

Conference abstract

## **Diagnostic, design and implementation of an integrated model of care in France: a bottom-up process with a continuous leadership**

*Matthieu de Stampa, Versailles St-Quentin University, “Santé Vieillessement” Group, AP-HP, Hôpital Sainte Perine, Paris, France*

*Isabelle Vedel, Solidage Research Group, McGill University and Montreal University, Montreal, Quebec*

*Claire Mauriat, Versailles St-Quentin University, “Santé Vieillessement” Group, AP-HP, Hôpital Sainte Perine, Paris, France*

*Emmanuel Bagaragaza, Versailles St-Quentin University, “Santé Vieillessement” Group, AP-HP, Hôpital Sainte Perine, Paris, France*

*Christelle Routelous, Ecole des Hautes Etudes Santé Publique, Rennes, France*

*Howard Bergman, Solidage Research Group, McGill University and Montreal University, Montreal, Quebec*

*Liette Lapointe, McGill University, Management Desautel, Montreal, Quebec*

*Bernard Cassou, Versailles St-Quentin University, “Santé Vieillessement” Group, AP-HP, Hôpital Sainte Perine, Paris, France*

*Joel Ankri, Versailles St-Quentin University, “Santé Vieillessement” Group, AP-HP, Hôpital Sainte Perine, Paris, France*

*Jean-Claude Henrard, Versailles St-Quentin University, “Santé Vieillessement” Group, AP-HP, Hôpital Sainte Perine, Paris, France*

*Correspondence to: Matthieu de Stampa, E-mail: [matthieu.destampa@spr.aphp.fr](mailto:matthieu.destampa@spr.aphp.fr)*

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### **Abstract**

**Purpose:** To present an innovative bottom-up and pragmatic strategy used to implement a new integrated care model in France for community-dwelling elderly people with complex needs.

**Context:** Sustaining integrated care is difficult, in large part because of problems encountered securing the participation of health care and social service professionals and, in particular, general practitioners (GPs).

**Case description:** In the first step, a diagnostic study was conducted with face-to-face interviews to gather data on current practices from a sample of health and social stakeholders working with elderly people. In the second step, an integrated care model called Coordination Personnes Agées (COPA) was designed by the same major stakeholders in order to define its detailed characteristics based on the local context. In the third step, the model was implemented in two phases: adoption and maintenance. This strategy was carried out by a continuous and flexible leadership throughout the process, initially with a mixed leadership (clinician and researcher) followed by a double one (clinician and managers of services) in the implementation phase.

**Conclusions:** The implementation of this bottom-up and pragmatic strategy relied on establishing a collaborative dynamic among health and social stakeholders. This enhanced their involvement throughout the implementation phase, particularly among the GPs, and allowed them to support the change practices and services arrangements.

## **Keywords**

**integrated care models, leadership**

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