



PATH's framework for health services integration

The integration of health services is gaining momentum as a strategy for deriving greater impact from health resources and systems. Increasingly, global health advocates see integration—including the use of a single encounter with a client to address multiple health or social concerns—as a tool to better meet the needs of individuals and health systems.

Integration offers many potential benefits, including more cost-effective use of limited resources, more streamlined care for patients, increased reach and efficiency for health programs and services, and improved funding for health issues that are not prioritized by current funding streams. In addition, integration can help address related or overlapping systems needs across health focus areas, including those highlighted by the Millennium Development Goals. Lastly, integration can lead to a coordinated approach that engages other development sectors, such as education or agriculture, in addition to the health sector.

Integration within communities, health organizations, broader health systems, and across sectors is one way PATH works to improve global health. Examples of our integration work include combined HIV/AIDS and tuberculosis diagnosis and care in Tanzania, integrated care for HIV/AIDS and maternal and child health in Kenya, integrated interventions for diarrheal disease and child health in Vietnam, and a project linking agriculture and nutritional health in Kenya. This paper describes our approach to health services integration and outlines the critical elements we consider when developing integrated programming.

DEFINING INTEGRATION

At PATH, we define health services integration as the organization, management, and delivery of a continuum of preventive and curative health services. We do this in accordance with patient and family needs over time and across different levels of the health system. Our definition builds on existing literature that describes integration as an approach rather than an end in itself.¹

PATH carefully weighs opportunities for integration in the places we work, knowing that integration is not always the best approach. We use four questions to provide our teams and collaborators with a starting point to assess whether integration is possible or desirable:

- **What type of service integration, if any, is needed?** We consider the appropriateness of integration in a particular context, including challenges and benefits.
- **To what extent should services be integrated?** We examine specific services to integrate, then assess the timing, scope, and strategy for integrating them.
- **What steps are needed to establish and sustain high-quality integrated services?** We evaluate the necessary operational steps at the community, provider, facility, and health-system levels to support a program's integration goals and objectives.
- **What information is needed to measure success and inform improvement, replication, or scale-up?** We analyze information that will serve as indicators of whether integration is working.

OUR CONCEPTUAL FRAMEWORK

PATH considers potential integration of health services at four levels:

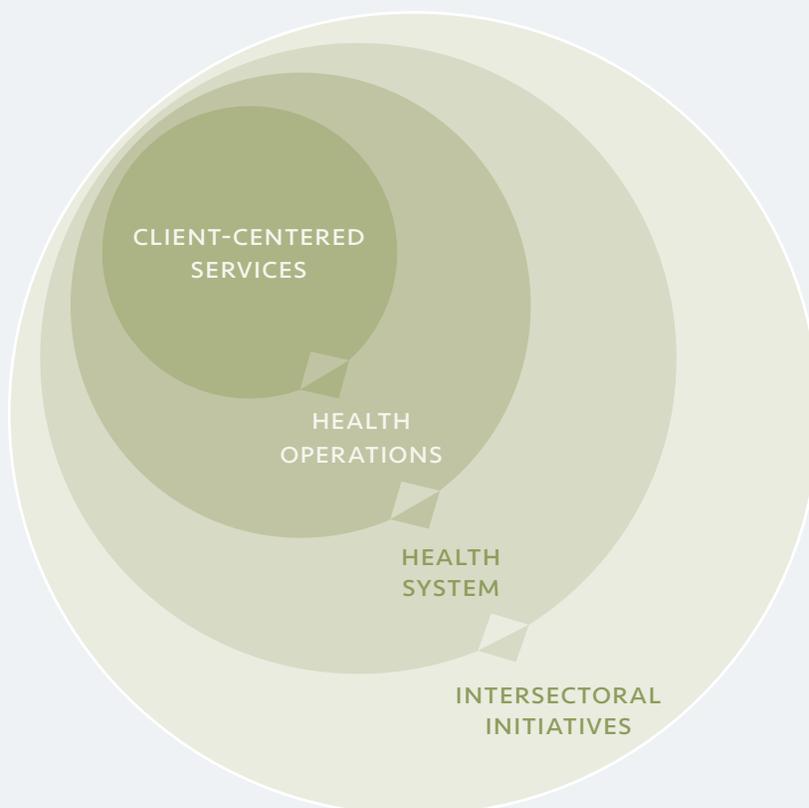
- **Client-centered services at the facility and community levels:** Integrated programming must fit the needs of clients, including individuals and families, as well as the broader community. It may involve expanded clinic hours, more efficient referral systems, increased use of preventive and lifesaving technologies, and improved access to treatment services, drugs, or innovative interventions to enhance care.
- **Operational elements at the health organization or agency levels:** Integrating services often requires changes in how services are delivered by ministries of health, nongovernmental or local organizations, and private-sector agencies. Existing or new health system inputs (such as resources, time, money, or expertise) may need to be allocated differently to support planning, management, staffing, budgeting, interpersonal communication, or the measurement of integrated services.
- **Broader governance and capacity issues at the health system level:** New levels of coordination or joint planning of the policies, processes, and infrastructure that make up an overarching health system may be needed to deliver integrated services. Elements may include strategic planning, governance, financing, human resources, supply chain and logistics, demand generation, and monitoring and evaluation. Integration at this level often requires significant involvement and support from many agencies, entities, and stakeholders engaged in public health, including donors, ministries of health, politicians, advocacy groups, the private sector, and nongovernmental organizations.
- **Intersectoral coordination:** Cross-sector integration may occur when, for example, a health system intersects with an educational system to administer vaccines through schools or with an agriculture program to address nutritional deficiencies.

