

Organisation Oriented Implementation Strategies

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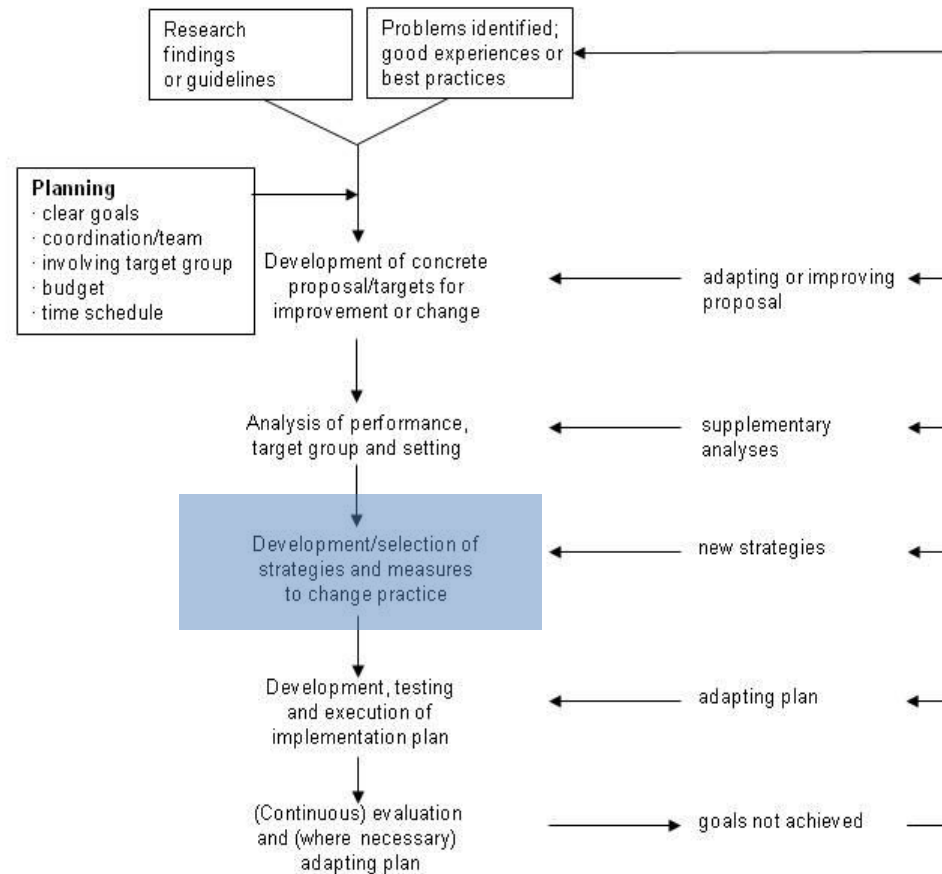
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Scientific Institute for
Quality of Healthcare

