Towards a critical understanding of the emergence, development and implementation of integrated care pathways for frail older people: An ethnographic study

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Background

Integrated care pathways (ICPs) are 'locally developed, multidisciplinary infrastructural technologies that map core interventions in a clinical trajectory and are simultaneously a workflow system and a record of care' (Allen 2014: 808). ICPs have been widely used to improve quality and equity of care for patients with a range of health conditions. They have been proposed as a vehicle for clinical governance (Degeling et al 2005), embedding evidence based guidelines into clinical practice (Allen 2014), and health care policy. However, there has been limited social science research focusing on a critical understanding of the role, value and implications of ICPs from different stakeholder perspectives, and the social, organisational, politico-economic and historical contexts shaping their emergence, development and implementation in practice. Pinder et al (2005:759) based on a sociological analysis of care pathways, found that rather than being neutral mechanisms for enabling continuity of care for groups of patients, instead 'they configure the patient, highlighting some aspects of their experiences, whilst silencing others'.

This PhD study will explore these issues in the context of ICPs for frail older people in Lambeth and Southwark, South London. Frail older people commonly experience complex health and social care needs (Manthorpe & Iliffe 2015) and multi-morbidity (Hewitt et al 2016). They are high users of health and social care services, but report difficulties receiving care efficiently and in a coordinated manner, and are at high risk of receiving poor quality of care due to fragmented service provision (Ament et al 2014, Oliver et al 2014, NHS England 2014, Andreasen et al 2015). In the UK, to address variations in care, improve outcomes and reduce costs, health care policy and quality guidelines advocate the use of ICPs for frail older people, which integrate health and social care delivered by multi-disciplinary teams (MDT) along a coordinated pathway (NHS England 2014, NICE 2015). However, although a number of ICPs for frail older people are being developed, evaluated and commissioned locally in the UK (Oliver et al 2014, O'Dowd 2015), little is known about different stakeholders' perspectives of the benefits, limitations and unintended consequences of ICPs, and the contexts shaping their development and implementation in practice.

Theoretical framework

This project will examine ICPs as 'boundary objects' or phenomena geared towards the translation and organisation of different social groups in different social contexts (Star and Griesemer 1989, Mackintosh and Sandall 2010, Allen 2014). It will also draw on Foucault's archaeology of knowledge (Foucault 1969) to examine the historical and politico-economic discourses, practices and contexts shaping the emergence of ICPs for frail older people. This is important to examine because it shapes how such pathways are developed and implemented and carry assumptions within them.

Aims

1) To examine the social, organisational, politico-economic and historical contexts shaping the emergence, development and implementation of ICPs for frail older people;

2) To explore how ICPs for frail older people in Lambeth and Southwark, South London are currently being delivered and implemented on the ground;

3) To explore how frail older people and their family carers, and different provider and organisational stakeholders perceive ICPs, including their role, value, limitations and implications.

4) To synthesise knowledge from 1-3 to co-design clearer pathways and inform a framework to facilitate the implementation of ICPs, that meet the needs of what is important to frail older people, and improve quality of care and outcomes for frail older people in Lambeth and Southwark, South London.

Methods

The study will use a mixed-methods design:

1) A genealogical analysis of health care policy of the historical and politico-economic discourses, practices and contexts shaping the emergence of ICPs for frail older people.

2) An ethnographic study to explore how ICPs for frail older people in Lambeth and Southwark, South London are currently delivered locally. This will involve observations of care practices with a sample of frail older people and their family members as they navigate the health and care system, analysis of care records, interviews with participants and professionals involved in their care and pathway mapping.

3) Co-design methodology will subsequently be applied through a series of group workshops with a range of stakeholders to develop clearer pathways and a framework to facilitate the implementation of ICPs to improve quality of care and outcomes for frail older people.

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