

Case management activities and integration policies in France: the weight of pre-existing dynamics and local negotiations

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Case management activities and integration policies in France

The weight of pre-existing dynamics
and local negotiations

Integration policies and case management in France : a dilemma?

- Overarching priorities at the policy making level
 - Integration policies: successive schemes
- Integration activities at the local level
 - Pre-existing schemes and professionals
 - Local reception, resistance
- Conflicting ends?
 - Integration vs layering...
- New context: convergence objective

MAIA scheme

- Method of action for the integration of health and social services in the field of autonomy
- 3rd Alzheimer plan 2008-2012
- Elderly people 60+ in complex health and social care situations
- New professionals
 - MAIA pilot
 - Case managers

- *How do new case managers develop their integration activities?*
 - 2 local MAIA schemes
 - 2 local territories

Results: public policy analysis (1)

- Paradoxes of implementation: resistance at three interdependent levels
 - Institutional, organisational and professional levels
- At the professional level
 - Other professionals with similar coordination tasks on the territory
 - *“When the case managers explain their work, it looks so much as what we do. I find it really hard. I also feel bitterness: they have a case load of only 40 situations. What does this mean for our work?! It is completely discrediting it! Our work must be really pathetic if we manage 458 follow-ups a year!”* (Social worker)

Results: sociology of professions (2)

- New case managers
 - Absence of a common professional background to face resistance
- Strategies to develop activities: different dimensions of integration work revealed
 - Building reputation: didactic skills, socialisation, clarification
 - Earning recognition: new regulation, complementary relationship, build trust, encourage professional cooperation
 - Exercising judgement: delimitate the scope for the action and stabilize professional boundaries, added value, relational skills

Discussion

- Integrated care research: centrality of the processual dimension of integration (Goodwin et al., 2014; Williams and Sullivan, 2009)
- Drivers for local integration: reconfigurations at work
 - Specific professional skills and know-how
 - Ordinary negotiation spaces
 - Collective learning
 - Permeability of professional boundaries
 - Time needed
- Complex and challenging process
 - Layering logic and concrete implications of the convergence objective
 - Similar implementation of several coordination schemes = difficulty dealt first and foremost at the local level
 - Persistent or increased complexity left in the hands of those in the field
 - Not to be taken for granted nor ignored – risk of disengagement