PATH's approach to integrated health services

We develop integrated programming across as many as four levels of a country's health framework—**client-centered services** at the community level, **health operations** planning at the organization or agency level, **health system** coordination at the national level, and **intersectoral initiatives** across development sectors.

Our approach incorporates nine elements we consider essential for successful integration:

- Planning and budgeting
- Organization of health services
- Staffing
- Training
- Supervision
- Logistics
- Community outreach
- Referral services
- Monitoring, evaluation, and research



NINE ESSENTIAL ELEMENTS

PATH considers nine attributes when developing integrated approaches in client- and operations-level programming, overall health-system organization, and intersectoral initiatives.

- **Planning and budgeting.** Planning for integration must be informed by data on the availability, strength, and organization of existing services and by staff perspectives on activities and areas to be coordinated. Budgeting efforts should use available financial resources and policies to help facilities or communities implement integrated services in a coordinated way.
- **Organization of health services.** Integrated programming may require reallocating resources or staff and examining pay scales or other forms of compensation so the internal organizational structure supports the intended coordination of services. Organization of services may also need to address issues of patient volume, human capacity, work flow, and facility infrastructure.
- **Staffing.** Staff numbers, roles, and responsibilities must be clarified or codified to reflect new responsibilities and interventions that will be incorporated into a position. To determine the appropriate number of qualified staff needed to deliver integrated programming, health providers at the facility and community levels must have a solid understanding of how the staff will work together to achieve health outcomes linked to program goals and objectives.
- **Training.** Training is essential to ensure that staff are prepared and can competently perform new functions and improve their skills. Especially when programs are transitioning to integrated health services, training activities must provide information and skill-building to frontline health and community workers, supporting their efforts to deliver multiple services and minimizing their chance of becoming overwhelmed by increased client volumes or different work flows. PATH has found that training activities are most effective when they incorporate ongoing study and support groups and use peer-to-peer support. In addition, training that calls upon staff with special skills or knowledge may help mitigate the risk of losing staff expertise or creating a cadre of mediocre staff.
- **Supervision.** Supervisors play an important role in supporting change, particularly by helping staff adopt new behaviors. Mentoring, joint problem-solving, and strong communication between supervisor and employees are important aspects of promoting and supporting change. Facilitative supervision can empower staff to effectively identify and solve integration problems that may emerge, help supervisors and staff communicate more effectively, and leverage resources by clearly articulating what is needed to maintain high-quality services.
- **Logistics.** Delivering integrated services often requires that health programs consider how they supply critical products and commodities. Integration of these logistics helps reduce redundancies that may occur in vertical supply chains while still meeting product and customer requirements. The integration process should coordinate the supply of products and commodities that require similar resources, such as warehousing, information systems, and transport.

