
UCLouvain

be.hive

The Fund Dr. Daniël De Coninck is managed by the King Baudouin Foundation

Interdisciplinary primary care Chair - Fund De Coninck

Where primary care matters

FONDS DR. DANIËL DE CONINCK

King Baudouin Foundation

Working together for a better society

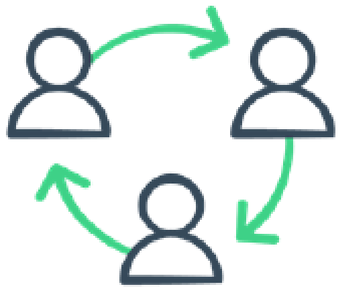
One of the many projects funded by the Fonds Dr. De Coninck

Where primary care matters
FONDS DR. DANIËL DE CONINCK

2 primary care chairs

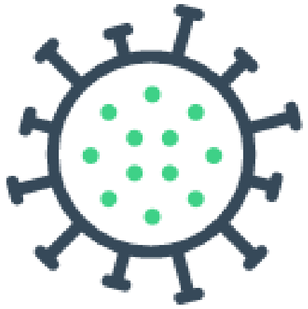
Grants for providers

TransForm Integrated Community care



Summer Academy Goal-oriented care

Health & care literacy



COVID-19 & primary care

Neighbourhood care

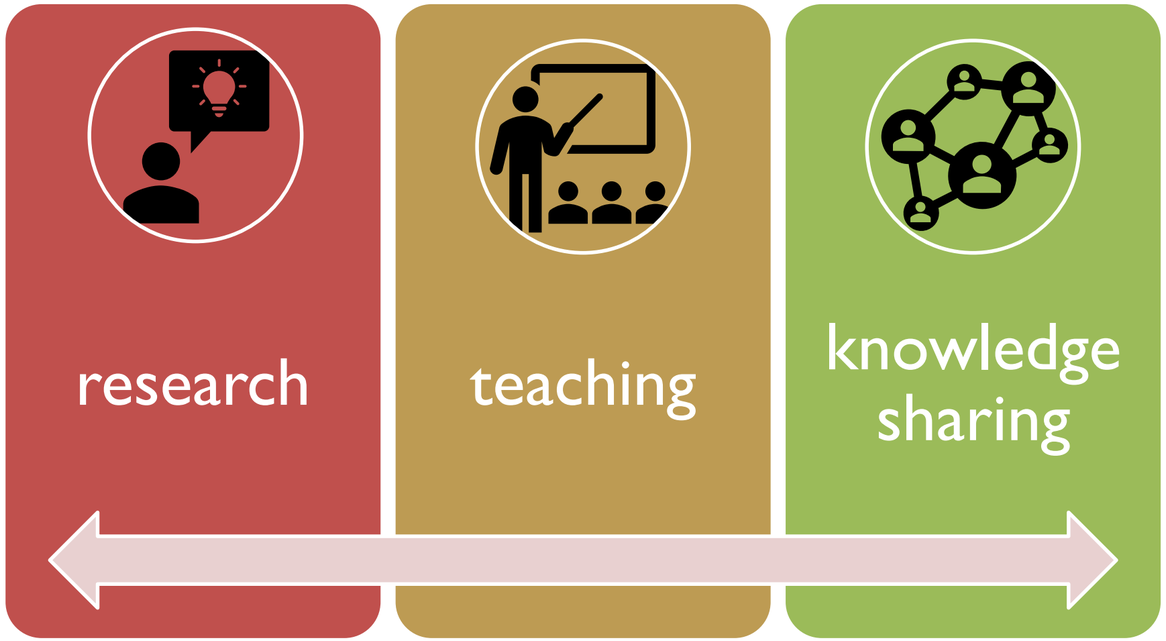
Caring technology

Care-related infections in primary care

Supporting autonomy

Preparing for the future of employment

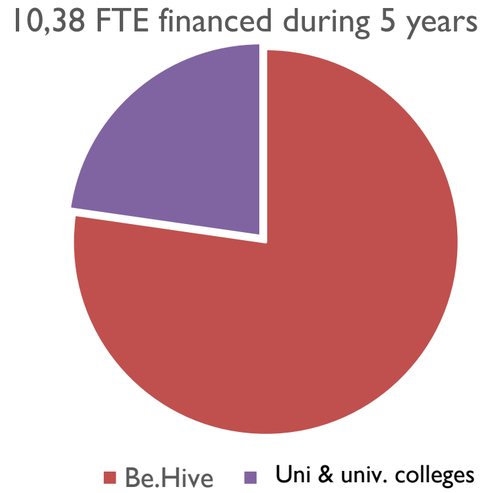
3 missions of the chairs



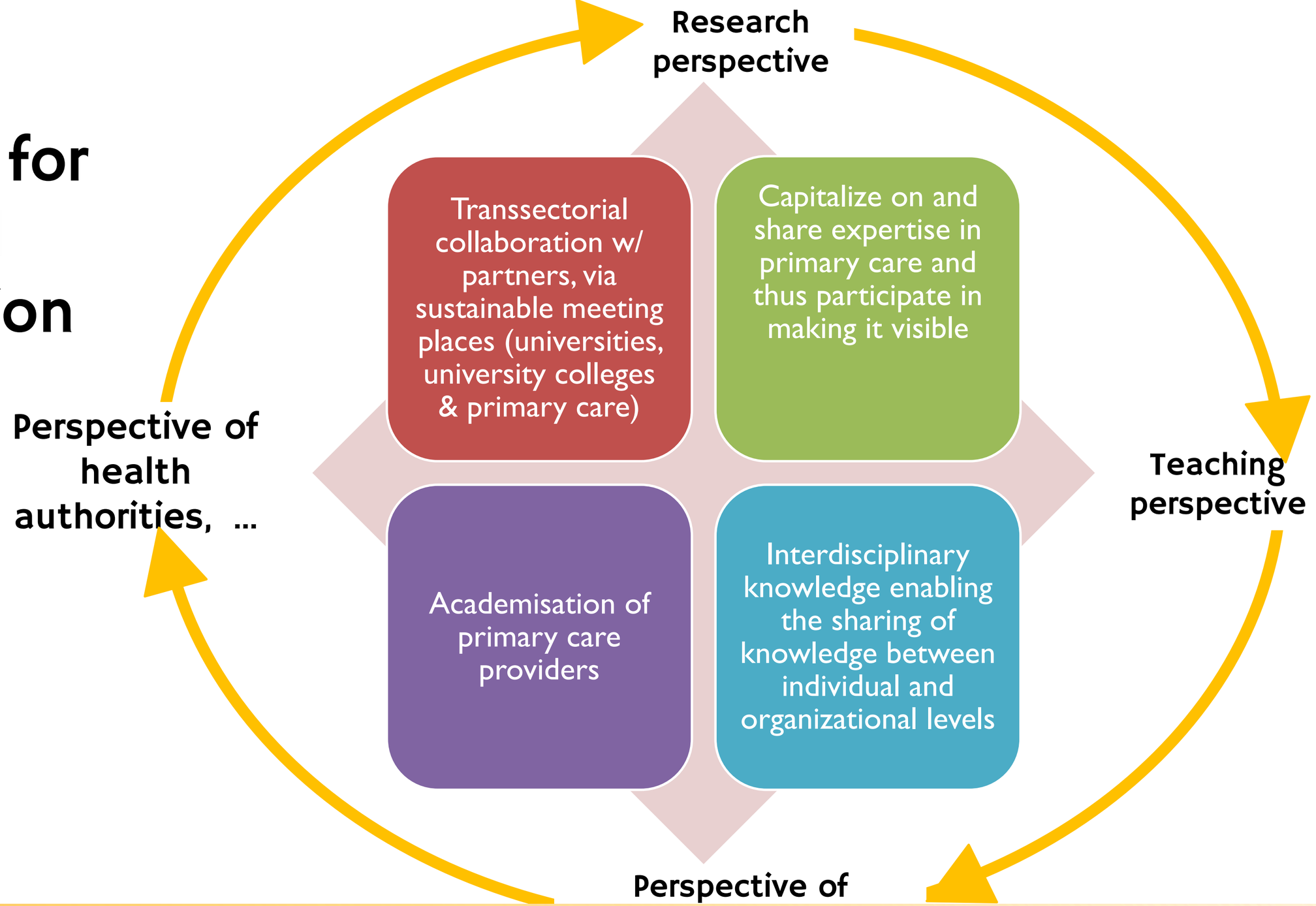
