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Poster Abstract

Intersectoral pathways of vulnerable patient groups in Southern Denmark

Mrs. Stine Lundstroem Kamionka, MSc (International Management), Researcher at Center for Global health, University of Southern Denmark / The Migrant Health Clinic, Department of Infectious diseases, Odense University Hospital, Denmark

Dr. Niels Buus, Ph.D, Associate professor at Institut of Public Health, University of Southern Denmark

Mr. Morten Sodemann, M.D, Ph.D., Professor of Global and Migrant health, The Migrant Health Clinic, Department of Infectious diseases, Odense University Hospital and Center for Global health, Clinical Institute, Faculty of Health, University of Southern, Denmark

Mr. Peer Noehr-Jensen, M.D., Ph.D, Senior hospital physician in psychiatry, Denmark

Mr. Kim Juul Larsen, psychologist, Director and psychologist at Centre for Suicide Prevention Child and Adolescent Psychiatry Odense, Odense University Hospital of Mental Health Services, Region of Southern Denmark

Correspondence to: **Mrs. Stine Lundstroem Kamionka**, University of Southern Denmark / The Migrant Health Clinic, Department of Infectious diseases, Odense University Hospital, Phone: +45 20766128, E-mail: stine_lundstroem@hotmail.com

Abstract

Introduction: Denmark has highly specialized health care and social service sectors. As a result vulnerable patients, who deal with multifaceted social disadvantaged and chronic and mental illness, often have intersectional pathways involving many different health care and social work staff members. Those patients rarely have resources to manage their own course and without professional coordination, these patients are in danger of not receiving the treatment they need. Consequently there is a need for interdisciplinary and intersectional collaboration to avoid further stigmatization of these patients.

Purpose and objective: Professionals experience intersectoral cooperation on vulnerable patients' treatment courses challenging and resource demanding. In addition the professional effort may still not result in continuous pathways. To ensure vulnerable patients access to the health care and social services they need, pathways of vulnerable patients have to be examined. This study wants to identify which processes that lead to consistency in interdisciplinary and intersectoral treatment courses for vulnerable patients. First, this study aims to identify the core components of securing intersectoral pathways of vulnerable patients. Second, based on the findings, the study wants to develop a patient-centred and practice-orientated model that can be used to ensure the patient group coherent intersectoral and interdisciplinary pathways. Third, the study wants to explore the possibilities for digitally support of the model.

Methods: The study is designed as a qualitative, explorative case study. The cases are pathways of vulnerable patients from the Centre for Suicide Prevention - Child and Adolescent Psychiatry

Odense, Denmark (N=7) and from the Migrant Health Clinic, Department of Infectious Diseases, Odense University Hospital, Denmark (N=7). The empirical data are generated through triangulation and are collected through pathway logs, interviews of professionals and interview of patients. The analysis focuses on identifying themes in the collected data. The themes will be analyzed according to the processes of ensuring the pathways direction, alignment and commitment.

Outcome and transferability: This on-going study will present an insight in the actual process of making of integrated care for vulnerable patients in the Region of Southern Denmark. The conference presentation will be centered on the project's methodological findings derived from the data collecting process. The various theoretical methods and approaches are chosen to ensure that the results are relevant to users (patients, health care workers and social work professionals) in clinical practice. By using these approaches it is revealed that the researchers not only gain useful knowledge by scrutinizing the pathways but also experience the challenges of intersectoral pathways themselves while collecting data. This has been an unexpected outcome and adds yet another dimension to project's findings.

The project's final results can be used to generate hypotheses in larger scale qualitative and quantitative studies of intersectoral pathways. The procurements will be implemented in the two above mentioned clinics' daily practice and development and in the clinics' conference and training material. The clinical staff will be important partners when implementing the results and passing on the knowledge. Furthermore, a supported integrated care model for vulnerable patients may be transferrable to other patient groups.

Keywords

community-based integrated care, organisational structure, integrated care pathway, coordination

Powerpoint presentation:

<http://www.integratedcarefoundation.org/content/posters-oral-presentations-session-2>
