

CONFERENCE ABSTRACT

Understanding for whom, how and why Sydney Local Health District's integrated response was effective in addressing COVID-19: a qualitative study

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Background and problem statement

Australia has been effective in preventing the transmission of COVID-19 and numbers of mortality has been relatively low as compared to global numbers. The Sydney Local Health District (SLHD), used a “whole of health” approach (i.e. across hospital, community services, and other sectors) to respond to the pandemic in Sydney. The aim of this study was to understand for whom, how and why this integrated response approach worked for, and to inform a sustainable system change beyond the COVID-19 pandemic.

Theory and Methods

Semi-structured interviews with 20 key informants working in various agencies within the SLHD. Inductive and deductive analysis were used to condense the data into constructs informed by the context-mechanism-outcome realist heuristic tools. Abductive and retroduction theorizing were applied to develop themes. Our overall analysis was guided by a Critical realist paradigm and informed by five strategies of the WHO integrated people-centred health services framework.

Results

An enabling environment of a strong governance structure, emergency preparedness, a committed and adaptable workforce, mature service delivery structures, and a strong core infrastructure underpinned the swift response to absorb the shock of the pandemic. With a culture of embracing innovation, the district adapted and used virtual care, to effectively quarantine people through their special health accommodation and coordinate care across tertiary and community services. The underlying progress towards the ‘whole of health’ approach, prior to the pandemic, enabled service directors to quickly integrate their services, so as to empower and engage the community (and staff), to work across other sectors to reach marginalised populations, and effectively reduce community transmission during the pandemic.

Conclusion and implications

The SLHD's underlying vision of a ‘whole of health’ approach, openness to innovation, advances in health and social clinical integration, empowered and enabled the district to effectively work within

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and across sectors to address the pandemic in an equitable and people-centred manner. Sustaining the 'whole of health' integration post COVID will be beneficial.

Limitations and strengths of the study

1) Using the critical realist paradigm has been a useful approach in our qualitative study to unpack the decision-making process of the observed phenomenon of the how there was integration across the agencies in our response towards COVID.

2) Using the WHO people-centred integrated health services framework in our analysis confirmed the value of their core five strategies as mechanisms of our response; which will continue to guide our health district planning, investment and service delivery.

3) A limitation of our study is that our key informants and interviewers are all staff of SLHD, though triangulation of data sources, and strong researcher reflexivity, ensure the robustness and completeness of our analysis and findings.