Cofinanced model

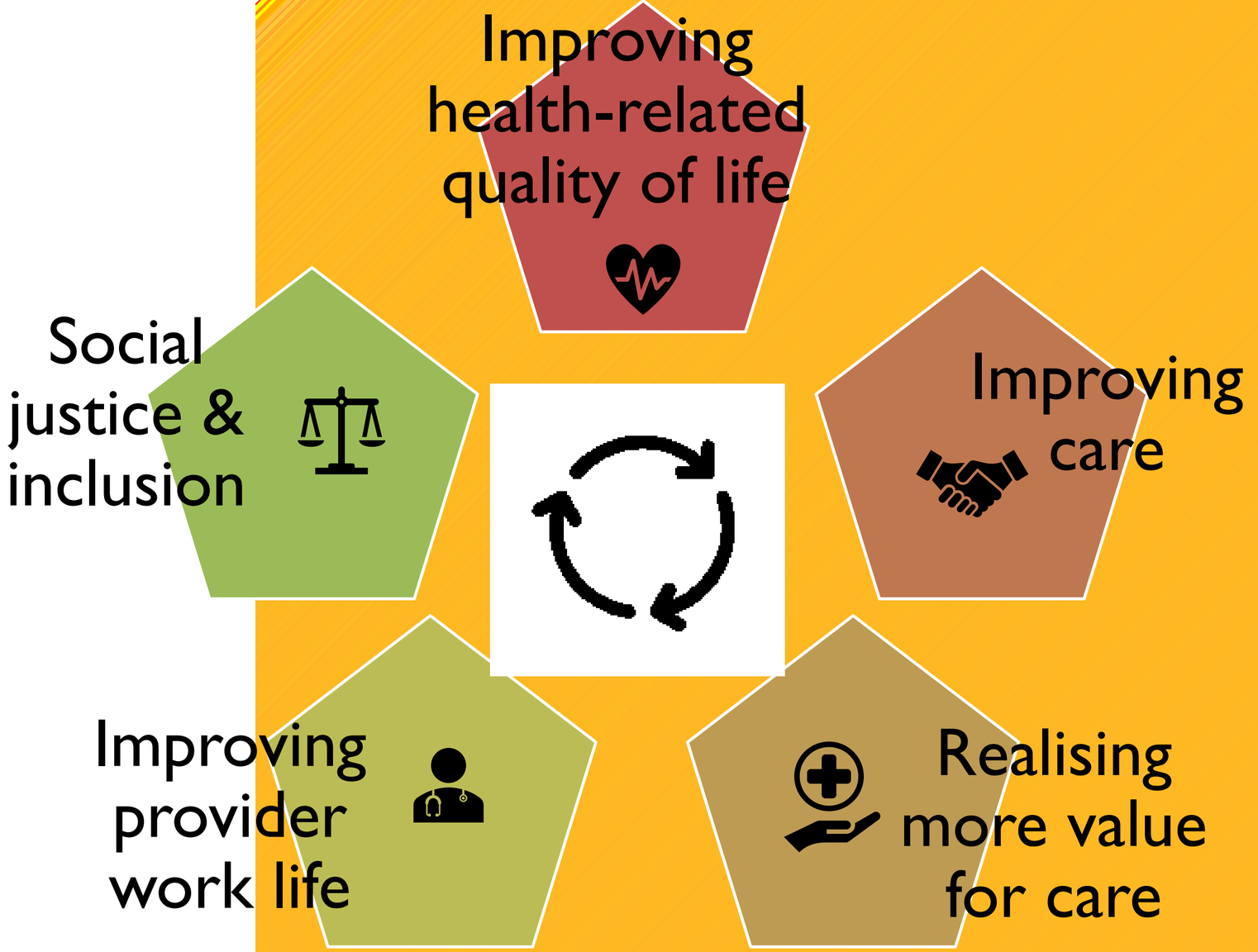
Mix of junior & senior researchers

Initial training	Full-time equivalent	Nb persons
Nursing	3,55	7
Sociology	2,25	7
Medicine	2	6
Others (admin, ITC)	1	4
Osteopathy	0,53	2
Occupational therapy	0,5	1
Physiotherapy	0,25	1
Education science	0,2	2
Psychology	0,05	1
Pharmacy	0,05	1
TOTAL	10,38	32



A model for social innovation





Quintuple aim

Farrell, T. W., Greer, A. G., Bennie, S., Hageman, H., & Pfeifle, A. (2022). Academic Health Centers and the Quintuple Aim of Health care. Academic Medicine, 10-1097.

WPI
Structuration of primary care

Coconstruct and share a common vision of primary care.
Measure the added value of the Chair

AXIS 1

AXIS 2

WP2
Engaging people and communities in health

Support & develop research & teaching about community care,

WP3
People living in complex situations

Perception of the organization of primary care for people living in complex situations.

AXIS 3

AXIS 4

WP4
Interprofessional collaboration

Between health and social sectors, somatic and mental health, with hospital and specialized care; special focus on vulnerable groups.

4 Research axes

Teaching

1. Translating research findings into teaching of (future) primary care providers
2. Interprofessional teaching
   - ➢ esp. Regarding skills needed in primary care
     - New functions, new roles (place-based governance, collaborations, change facilitation)
     - New paradigms: goal-oriented care
     - Interprofessional and interorganisational collaborations,
     - NTIC
     - …

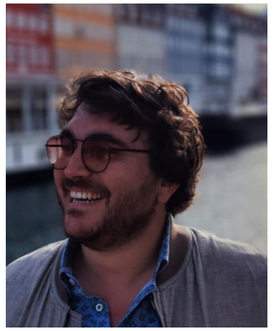
Axis I

LIÈGE université

UCLouvain
Institute of Health and Society

Doctoral theses:
Madeleine Capiau. Self-evaluation of primary care practices: the DEQUAP project in community health centres.
Hubert Jamart. What is the optimal configuration for primary care practices?

