

Integrating terminology for integrated care

Sabater Berenguer, Marta¹; Julià Berruezo, M. Antònia¹; Montané March, M. Amor¹; Ledesma Castelltort, Albert²; Blay Pueyo, Carles³; Sarquella Casellas, Ester²

1: Centre for terminology in the Catalan language (TERMCAT), 2: Interdepartmental Plan for Health and Social Care and Interaction (PIAISS), 3: Chronicity Prevention and Care Programme

The project

To achieve social and health integration successfully, a strong conceptual framework must be constructed, in which terminology will play an important part. Professionals see the use of a **common vocabulary** as one of the first needs for integration of health and social services.

PIAISS and TERMCAT colead the effort to build a formal consensus on integrated care terminology.

The result will be a **free online dictionary** in Catalan with equivalents in English and Spanish, with definitions in Catalan.

The method

This project involves integration based on collaboration between many stakeholders, and takes an integral approach, as the integrated care terminology will be examined from multiple angles.

Three groups of terms will be included:

- 1) New or emerging terms;
- 2) Terms already included in the online terminology of chronicity or in the online dictionary of social services (both produced by TERMCAT), for which it will be necessary to extend the definition in use, and
- 3) Terms already included in both previous dictionaries, for which it will be essential to integrate the two definitions.

Final selection of terms and denominations has been carried out by a formal consensus involving experts from PIAISS and external consultants (figure1).

Preliminary definitions come from the referent bibliography, which includes two previous online dictionaries produced by TERMCAT, about chronicity and social services (see an example in figure 2)

