The future of regulation and supervision of integrated care

Prof. dr. Mirella M.N. Minkman

EPSO conference 13 oktober 2026

Tilburg University
Understanding Society

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Let’s meet

Mirella Minkman

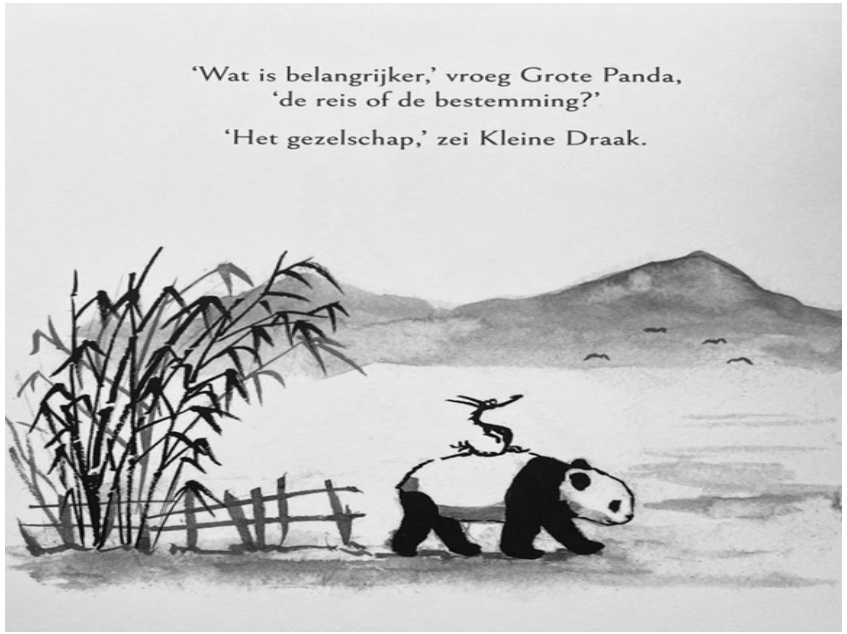
- Professor Tilburg University -TIAS Inter-organisational governance for care and society
- CEO of Vilans, National Center of Expertise in Care & Support
- Chair National Advisory Committee on Innovation of governance in healthcare