Other research in line with structuration of primary care
Anne-Sophie Lambert: Implementation of an HSO reference system in Wallonia, to strengthen the local dynamics "Integrated health systems centred on people"
Thérèse Van Durme: measuring the impact of Be.Hive





Axis2

Doctoral theses :
Delphine Kirkove : therapeutic education in community healthcare
Bernard Voz : Patient participation : between construction and instrumentation of new standards of action in health

other research
Vincent La Paglia: Determinants of specific populations' participation in community-based health activities

Axis3

Haute École Léonard de Vinci

UCLouvain Institute of Health and Society

ULB Université Libre de Bruxelles

hénallux Haute École de Namur-Liège-Luxembourg

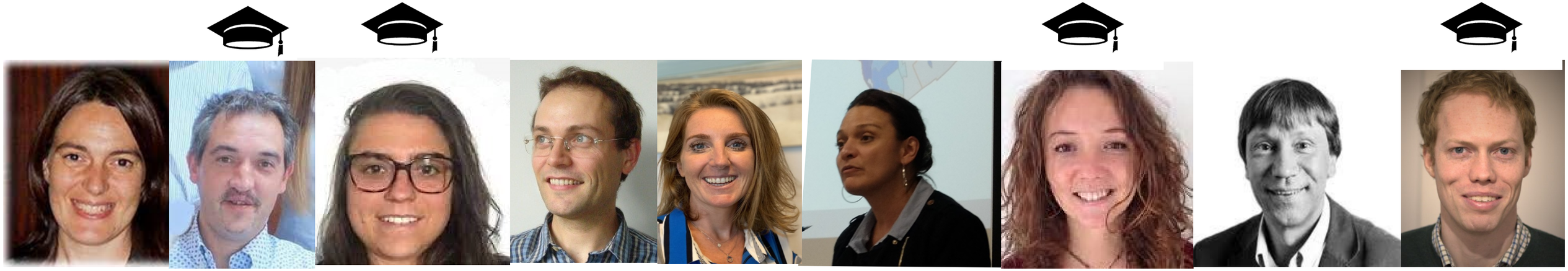
Doctoral theses

Lucia Alvarez-Irusta. The role of the primary care for people with chronic wound(s) in complex situations.

Kathy Delabye. The role of primary care in considering goal-oriented care for people hospitalized at home.

Anne Ledoux. Early preventive actions to promote the "Healthy Aging in Place" of pre-fragile seniors living in urban settings.

Jessica Mellier. Chronic neuro-musculoskeletal pain: place of osteopathy in the perspectives of care throught integrative medicine.



Axis4

Doctoral theses

Fabian Defraine : Hospital deinstitutionalization and its consequences on nursing practice and professional identity.

Léa Di Biagi : Interprofessional collaboration in social and legal systems: Towards a professional identity of collaboration?

Quentin Vanderhofstadt : What are the effects of the current structuring of computerized health records on interprofessional collaboration? Are there more supportive alternatives to interprofessional collaboration? Which ones?

Other research

Dan Lecocq: Implementation of an innovative pedagogical tool, useful to the actors of primary care.

Governance of Be.Hive

STEERING COMMITTEE
(2 coordinators of each WP
+ patient & informal caregivers' representatives
+ providers interprofessional platforms)

Coordinator
(executive & representative function & researcher)

