

Professionals and organizational innovation in elderly care: Implementation of municipal care pathways

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Introduction

Internationally, there is growing agreement on the need for greater inter-professional coordination in elderly care. Inter-professional coordination is thus central to policy reforms concerned with improving the quality of care based on the needs of the elderly. In response, the municipality of Aarhus in Denmark is currently implementing a care pathway for the inter-professional coordination of elderly care. The main aim is to meet the individual needs of the elderly based on individually planned and highly coordinated care. There is a substantial body of research on the implementation and experiences of inter-professional coordination in elderly care. However, research is lacking on what professionals and managers actually do when practicing it. Existing research also primarily emphasizes professions as barriers to inter-professional coordination. Little is known about the positive role that professions can play in supporting the implementation and sustainment of inter-professional coordination.

Objectives

To investigate how professions in the municipality of Aarhus contribute to implementing and sustaining the new care pathway for inter-professional coordination in elderly care.

Methods

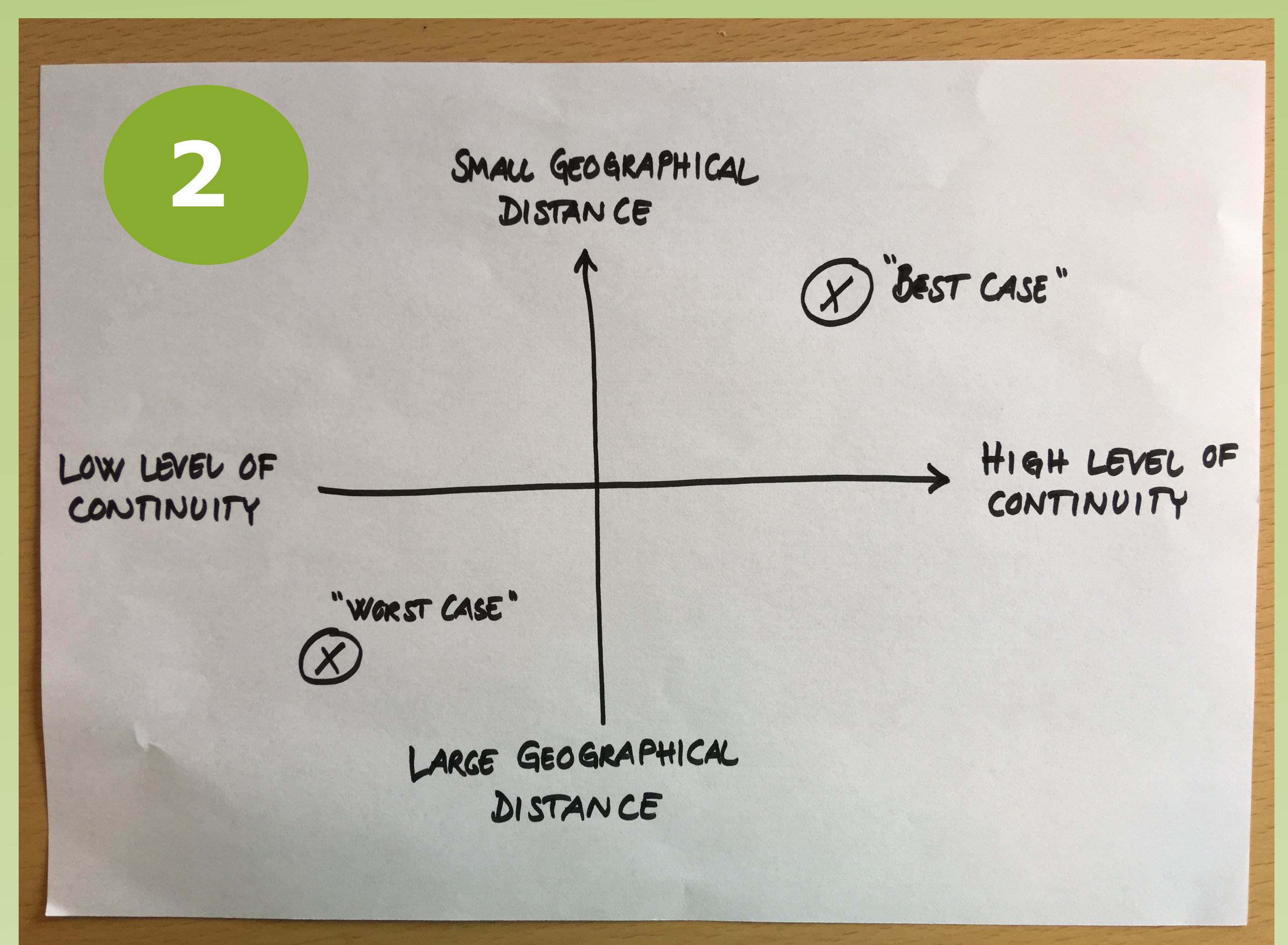
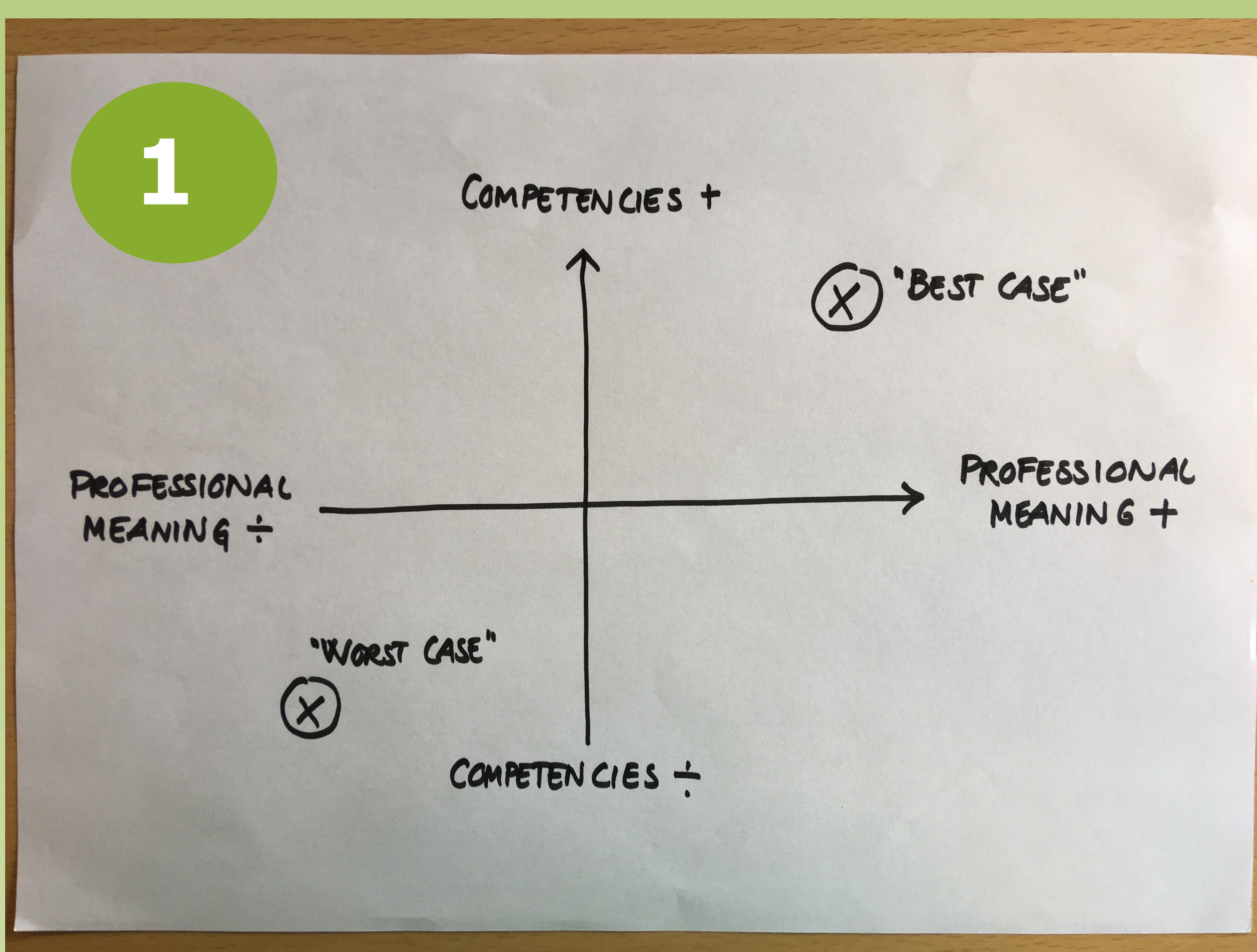
Qualitative case study, drawing on qualitative interviews and observations collected across different organizational units in the Municipality of Aarhus.