KEYPOINTS



Changing societies



On a developmental journey

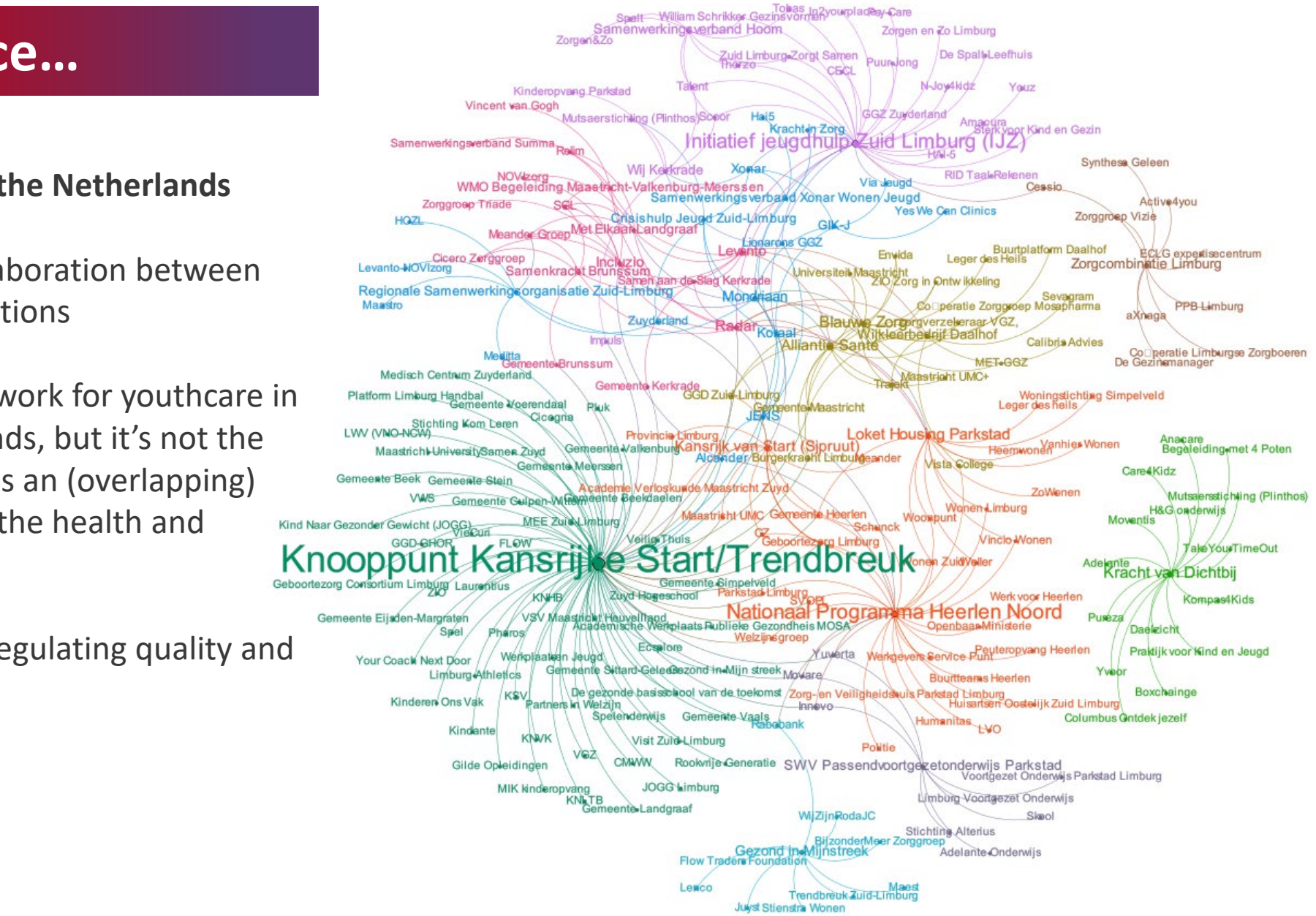


Learning and wisdom

Healthcare practice…

Just one Youth care region in the Netherlands

- Quality is delivered in collaboration between professionals and organisations
- JENS is a collaborative network for youthcare in the south of the Netherlands, but it's not the only service. Every colour is an (overlapping) network, also focusing on the health and wellbeing of youth
- What does this mean for regulating quality and supervisory practices?



INTEGRATED SERVICES…

- Start from a different perspective
- Central focus point is the joint commitment to a societal goal
- Starting point for the design of inter-organisational collaboration
- Governance that facilitates sustainability and further development

Supervision integrated services: part of governance start from another governance logic. Non hierarchial, shared responsibility, basic trust and explicit agreements. Governance that suits and follows the development of the integrated care over time.

EIGHT CRUCIAL COMPONENTS

What type of netwerk?

Proportional governance. Coordinator as important factor

Assess the phase of development

Nine clusters of integrated care (DMIC)

