



EHMA 2024

Shaping and managing
innovative health ecosystems

Collaborative governance for population health: best practices of a local initiative to reduce health inequalities

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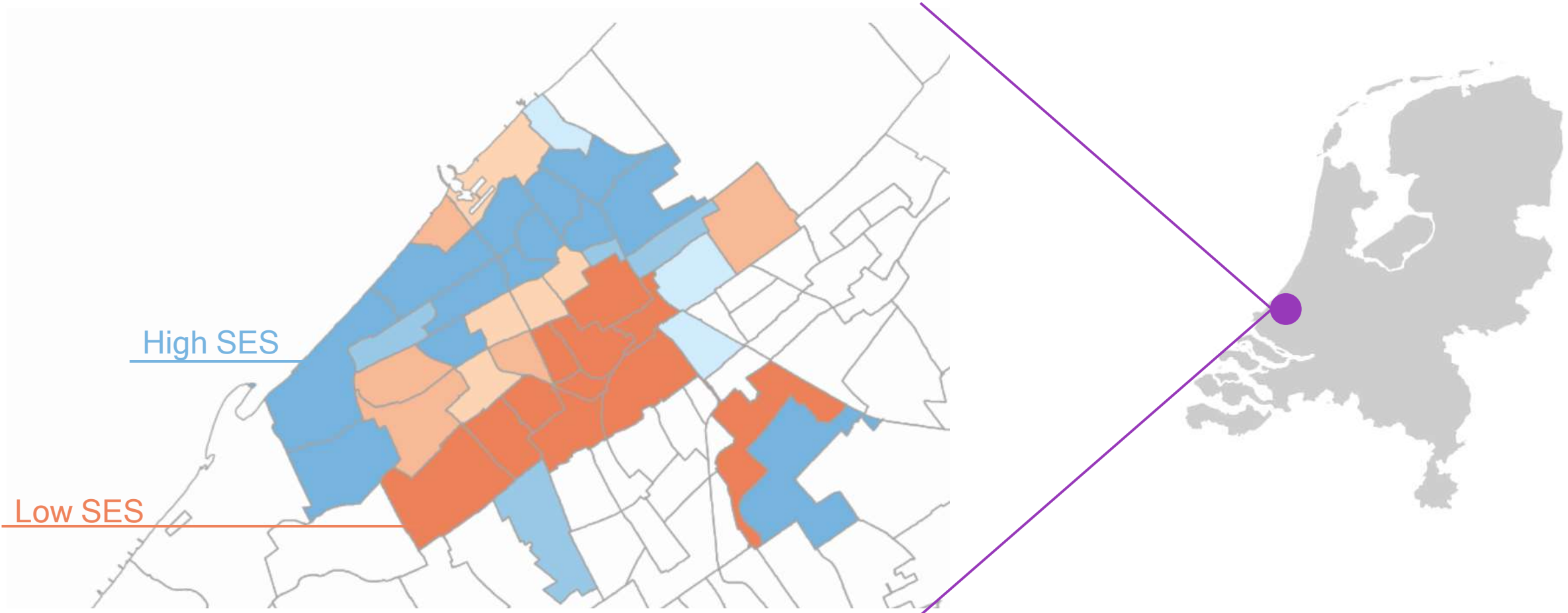
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Neighbourhoods of The Hague



Overview

- Method
- Why Quintuple aim and collaborative governance?
- Characteristics of collaborative governance contributing to Quintuple Aim
- Formal governance
- Informal governance
- Collaborate with attention to governance

