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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?

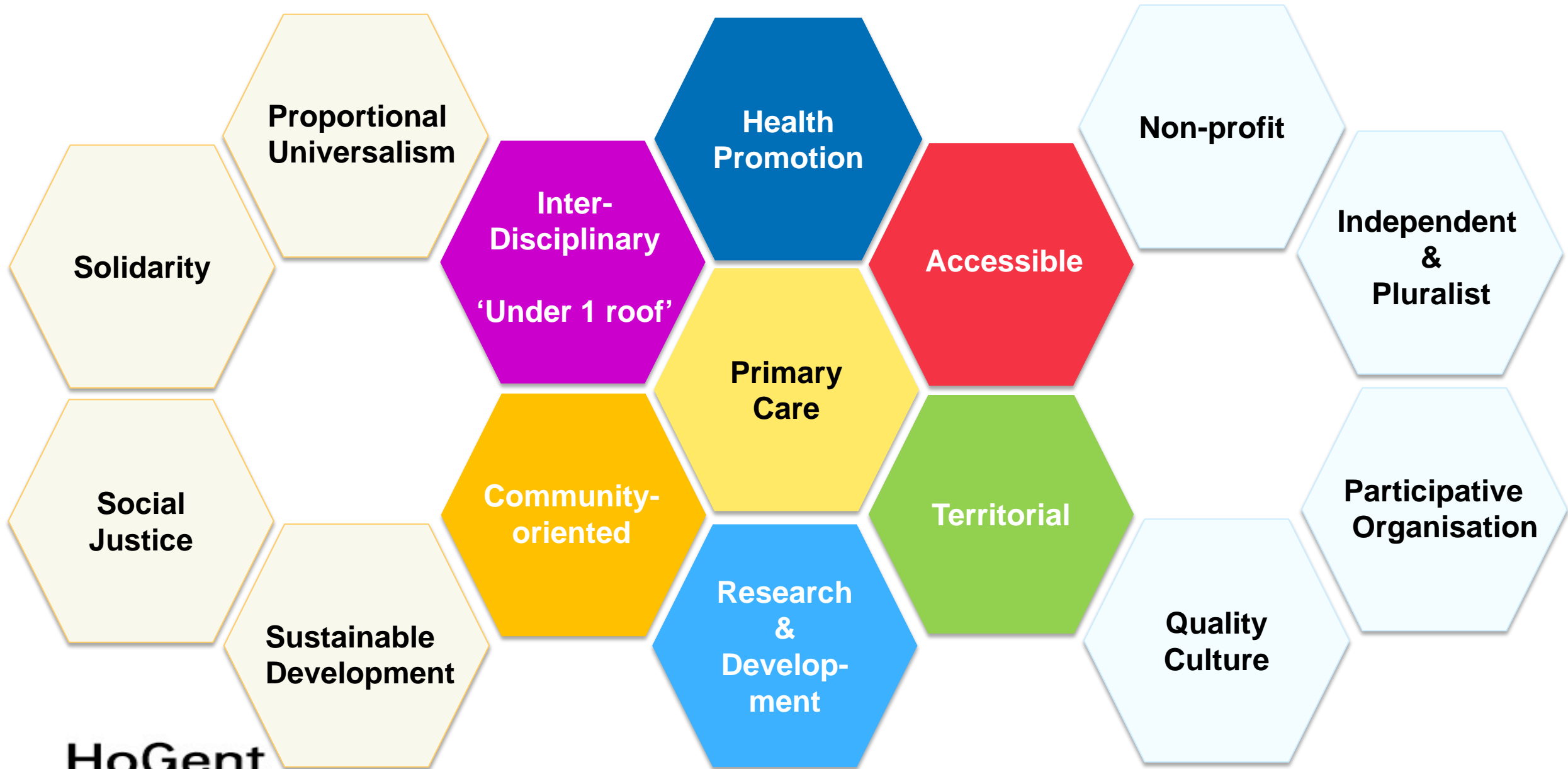
Context

- 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



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Community Health Centers in Flanders



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)