Communication & valorisation group

WP1

WP3

WP2

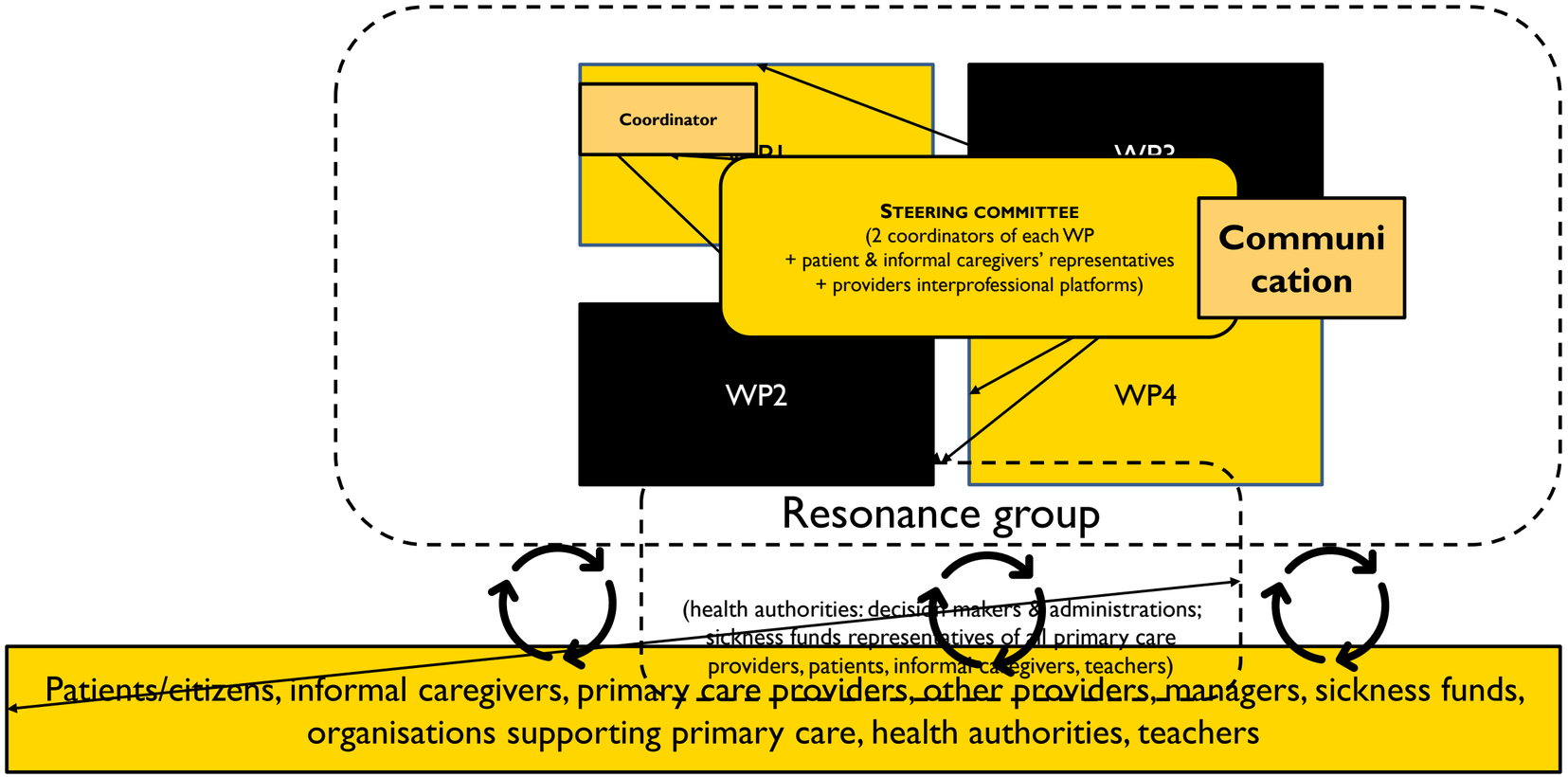
WP4

Resonance group

(health authorities: decision makers & administrations; sickness funds representatives of all primary care providers, patients, informal caregivers, teachers)

Patients/citizens, informal caregivers, primary care providers, other providers, managers, sickness