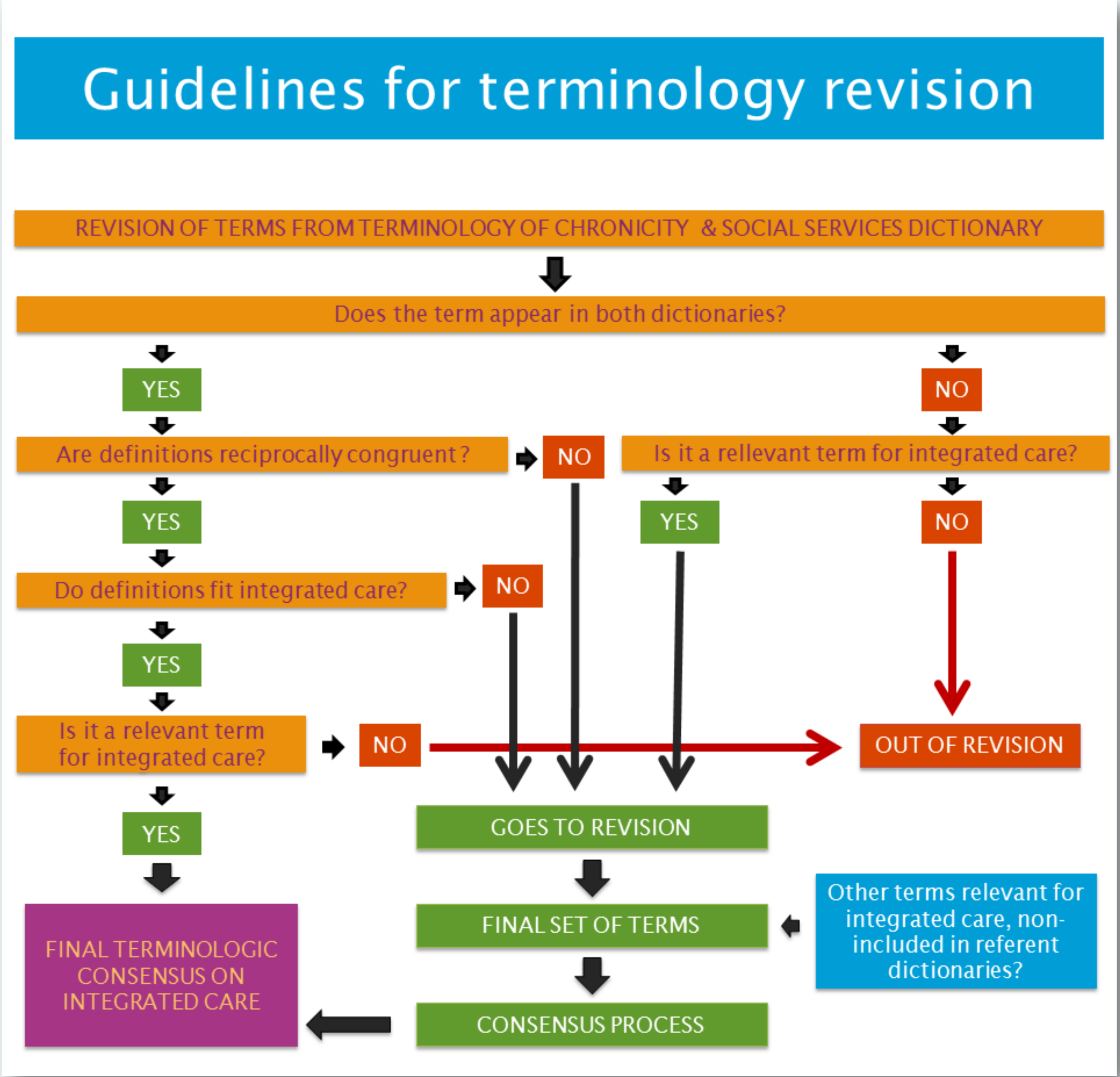


Figure 1

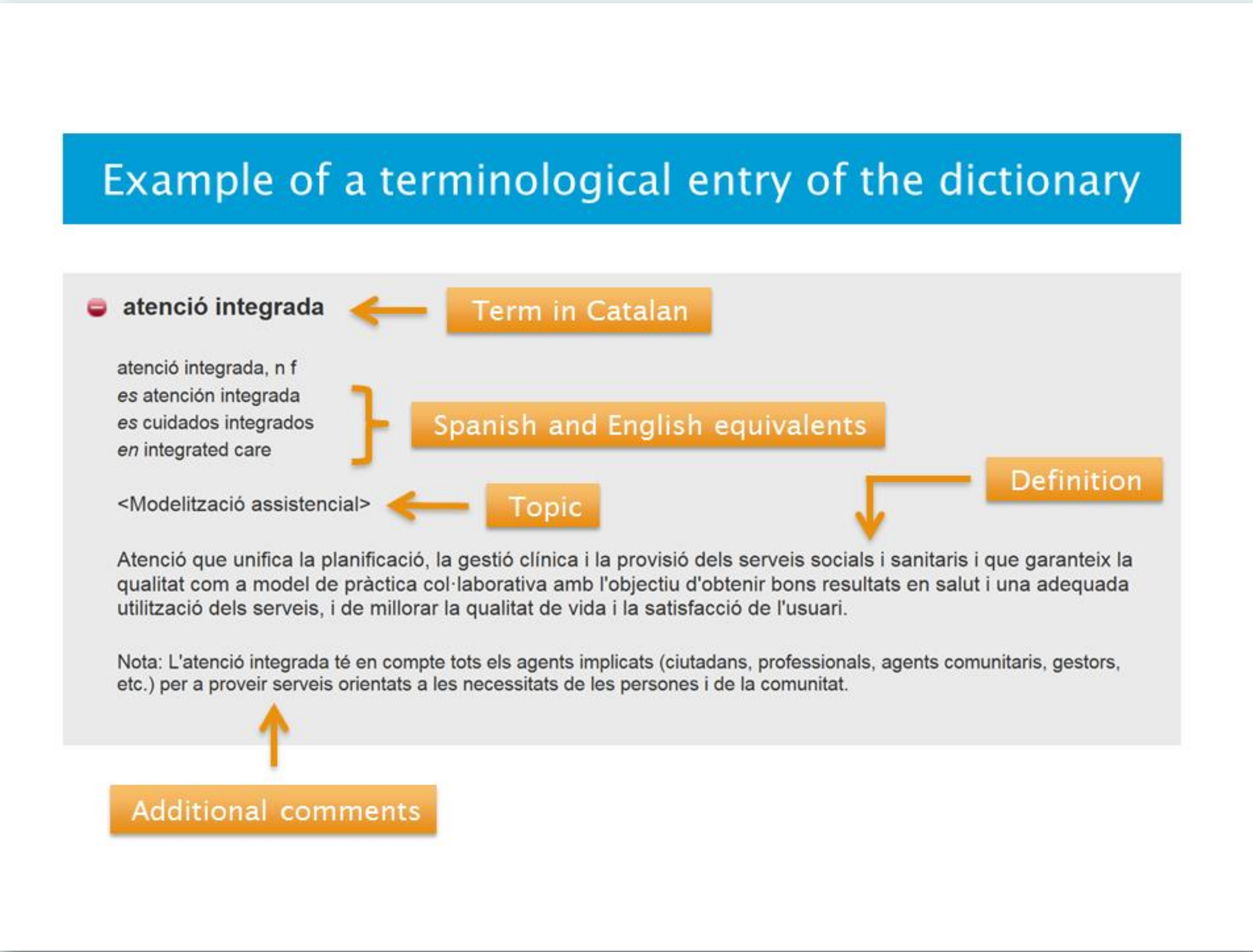


Figure 2

Outcomes and future steps

At the present time, a working version of the dictionary has been developed, which includes **80 terms**, with preliminary definitions and equivalents, classified in four thematic groups (figure 3).

170 experts are doing now a systematic revision of this proposal that will bring a pre-definitive consensus on definitions.

Finally, this consensus will be raised to the revision of the Supervisory Council, the official body responsible for the establishment of Catalan terminology.

Even though the object of this project is Catalan terminology, the agreements for Catalan terminology should be useful for other contexts, as the discussion is not based on linguistic questions but primarily on the concepts that are central to integrated care, which should be established in all instances of **care transformation**.

Map of topics & selected terms

GENERAL CONCEPTS

active aging, care experience, chronic condition, health, integral care, integrated care, patient-centered care, quality of life, well-being.

PERSONS

Subjects

caregiver, chronic patient, complex chronic patient, expert patient, frail patient, patient, person with complex social care needs.

Intrinsic attributes

belief, capacity, dignity, empowerment, health preference, life project, self-determination, value.

Personal situations

advanced disease, autonomy, chronic disease, chronicity, co-morbidity, complex need, complex situation, dependency, disability, multi-morbidity, social vulnerability.

Personal impacts

need, population at risk, risk factor.

MODEL OF CARE

24/7 care, care management, case management, community dimension, continuing care, continuum of care, end-of-life care, interdisciplinary approach, model of care, multidisciplinary approach, palliative care, personalized care, preventive care, proactive care, referent professional, shared care, shared decision, transitional care.

INSTRUMENTS

Community assets, long-term care, day care, home care, specialized care, intermediate care, non-presential care, primary care, case manager, practice guideline, territorial governance, integrated electronic health record, shared care plan, advance care planning, discharge planning, clinical pathway, shared assessment, comprehensive assessment, social network.

Figure 3