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Conference Abstract

## Governance and ownership of citizen driven forms of integrated care

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## Abstract

**Background:** In the Netherlands the complexity of the governance of health care organisations, especially in long-term care, will increase. This is related to a large health care reforms and transitions which are currently implemented. In 2015 all relevant health and social care legislation will change. The aim is to strengthen care in the community and care by the community. This implies a larger focus on the responsibilities of citizens. Moreover, the aim is to reduce public expenses.

These transformations of the system require increased multi-sector collaboration and governance by municipalities, health care insurers, health and social care organisations, professionals, service users and citizens. Therefore, the roles and responsibilities of the multiple stakeholders in integrated care settings change. This raises new challenges and questions for practice and research in integrated care.

Two of these challenges and questions will be addressed: the role of citizens in integrated care and the need for new governance structures and processes across sectors, in particular across the various professional and non-professional, public and private domains. The overall issue implies a question on ownership of citizen driven forms of integrated care.

**Methods:** In 2014 Vilans conducted two studies which are related to ownership and governance of integrated care. In the first study we researched a relatively new development in the Netherlands; the upcoming large number of long-term and social care initiatives initiated and run by citizens. We conducted an in depth study in three of these citizens' initiatives, as well as a nation-wide inventory of overall characteristics of these initiatives. We also conducted a study in seven regions to assess new models and structures in local collaboration between multiple stakeholders.

**Results:** Our studies revealed a large (and rapidly increasing) number (>60) of citizens' initiatives. Citizens take the lead in organising informal and formal care and in set up (digital) communities, often formalised as corporations. These corporations operate more or less in collaboration with the local 'traditional' professional organisations, thereby, becoming new players in the field of integrated care.

Thus, ownership of care is a matter of discussion. Questions arise as: who is the owner of care provision and who holds responsibilities in a system of public payments; professional organisations, municipalities, health care insurers, citizens, patients?

Our second study showed that local models of collaboration are changing, and that a shift from disease oriented initiatives towards more population or target group collaboration in networks is developing. Various models appear, with various choices regarding responsibilities and governance.

Both studies reveal a knowledge gap on multi-sectoral, horizontal governance in integrated care in the professional and the non-professional, and the public and private domain.

**Discussion:** In interaction with the participants we will discuss ownership of integrated care and the current (lack) of suitable governance structures and processes. The involvement and co-production of citizens, service users, their families, professional and public agencies is crucial in the newly emerging health and social care systems, whilst at the same time budgets are shrinking. The call for a participative society requires new dimensions in integrated care settings and networks, as well as in governance of integrated care. Traditional vertical governance of organisations and public agencies is not suitable for these new integrated care networks and other forms of structural collaboration. Based on our studies and the international knowledge about this theme, we will map the implications for integrated care governance and new models that emerge.

## **Keywords**

**governance; citizens' involvement; cross-sector; long-term care**

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