
CONFERENCE ABSTRACT**A complex adaptive system framework of barriers and facilitators to
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In 2014, the Canadian Academy of Health Sciences released its foundational report, *Optimising Health Professional Scopes of Practice in Innovative Models of Care for a Transformed Health System*. In this report, the Academy proposed an expanded model of barriers and facilitators to the optimisation of health professional scopes of practice in interprofessional models of care based on earlier work of Bourgeault and Mulvale. The CAHS model takes a modified Donebedian (or logic) model approach identifying inputs, activities, outputs and outcomes, drawing these out at the micro/practice, meso/organizational and macro/policy level. More recent discussions of health workforce policy, planning and management criticise this approach as being too linear for the complex system dynamics of the health workforce.

In this presentation, I will begin to transpose the CAHS framework to one that is more in line with complexity theory and a complex adaptive systems approach. Complex adaptive systems are a set of connected or interdependent entities containing a wide variety of elements; they are adaptive in the sense that they have the capacity to alter or change (Begun, Zimmerman Dooley 2003). The diverse elements of the system often have conflicting goals and behaviors and there is no single point of control, although there are clearly some power centres.

Transposing complex adaptive system theory to the understanding of the system of integrated care reveals the influence of multiple intersecting systems with complex dynamics amongst a range of stakeholders with different interests and levels of influence. Some of the key intersecting systems affecting integrated care initiatives include the education system, the health workforce planning system, the health workforce policy system and the system of health workforce deployment. These exist within and between health workforce cadres with varying degrees of authority in practice.

Specific examples of complex adaptive systems analysis applied to integrated care initiatives across mental health, primary care and maternity care in the Canadian context will be drawn enabling an expanded heuristic model informing future research.

Keywords: framework; barriers; facilitators; integrated practice