funds, organisations supporting primary care, health authorities, teachers

Governance of Be.Hive



Knowledge sharing via an extended and dense network

an example

Presentation of Lucia Alvarez-Irusta

Congress afiscep, mars 2022

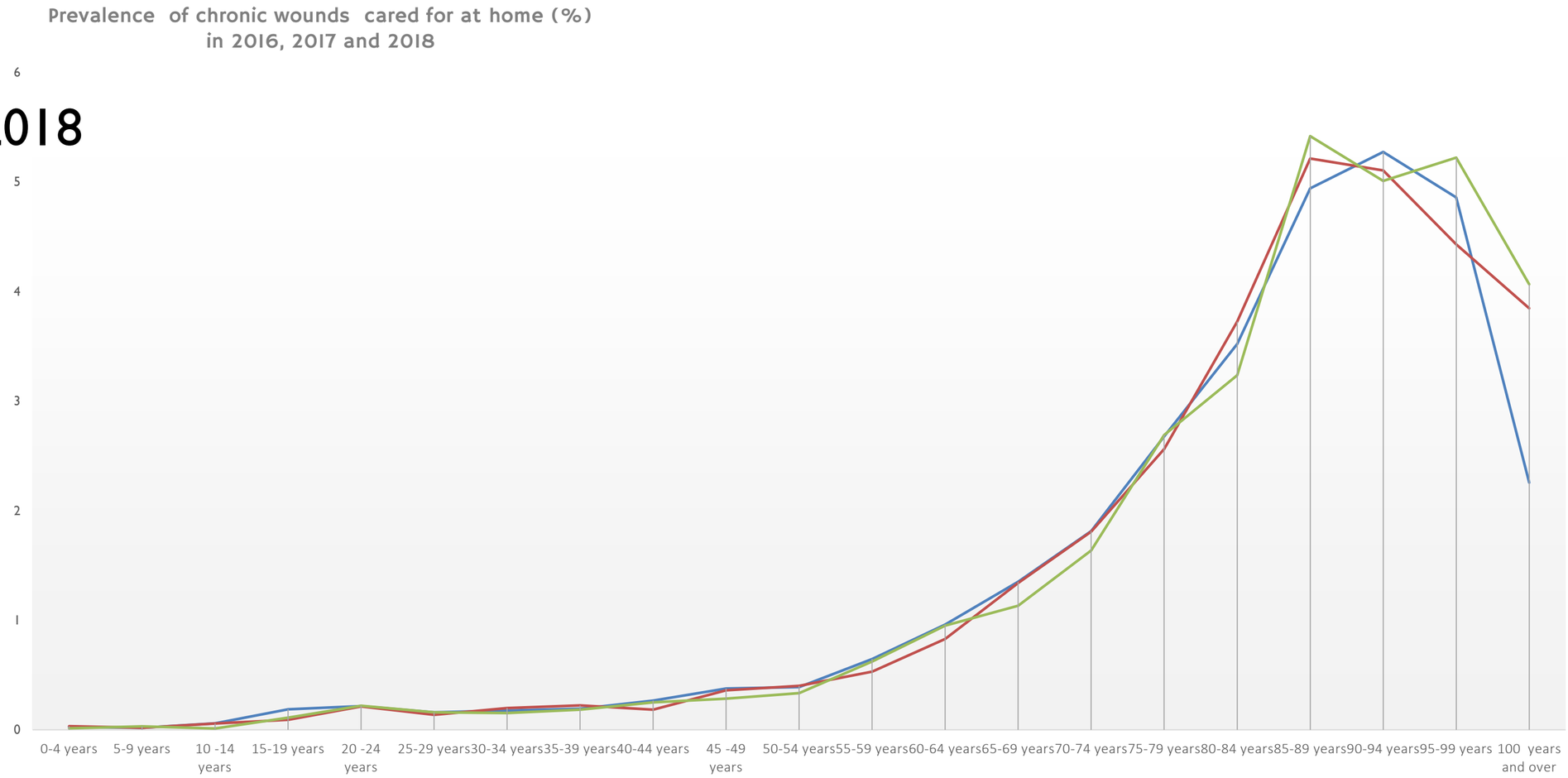
Involved disciplines: nursing, public health, geriatrician, sociologist

