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Strengthening primary care in France: the role of digital tools in care coordination (INteropérabilité et TERminologies en SOins Primaire)

Submission date
22/09/2025

Recruitment status
Recruiting

Registration date
29/09/2025

Overall study status
Ongoing

Last Edited
26/09/2025

Condition category
Other

[ ] Prospectively registered
[ ] Protocol
[ ] Statistical analysis plan
[ ] Results
[ ] Individual participant data
[X] Record updated in last year

Plain English summary of protocol

Background and study aims
The study focuses on improving information systems in primary care centers. Its main goal is to design a technical and organizational architecture that strengthens cooperation between healthcare professionals, improves the relevance of care, provides quality indicators for community healthcare centers, and supports primary care research.

Who can participate?
Healthcare professionals working in the participating community healthcare centers during the study period can take part (general practitioners, nurses, midwives, secretaries). The only exclusions are specialists, professionals without accessible data in medical software, or those who formally refuse participation. Software editors can also participate and representatives of public organizations such as the Department of Health.

What does the study involve?
The study is based on the collection and analysis of transcripts, questionnaire responses, and oral comments from focus groups/workshops. The material focuses primarily on data from questionnaires regarding participants' relationships in coordination situations.

What are the possible benefits and risks of participating?
Benefits (indirect for patients):
1. Better clinical decisions based on improved documentation
2. More accurate reporting of community healthcare center activities for management and funding
3. Enhanced support for research and innovation in primary care

Where is the study run from?
The study takes place at least in six community healthcare centers (CDS) in Paris and the Île-de-France region, including Malakoff, Nanterre, Vitry, Montreuil, La Courneuve, and Paris 10th (Richerand Center).

When is the study starting and how long is it expected to run for?
February 2025 to January 2028

Who is funding the study?
The study is funded through the RESPIR 2022 call for projects.

Who are the main contacts?
1. Prof. Myriam Lewkowicz, myriam.lewkowicz@utt.fr
2. Dr Alain Beaupin, alain.beaupin@ijfr.fr, alain@ijfr.onmicrosoft.com

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Additional identifiers

Clinical Trials Information System (CTIS)
Nil known

ClinicalTrials.gov (NCT)
Nil known

Protocol serial number
NoID

Study information

Scientific Title
Strengthening primary care in France: the role of digital tools in care coordination (EPIDAURE-INTERSOP: INteropérabilité et TERminologies en SOins Primaire : une étude dans les Centres de Santé EPIDAURE)

Acronym
EPIDAURE-INTERSOP

Study objectives
Coordination is widely recognized as a cornerstone of quality and safety in primary care. Community healthcare centers (“centres de santé”, CDS), i.e., multi-professional primary care centers, are increasingly important in delivering primary care, particularly in less favored areas in France.

The objective of this project is to identify levers for optimizing information systems in order to meet the needs of healthcare professionals and patients, while strengthening the relevance and feasibility of the existing solutions and providing reliable data for primary care research.

It aims to define the technical and organizational architecture needed to strengthen cooperation between healthcare providers within community healthcare centers (“centres de santé”, CDS), in order to (1) improve the relevance of the care provided, (2) establish indicators for evaluating the quality of care in health centers, and (3) support primary care research.

Ethics approval required
Ethics approval not required

Ethics approval(s)

Study design
Observational qualitative study

Primary study design
Observational

Study type(s)
Other

Health condition(s) or problem(s) studied
Coordination between medical and medical administrative professionals and the impact of digital technology

Interventions
Three types of studies will be conducted.

The first is a questionnaire designed to assess the types and frequency of digital tools used in community health centers, as well as the organization and frequency of coordination meetings. Participants should indicate the main coordination channels (e.g., telephone, digital, meetings), the quality of exchanges, and their regular contacts. They should report any difficulties encountered in using digital tools, whether technical, experiential, or professional (ex. the software content does not correspond to their practice). This questionnaire has two purposes: (a) to collect data for analysis to meet our objective and (b) to recruit participants for interviews. Cross-referencing data (e.g. correlation, T-test) related to coordination activities and digital technology use will make it possible to determine: the importance of digital technology in coordination, the effect of certain digital tools on coordination, and users' perceptions of these digital tools and their expectations.