CASE STUDIES

Integrated diagnosis and care for tuberculosis and HIV/AIDS

TANZANIA

Goal: Tackle the dual epidemics with integrated health services to prevent disease and provide treatment to those living with both illnesses.

Approach: PATH is working with public- and private-sector partners to develop national guidelines, training for health care providers, referral systems, and a more coordinated strategy to improve health outcomes.



Combined care for HIV/AIDS and maternal and child health

KENYA

Goal: Integrate antenatal and HIV/AIDS care and treatment.

Approach: Enroll HIV-positive mothers in follow-up care to ensure more women are treated, better compliance with drug treatment, early diagnosis and enhanced care for newborns, and improved opportunities for testing and treating spouses and other family members.



CASE STUDIES

A coordinated approach to defeating diarrheal disease

VIETNAM

Goal: Reduce the burden of diarrheal disease by improving access to prevention and treatment interventions.

Approach: PATH supported new national guidelines on diarrhea management, enhanced training, and community outreach initiatives, providing health workers at all levels with new tools and strategies to combat the disease.



Linking agriculture and nutritional health

KENYA

Goal: Improve the health status of pregnant women and the nutritional health of young children.

Approach: Pregnant women receiving antenatal care services also receive nutrition counseling and vine cuttings to grow their own orange-fleshed sweet potatoes, rich in vitamin A.



For more information, please see the detailed case studies available on www.path.org.

Program managers must pay attention to how various logistics systems can be reconciled so that coordinated acquisition, distribution, and inventory-recording processes ensure reliable supplies.

- **Community outreach.** Creating demand for services and educating communities and individuals about the benefits of integrated services require effective communication and education. These activities can include community outreach as well as efforts to improve providers' ability to communicate directly with clients about available options.
- **Referral services.** Effective referral mechanisms ensure that clients receive the recommended or requested services and are tracked through a reliable health information system, rather than being lost to follow-up. Ideally, referral systems provide clients with information on the location of referred services, their hours and fees, and contact information. This information should be provided to clients in written or visual form. In addition, information such as the anticipated duration of the visit and the waiting time for results or services can be helpful.
- **Monitoring, evaluation, and research.** Accurate and actionable data are critical to improving the

performance of integrated services and measuring their effectiveness. A key consideration is ensuring that the measurement terms, identification codes, and forms for monitoring performance are compatible. Data collection, recording, and reporting tools should be modified to capture multiple service activities. In government health systems, altering information management systems and procedures can be a complex process requiring the use of special research studies or operations research to measure the effectiveness of integrated interventions.

IMPROVING GLOBAL HEALTH THROUGH INTEGRATED HEALTH SERVICES

Through our growing focus on the integration of health services, PATH works with partners to strengthen health services, programs, and systems. In turn, these efforts help to maximize the use of limited health resources and provide a more seamless health care experience for clients—allowing health care providers at all levels to achieve a greater impact on the health of the people they serve.

1. World Health Organization (WHO). *Integrated Health Services: What and Why*. Geneva: WHO; 2008. WHO Technical Brief No. 1.

Photos: page 1, David Jacobs; page 3, PATH/Mike Wang, Wendy Stone; page 4, Nguyen Ba Quang, PATH/Carol Levin



PATH is an international nonprofit organization that creates sustainable, culturally relevant solutions, enabling communities worldwide to break longstanding cycles of poor health. By collaborating with diverse public- and private-sector partners, PATH helps provide appropriate health technologies and vital strategies that change the way people think and act. PATH's work improves global health and well-being.

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