Implementation of change: a model

By Grol,
Wensing en
Eccles

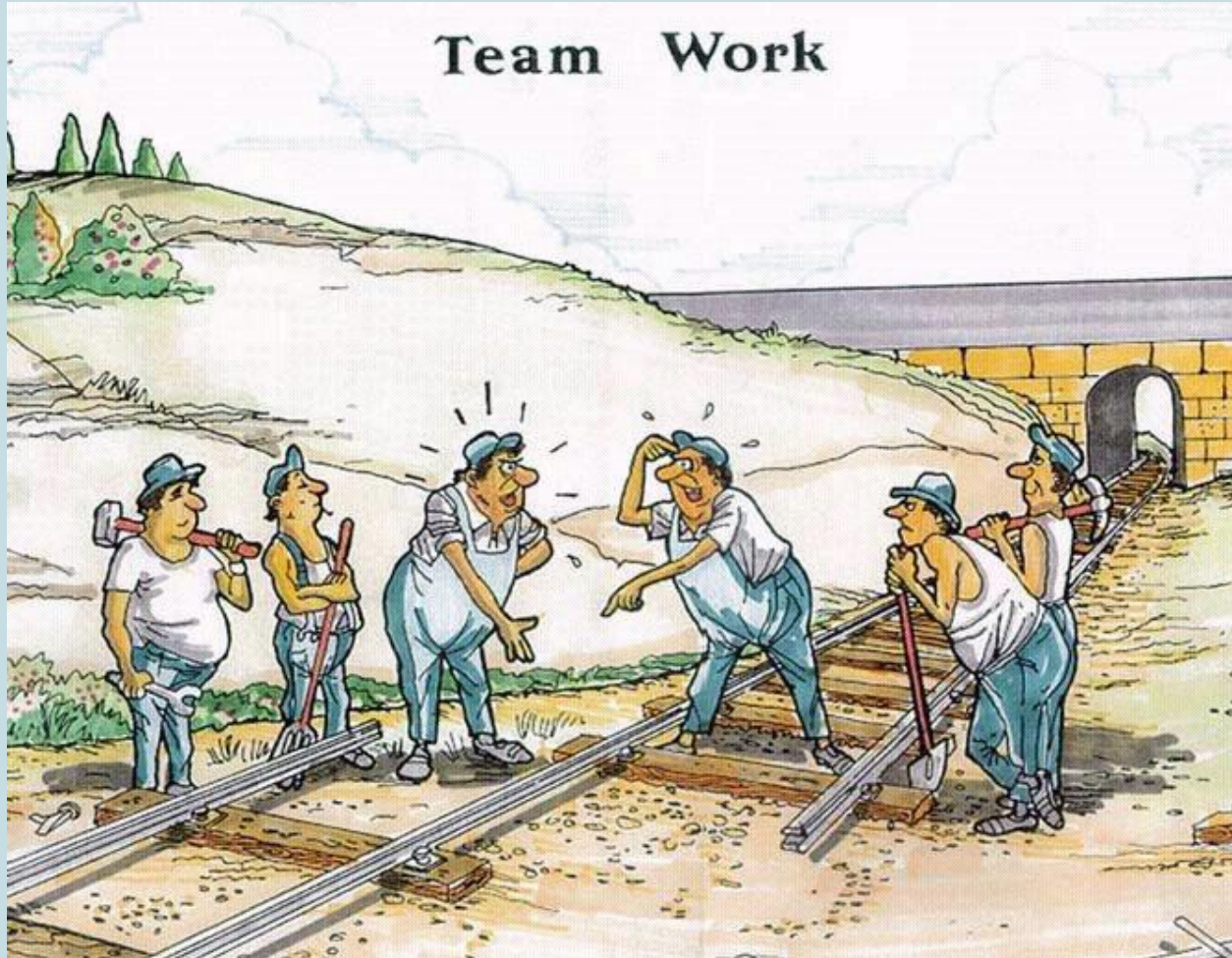


Strategies for Implementation

- Professional oriented implementation strategies
- Patient oriented implementation strategies
- **Organisation oriented implementation strategies**

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Key Messages

- Organisational interventions include changes at the microlevel, mesolevel and macrolevel
- Organisational interventions can effectively change processes of care delivery but no magic bullet
- The effectiveness is influenced by the context

Definition Organisation

- complex concept
- organising = arranging that different components make up a systematic whole, collaborate well
- organisational intervention implies ‘arranging something’; the ‘systematic whole’ refers to the variety of care providers, structures, technologies organised around the primary process of patient care.

Theories on organisations

Technical approach	Social science approach
<p>Organisation is system maintained by clear objectives, planning, tasks, structures etc. (Scientific Management Taylor; Organisational Structures)</p>	<p>Organisation is a group of individuals with specific behavioural routines that fit together by shared values and common goals. (Organisational culture, Morgan; Knowledge management)</p>

Each organisation has an area of tension between the regulations and planning on the one hand and the autonomy of each worker to design the job according to individual knowledge and preferences on the other.

Organizing Care

[Health Care Manage Rev.](#) 2001 Winter;26(1):56-69;
discussion 87-9.

**Managing the care of health and the cure of disease--
Part I: Differentiation.** [Glouberman S](#), [Mintzberg H](#).

[Health Care Manage Rev.](#) 2001 Winter;26(1):70-84;
discussion 87-9.

