

Coordinated Care, Care Management, Service Integration and Partnerships

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Background

As part of the Modernising Adult Social Care initiative (MASC), the Department of Health commissioned the PSSRU to provide a review of the state of social care services at the turn of the millennium. The research builds on previous investigations of the development of care management arrangements for older people and adults with mental health problems.

The purpose of the study was to provide a 'pre-modernisation' picture of service commissioning and delivery structures for all four principal adult user groups: older people, adults with a mental health problem, people with a learning disability and disabled adults, as a baseline for understanding the forthcoming changes. The study employed a quasi-systematic review of peer-reviewed UK literature from 1990 to 2001 and a national survey of English local authority social services departments in respect of the four user groups with an overall response rate of 79 per cent.

This article describes the key themes of modernisation identified from recent social care policy, used as a framework in the analysis of the findings from this study, and presents messages from the literature review and surveys.

Modernising social care

In the UK, modernisation of the public sector has been a key priority of the Labour administration since 1997. It has spanned many areas of policy and administration such as education, employment and healthcare. Within the wider modernisation process there are specific areas salient to the social care of adults. It was necessary to identify these in order to provide a framework by which to evaluate the state of development of social care services prior to the impact of modernisation.

Six main themes of modernisation were identified:

- Integrated health and social care
- Consistency
- Making sure services fit individuals' needs
- Independence
- Carers
- Workforce

The literature review

The study team conducted an extensive search of the research literature covering social care in the UK for the four user groups, revealing over 20,000 citations. For pragmatic reasons, the systematic review focused on the 793 peer-reviewed articles.

Each of these articles was abstracted to elicit methodological and outcome information and to rate methodological quality. In addition, each was categorised according to the six key modernisation themes listed (table 1).

We found that there was a relative dearth of peer-reviewed publications relating to services for disabled adults. Few studies investigated the effectiveness or impact of services or service configurations. There were wide variations in the quality of the social care research literature. Sometimes this related to styles of reporting. On many occasions, however, the scientific rigour of the research was substandard.

Future work

In the near future, a new survey of local authorities will examine current arrangements for care management and care coordination in older people's services. This survey will have a particular focus on integration and differentiation within care management provision and will also produce a measure of change since 1997/8, when the equivalent survey was last undertaken. It is planned that this survey will form the basis of a future evaluation of a small number of different sets of arrangements for older people, examining their relative efficiency and effectiveness.

Table 1 Percentages of references informing the modernisation themes

Theme	LD n=216	MH n=294	OP n=234	PD n=49
Integrated health and social care	4	37	25	6
Independence	44	39	23	55
Consistency	17	10	16	29
Support to carers	8	3	10	8
Making sure services fit individuals' needs	40	53	67	53
Workforce	20	15	11	2

The review revealed these points concerning the state of social care research:

- Research into integrated health and social care was more commonly concerned with joined up services than partnership working at agency level. There was little evidence concerning the efficacy of integrated structures at agency level either for promoting integrated modes of working or the enhancement of the well-being of users.
- The evidence base on the theme of independence was not well developed. For example, little evidence was available concerning the efficacy of social care involvement in intermediate care for older people. Another area lacking evidence was the impact of direct payments in mental health and old age services.
- Within the theme of consistency, eligibility criteria for social care were poorly researched in all user groups.
- In respect of support to carers, there were relatively few peer-reviewed publications. The material which was available was generally descriptive and suggested that services were not always attuned to carers' and users' needs.
- Although a large proportion of publications informed the theme of making sure services fit individuals' needs, there were several gaps in the knowledge base. First, there was a lack of evaluative research assessing the effectiveness and cost-effectiveness of different models of care management. Second, few studies of service commissioning examined the processes involved. Third, there was a dearth of research in respect of either the value of preventative services or the process of targeting assistance.
- Workforce issues were given relatively poor coverage in the literature identified for this review. This may reflect the user-specific criteria used in the original search strategies, the inclusion of only peer-reviewed journal articles, and the time-frame of the review.

The state of service development

Data from both the surveys and reviews were collated and used to derive an indication of the comparative state of service development across the four user groups along each of the six themes of modernisation.

The key messages arising from this process were:

- Across the range of modernisation themes, learning disability and mental health services appear further developed than services for older people and disabled adults.
- In terms of the development of integrated health and social care, little progress was documented in services for disabled adults.
- Progress in respect of the modernisation theme of independence showed marked variation between the user groups with most progress in learning disability services, and surprisingly little in older people's services.
- The evidence suggests that the goal of consistency in service provision was poorly developed across all user groups.
- Where evidence existed, support to carers was at an early stage of development, with most progress noted in learning disability services.
- Despite the emphasis on community care providing individually tailored services, there was little evidence of this in services for older people and disabled adults.