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THE CONTEXT FOR INTEGRATED CARE
WHAT DO WE MEAN BY INTEGRATED CARE?

At the Foundation, we take a broad view of what is meant by integrated care. It means different things to different people in different contexts. We have seen the term adopted globally over the last decade alongside such terms as person-centred care, population health management, case management, care co-ordination, chronic care and long term condition management to name but a few...
INTEGRATED CARE HAS OFTEN BEEN DEFINED CONCEPTUALLY BY THE PROBLEMS IT AIMS TO SOLVE:

Fragmentation of services, health, care and support systems not designed for the needs of a population living longer with multiple chronic conditions.

And under-resourced primary care that is narrow in scope and medically-driven.
IFIC SEES A CONTINUUM OF DEFINITIONS OF INTEGRATED CARE

This continuum at one end has a narrow definition which includes initiatives seeking to improve outcomes of care by overcoming issues of fragmentation through linkage or co-ordination of services of providers along the continuum of care with a health system (European Union’s Expert Group on Health Systems Performance Assessment, 2017).

At the other end of the continuum there is a broad definition of integrated care that addresses fragmentation beyond the boundaries of the formal health and care system, understanding wellbeing in terms of quality of life and referring to people’s capacity to live a good, meaningful, creative and fulfilling lives.

IFIC recognises that systems need to adopt a definition at a point in time that meets the needs of their community and recognises the wider context in which they sit and that this will change over time. The guiding principles of integrated care remain the same – person and community centred, coordinated and with continuity.
Irrespective of the definition that is adopted, the Foundation’s work over the last decade has identified nine pillars of integrated care. Research and evaluation of models of integrated care over the last 15 years have shown that these can be both enablers and constraints of integrated care. The pillars interact in complex ways with each other and the wider context.

Attending to these when designing, implementing and evaluating integrated care is critical.
MARIA

Maria is a 67-year-old retired teacher who lives alone, is very independent and connected to her family.

Maria has a full and active life. Recently she has been aware that she has been forgetting things that she never used to. Then, one day, she forgot to pick up her grandson from nursery.

When she goes to see her GP or family doctor, they talk to Maria about her concerns and what matters to her. They decide together to refer Maria to a memory service which includes a multi-disciplinary team of health and social care professionals, as well as local community organisations and peer support groups.

Maria is seen by the team in the memory clinic and one of the team comes and visits her at home.

One of the team is assigned as Maria’s care coordinator and together they make a plan for Maria based on what she needs and wants that includes all the services so she only needs one point of contact.
George

George is 56 years old and until 18 months ago was looking after his frail mother while working full time as a carpenter.

George has been struggling to cope for a few years now. Even before his mother passed away, he was finding life very stressful. He has been drinking more alcohol than was healthy and 2 years ago was diagnosed with type 2 diabetes and hypertension. After his mother died, he became more and more isolated and his drinking got worse. One night, his daughter stops by and finds him on the floor having had a heart attack.

Fortunately, George recovers and while he is in hospital he is visited by a care coordinator from the local integrated care team. They agree a plan that will support George to stop drinking, manage his diabetes and hyper-tension better and reconnect with his friends and family.

Today he is hosting a birthday party for his grandson and hasn't touched a drop of alcohol for months.
IFIC’S JOURNEY SO FAR

IJIC is Founded by 3 Dutch Universities

2000
- European Society for Integrated Care proposed

2002
- IGITUR hosts IJIC

2004
- Formation of First Dutch Foundation IFIC/INIC

2006
- International Network of Integrated Care (INIC) is formed
- University Library Utrecht Sponsorship ends

2008
- First Foundation Ends
- Julius Centre @ UMC Utrecht provides leadership

2010
- IFIC/INIC
- IFIC Hubs
- Julius Centre @ UMC Utrecht provides leadership

2012
- First World Congress Singapore
- IFIC gains Impact rating of 1.299

2014
- IJIC gains Impact rating of 5.120
- IJIC Website
- Webinars & Special Interest Groups

2016
- ICIC17 exceeds 1000 delegates
- IFIC Academy

2018
- IJIC impact rating reaches 5.120
- Webinars & Special Interest Groups
- IJIC Network

2020
- ICIC20 goes virtual due to COVID-19
- Ubiquity Press host IJIC
- IFIC Hubs

2021
- The IFIC Podcast
- IFIC20 Virtual Conference

IFIC Founded
WHY WE ARE BEST PLACED TO LEAD THE MOVEMENT FOR CHANGE

We are politically and financially independent

We are truly international having a presence in 70+ countries

Our constituents are diverse in terms of background, education and perspective

Our network is very active locally and willing to collaborate beyond boundaries

We rely on people volunteering time which shows commitment

We have proven our impact as a movement for change already
IFIC IS **NOT**
AN EXCLUSIVE MEMBER ORGANISATION

IFIC IS **AN INCLUSIVE MOVEMENT FOR CHANGE THAT SHARES A COMMON PURPOSE**
There is a drive across many health systems to build back better and more equal after C19. Integrated care offers opportunities to deliver genuinely person and community centred care.