**Managing the care of health and the cure of disease--
Part II: Integration.** [Glouberman S](#), [Mintzberg H](#).

Differentiation

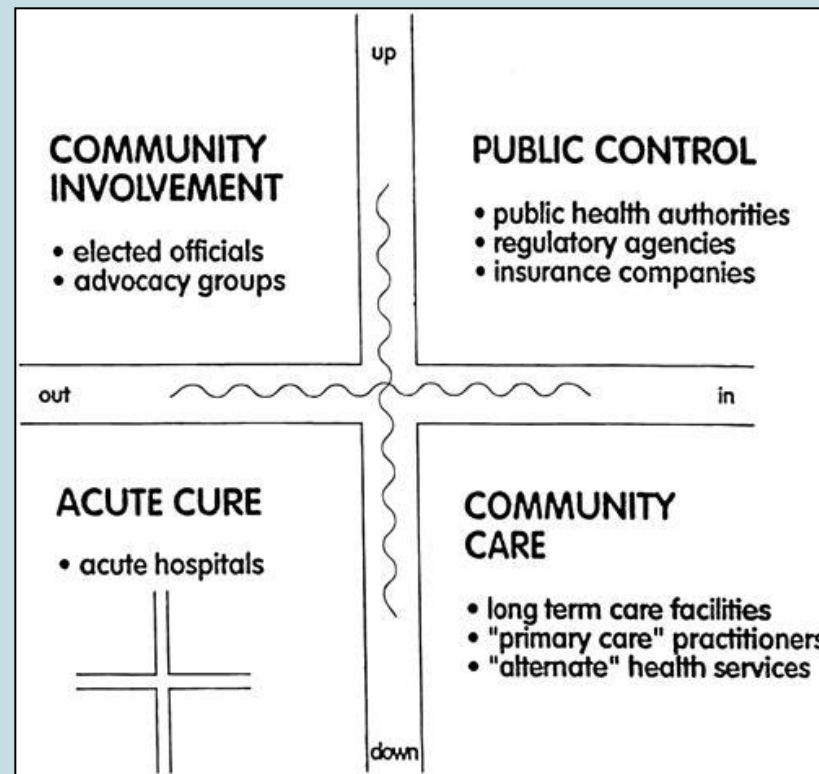
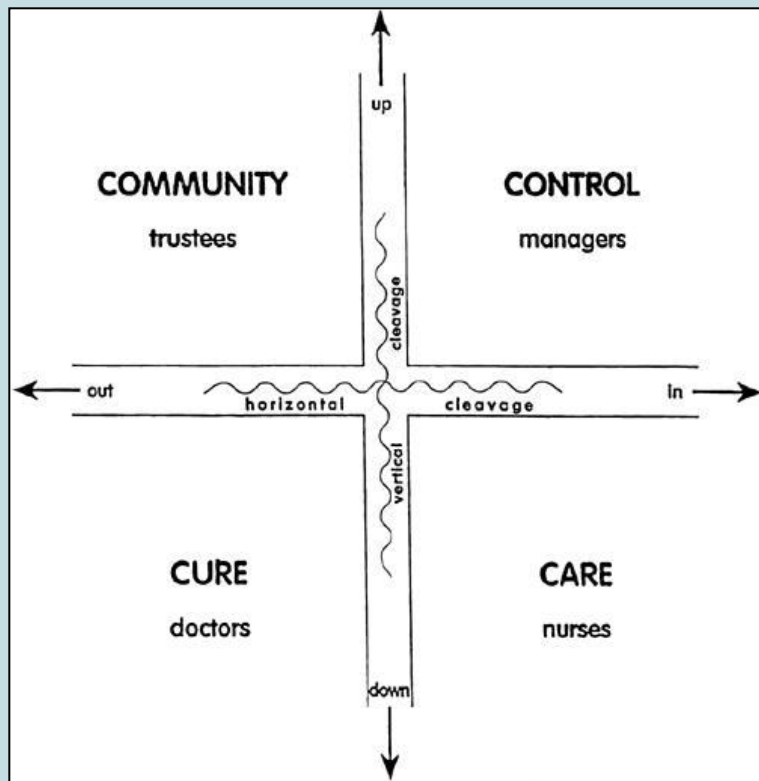


