CONFERENCE ABSTRACT

Inter-organisational learning among health care professionals: A learning arena to address transitional care of the elderly

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Introduction: The study reports findings from an inter-organisational learning arena, the “Meeting Point”, designed to address transitional care of the elderly across care levels (admissions, discharge). The aim of the study was to reveal how the “Meeting Point” enables inter-organisational learning across primary and specialist healthcare services. The background for establishing the “Meeting Point” was findings from an exploratory study documenting the need for an arena for health professionals across care levels to be able to discuss issues and responsibilities related to the quality of transitional care (Aase et al, 2013; Storm et al, 2014).

Methods/Theory: The study design is qualitative and descriptive, using participant observation as data collection method. About one hundred health care professionals from hospital and municipality healthcare services attended the “Meeting Point”. The “Meeting Point” seminars consisted of three main phases, Mingling, Dissemination, and Dialogue, related to transitional care of the elderly. An observation guide was developed based on theories of knowledge creation and inter-organisational learning (Nonaka & Takeuchi, 1995; Nonaka, 1994; Easterby-Smith et al, 2008). The guide was tested during four “Meeting Point” sessions in 2013, revised and used for data collection during three “Meeting Point” seminars in January 2014.

Results: The “Meeting Point” arena enabled four forms of knowledge interaction among healthcare personnel across care levels and professions; socialization (the process of creating tacit knowledge through shared experience), externalization (the conversion of tacit knowledge into explicit knowledge), combination (creating explicit knowledge by combining different bodies of explicit knowledge) and internalization (the conversion of explicit knowledge into tacit knowledge). The interaction forms varied in different phases of the learning arena. Socialization was enabled by unrestricted time, films, shared meals, informal discussions, and a meeting location separated from the participating units’ surroundings (present in Mingling and Dissemination phases). Externalization was enabled by PowerPoint presentations, lectures, group discussions, participants seated in small groups, and participants’ formulation of written measures (present in Dissemination and Dialogue phases). Combination was enabled by setting aside time and arranging for informal discussions, summary of already existing knowledge, PowerPoint presentations, group discussions,
participants seated in small groups and participants’ formulation of written measures (present in Mingling, Dissemination, and Dialogue phases). Internalization was enabled by means of lectures, opportunity for questions and reflections, group discussions and participants seated in small groups (present in Dissemination and Dialogue phases). Inter-organisational learning at the “Meeting Point” was further strengthened by inter-organisational dynamics (i.e. facilitating informal discussions, time available, opportunity for social contact, gathering the same participants in several sessions over time, lectures, opening up for questions from the participants, film, group discussions, and the presence of facilitators) and characteristics of the participants (i.e. participants motivated to learn and share knowledge, recognition of the value of new knowledge, and valuable knowledge).

Discussion: The study results describe how the establishment of a learning arena can facilitate important knowledge interaction related to transitional care of the elderly across care levels, thus addressing a vital component of integrated care, i.e. the ability to meet across organizational and professional boundaries. The literature shows a lack of current studies proposing methods to support knowledge interaction in health care, in which this study contributes.

To implement the “Meeting Point” as an integral part of current work practices in transitional care of elderly patients involves challenges related to responsibility, organization, resources and culture. The study offers proposals for how a learning arena can be developed and implemented in practice.

Conclusion: The “Meeting Point” met vital criteria for inter-organizational learning indicating that it should be considered a powerful arena to tailor knowledge interaction related to transitional care of the elderly. It is important to conduct further studies to establish the impact of the “Meeting Point” on learning conditions in the participating health care units and the quality of transitional care of the elderly.

References:

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