Integrated care

in Community Health Centers in Belgium

An exploratory study on the provision of care by general practitioners, nurses and social workers

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Overview

• Context
• Community Health Centers (CHCs) in Flanders
• Research questions
• Methods
• Results
• What’s next?

HoGent
Context

- University College Ghent
  Faculty of Education, Health and Social Work
- Practice-based research
- Involvement of multiple disciplines
  Nursing, Social Work & Occupational Therapy
- In cooperation with professionals from 3 CHCs in Ghent
  general practitioners, social workers & nurses
Community Health Centers in Flanders

- Proportional Universalism
- Inter-Disciplinary
- ‘Under 1 roof’
- Community-oriented
- Accessible
- Primary Care
- Sustainable Development
- Research & Development
- Territorial
- Non-profit
- Independent & Pluralist
- Participative Organisation
- Quality Culture
- Social Justice
- Solidarity

HGent
Community Health Centers

- 30 CHCs in Flanders, of which 10 in Ghent (VWGC, 2017)
- 3 Centers in Ghent are chosen as a partner in this research project

(Source: http://vwgc.be, 2017)
Research questions

• How is integrated care organized in CHCs, looking at health and social care?

• How do professionals in CHCs collaborate with external primary care providers and informal carers?

• How do patients and informal carers experience the integrated care approach in CHCs?
Mixed method design

• Literature study

• Document analysis
  Mission statement CHCs, Policy, Reports, … of Community Health Centers

• Participatory observations

• Semi-structured interviews with professionals, informal carers and patients

• (Future) Focus groups

HoGent
Results literature study

‘Integrated care seeks to close the traditional division between health and social care. It imposes the patient’s perspective as the organizing principle of service delivery and makes redundant old supply-driven models of care provision. Integrated care enables health and social care provision that is flexible, personalized, and seamless.’ (Lloyd & Wait, 2005)

• Integrated care → many different approaches to and definitions
Results literature study + documents of the CHCs*

2 PRECONDITIONS

- Equity and fairness
- Person-centredness

6 CORE PRINCIPLES

- Participative
- Lifeworld-led
- Interfunctional
- Continuity
- Accessible
- Community-oriented

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Results participatory observation

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Dimensions

- Professionals intern
- Professionals extern
- Organisations extern
- Life domains
- Informal carers
- Neighborhood / community

Influencing factors

- History
- Legislation
- Informal structures
- Formal structures
- Spirit of the time
- Conceptions about society
- Size of the center
- ...

*
Preliminary results semi-structured interviews*

- Professionals in CHCs endorse the importance of integrated care
- Parallels between what professionals find essential and the competencies for coordinated / integrated health services, named by the WHO (2015): Advocacy
  - Effective communication
  - Team work
  - People-centered care
  - Continuous learning

*
Preliminary results Semi-Structured interviews

• Influencing factors were listed
  Positive and negative

• Different levels: from clinical integration system integration
  Require different roles/competencies
What’s next?

- In depth analysis of semi-structured interviews with professionals (N=24), patients and informal carers (may 2017- june 2017)
- Focus groups (july 2017 - october 2017)
- Development of an instrument for students and professionals (november 2018- august 2018)
Thank you

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