



The Bridge Model



The Capital Region
of Denmark

Why we need to look at new ways of working within healthcare

The Danish healthcare sector faces great challenges in the future

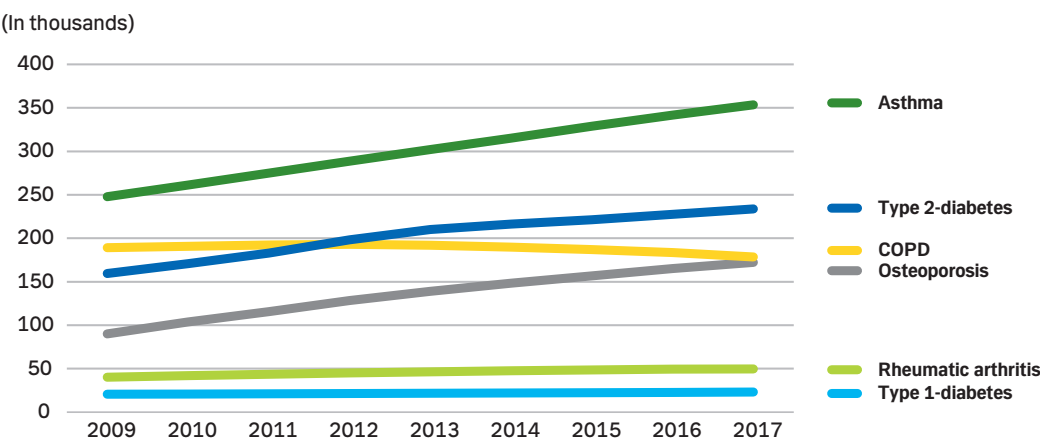
The Danish healthcare sector faces extensive challenges and changes in the next decades to meet the increasing number of elderly patients and patients with chronic illness as well as multimorbidity. This requires increased use of new technologies and development of new care patterns such as integrated care and consistency between sectors.

There are increasing demands and expectations from patients for higher quality of

care and greater emphasis on preventive care as well as expectations of increased individualized care and patient involvement.

The new public health challenges and organizational changes within the health sector in Denmark require increased specialized care in hospitals leading to an increased demand for rehabilitation and preventive care close to the patient's daily life and environment.

Development of number of adults facing multimorbidity



Persons over 18 years with minimum one chronic disorder out of six selected chronic disorders.

Reference: Borgere med multisygdom, Sundhedsdatastyrelsen 2017



“Patients as educators”

A demand for new skills

To meet these challenges a well-trained and well-equipped health workforce is crucial

The health workforce needs to adapt to new challenges and changes, in particular:

- Continuing Professional Development (CPD) and Lifelong Learning (LLL)
- Interprofessional skills and seamless care
- Up-to-date knowledge and skills in new technologies, blended learning, simulation and bed-site training
- Increased specialization and increased complexity of treatment and care
- Increased demands for user involvement and patient empowerment
- Knowledge and skills in patient involvement and communication
- New ways of collaboration, co-creation and relational skills
- Knowledge and skills in public health, health prevention and target groups with special needs



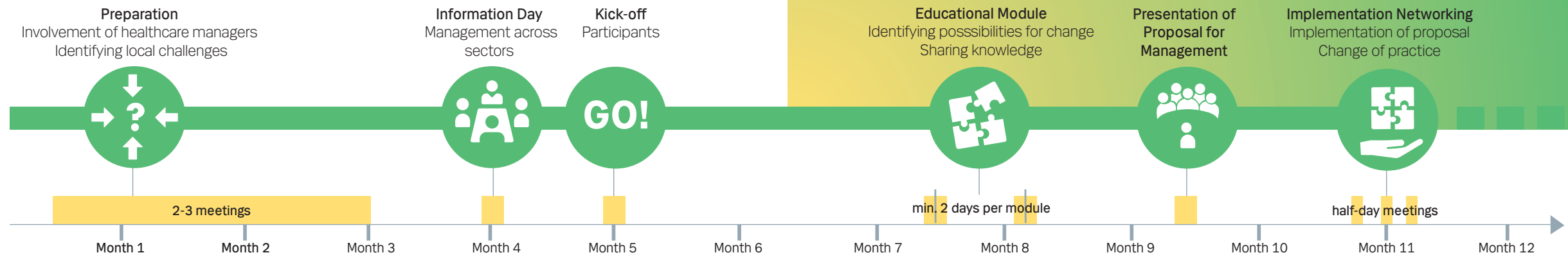
“We cannot work alone”

Working together – learning together

BRO – The Bridge Model is a model to ensure continuing professional development and lifelong learning among health professionals across sectors

BRO – The Bridge Model is a generic model. However, it is necessary to tailor the learning process to focus on the organizational setting, skills among healthcare staff and healthcare needs when patients switch between primary and secondary healthcare

“Co-creation is vital”



STEP 1: Co-creation - workshop

- Dialogue among healthcare management and planners across sectors
- Involvement of relevant stakeholders
- Identifying current and future challenges and needs
- Identifying who needs to be trained
Nurses, physiotherapists, occupational therapists, doctors, etc.
- Planning of the modules: Need for keeping up-to-date on knowledge and skills

STEP 2: Kick-off for local management and health professionals

Dialogue and sharing knowledge of current and future challenges such as:

- Data
- Cases
- Shared good practices
- Improving service

Target groups: Healthcare management, planners and staff from primary and secondary sector (hospital, homecare, rehabilitation units/programmes, etc.)

STEP 3: Work-related learning

Module 1+2

- Patients as trainers, cases, innovative learning, blended learning, dialogue, learning together
- Homework: Learning relating to practice, using new knowledge, new methods, job rotation

Target groups: Healthcare staff from primary and secondary sector (hospital, homecare, rehabilitation units/ programmes, etc.)

