

PROMOTING THE DELIVERY OF INTEGRATED CARE BY A TIERED APPROACH TO EDUCATION AND TRAINING

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The drive for integration necessitates change

- ▣ The drive for integration has required a change in the workforce including their values, skill set and their pattern of delivery and their hopes and has also enhanced service user's expectations.
- ▣ However, to accommodate these changes in the health care arena there is an enhanced need for education and training around the sphere of integration for students and practitioners.

Setting the scene

- ▣ Due to recognising the need for integrating care and appreciating these drivers for change (I was a practicing clinician in the community) I approached Bournemouth University in the middle of June 2014 about driving integration forward. I was appointed in the beginning of 2015 (after competitive interviewing) and started pushing the value of integration forward including how to promote and teach integration.

A multi faceted approach

- ▣ A combined training and educational approach was utilised to service the needs of the care community to jointly upskill the practitioners and individuals involved in health and social care arenas and also to educate the individuals currently training to be practitioners in their respective disciplines across the Faculty of Health and Social Sciences.

A multi faceted approach

- ▣ Examples of this training and educational approach included offering all pre registration students across three fields of nursing, paramedics, physiotherapists, social work students, midwives and occupational therapists, the opportunity to attend themed days around integration.
- ▣ Short sessions (3hours) were also offered in programmes such as professional practice to groups including mental health nurses, nutrition and physiotherapy students and practice nurses.

A multi faceted approach

- ▣ Short (8) and (6) day integrated courses were also offered to practitioners from all disciplines and from primary and secondary care.
- ▣ These courses range from being stand alone units through to part of BSc and MSc programmes. Pertinent topics covered include change management and transformative leadership in integrated care.
- ▣ PhD's and MSc's in Integrated Care commenced in September 2016.

Consequences

- ▣ This innovative and inter connected educational and training approach has had significant, positive feedback.
- ▣ A variety of qualitative and quantitative data has been collected.
- ▣ There has been a fundamental impact on service delivery.
- ▣ This has raised practitioners feelings and knowledge around the field of integrative delivery.

Consequences

- ▣ This has resulted in a raft of improvements in person centred care for individuals and whole areas of care.
- ▣ Examples have included improving referral systems, shadowing between disciplines, reviewing record keeping, improving record keeping, enhanced dialogues between clinicians and service users and improved co-ordination between services upon service user discharge.

Benefits

- ▣ This multiple approach of educational and training programmes jointly focused on undergraduate students in health and care programmes and to practitioners at the same time although in differing formats further raised awareness of integration and helped to promote its value and ability to be implemented across the health and care arenas.

Implications for resources

- ▣ Initiating, creating and changing the format of education and training around the integrated arena both faculty wide and in the clinical area, leading the way and both accommodating and promoting need was initially very time and labour intensive and challenging because it required new ways of working and thinking.
- ▣ However, it has resulted in a change of ethos, more improved working together in the clinical arenas and in the university setting too.

Improvements evident

- ▣ There has been a significant improvement in the level of service offered to the service users. Feedback from the service users supports this improvement.
- ▣ Knowledge and skill has also been enhanced both in the undergraduate student body and in the individual's practicing both in the acute and community settings in a variety of professional capacities.

Replication is possible

- ▣ Such a concerted and multi faceted tiered approach to an educational and training programme is transferable and can be replicated.
- ▣ Although it does require enthusiasm and passion and support including funding and particularly time.
- ▣ Tailoring may be required for local arenas to accommodate for individual needs, population demands or professions involved in care provision.

In Conclusion – A number of positives

- ▣ There have been a significant number of benefits from such a multi faceted approach to integrated education and training.
- ▣ There has been a definite increase in the standard of person centred care being offered
- ▣ All the stakeholders report the level of knowledge around integration and its benefits has increased.
- ▣ The development of an increased number of integrated care and projects at all levels has been phenomenal.