FIGURE 1 FOUR WORLDS OF THE GENERAL HOSPITAL

FIGURE 2 FOUR WORLDS IN SOCIETY AT LARGE

Differentiation

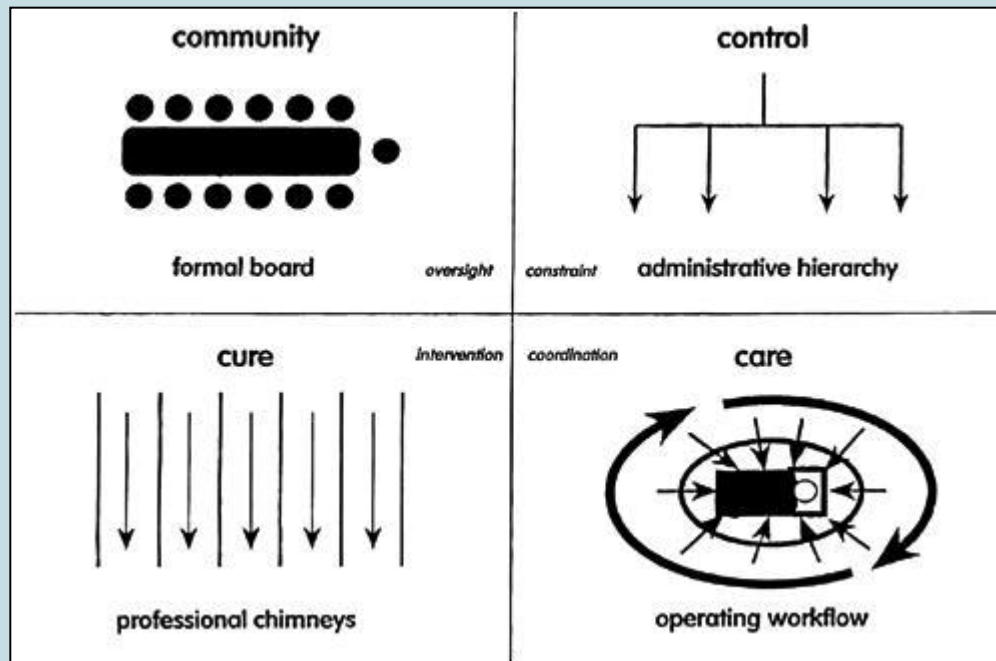
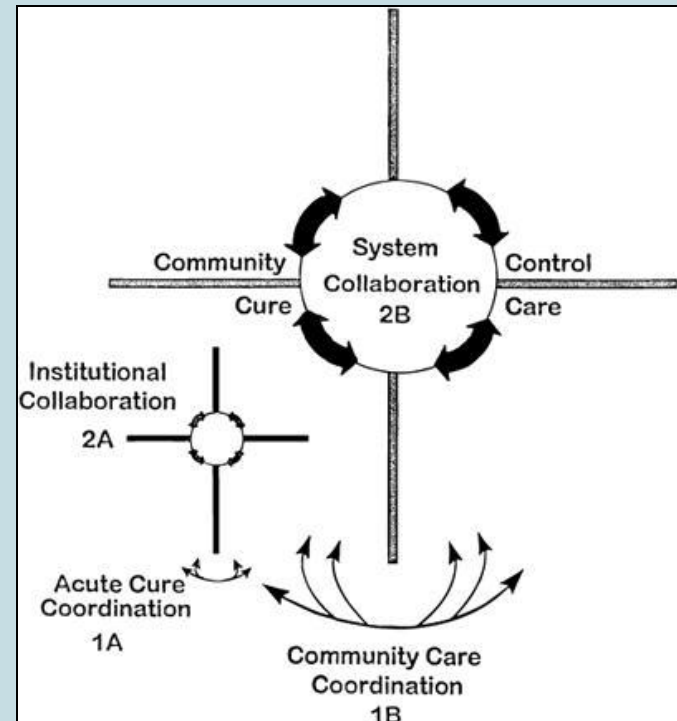
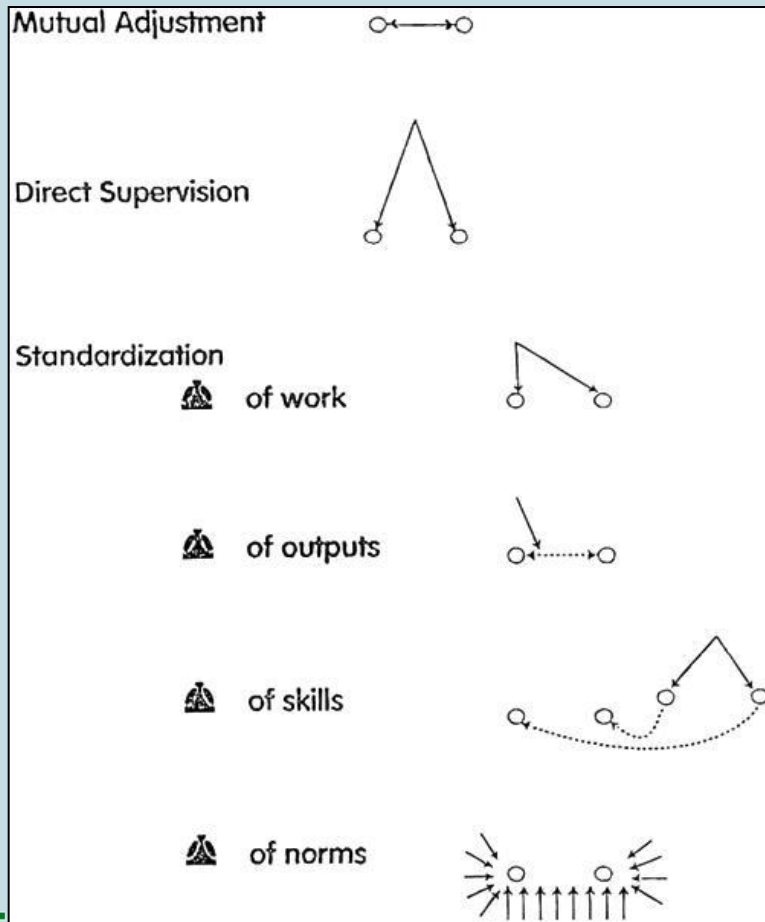