STEP 4: Learning together

- Presentation of new ideas and dialogue about change of practice
- Change of practice – Plan – Do – Study – Act

Target groups: Healthcare management, staff, patients and care givers

CASE: Using technology in rehabilitation

Tablets support neuro rehabilitation

Physiotherapist Vicki Arborg at Bornholm's Hospital is preparing a transfer of the 94-year-old patient, Sigrid Holm. She is partially paralyzed after a stroke in the brain and is not as agile as previously.

"What's going to happen now, Sigrid, you are going to move over to the bed", Vicki Arborg says and assists the elderly lady to the bedside. An assistant is filming the transfer on an iPad.

"We are filming to show how the patients – with physiotherapy and a minimum of effort - can get in and out of bed and walk independently. Hopefully, the progress they have made during the hospitalization will be maintained", Søren Dam Jacobsen says who is the coordinating physiotherapist at Bornholm Hospital.

The target group are patients with acquired brain injury, who is admitted longer than 14 days in a hospital. The short video clips showing how to mobilize and transfer patients are visual tools fitting the individual patient. This tool can be used across sections by all professionals who deal with and take care of the patients during and after hospitalization.

"By using video clips, we are communicating directly with the health professional in the

municipal healthcare who will continue taking care of the patient", Søren Dam Jacobsen explains.

When patients are more involved in their own rehabilitation and when the communication with the professionals is clear, the patient is more likely to maintain the results of the physiotherapy achieved during hospitalization.

Søren Dam Jacobsen is quite confident that when the patients maintain the rehabilitation of physical functions, they combine their activity of daily living and self-care to a higher quality of life.

After being discharged, 94-year-old Sigrid Holm is back in her own home. The elderly lady, as usual, wants a little nap in the afternoon. On the iPad social and healthcare helper Dorte Bruun Jensen, watches the video clip that has been recorded at the hospital.

"I think it is a great idea because you can feel a little uncertain when a patient comes home from the hospital and you are not sure how to work out the transfer techniques. This is a really great tool for the client and for the professionals", Dorte Bruun Jensen says.

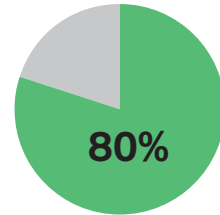


"When patients are more involved in their own rehabilitation and when the communication with the professionals is clear, the patient is more likely to maintain the results of the physiotherapy achieved during hospitalization."

What have we learned?

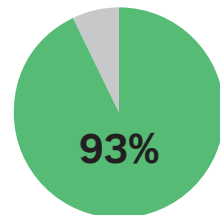
- The Bridge Model has been evaluated within the theoretical frame of Programme Theory. The results show that participants have enhanced knowledge and new ideas on how to involve the patient across primary and secondary sector. The relational coordination and communication have increased and they have gained mutual respect, shared knowledge and shared objectives
- The Bridge Model has been used for geriatric care, neuro rehabilitation, mental health, palliative care, etc. The results show that this generic model can be transferred to other health interventions characterized by complexity due to care that involves multiple healthcare professionals

Management respondents



Responsibility: 80% of the participants feel The Bridge Model has increased their awareness of own role and responsibilities

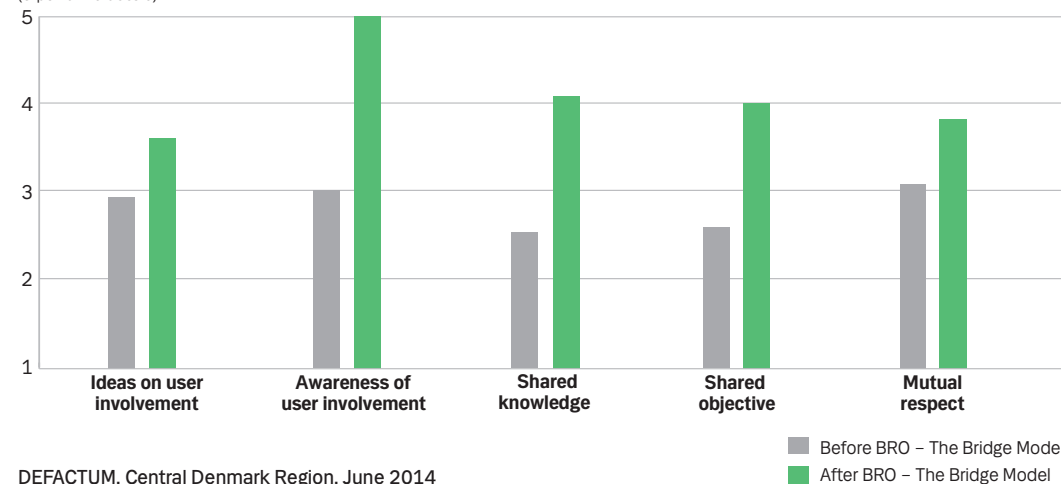
Management respondents



Motivation: After The Bridge Model 93% of the participants are more motivated to work with seamless care and user participation

Participant respondents

(5-point Likert Scale)



DEFACTUM, Central Denmark Region, June 2014

Is The Bridge Model for us?

How The Bridge Model supports Continuing Professional Development (CPD) and Lifelong Learning (LLL)

- Patient care affecting comprehensive primary and secondary healthcare
- Awareness of the fact that issues regarding patients care will be even more crucial in the future
- The need for health professionals to be trained and supported in a more comprehensive way to coordinate and communicate about patients' care
- An aim to involve significant stakeholders in the training and planning process
- A desire to include patients, caregivers and informal networks in the training
- The demand for implementing new skills of the trained staff throughout the organization
- An aim to focus on good practice and shared experience



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