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Suggested Reference

Shaw, J., Baker, G. R., Gutberg, J., Belzile, L., Steele Gray, C., Breton, M., . . . Kenealy, T. W. (2017). Managerial strategies for integrated care: Health care provider engagement in the iCOACH project. In *International Journal of Integrated Care: WCIC Conference Supplement 2016* Vol. 17(3);A72. Ubiquity Press.
doi: [10.5334/ijic.3184](https://doi.org/10.5334/ijic.3184)

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CONFERENCE ABSTRACT

Managerial strategies for integrated care: Health care provider engagement in the iCOACH project

4th World Congress on Integrated Care, Wellington, NZ, 23-25 Nov 2016

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Introduction: The implementation of integrated care involves efforts to engage health care providers in a vision of health care delivery that includes coordination and collaboration for the care of individual clients. The processes by which health care providers engage with an organizational vision for integrated care, and the challenges associated with encouraging health care providers to adopt integrated practices remain under-explored in the research literature.

Theory/Method: This paper reports initial findings on health care provider engagement in efforts to implement integrated community-based primary health care from the iCOACH project (Integrated Care for Older Adults with Complex Health Needs). The research project draws on in-depth international case studies of organizations in 3 jurisdictions: Ontario, Canada (n=3), Quebec, Canada (n=3), and New Zealand (n=3). Drawing on the theory of institutional logics, this report will include data from health care provider and organizational management/leadership interviews across all 9 case studies.

Results: Preliminary findings suggest that health care providers respond to organizations' visions for integrated care differently depending on whether they feel supported to practice in more integrated ways. Even within a single organization, health care providers may enact or resist the organizational vision (and thus institutional logic) toward integrated care depending on the extent to which they feel engaged. Managerial approaches were found to be of central importance, helping to determine the extent to which health care providers adopted more integrated practices in the provision of everyday care delivery. These findings were illustrated across case studies in each of the 3 study jurisdictions.

Discussion: Although these qualitative data only represent preliminary analysis, they point to the importance of managerial engagement strategies to promote health care provider buy-in to an organizational vision of more integrated care. These early findings suggest that managers within health care organizations can act as either barriers or facilitators to implementing integrated care depending on whether and how they interact and work with health care providers.

Conclusions: Managerial approaches to the engagement of health care providers are of primary importance for the implementation of integrated care. Further analysis of the iCOACH study data will provide more detailed examination of which managerial approaches promote integrated health care provider practice, and those which act as barriers to integrated primary health care.

Lessons Learned: The key lesson learned is that health care providers respond differently to a single managerial approach. Organizational leaders should anticipate different reactions from health care providers within a given organizational context, and anticipate the need for different engagement strategies when seeking to implement integrated care.

Limitations: This abstract represents preliminary analysis, and further analysis is required to provide a more detailed presentation of (a) specific care provider reactions to managerial strategies, (b) the influence of other features of organizational contexts, and (c) how to promote better health care provider buy-in to organization vision.

Future Research: Further analysis will examine in detail the reactions of health care providers to specific managerial strategies, presenting their adoption of more integrated ways of providing primary health care in different organizational contexts.

Keywords: Implementation science; community-based primary health care; icoach project; institutional logics
