Staff engagement with telehealth and coordinated care programmes: a landscaping study across EU regions

David Barrett, Joanne Hatfield (University of Hull) & the ACT consortium

The Advancing Care Coordination and Telehealth Deployment (ACT) programme is an EU-funded, multi-region project (www.act-programme.eu)

The programme seeks to identify, embed and disseminate best practice in coordinated care and telehealth services

One area of study is identifying best practice in staff engagement with coordinated care and telehealth services

Stage 1 involved using existing literature to identify the key domains of staff engagement (right)

Identifying resistance: “The main challenge of this project was to overcome preconceived opinions of clinicians”

Nurturing ownership: “[clinicians] have been engaged since the beginning of the project in order to make them feel part of it”

Clinical champions: “Clinical champions take the key user role in order to spread the engagement of the rest of the professionals as they serve as an example”

Stage 2 involved a survey of programme managers in the five ACT regions (Basque Country, Catalonia, Lombardy, Groningen, Scotland) to gain views on staff engagement

Responses suggested a strong emphasis on engaging staff with operational issues, with less focus on ‘hearts and minds’

Analysis of free-text responses identified some key elements of best practice, including recruitment of clinical champions, promoting ownership and celebrating successes

Stage 3 – due to report in Autumn 2014 – is a survey of frontline practitioners regarding their experiences and perceptions of staff engagement activities

For more information, contact David Barrett, Nurse Lecturer, University of Hull: d.i.barrett@hull.ac.uk

The work leading to these results has received funding from the European Community’s Health Programme under grant agreement 0121209. The ACT programme is fully aligned with the European Innovation Partnership in Active and Healthy Ageing objectives to deploy integrated care for chronically ill patients.

We acknowledge the contribution of the following researchers participating in ACT: C. Bescos, C. Westersteicher (Philips Healthcare); S. Pauws, H. Schonenberg (Philips Research); P. Natsiavas, D. Filos, C. Maramis, I. Chouvarda, N. Maglaveras (Aristotle University Thessaloniki); S. Newman, R. Davidson (City University London); J. Roca (IDIBAPS); J. Escarrabill, M. Moharra (ADUAS); I. Cleland (Imperial College); S. Nabb (University of Hull); N. Hart (Guy’s and St Thomas’ NHS Trust); M. David, J. Mora, E. de Manuel (Kronikgune); E. Budens, M. Lahr (UMCG); M. Romano, M. Nalin, I. Baroni (Telbios); J. Rasmussen, A. Pavlickova (NHS 24/SCTT); S. Störk, C. Wahl (University of Würzburg).