FIGURE 3 ORGANIZING PRINCIPLES AND THE KEY CHARACTERISTICS OF THE FOUR WORLDS

Integration



Integration

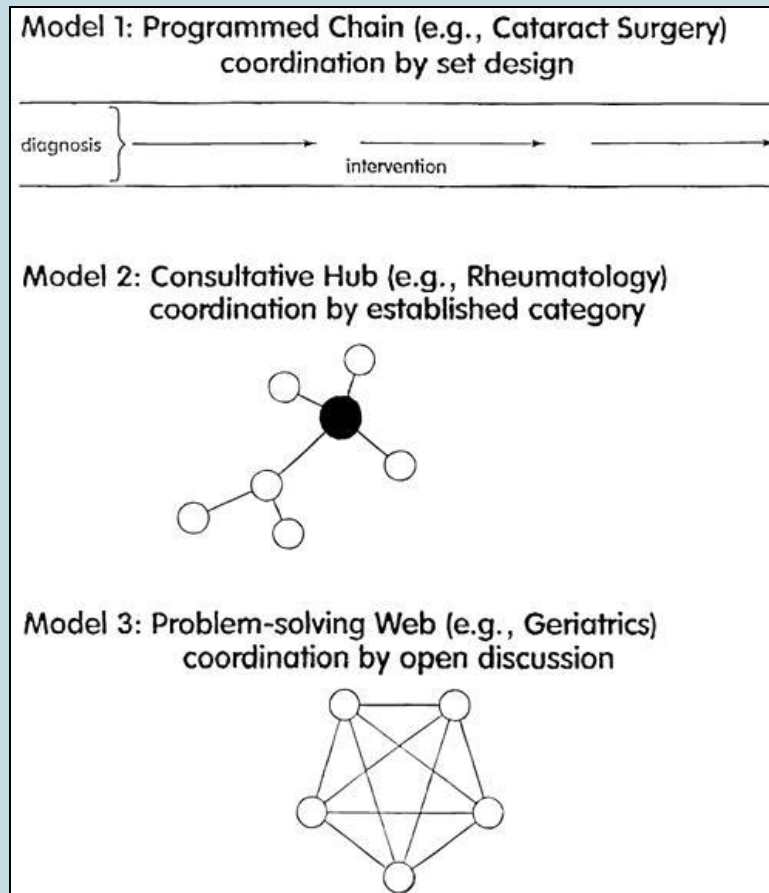


FIGURE 3 MODELS OF CLINICAL COORDINATION 6

Conclusion Mintzberg and Glouberman

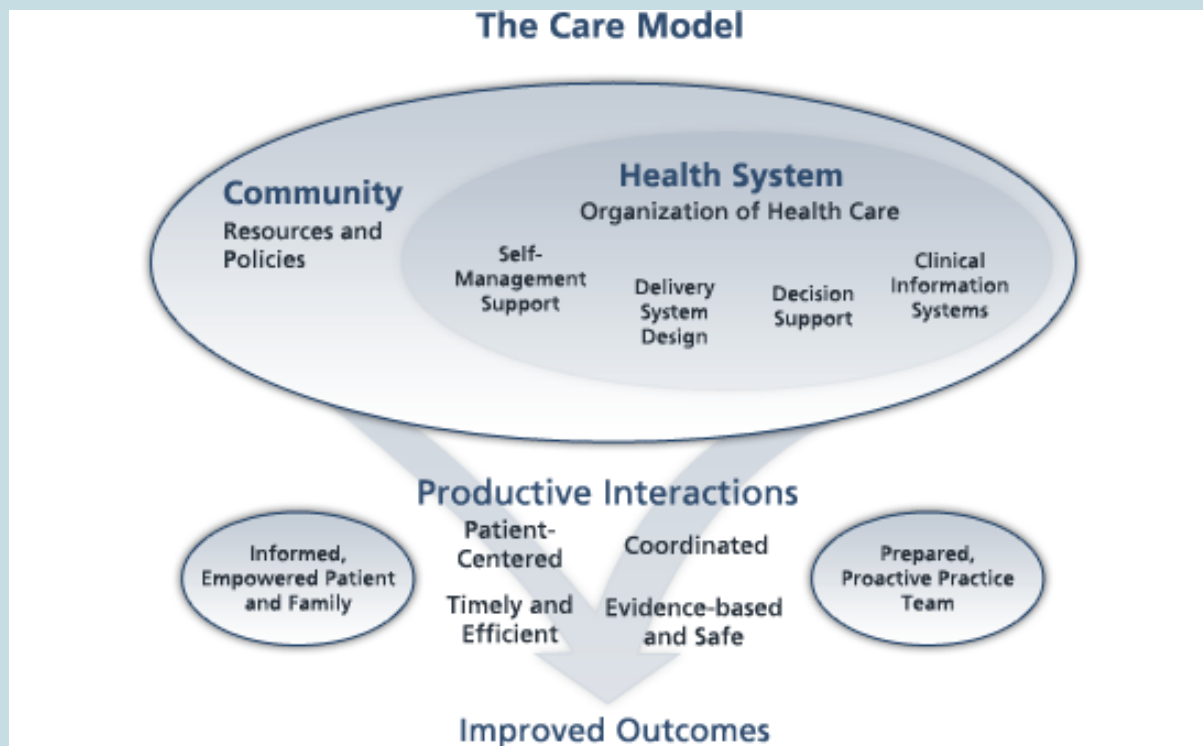
RECONNECTING CARE, CURE, CONTROL, AND COMMUNITY

"All change seems impossible," observed the French philosopher Alain, "but once accomplished, it is the state you are no longer in that seems impossible."

Conclusion Mintzberg and Glouberman

“Management at the institutional and systems levels has to become more direct, involved, and natural. Professionals have to develop greater appreciation of the managerial processes, and managers as well as community representatives have to reflect a deeper understanding of the clinical operations. Care has to be strengthened and brought into better balance with cure, within the acute institutions and especially in the community at large. On the wards, in the hospitals, and across all of society, we need more informed community, more nuanced control, better connected cure, and more fortified care.”

Different levels



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Organisational interventions

Microlevel	Mesolevel	Macrolevel
<ul style="list-style-type: none"> ▪ Change of professional roles ▪ Multiprofessional collaboration 	<ul style="list-style-type: none"> ▪ Integrated Care/DM ▪ Knowledge Management ▪ Quality Management ▪ Leadership 	<ul style="list-style-type: none"> ▪ Changes of reimbursement and copayment