CARE FOR PEOPLE WITH CHRONIC WOUNDS

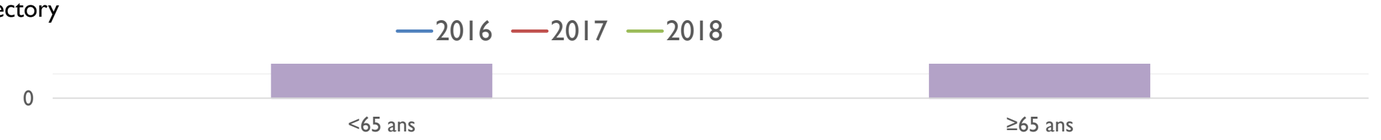
Prevalence of care for people with chronic wounds living at home (Belgium)

321.360 people in 2018

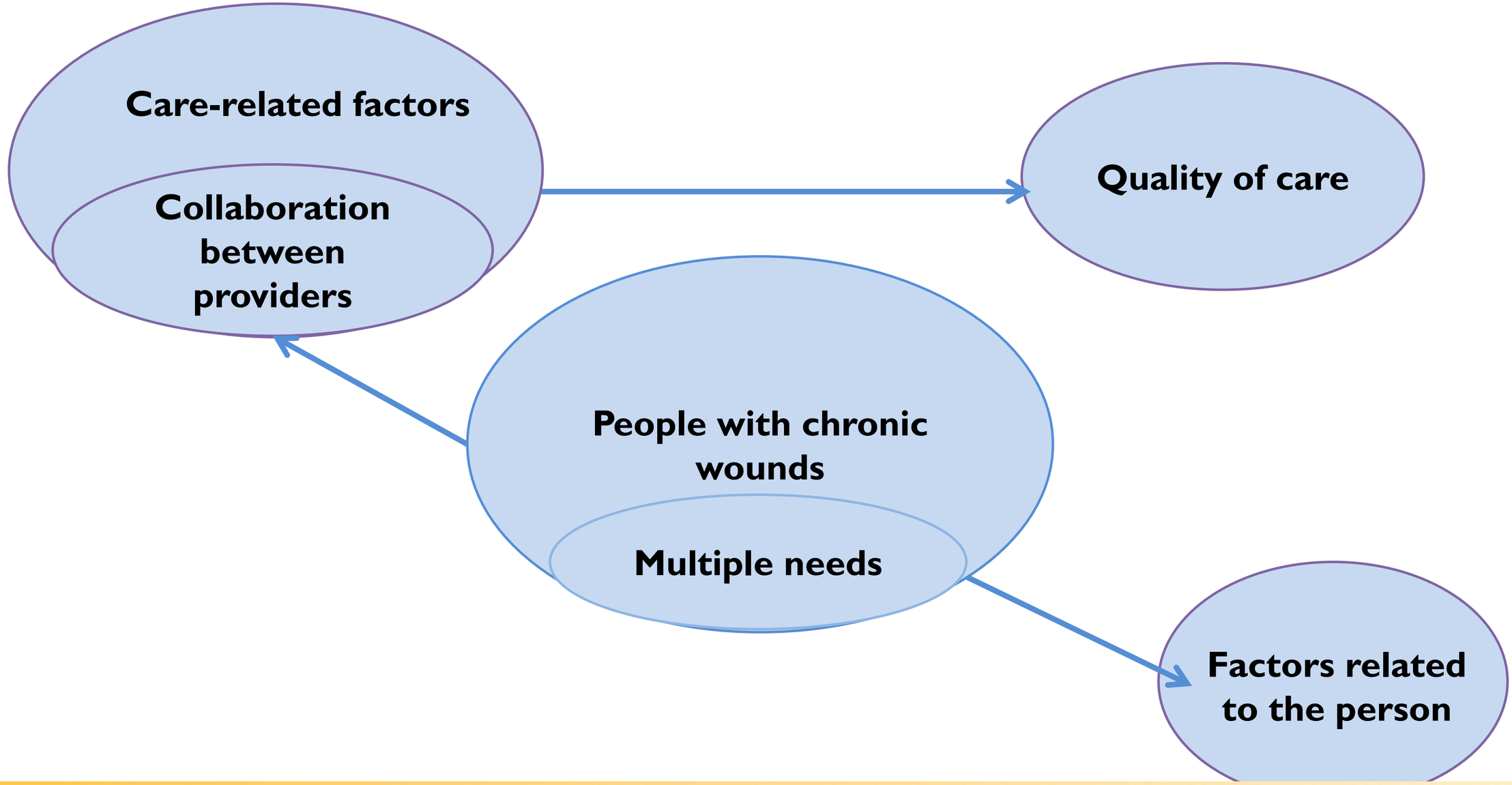
(intermutualistic agency)