No progress without making decisions

Learning & monitoring

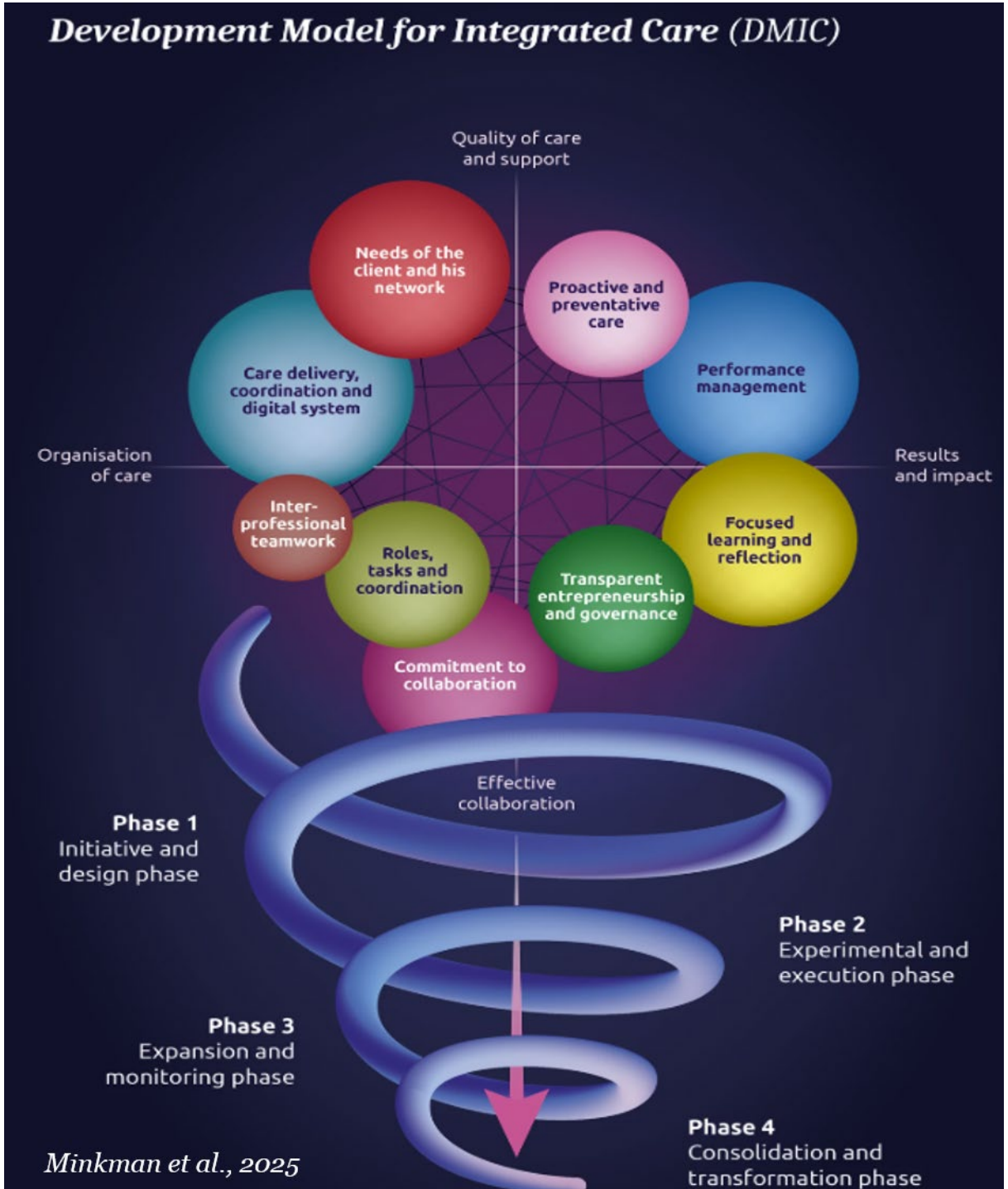
Innovate supervisory arrangements

Building relationships

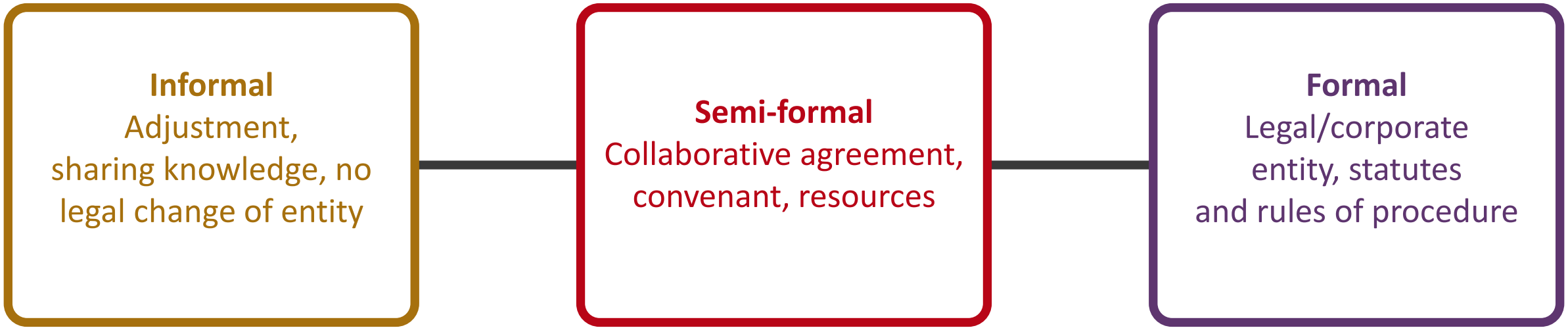
A LONG TIME SPAN!

- Multi-cluster effort to realise
- 4 phases of development
- Every phase calls for different actions, governance characteristics and choices
- Governance develops over time!

Minkman et al (2025). The renewed development model for integrated care: a systematic review and model update. BMC Health Services Research, 25(1).