Integrated care is now a commonly used term in policy world wide, but there remains a gap between the words and the practice of integration, particularly when viewed from the perspective of people and communities.

Integrated care has been implemented in predominantly well-resourced settings to date. As integrated care spreads, we need to understand what this means in less resource rich settings.

There has been a rapid acceleration of digitally enabled health and care over the last 18 months. Much of it enhances care integration, some does not. We need to harness the positive impact of this shift by sharing the evidence of impact.

The health and care workforce drive the shift from care fragmentation to integration. The workforce was facing challenges pre-C19, these are exacerbated now. They need the tools and supportive culture that enables them to deliver sustainable models of care.

People and communities have always been vitally important to the design, delivery and implementation of person-centred integrated care but their voices are rarely heard in policy making or practice. The inequalities exposed by C19 makes this even more urgent to address.
OUR VISION, MISSION AND VALUES AS A FOUNDATION
IFIC's **vision** is for a world where everybody experiences joined-up, easy to navigate care that addresses the outcomes that matter to them in their life and the communities in which they live.

**Our mission** is to inspire, influence and facilitate the adoption of community-centered integrated care in policy and practice around the world that is inclusive.

IFIC does not operate alone but in **collaboration** with partners internationally, nationally, and regionally.
OUR VALUES

PASSION
We believe in what we are doing and the value of integrated care. We have fun together and celebrate our successes and achievements.

COLLABORATION
We achieve our goals in collaboration with others inside and outside our foundation. We recognize that people and communities are central to our movement for change.

INCLUSIVITY
We know it takes people with different ideas, strengths, interests, and cultural backgrounds to make our foundation succeed. We encourage healthy debate and differences of opinion.

INTEGRITY
We are honest, open, ethical, and fair. We recognize that this is the basis of trust which brings people to our movement for change.

QUALITY
We are driven by a desire for excellence in all we do. We recognize that this is a continuous process based on reflection and learning.
OUR STRATEGIC GOALS
AND OBJECTIVES
OUR STRATEGIC GOALS FOR THE NEXT 5 YEARS

DURING 2022 AND 2023
IFIC will consolidate its position as the **leading integrated care knowledge network** globally and secure a financially and operationally sustainable future.

OVER THE NEXT 5 YEARS
IFIC will **grow the movement for change globally** with a particular focus on growth in non-English speaking countries and those at an early stage of developing integrated care policy and practice.

IFIC will practice and promote the **inclusion of people and communities** in the design, delivery and evaluation of integrated care.
OUR STRATEGIC OBJECTIVES

LEAD AND ADVANCE THE SCIENCE

We will continue to advance the science of integrated care conducting, publishing and sharing primary and secondary research and real world evaluation.

INCREASE KNOWLEDGE AND SKILLS FOR POLICY

We will generate and share knowledge and skills about the impact of policy-making that promotes integrated care in different contexts.

EVIDENCE INFORMED PRACTICE

We will generate and share knowledge and skills about the practice of integrated care in real world settings and its impact on people and communities.

INTERNATIONAL COLLABORATION PLATFORM

We will provide spaces in which people and communities, the integrated care workforce, policy-makers and researchers can collaborate, share and co-create new knowledge.

GROW THE MOVEMENT

We will continue to advance the science of integrated care conducting, publishing and sharing primary and secondary research and real world evaluation.
HOW WE WILL ACHIEVE OUR OBJECTIVES
THE FIVE YEAR PLAN
When we were developing this strategy, we consulted with several groups of our stakeholders. One of the messages that came back consistently was how impressed our network constituents are with the breadth and scope of the work that we do.

That breadth and scope is something that took the team at IFIC and the Board by surprise too and the opportunity that this strategy development gave us to step back and look at what we do, how we do it and whether we can do it differently or better, was hugely beneficial.

We will continue to focus on delivering the services that we currently do, improve them and where possible innovate.
The movement for change

We will support the development of our existing **Country Hubs** and the establishment of new ones. We are already in discussions about the establishment of hubs in Latin America and New Zealand. We want to develop a flexible and context-sensitive but sustainable model that enables the growth of our movement for change.

