



The International Journal of

Integrated Care (IJiC) is an online, open-access, peer-reviewed scientific journal that publishes original articles in the field of integrated care on a continuous basis. IJiC has an Impact Factor of 2.489 (2018 JCR, received in June 2019).

[www.ijic.org](http://www.ijic.org)

---

## **New ICIC and NACIC dates announced due to COVID 19 Restrictions**

Due to global restrictions relating to the COVID 19 pandemic there has been a knock on impact to IFIC conferences. We have been working closely with our co-hosts in each region to provide the best solution and the following schedule has been agreed:

**ICIC20 Croatia** - the conference has moved to a virtual offer and will take place across 4 days in September (each Wednesday of the month with a focus on different conference themes). The conference agenda has been redeveloped and full details of the new programme will be posted to all presenters in the coming weeks. The opportunity to register for the conference will also be reopened to those that would like to present and/or attend but had not already booked their place for the original conference dates.

**NACIC2020 Canada** - this conference will be postponed to October 2021. All abstract submitters have been notified and a new schedule for submissions and registrations will be posted in the coming months.

**ICIC21 Flanders** - this conference will be postponed to Spring 2023 and IFIC will host a Global Virtual Conference in 2021 in its place to look at the lessons learned from COVID 19 for integrated care. A call for papers for this virtual conference will be published in the autumn.

**ICIC22 Denmark** - this conference will go ahead as planned and official dates and venue details will be announced in due course.

We would like to thank all those who have supported us with these difficult decisions including our co-hosts, partners, presenters and our wider network. Here at IFIC we are committed to providing continuation of learning and knowledge sharing during and beyond COVID 19, and are grateful for your patience and understanding as we worked through these details. We hope you will continue with us in this journey. If you have any questions or concerns or suggestions for how we can best operate in a virtual learning environment in the coming 12 months we would love to hear from you.

---

**Ctrl-Alt-Del:**

It's time for health and care leaders to hit the reset button and come together as one system, one team



"Realising the true value of integrated care: Beyond COVID-19" is a thought leadership report published by the International Foundation for Integrated Care which states that Covid19 presents an opportunity to reset our fragmented health and care systems so that they are integrated, driven by people and communities and resilient in the face of future systemic shocks.

COVID-19 is changing what we value as a society – we are redefining the meaning of 'community', realising that we cannot get through difficult times on our own. We are discovering the importance of undervalued care work. We are now painfully aware of how the social, economic and health inequities, entrenched in the past decades through austerity measures, exacerbate and are exacerbated by the pandemic.

Seizing the opportunity to transform how we think about and design our systems will lead to improving population health and wellbeing and ensure we are better equipped to respond to future crises. This requires unprecedented levels of collective action. It requires tackling the social determinants of health and reducing health inequalities. It requires shifting our focus from hospital-centric, disease-specific approaches to assuming accountability towards a territorially defined population, taking as a start point people's and communities' strengths.

IFIC proposes nine building blocks to help steer health and care system leaders towards a radically different future where we as one team, one system can achieve a stronger and more resilient society. In shifting sands, Integrated Care provides solid foundations.

The current crisis represents an opportunity to do things better and speed up integration of our health and care systems so that they are more resilient in the future. This report, which brought together many global perspectives from across IFIC's network, was written and collated by Leo Lewis, Director for Research and Development and Nieves Ehrenberg, Senior Researcher, and describes the issues with and opportunities for strengthening the enablers of integration.

[Access the Report](#)

---

**Oct - Dec Volume 19 Issue 4**

---

# Advancing Towards Value-Based Integrated Care for Individuals and Populations

## Editorial

by Roberto Nuño-Solinís

Value-based health care (VBHC) is nowadays a global trend in healthcare management and policy [1]. Value is defined as the outcomes that matter to patients related to the costs required to achieve those outcomes [2]. VBHC is thus yet another strategy that promises to “fix” health care [3]. Although it is uncertain if this purpose will be achieved, it is clear that VBHC incorporates some very relevant elements that have been hitherto absent or neglected in the daily management of organizations and health systems.

[Read more](#)

---

## Integrating Primary Care Into Community Mental Health Centres in Texas, USA: Results of a Case Study Investigation

### Integrated Care Cases

by Rebecca Wells, Ellen D. Breckenridge, Sasha Ajaz, Aman Narayan, Daniel Brossart, James H. Zahniser, Jolene Rasmussen

Despite evidence that people with serious mental illness benefit from receiving primary care within mental health care settings, there is little research on this type of integration. The objective of this study was to characterize how providers and patients experienced implementation of primary care into specialty mental health services.