FORMALISATION (AND LEGISLATION)

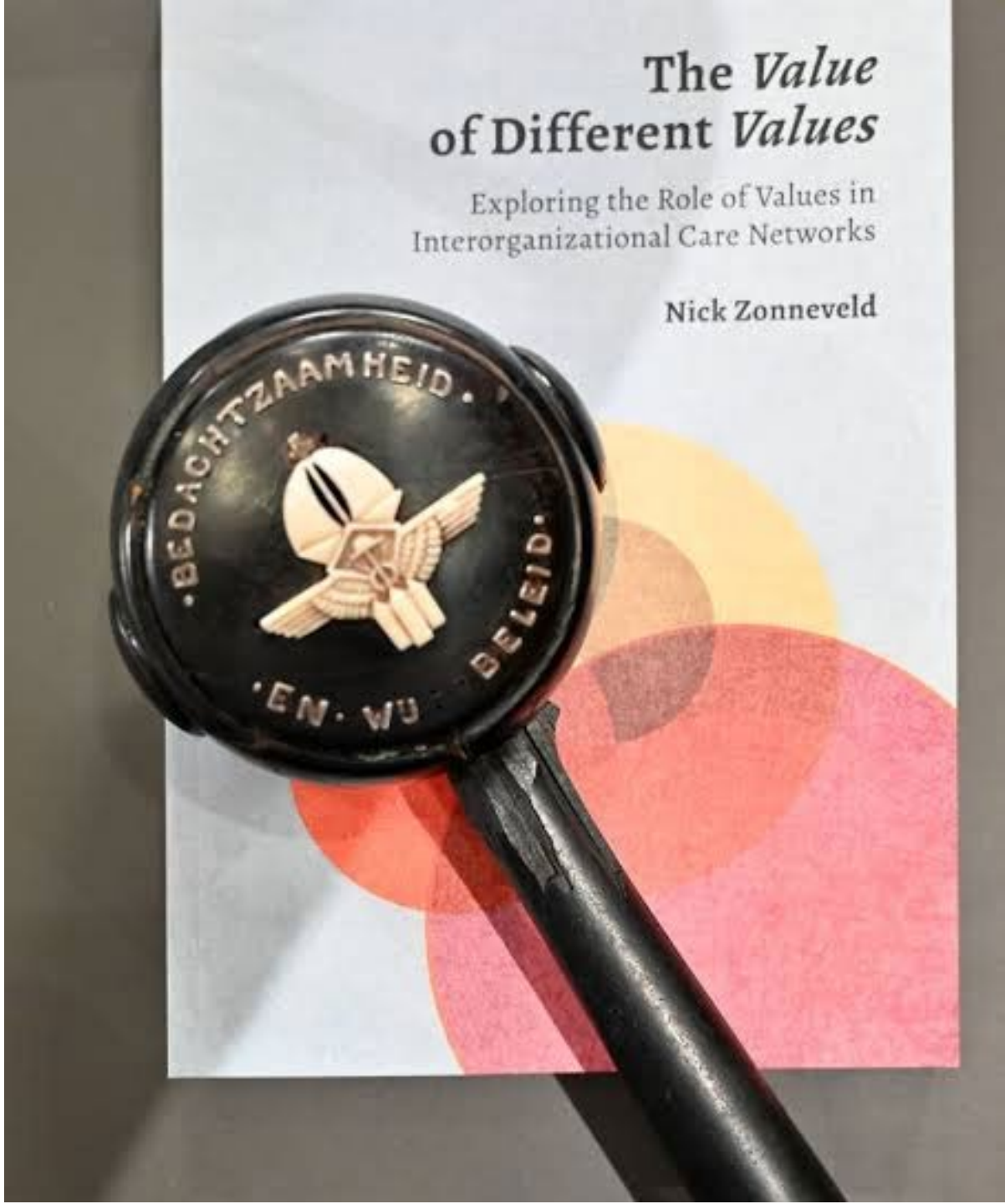


Ax of collaboration

SUITABLE GOVERNANCE

- How many organisations?
- Who is involved, who is needed?
- Is a lead organisation preferable?
- Is a neutral partner preferable?

Phd Nick Zonneveld, 2026: both *differentiation and integration are necessary for effectiveness*. And: when values differ, a broker can support the alignment of values



Just released!

