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Research Protocol and Analysis Framework for a Mixed Methods Case Study Service Evaluation

10.03.2022

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The aim and objectives of the evaluation

Aim

To understand the emergence and evolution of the KSPCS service, determine the factors that explain its success and identify the potential for replicability and transferability to other geographical areas in Ireland.

Objectives

- 1. Identify the key elements of the service journey
- 2. Identify the elements that enable integrated palliative care service provision
- 3. Provide guidance as to which factors that contribute to service success can be replicated or transferred to broader settings for supporting integrated palliative care in Ireland
- 4. Apply a broader international perspective to reflect on KSPCS and identify the learnings from their journey

Why a case study approach?

- To investigate and to develop an in-depth understanding of a complex intervention / phenomenon
- To explore the complexity of the service in the 'real-life' setting
- To employ a mix of qualitative and quantitative data
- To triangulate data collected from multiple sources of evidence
- Case study research is generally thought of as being useful to answer “how and why?” questions, and where in-depth research is needed using a holistic lens

To tell a story



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The balancing act in the methodology

Mixed approach - Yin (single case study) and a balancing inside-out/outside-in approach

- Yin: maximize four conditions related to design quality

- Construct validity, internal validity, external validity, and reliability



use multiple sources
of evidence



cognitive mapping
explanation building



replication logic



follow a protocol (replicability)
frameworks

- To address the common criticisms of single case study

- The counter/balance

- ≥Two researchers (redundancy, triangulation and countering bias)

- International Expert Panel – generalisability, comparison with other real world context/examples

- Use of an independent and evidence based framework to assess the components of integrated care

- Service involved in co-design

Yin, R.K. 2014. Case study research. Design and methods, 5th ed. London, Thousand Oaks: Sage Publications.



What Evaluation framework to use?

The World Cup of evaluation tools...

	Suitability for integrated palliative care	Ability to layer (macro, meso micro)	Self-assessment toolset	Maturity and spread/use of the framework
 <p>SCIROCCO www.scirocco-project.eu/about</p>	✓	✓	✓	H
 <p>Project Integrate www.projectintegrate.eu</p>	✓	✓	✗	M
 <p>OPTIMITY Health Check Readiness https://ec.europa.eu/health/systems_performance_assessment/key_documents_en</p>	✗	✗	✗	M
 <p>Minkman Development Model</p>	✓	✓	✗	L
 <p>SELFIE 2020</p>	✓	✓	✗	M Note 1

Note 1: is an implementation support tool for multi morbidity, not an evaluation tool

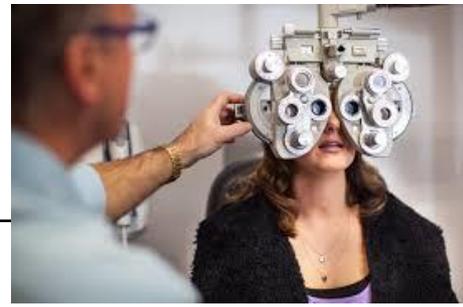


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Through the lenses



- Macro – policy and strategy
 - Incentivising integrated care and supporting scale in local context.
- Meso – the community setting – local planners and funders and managers
 - How structures and relationships have emerged and changed to support the service.
- Micro – a 360-degree view of professionals, support workers, the family and the patient
 - Each seeing where they fit in the picture and drawing strength or lessons from the personal stories.

Recruitment

Purposive sampling with a maximum variation:

- Geographical spread
- Referral
- Service type
- Diagnosis and progression of disease
- Coronavirus pandemic



