

Lead research institutions: King's College, London and University of Southern California (USC)

Other participating institutions: Kobe University, Japan; Kyoto University, Japan; Ashiya Municipal Hospital, Japan, and Catalan Institute of Oncology, Barcelona, Spain

Principal investigators: Dr Matthew Maddocks and Dr Catherine Evans, King's College, London; and Dr Joanne Yoong and Ms Lila Rabinovich, University of Southern California

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• Background

As populations age, health and social services need to be realigned towards older populations to optimize their functioning and quality of life (QOL). This requires fundamental changes to health systems and service delivery to meet the needs of older people and achieve intended outcomes, particularly for those with advancing chronic disease.

Phase 1: In 2017, researchers completed a rapid review of systematic reviews on the effectiveness of service models aiming to optimize QOL for older people. Of 2238 identified, 72 systematic reviews were retained. Service models broadly classified as Integrated Geriatric Care (targeting physical function), and Integrated Palliative Care (focused on symptoms and concerns) demonstrated effectiveness in improving QOL for older people. However, the study could not draw conclusions about which service delivery model contributed to specific outcomes, nor could it describe which models would work in resource constrained settings in low and middle-income countries (LMIC).

Phase 2: To address this, the researchers will explore the primary studies of the scoping review.

• Goal

Under phase 2, to undertake a tertiary review of primary literature to map service delivery models to specific outcomes that optimize both quality of life and health services use for older people with advancing chronic disease. The study will cover clinical, health services organizational and macro-policy environmental perspectives, and describe the elements that are needed for the models to work in other contexts.

• Methods

1. Two independent teams with expertise in health services organization and clinical services delivery research (King's), or macro-policy environment and health services organization research (USC) will analyze the primary studies identified from the original scoping review.
2. According to their respective expertise, the teams will identify and evaluate linkages between service delivery models, their elements, organization and delivery to describe how intended outcomes might be achieved across a continuum of care for older populations.
3. During the first quarter of 2020, WKC will convene an expert meeting for the teams to exchange findings and synthesize a joint report. This is expected to yield a map linking clinical, health services organization, policy and systems elements to service delivery models that can deliver appropriate outcomes for this population.

• Conclusions

Phase 1 found that, although they targeted different outcomes, service models classified as Integrated Geriatric Care or Integrated Palliative Care demonstrated effectiveness at improving QOL and symptoms for older people nearing end-of-life. It is important to integrate areas of synergy between these approaches across the care continuum, with service use triggered by patient need and intended outcomes. To inform scalability, we encourage economic analyses that span health and social care and an examination of all sources of finance to understand contextual inequalities.