- New report IAC
- In what way does the Governance code support interorganisational governance and supervision?

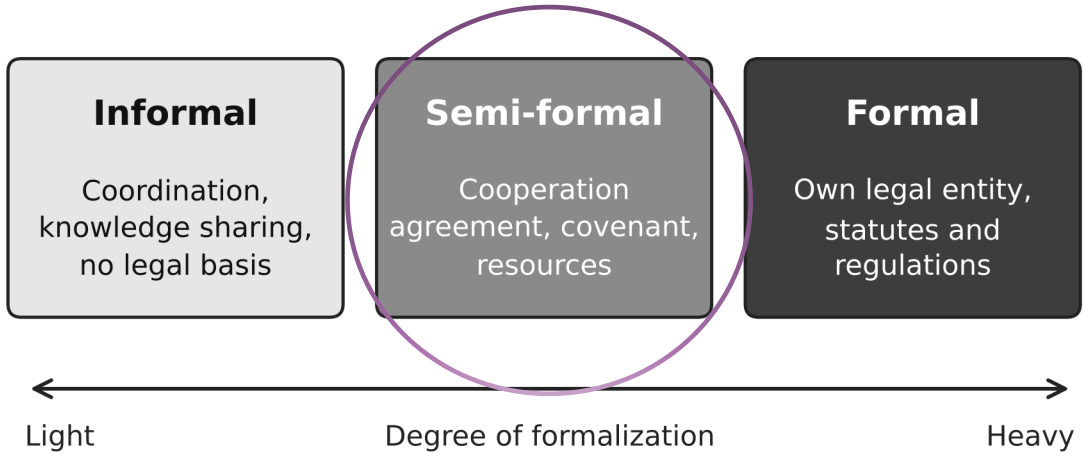
Minkman et al (2026). Governance voorbij de organisatiegrenzen. IAC, Boz.
https://www.governancecodezorg.nl/introductie/actueel/ (in Dutch)



Practicebased research design

- Literature study
- Analyses of other governance national frameworks: education (4), culture, housing, social work sector

- 8 Cases: deskresearch governance documents & semistructured interviews, focusgroup



SIEM

Hart van Brabant

MGZL

Zuid-Limburg

RegioKompas

Gooi & Vechtstreek

Zeeuwse Zorgcoalitie

Zeeland

MooiMaasvallei

Maasregio

Positief Gezond Almere

Almere

RondomJou

Den Haag

Salland United

Salland

Analytical Framework: three layers of governance

1 Normative layer

Shared values & legitimacy

Shared awareness of urgency and values like trust and equality of partners. The foundation and bonding of the collaboration.