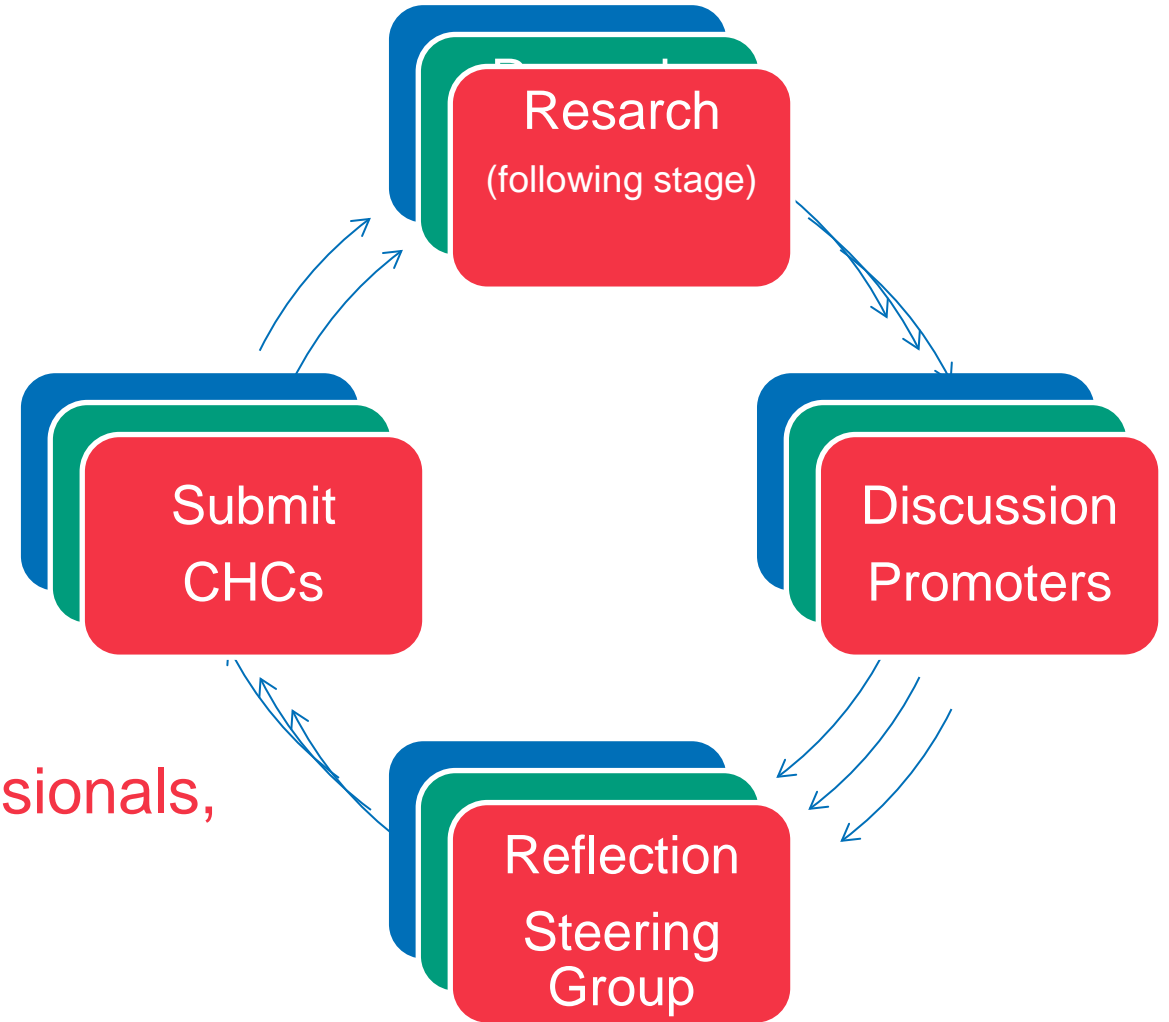


Research questions

- 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



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

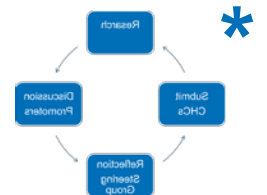
Lifeworld-led

Interfunctional

Continuity

Accessible

Community-oriented



Results participatory observation

Principles	Dimensions	Influencing factors
<ul style="list-style-type: none">• Holistic vision• Equality• Participation• Individu in context• Quality• Justice• Sustainability• Person-centeredness• Involvement• ...	<ul style="list-style-type: none">• Professionals intern• Professionals extern• Organisations extern• Life domains• Informal carers• Neighborhood / community	<ul style="list-style-type: none">• 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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References

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