

Cité-Generations

A care network including sheltered housing

Switzerland

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Cité-Génération (Organisational Structures)

... is found under: Formal care in the Home and Community

... and addresses:

- Service integration
- Community involvement
- Intermediary care structures

... Status:

PILOT PROJECT TERMINATED	PILOT PROJECT ONGOING	PROJECT TERMINATED	PROJECT ONGOING	IMPLEMENTED PRACTICE RESTRICTED AREAS	WIDELY SPREAD PRACTICE ROLLED OUT
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Main benefit for users/carers:

- Simpler and more unified access to information and services in their neighbourhood

Why was this project developed/implemented?

- Lack of comprehensive, easily accessible information
- Service characterized by gaps and insufficient coordination, especially for chronic care
- Emphasis on specialist care for medical problems
- Lack of intermediary structures such as sheltered housing and day centres

Main features of the example

- Initiated by an existing network of GPs ...
- Set in a dense, culturally diverse suburban setting (Geneva area) experiencing rapid ageing
- Involves the creation of a centre building including housing, medical offices, home care offices and other professional practices

What are/were the effects?

- *N.B. The project is not fully implemented yet*
- This pilot project demonstrates that networks must go beyond models of managed care as MD groups of *preferred providers* (being implemented in Switzerland) to achieve potential improvements in continuity of care and decrease in ER visits and inappropriate hospitalisations
- Other similar integrated projects are being planned
- Intensive contacts between local professionals, services, elderly organizations etc have already taken place

Strengths and limitations

- Cité-Génération (CG) is an innovative set-up specifically aimed at providing a global approach to chronic health problems
- It is founded upon concrete, daily interdisciplinary collaboration
- It will relieve professionals from some administrative tasks as they can be delegated to a specific team
- It should contribute to avoiding unnecessary ER visits and hospitalisations
- It required intensive planning and lobbying activities during several years
- It is not easy to replicate as it arose from an existing GP network

Conclusions

- CG combines service provision, staff training and private and public status and resources in an innovative way
- It should provide better chronic care to elderly patients and enable them to stay “in the system” even if they require residential care
- It is neighbourhood based but connected to partners through information technology

interlinks

Health systems and long-term care for older people in Europe. Modelling the interfaces and links between prevention, rehabilitation, quality of services and informal care