2 Administrative layer

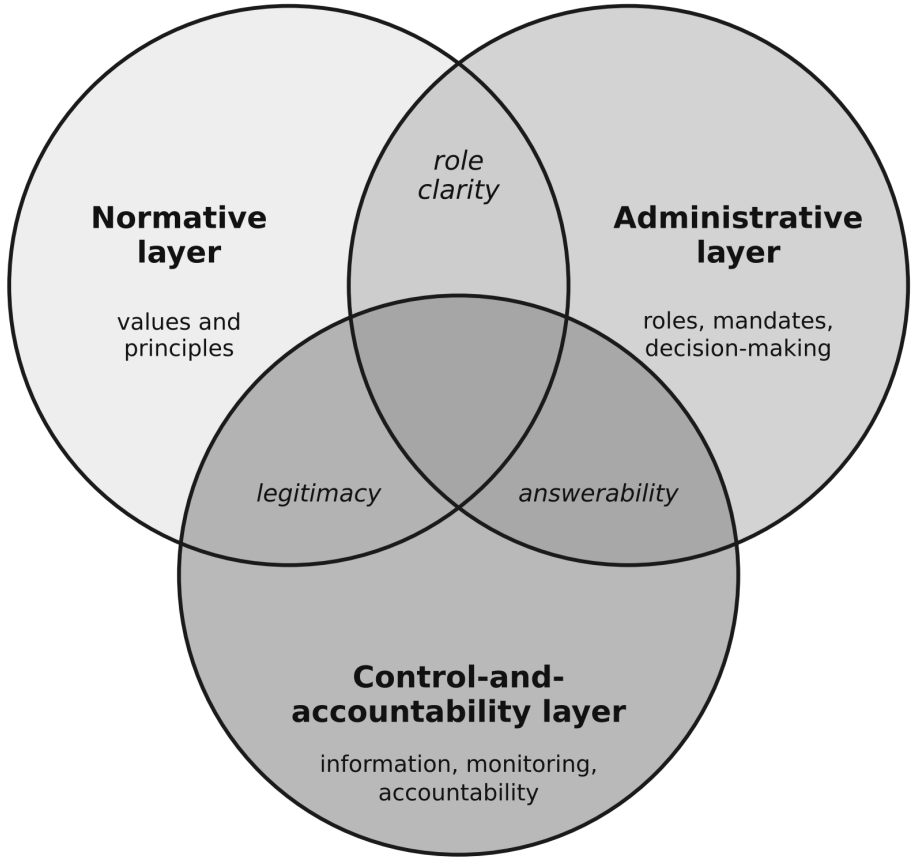
Roles, mandates & decision making

Clear arrangements about decision making (who for what decisions), representation of stakeholders, how mandates are agreed.

3 Control- & accountability layer

Monitoring, risks & transparency

Periodical reports, risk analyses, evaluation and accountability towards internal and external stakeholders.



Tensions in collaborative integrated care service occur when the differencet layers experience a disbalans.

Three overarching findings

1

Collaboration asks for a different governance-logic

Non hierarchial leadership, but shared responsibility, trust and explicit agreements. Governance and structure should follow the development pathway of the integrated care collaboration.

2

Three layers are always present. Tensions on the boundaries.

Normative, administrative and control. De governance challenge is every time: what does this collaborative network need, in this phase, on each layer?

3

The governance code is present — but mainly implicit

Involved stakeholders do adhere to codeprincipes. Make this more explicit and clear and improve support, internally and externally.

“The cliëntperspective is not an attention point besides the governance, but the main criterion to assess."

Finding 5 — 'In Control' in collaborative services

What is does NOT mean

- ✕ Hierarchial supervision on partners (ketentoezicht)
- ✕ Forcing compliance with collaborative partners
- ✕ One organisation responsible for all internal control of all other partners

What it DOES mean

- ✓ **Insight & testable**

  Timely, reliable information about the collaboration

- ✓ **Shared monitoring**

  Shared monitoring system on progress, risks and goal achievement

- ✓ **Proportionality**

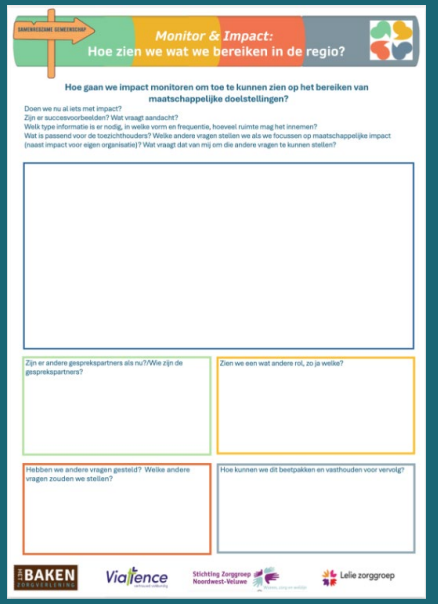
  More heavy governance for high impact and risks

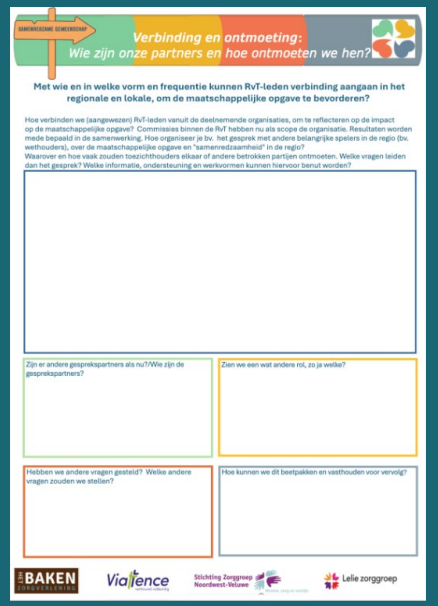
- ✓ **Institutional sustainability**

  Explicit arrangements where size and impact justifies this

Co - creation in pratice....