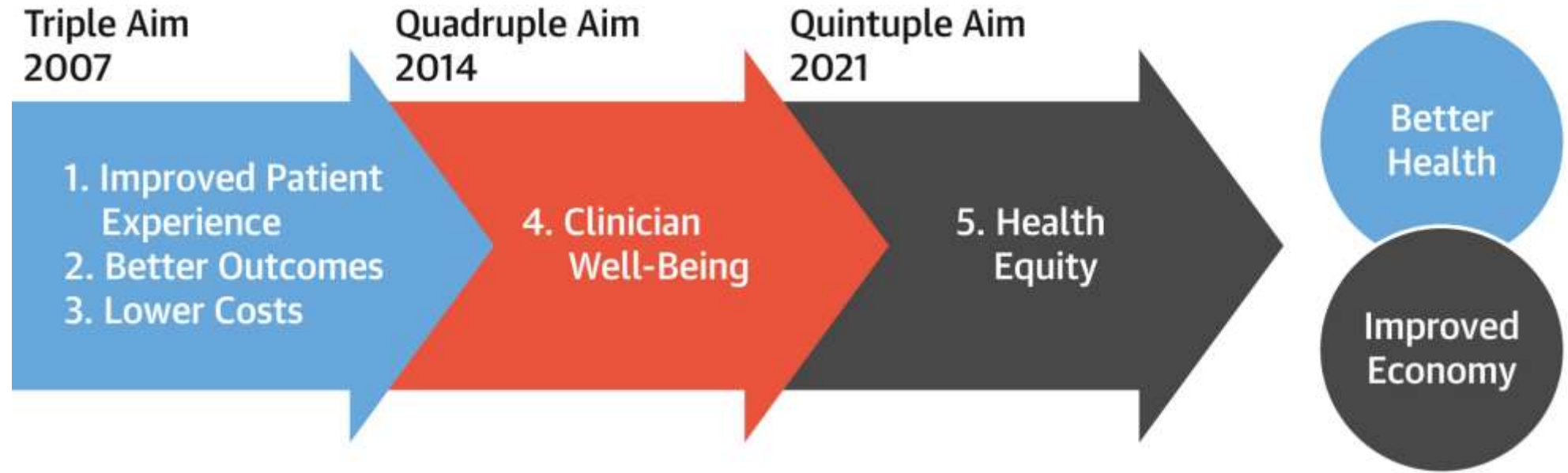
Method

How does collaborative governance in local networks contribute to the implementation of Quintuple Aim interventions aimed at addressing health inequalities in urban areas?

8 Retrospective, semi-structured interviews

- 55h Observation of re-occurring meetings
- 60 Policy documents
-

Why Quintuple aim and collaborative governance?



The characteristics of collaborative governance contributing to Quintuple Aim unraveled

Formal governance	Informal governance
Multilevel collaboration	Acquiring knowledge
Context-governance fit	Incentives and commitment to collaborate
Adequate resources	Communication
	Personal leadership

Formal governance

Multilevel collaboration

Health insurer: **“And I think it’s great that everyone is involved in the consultation.** That it is not only about the hospitals but involving the municipality as well. That there is also a lot of positive energy from the municipality. I like all of that.”

Context governance fit

Academic Hospital: “For me, this is really an example of a formal program, which is a movement. So, it is something temporary where you say we want to go somewhere and step by step, the pieces of the puzzle fall into place. Because there is already a lot going on, and it just needs to be brought together and given the same focus. **This must be done by people who are motivated and who have the same goal.**”

Adequate resources

Representative body for care providers: “Yes, yes, and the difficulty in such a process, which is already very complicated, is when people leave. Not only the chairperson, but also other people left, and new people joined, and then you must start all over again, which was really complicated. Then immediately the chessboard has changed. **Regardless of agreements made or topics discussed previously, the chessboard changes immediately.**”

Informal governance

Acquiring knowledge

Academic hospital: “And if you then make an overview, you do indeed think yes, we have many parties in The Hague, ‘...’ but you miss out on science. **Including the academic hospital is complementary because the academic hospital is providing research and training, besides healthcare.**”

Incentives and commitment to collaborate

Municipality: “But we sometimes had the feeling that we had to pressure everyone hard to do something .. **We were a kind of Healthy and Happy The Hague with the ten of us** [the core group], and that was of course not the intention. **HHTH belongs to all of us.** And that’s really...., I think it took two to three years before everyone felt part of HHTH. Because before it was a bit like “that group of people is running around”, so to speak, and well, “good luck with that.”.

Communication

Program manager: “The conversations I’m having now are undoubtedly more ‘on topic’ than they were in the beginning.”

Personal Leadership

Each consultation group had its own chairperson, who was chosen based on the size of the stakeholder. However, this individual is not automatically a good leader who possesses crucial characteristics of leadership for the collaborative networks. **It has been said that they missed, for example, being action-oriented and were not able to keep the members focused on the network’s goals.**

Collaborate with attention to governance

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Pay attention to the characteristics of collaborative governance contributing to the achievement of Quintuple Aim



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References

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