

CONFERENCE ABSTRACT

An action-oriented study on developing effective collaboration between primary care and welfare in the promotion of mental health in patients with multi-problems

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Introduction: Many patient who presents themselves with mental health complaints to a general practitioner (GP) also suffer from problems in other domains. Consequently, many of these multi-problem patients qualify for health care as well as social welfare. Since 2015, social welfare professionals in most municipalities in the Netherlands work organized in so called 'area-based social welfare teams' (SWTs). This is linked to the 'Triple Aim' which entails reduced healthcare expenditure, improved satisfaction with care and perceived health and asks for more intense and new forms of collaboration between healthcare and social welfare professionals. However, collaboration between a GP facility and the local SWT is in most municipalities in the Netherlands, including Nijmegen, not self-evident. Aim of this action-oriented study is to develop a blueprint and implementation plan for optimal and efficient collaboration between general practitioners (GPs) and a SWT in order to employ an integral and preventive approach for people with mental health complaints and problems in different life domains.

Methods: Setting for the current study, with a duration of 24 months, is the district of Lindenholt in the city of Nijmegen where the prevalence of psychiatric diagnoses and mental health symptoms are highest of Nijmegen. All relevant stakeholder have committed themselves to a joint trajectory with the ambition to improve the health of residents of Lindenholt by an effective and efficient integration of healthcare and social welfare and an optimal person-oriented and preventive approach. For this study a multi-method approach with a mix of qualitative, quantitative and action-oriented research is used. Two main components can be distinguished:

1. Qualitative and quantitative research to explore the baseline and follow-up level of quality of integrated care (ICE-Q), facilitating factors for better collaboration between GPs and SWT and to evaluate the to be developed work format.
2. Action-oriented research in which professionals from a GP facility and SWT experiment with a new work format for collaboration using three cycles of 'plan-do-check/evaluate-act'

Boersma; An action-oriented study on developing effective collaboration between primary care and welfare in the promotion of mental health in patients with multi-problems

resulting in a blueprint and implementation plan for collaboration between primary health care and social welfare.

Thirty patients with mental health complaints in combination with problems in other domains and who receive a high level of care by both the GP and the SWT ('high users') will be selected for an experimental work format of collaboration like a joint consultation.

Preliminary results: on the quantitative and qualitative baseline findings on the level of integrated care and perceived barriers and facilitating factors for collaboration will be presented at the conference.

Lessons already learned:

- Instead of jumping to an intervention, invest in getting to know your collaborators and work out the details of how you want to communicate and collaborate first.
- Experienced barriers for effective collaboration are often not work-related but emotional.
- Don't assume you share the same vision but explicate a shared one.
- Innovation starts with visionary health professionals, but if the conditions for implementation are not well organized (e.g., financial support or extra hours), integral collaboration stagnates.

Keywords: social welfare; general practitioner; collaboration; action-oriented research
