

## **POSTER ABSTRACT**

## Connecting the dots: interprofessional collaboration in caring neighbourhoods, a pilot study

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Sophie Albrecht<sup>12</sup>, Aaron Van Steenlandt<sup>13</sup>, Jasmina Van Eeckhout<sup>12</sup>, Maja Lopez-Hartmann<sup>12</sup>, Kristel Driessens<sup>13,4</sup>, Van Robaeys<sup>13</sup>, Arno Maetens<sup>12</sup>

- 1: Karel de Grote Hogeschool, Antwerpen, Belgium
- 2: Research Center Cycle of Care, Antwerpen, Belgium
- 3: Reasearch Center Social Inclusion, Antwerpen, Belgium
- 4: Universiteit Antwerpen, Antwerpen, Belgium

**Introduction:** There is an increasing need for interprofessional collaboration (IPC) in the community, in order to ensure personcentered care for those with a care need. In Belgium, the Flemish government committed to support this through the creation of Primary Care Zones (PCZ) and a pilot-program of Caring Neighbourhoods (CN). The PCZ's mission is to get the diverse group of primary care professionals at the community level to work together. CN's work on this community level and aim to allow residents to stay in their familiar surroundings for as long as possible and have low-threshold access to care and support. The aim of our research is finding a method to enhance IPC in CN's.

**Methods:** Our practice-based scientific research sought to answer the question: How can professionals in care and wellbeing create interventions to enhance IPC? We conducted action research and innovation labs with a group of participants (n=5) from different organizations in health and welfare work within the Brederode neighbourhood in Antwerp South. The aim of this innovationlab was to facilitate co-creation of initiatives to improve communication and collaboration. Before starting the innovationlab sessions, a context analysis was conducted in which a.o. geography, socio-cultural context, socio-economic context of the neighbourhood was mapped. The innovation labs were built using the model of design thinking. One physical session was organized, followed by four online sessions. After going through the design thinking process, a focus group took place to reflect on the whole process.

**Results:** At the start of our research project, the IPC in the PCZ was very limited. We found that participants in PCZ Antwerp Centre knew little about each other's tasks and way of working. Therefore, people with certain care needs are not helped in the way they should have been. The participants express an increased communication between them, regarding residents in their neighbourhood. The method of innovation labs proved to be a valid way to enhance IPC. The structure of this methodology was perceived as a clear and straightforward form to facilitate bottom-up initiatives. Their knowledge of each other's tasks and opportunities to work together has led to the onset of IPC. During our research, the following limitations were encountered: a shortage of personnel, the noncommittal nature of IPC, time investment and large staff turnover

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of people in crucial positions were detected as contributing factors why there is no IPC in the community of Brederode neighbourhood.

**Discussion:** We observed an increased need for tools and facilitation that encourage IPC to move towards CN. Organizations and individual primary care professionals benefit from the developed E-book when aiming to improve interprofessional cooperation on a community level.

Conclusion: By using the methodology of our innovation labs, the participants expanded their network, improved their communication and mapped structural problems in IPC.