- Qualitative interviews include six focus group interviews with professional groups (nurses, physiotherapists, occupational therapists, social and health care assistants and social and health care workers); and eight individual interviews with managers at different levels and from different organizational units.
- Observations comprise following the ordinary working day of different professional groups (eight full days) and participating in eight formalized care coordination meetings.

Results

Data were collected in March to May 2018 and is currently analyzed using a thematic approach. Preliminary results show:

1. Professions' contribution to inter-professional coordination depends on the professions experiencing to have the adequate competencies and experiencing the care pathway and coordination tasks professionally meaningful. There seem to be variation between different professions in the degree to which this is the case. Having adequate competencies depends on e.g. the possibility for professional feedback and management support. Professional meaningfulness depends on how the new tasks embedded in the new care pathway is experienced, e.g. documentation, coordination tasks and new areas of responsibility.
2. Inter-professional coordination depends on the relations between involved professions. The organizational context of the professions provides different conditions for establishing such relations. Small geographical distance and high level of continuity among the appointed professionals in a care pathway seem facilitating for establishment of relations while the opposite seem to be a barrier.



Conclusion

From a research perspective, the results of the study will contribute with important knowledge on the concrete practice of inter-professional coordination and insights on the positive capacity of professions and managers to contribute to implementing organizational change concerned with inter-professional collaboration.

From a practice perspective, the results of the study will contribute with important knowledge on the successful implementation and sustainment of similar municipal care pathways for inter-professional coordination.