[Read more](#)

---

# Patient Navigation as an Approach to Improve the Integration of Care: The Case of NaviCare/SoinsNavi

## **Integrated Care Cases**

by Shelley Doucet, Alison Luke, Jennifer Splane, Rima Azar

Children and youth with complex care needs require more and varied healthcare services than the average population, as well as a high degree of coordinated care. Evidence has shown that these individuals and their families have better outcomes if they have access to integrated care. Patient navigation can serve as a novel approach to improve the integration of care for individuals with complex care needs in an increasingly fragmented system. NaviCare/SoinsNavi is an example of a navigation centre for children and youth with complex care needs, their families, and the care team.

[Read more](#)

---

## Municipal Acute Units as Part of the Clinical Pathway for Older Patients

### **Research and Theory**

by Anne-Kari Johannessen, Sissel Steihaug

Since 2016, Norwegian municipalities have been obliged to provide municipal acute 24-hour services representing a service before or instead of hospital treatment. This study explores two municipal acute units (MAUs) as part of the clinical pathway for older patients.

[Read more](#)

---

# Implementing Integrated Community-Based Primary Healthcare: Applying the iCoach-Approach to Case Selection to Denmark

## Research and Theory

by Stine Bligaard Madsen, Kirsten Beedholm, Flemming Bro, Loni Kraus Ledderer, Louise Ormstrup Vestergaard, Viola Burau

The iCoach approach to case selection focuses on innovative models of community-based primary healthcare (CBPHC) and their contexts. The aim of this study was to assess the possibilities and limitations of the approach based on Denmark, which differs in significant ways from the jurisdictions initially included.

[Read more](#)

---

# Developing Normative Integration among Professionals in an Intersectoral Collaboration: A Multi-Method Investigation of an Integrated Intervention for People on Sick Leave Due to Common Mental Disorders

## Research and Theory

by Rie Mandrup Poulsen, Kathrine Hoffmann Pii, Ute Bültmann, Mathias Meijer, Lene Falgaard Eplov, Karen Albertsen, Ulla Christensen

Intersectoral integration is recommended in vocational rehabilitation, though difficult to implement. We describe barriers to and strategies for the development of normative integration in an intersectoral, team-based vocational rehabilitation intervention.

[Read more](#)

---

## Improving Patient Access and Reducing Costs for Glaucoma with Integrated Hospital and Community Care: A Case Study from Australia

### Research and Theory

by Belinda K. Ford, Blake Angell, Gerald Liew, Andrew J. R. White, Lisa J. Keay

Glaucoma, a chronic eye disease requires regular monitoring and treatment to prevent vision-loss. In Australia, most public ophthalmology departments are overburdened. Community Eye Care is a 'collaborative' care model, involving community-based optometrist assessment and 'virtual review' by ophthalmologists to manage low-risk patients. C-EYE-C was implemented at one Australian hospital. This study aims to determine whether C-EYE-C improves access to care and better utilises resources, compared to hospital-based care.

[Read more](#)

---

## Multiple Perspectives Analysis of the Implementation of an Integrated Care Model for Older Adults in Quebec

### Research and Theory

by Mylaine Breton, Paul Wankah, Maxime Guillette, Yves Couturier, Louise Belzile, Dominique Gagnon, Jean-Louis Denis

Integrated care models for older adults are increasingly utilised in healthcare systems to overcome fragmentations. Several groups of stakeholders are involved in the implementation of integrated care. The aim of this study is to identify the main concerns, convergences and divergences in perspectives of stakeholders involved in the implementation of a centralised system-wide integrated care model for older adults in Quebec.

[Read more](#)

---

## Legitimising Inter-Sectoral Public Health Policies: A Challenge for Professional Identities?

### **Research and Theory**

by Ellen Strøm Synnevåg, Roar Amdam, Elisabeth Fosse

The 2012 Norwegian Public Health Act stipulates that all Norwegian municipalities need to integrate public health concerns in their decision-making processes at all policy levels. Based on a Health in All Policies (HiAP) approach, population health and health equity are seen as whole-of-government responsibilities, making all municipal actors across sectors and professional boundaries responsible for health issues. Although many municipalities are well on their way towards implementing this goal, several experience a lack of legitimacy and inter-sectoral collaboration, as well as encounter conflicting professional identities.

[Read more](#)

---

## Can Organisational Culture of Teams Be a Lever for Integrating Care? An Exploratory Study



## **Research and Theory**

by Maike V. Tietschert, Federica Angeli, Arno J.A. Van Raak, Jonathan Clark, Sara J. Singer, Dirk Ruwaard

Organisational culture is believed to be an important facilitator for better integrated care, yet how organisational culture impacts integrated care remains underspecified. In an exploratory study, we assessed the relationship between organisational culture in primary care centres as perceived by primary care teams and patient-perceived levels of integrated care.

[Read more](#)