The second study will be a series of interviews. The aim here is either to explore the questionnaire responses in greater depth with those who took part in the questionnaire, or to address the same topics (for the others). An interview guide will be used for all participants. The same framework is therefore used with each participant for the sake of comparability.
The responses will be analyzed using the verbatim coding method developed by Strauss & Corbin (1990), among others. We will apply a Straussian Grounded Theory approach. In other words, after defining our coding unit, we proceed in three stages: open coding, axial coding, and selective coding.
As we do not have a second coder, we proceed in two stages. For each coded interview, we perform an initial coding, then a few days later, this coding is reviewed by the same researcher. The percentage of convergence is calculated and based on this result, a decision is made as to whether or not to undertake a new coding.

Last part: personas creation and personas confrontation sessions.
To create the personas, we will use a focus group approach (with members from community health centers) based on the KJ method (Scupin 1997). Based on these focus groups, I will construct the personas using Goodwin's behavioral model approach (2008).
Finally, once the personas have been built, they will be presented to another group (people who

work in a community health center). They will be asked to simulate a coordination situation around these personas, and indicate the tools used. I will use a storytelling and/or context mapping approach (Visser et al. 2005).

Intervention Type
Behavioural

Primary outcome(s)
Qualitative data on coordination activities and the digital tools used in this context, collected using interviews at a single timepoint and analyzed using methods derived from psychology and ethnography, based on grounded theory.

Key secondary outcome(s))
Quantitative data on coordination situations collected via questionnaires at a single timepoint and analyzed using standard statistical tests (e.g. T-test, or Anova). The questionnaires do not include any medical or patient-related data.

Completion date
31/01/2028

Eligibility

Key inclusion criteria
1. Medical, paramedical, and medical administrative personnel working in community healthcare centers
2. Software editors
3. Representatives of public organizations such as the Department of Health

Participant type(s)
Health professional

Healthy volunteers allowed
No

Age group
Adult

Lower age limit
18 years

Upper age limit
75 years

Sex
All

Key exclusion criteria
1. Patients
2. Medical specialists

Date of first enrolment
01/04/2025

Date of final enrolment
31/12/2027

Locations

Countries of recruitment
France

Study participating centre
Centre de santé municipal Nanterre
136 Avenue Joliot Curie
Nanterre
France
92000

Study participating centre
Centre de Santé Malakoff
74 Avenue Pierre Larousse
Malakoff
France
92240

Study participating centre
Centre Municipal de Santé Pierre-Rouquès
12-14 Rue du Général de Gaulle
Vitry-sur-Seine
France
94400

Study participating centre
Centre Municipal de Santé La Courneuve
2 Mail de l'Egalité
La Courneuve
France
93120

Study participating centre

Centre de Santé Richerand
4 Avenue Richerand
Paris
France
75010

Study participating centre
CDS Medical Municipal Montreuil
3 Avenue Leo Lagrange
Montreuil
France
93100

Sponsor information

Organisation
Groupements interrégionaux pour la recherche clinique et l'innovation - GIRCI

Funder(s)

Funder type
Research organisation

Funder Name
Call for Projects on Primary Care Research AAP RESPIR 2022

Results and Publications

Individual participant data (IPD) sharing plan
The data is anonymized. The datasets generated during and/or analysed during the current study will be available upon request from Prof. Myriam Lewkowicz (myriam.lewkowicz@utt.fr) and Dr Alain Beaupin (alain.beaupin@ijfr.fr, alain@ijfr.onmicrosoft.com)

IPD sharing plan summary
Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes