CONFERENCE ABSTRACT

Patients and professionals learning together: an evaluation of an integrated change management fellowship programme for healthcare improvement

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Improving the quality of healthcare involves collaboration between many different stakeholders to lead change. However, individuals are rarely taught to develop the skills to lead change effectively across professional boundaries. Collaborative learning theory suggests that teaching professionals alongside each other may enable them to develop those skills, but there is little literature on how this works in practice. Additionally, though it is recognised that patients play a crucial role in improving healthcare, there are few examples of where they learn together alongside professionals.

This study contributes to addressing this gap. Using the lens of collaborative learning, we report on a qualitative evaluation of an educational programme (the Collaboration for Leadership in Applied Health Research and Care (CLAHRC) Northwest London (NWL) Improvement Leader Fellowship) which is designed to build capacity to lead change through quality improvement methods in healthcare. This year-long programme is a local case study as it enables patients/service users and healthcare professionals to learn together, as equals.

Qualitative data were collected across six cohorts of the programme, through online evaluation forms and 34 semi-structured interviews with participants, data were analysed using a grounded theory approach. The overall finding was that the skills and capacity to lead change was valued and was enabled by the processes of learning together, discussing real world problems.

The potential struggle Fellows faced to make sense of new concepts and work with new, unexpected methods and people within the Fellowship became a productive struggle, encouraging them to try new things, take a new perspective and step beyond their comfort zone. The integration of patients into the Fellowship appeared to enrich the experience for all fellows, with a clear exchange of learning with professionals and patients benefitting from the new perspectives brought into the group. The flattened hierarchy enabled a range of professions and patients to join as equal voices. This was achieved by faculty facilitation ensuring clear set ground rules and management to prevent one voice (patient or professional) from dominating the group. Fellows project's demonstrated a number of change outputs, from
the implementation of patient booklet in mental health wards, to the increased use of co-production in a GP surgery.

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