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Data collection

- **Primary data**

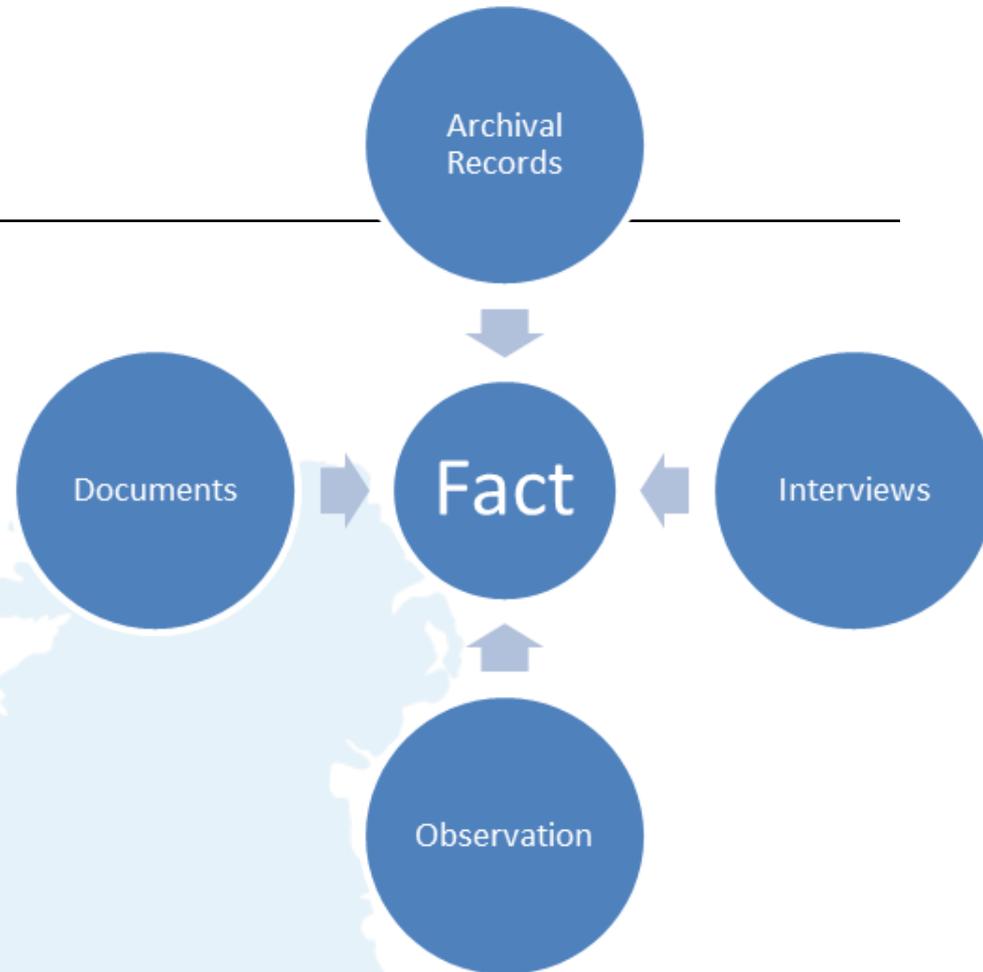
- Qualitative interviews (macro, meso and micro level)
- Non-participatory observation of MDT meetings
- Participatory workshop (SCIROCCO self-assessment tool)
- Research fieldnotes

- **Secondary data**

- Review of the international literature
- Review of documents and physical artefacts
- KPIs

Data triangulation

- Reliability
- Validity
- Consistency



We implemented particular strategies for making such comparisons:

- pattern matching
- explanation building
- thematic review

Outputs

- The narrative
 - The story of the evolution of the service
 - The stories of some of the patients (and their caregivers / families) and their journey through the service
- The themes
 - Inductive and deductive approach
 - The what, how and why
- The results
 - In the local context
 - In the international context
- The lessons and conclusions
 - We captured the dynamic interaction between the context and the implementation of the complex intervention
 - Flexibility, evolution and dynamics of the approach = opportunity and challenge
 - Dynamic and in-depth understanding

IFIC Research and Project Team

- Principal Investigator: Prof Áine Carroll
- Research team: Dr Niamh Lennox-Chhugani, Dr Edelweiss Aldasoro, Dr Dominika Lisiecka, Ingo Meyer, Adriana Poppe
- KSPCS team: Dr Patricia Sheahan, Mari O’Connell, Margaret Goodwin
- Governance Group: Dr Billy O’Conor, Michael Fitzgerald, Sheilagh Reaper-Reynolds, Mary Flanagan, Dr. Marian Conroy, Síle O’Connor
- Expert Panel: Dr Arturo Alvarez-Rosete, Prof Xavier Gomez-Batiste, Dr Mary Miller, Prof Mark Taubert, Brian Creedon
- Project Manager: Karen O’Connell



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