

## Testing of Canadian Integrated Healthcare and Social Services Initiatives with an Evidence-Based Case Definition for Healthcare and Social Services Integrations

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**Abstract :** Introduction: Canada's healthcare and social services systems are failing high risk, vulnerable older adults. Care for vulnerable older Canadians (65 and older) is not optimal in Canada. It does not address the care needs of vulnerable, high risk adults using a holistic approach. Given the growing aging population, and the care needs for seniors with complex conditions is one of the highest in Canada's health care system, there is a sense of urgency to optimize care. Integration of health and social services is an emerging trend in Canada when compared to European countries. There is no common and universal understanding of healthcare and social services integration within the country. Consequently, a clear understanding and definition of integrated health and social services are absent in Canada. Objectives: A study was undertaken to develop a case definition for integrated health and social care initiatives that serve older adults, which was then tested against three Canadian integrated initiatives. Methodology: A limited literature review was undertaken to identify common characteristics of integrated health and social care initiatives that serve older adults, and comprised both scientific and grey literature, in order to develop a case definition. Three Canadian integrated initiatives that are located in the province of Ontario, were identified using an online search and a screening process. They were surveyed to determine if the literature-based integration definition applied to them. Results: The literature showed that there were 24 common healthcare and social services integration characteristics that could be categorized into ten themes: 1) patient-care approach; 2) program goals; 3) measurement; 4) service and care quality; 5) accountability and responsibility; 6) information sharing; 7) Decision-making and problem-solving; 8) culture; 9) leadership; and 10) staff and professional interaction. The three initiatives showed agreement on all the integration characteristics except for those characteristics associated with healthcare and social care professional interaction, collaborative leadership and shared culture. This disagreement may be due to several reasons, including the existing governance divide between the healthcare and social services sectors within the province of Ontario that has created a ripple effect in how professions in the two different sectors interact. In addition, the three initiatives may be at maturing levels of integration, which may explain disagreement on the characteristics associated with leadership and culture. Conclusions: The development of a case definition for healthcare and social services integration that incorporates common integration characteristics can act as a useful instrument in identifying integrated healthcare and social services, particularly given the emerging and evolutionary state of this phenomenon within Canada.

**Keywords :** Canada, case definition, healthcare and social services integration, integration, seniors health, services delivery

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