Our network of **Special Interest Groups** has grown substantially over the last few years and some are very active, others less so. We will work with SIGs to manage their evolution and measure their impact. Some may be established to achieve short-term goals. We will also develop closer ties with our Emerging Researchers and Professionals in Integrated Care **ERPIC** network.

We will grow our **associate network** recruiting new associates in late 2021 who will bring fresh perspectives and thinking to our work.

We will increase **representation of people and communities as partners in care** in all aspects of our work including IFIC’s governance, Hubs, SIGs, project work, knowledge sharing and events.
Our Country Hubs, SIGs and ERPIC and inclusion of people and communities as partners in integrated care.
Conferences and Virtual Events

Working with our conference partners, hubs and SIGs, IFIC will continue to promote the active involvement of people with lived experience of care in our conferences, webinars and podcasts.

We will design conferences and events that are accessible to people with lived experience of care and non-English speakers.

By choosing partners and suppliers that are at the cutting edge of conference organisation, the Foundation will be a leading Innovator in the use of platforms, channels and formats to engage our audiences in ways that promote knowledge exchange and learning.
Our annual conference, regional conferences, podcasts and webinars.

ICIC21
VIRTUAL CONFERENCE
May 2021

North American Conference
on Integrated Care
4th–7th October 2021
Toronto, Canada

The IFIC Podcast
Integrated Care Today

IFIC Webinars
Integrated Care Academy

We will build on the recent success of IFIC’s Online Certificate to deliver the programme to two cohorts of students per year ensuring that it is accessible to an inclusive student body. We see the strength and uniqueness of this programme lying in the inclusion of people who are partners in care alongside health and care workers, policy-makers and others.

We will bring back our hugely popular Annual Summer School in Oxford from 2023.

We will be delivering our first collaborative education award with a ‘bricks and mortar’ higher education institution in Ireland in January 2022. We will build relationships with other institutions in other countries over the next 5 years.

We will continue to provide bespoke courses as part of our Integrated Care Solutions work such as our Accelerated Learning Programmes and Study Tours.

We will grow and diversify our Faculty, leveraging our leadership in the science and practice of integrated care world-wide.
Our Online Certificate, Summer School, Accelerated Learning Events and partnerships with higher education institutes.
Over the next six months, we will develop a detailed **business development plan** for Integrated Care Solutions which will include consulting with our network what they as users would need from such a service.

We will prioritise the provision of **evaluation support** as this is an area we are most frequently asked to support, an area where there is substantial un-met need and we can bring a diverse network of international expertise to support.

As part of the planning process, we will define what **IFIC’s implementation advisory offer** is and develop toolkits to support delivery.

This is likely to include a focus on:

- **Coaching and mentoring for policy-makers and practitioners**
- **Co-production support**
Our commissioned evaluation and implementation projects.

Diagnosis

Implementation Support

Analysis and Design

Ongoing Evaluation
The Journal is the bed-rock of our objective in leading and advancing the science of integrated care. We will work with the editors-in-chief and managing editor of the journal to leverage the journal as a key resource for integrated care evidence thus increasing the impact factor still further.

The Foundation and IJIC will join forces to channel high quality thought leadership in integrated care.

As a trusted source of knowledge on the theory and practice of integrated care, the Foundation and IJIC will collaborate to further develop Knowledge Tree 2.0 as a search resource that will enable users of our website to access evidence and other resources from our library more easily.

In the future, we will produce an annual report on the state of integrated care internationally that will be drawn from peer reviewed evidence, systematic country-level data collection and reviewed by a panel of integrated care experts.
Our scientific journal with a focus on integrated care.
IFIC will build new and maintain existing relationships with EU project consortium lead organisations who share IFIC’s focus on integrated care.

We will deliver our current project portfolio to the highest level of quality.

We will prioritise EU funded projects that have as their focus the promotion of integrated care across the region. This includes projects that support digital technology innovation as an enabler of integrated care.
Evidence-based guidance to scale-up integrated care in Europe. Our contribution to Horizon and other EU Health Programme projects focusing on integrated care.
## STRATEGIC OBJECTIVES SUMMARY

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<th>Objectives</th>
<th>IFIC Global Network</th>
<th>IFIC Events and Conferences</th>
<th>Integrated Care Academy</th>
<th>Integrated Care Solutions</th>
<th>International Journal of Integrated Care</th>
<th>EU projects</th>
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