

## **CONFERENCE ABSTRACT**

## Designing integrated care at the ecosystem level

19<sup>th</sup> International Conference on Integrated Care, San Sebastian, 01-03 April 2019

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**Background**: Just as care integration cannot always be realized only at the level of a single organization, a single care network may not always offer the scope to reach care integration. Individual care providers, care organizations and care networks are part of a larger constellation of ecosystem actors. Although existing care organizations and care networks can benefit from redesign in pursuit of integrated care, the care ecosystem offers a relatively unexplored level within which to design multiple forms of relationships between independent organizations, already existing care networks, and the multitude of other agencies, groups and patients that are involved. The forthcoming Springer volume "Designing Integrated Care Ecosystems. A Socio-Technical Perspective" focuses on the challenge of how to move the larger constellation of actors towards a more integrated care delivery, across organizational and network boundaries. The volume collects 16 international cases of care ecosystem design, of which 4 cases will be presented during the workshop.

**Aims and Objectives**: The aim of the 90' workshop is to get participants acquainted with an ecosystem perspective on care integration, to explore possible design elements and principles, and to learn about design process challenges and characteristics at an ecosystem level.

**Format**: The participants will be divided in four groups (preferably seated around four tables). We strive for mixed groups of people with different backgrounds, to include different perspectives. The book editors will first give a brief introduction on care ecosystems definition and relevance. Next, in each of the groups a case will be presented:

- Group 1: Designing a cardiac surgery patients pathway as part of an integrated care ecosystem (Todorka Kostadinova)
- Group 2: Co-creating value in the Diabetic Foot Care Ecosystem (Chris Lawer)
- Group 3: Collaborating at the intersection of facilities and organization design (Bernard Mohr)
- Group 4: Redesigning primary care ecosystems in the Flemish Community, Belgium (Ezra Dessers)

After the case presentation, each group will try to identify key elements and principles for ecosystem design. The cases offer different angles, so that a useful synthesis can be derived from individual group sessions: from hospitals that redesign care processes with the broader ecosystem in mind (group 1), over ecosystem-level analyses and interventions (group 2 and 4), to the role of cross disciplinary collaboration in ecosystem design (group 3). Next, each group will be asked to

report the results in a plenary pitch of 3' max. The workshop facilitators will summarize the results and give their feedback, after which a plenary discussion will be held.

**Timing**: 10' welcome and introduction; 5' explanation of today's deliberation process and assignment; 30' group work, of which 10' case presentation and 20' group discussion; 15' plenary reporting (3' per group – key learnings/insights); 10' summary of outcomes, and feedback; 15' plenary discussion; 5' wrap-up and goodbye

**Target audience**: Health care executives, managers and policy makers, but also interested scholars, practitioners and students of care innovation and organization design.

**Learnings**: The ecosystem perspective holds a promising expectation to better understand and improve care integration across networks, organizations and individual actors.

**Keywords:** ecosystem; design; integrated care; relationships