
CONFERENCE ABSTRACT

Population Health Management: the Evaluation Framework for Panel Management in Integrated Care

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Introduction

In the current healthcare's transition from volume to value, care integration is envisioned as essential and the former fragmented way of healthcare delivery as outdated. Furthermore, the equality-principle of treating everybody similar results in health inequality; overestimating patients with less complex care needs (care-waste) and underestimating those with complex social and medical needs (care-gap).

A promising proactive method for integrated care in this sense is Panel Management, providing appropriate care - based on medical and social needs - to panels of patients sharing the same risk on an adverse event. To evaluate this transition in healthcare practice, a sounded evaluation framework is needed.

Theory/Methods

A literature search was conducted through November 2018, utilizing data sources from PubMed, Embase, Emcare, LWW/OVID-journals, Web of Science, Cochrane, PsychINFO and Academic Search Premier. Title-abstract screening was performed by two authors. First, selected articles were categorized in effect- and/or process-evaluation. In case of effect-evaluation, the primary outcome was identified using the Triple Aim. Second, combining the evaluation designs with theoretical frameworks from complementary scientific fields, a new evaluation framework for Panel Management was developed.

Results

The literature research yielded 77 articles of which 24 articles met the inclusion criteria. Of the 24 articles, 13 studies focused at the effect level, 5 at the process level, and 6 combined the effect and process level. The primary outcomes of effect-evaluation were mostly attendance or screening rates (9/19); five used clinical effect; three healthcare professionals satisfaction; one other outcome; and none reported financial costs.

The new Evaluation Framework of Panel Management is depicted as a hybrid design including both state of the art effect-evaluation and ongoing quality improvement based on qualitative methods (See figure 1). The effect-evaluation on Triple Aim is performed per panel and within the entire population. In process-evaluation, feedback of participants and stakeholders disclose the barriers and facilitators leading to adjustment of the Panel Management intervention.

Discussion

Literature showed that most studies focused either on the effect- or process-evaluation and did not use a hybrid evaluation design. This gap of knowledge could hinder adjustment and improvement of the Panel Management intervention. Furthermore, most evaluation designs were single-outcome orientated.

Conclusion

To successfully implement the Panel Management approach, we propose the hybrid Evaluation Framework for Panel Management comprising effect and process-evaluation on the triple aim per panel and on the entire population.

Lessons Learned

The upcoming and promising field of Panel Management lacked a structured and scientific based evaluation framework. Most studies evaluating the Panel Management approach focus on attendance or screenings rates only.

Limitations

So far, the Evaluation Framework for the Panel Management approach is agreed upon by the authors of this study, but is not yet discussed and agreed upon by an international expert panel.

Suggestions For Future Research

The proposed framework needs to be discussed in the international expert panel and adjusted if needed. Next, the framework should be tested in practice.