- Supervisors from different organisations
- Monitoring & Impact: how can we see or impact?
- How can regulation and accountability be aligned? (Netherlands: NZA, IGJ, Supervisory boards)











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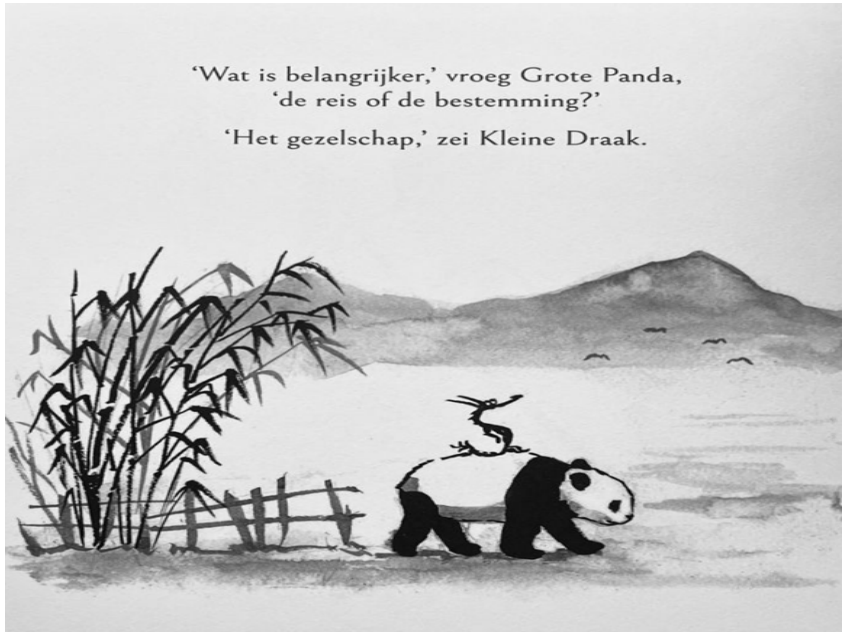

On a developmental journey



Learning and wisdom

THANK YOU FOR YOUR ATTENTION

Prof. dr. Mirella M.N. Minkman

www.vilans.nl | www.tias.edu
m.minkman@vilans.nl | m.minkman@tias.edu

Secretariaat: rvb@vilans.nl

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OUDE SLIDES

Bevinding 3 & 4 — Besluitvorming en Belangenverstrengeling

V3 | Gelaagde besluitvormingslogica: wat brengt een besluit teweeg?

Binnen het SWV

Operationele besluiten binnen vooraf afgesproken mandaten

Bij het bestuur

Nieuwe verplichtingen, ingrijpende financiële gevolgen, toetreden/uittreden

Bij de Raad van Toezicht

Strategische koers, wezenlijk gewijzigd risicoprofiel, publieke legitimiteit

> *De focus verschuift van wáár een besluit wordt genomen naar wát het teweegbrengt voor de deelnemende organisaties.*

V4 | Belangenverstrengeling: onderscheid is essentieel

Persoonlijke belangenverstrengeling

Behandeld als integriteitsvraagstuk. Aanpak: onttrekking aan besluitvorming, melden en transparantie — dit is bekend terrein.

Institutionele belangenconflicten

Structureel governancevraagstuk dat inherent is aan samenwerking. Aanpak via transparantie, expliciete procedureafspraken en zorgvuldige omgang — niet via ontwijking.

> *"Legitimiteit vloeit niet voort uit het ontbreken van belangen, maar uit de zorgvuldige omgang ermee."*

Bevinding 1 & 2 — Reikwijdte en Toezicht

V1 | Reikwijdte doorwerking

Minimumniveau (altijd)

Borgingsverplichting: principes van de code zijn herkenbaar vertaald in afspraken en werkwijze van het samenwerkingsverband.

Ambitieniveau (waar passend)

Partners verklaren (delen van) de Governancecode of een gelijkwaardig normatief kader expliciet van toepassing.

Institutioneel niveau

Bij gezamenlijke uitvoeringsverantwoordelijkheid: codeprincipes worden expliciet geïnstitutionaliseerd in de governance van het SV zelf.

V2 | Toezicht op samenwerkingsverbanden

Vóór	Afspraken over doelen, mandaten, risicoanalyse en informatieverdeling.
Tijdens	Periodieke monitoring van voortgang, financiën en risico's; reflectie- en escalatiemomenten.
Na	Expliciete evaluatie van doelbereik en governance; besluit over voortzetting, wijziging of stopzetting.