Alvarez-Irusta, L., Van Durme, T., Lambert, A. S., & Macq, J. (2022). People with chronic wounds cared for at home in Belgium: Prevalence and exploration of care integration needs using health care trajectory analysis. International Journal of Nursing Studies, 135, 104349.

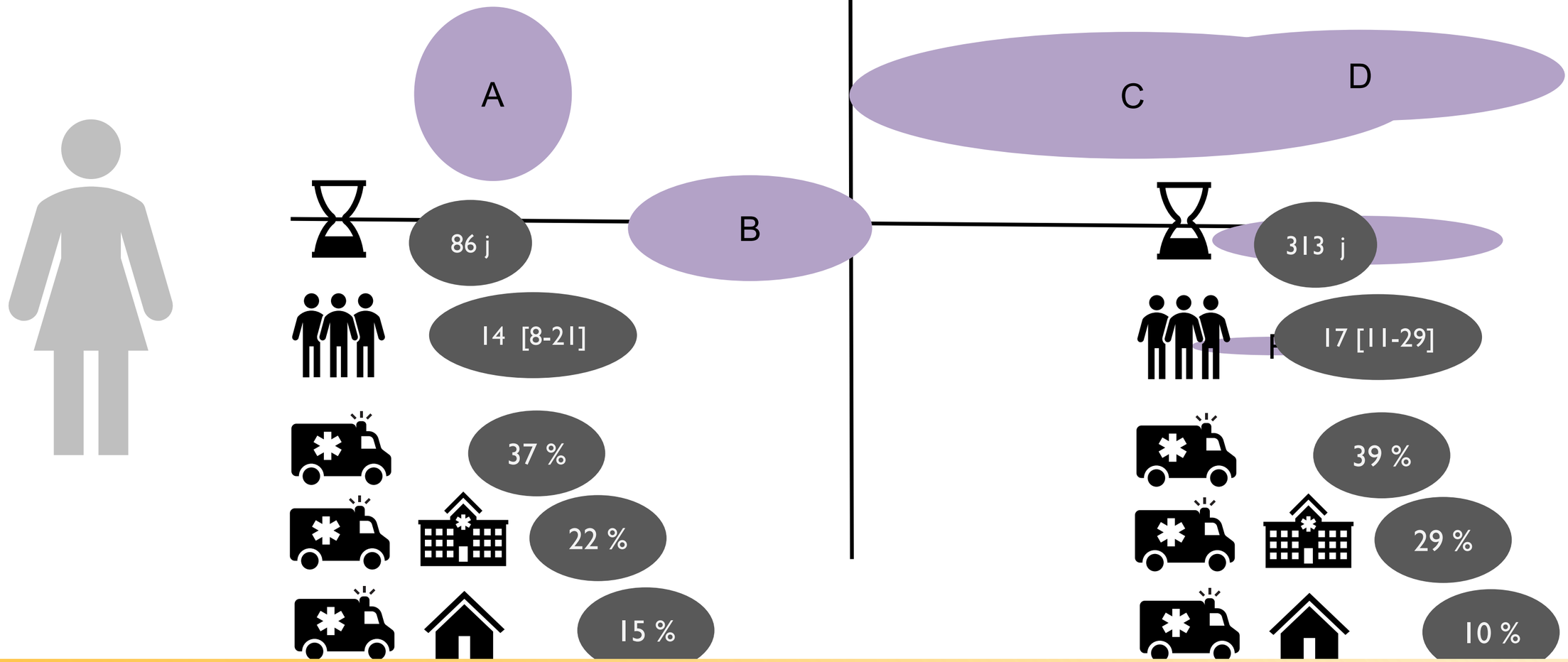


People with chronic wounds

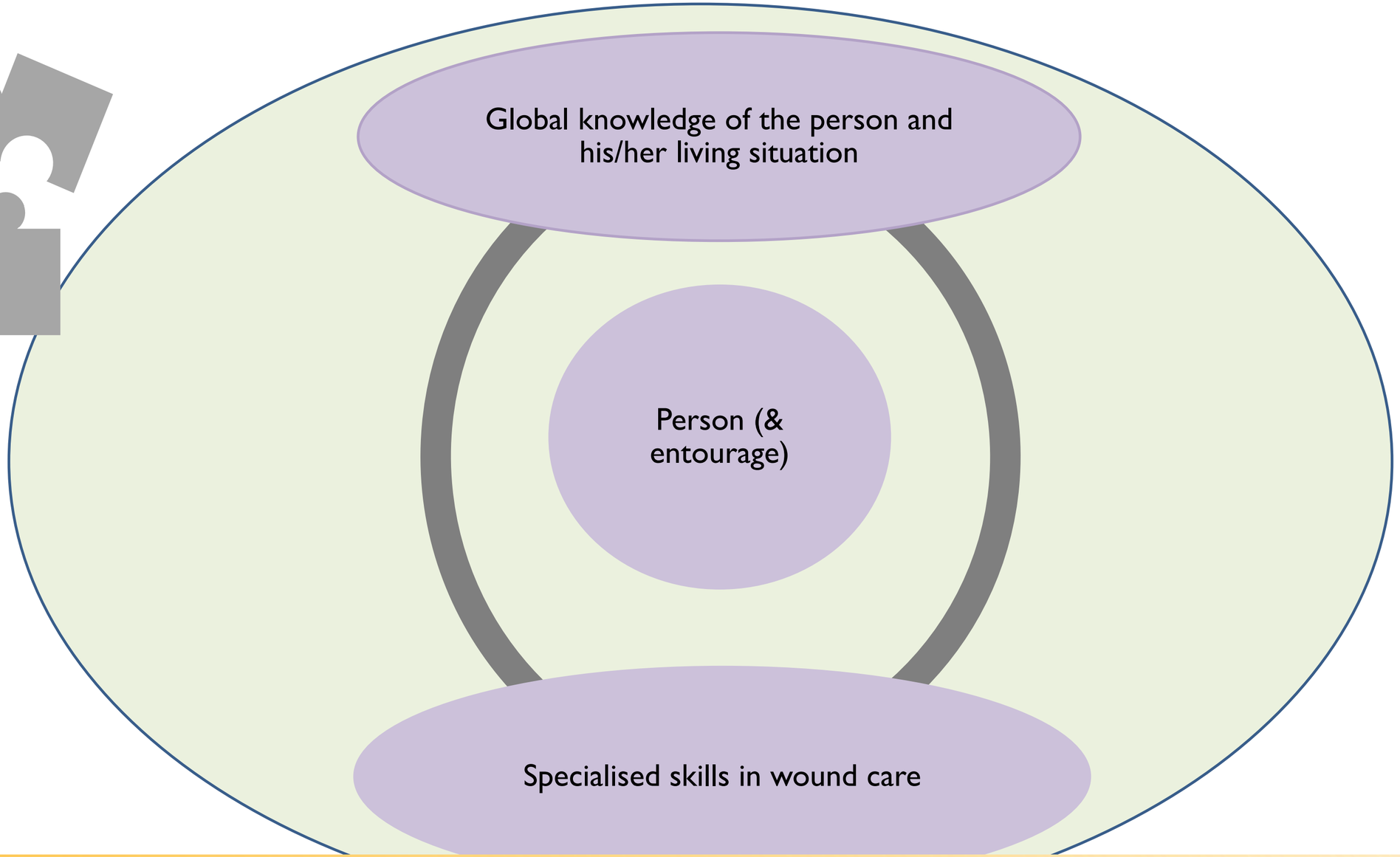


A typology of patient trajectories

Grouping patients (65y +) per type of care trajectory (nb of consultations with general practitioner, specialists, hospitalisations & emergency room visits and home care by nurses).



Competences required from the professionals who accompany these situations & how we can respond as a coherent system



Some conclusions

- Interdisciplinary research and triangulation of researchers, research paradigms, methods and values allows for innovative research methods and deep-diving into the phenomena of interest, resulting in rich data and new insights we probably would not have achieved otherwise
- In turn, this may improve the chance of implementing research findings in routine care
  - linking explicitly teaching to research findings helps us to find innovative ways to transfer the skills more adequately (ex. patient-expert as teachers, etc.)
- Many challenges ahead linked to the competitive nature of research grants procedures and the pressure to publish