



International Network for
Health Workforce Education

Innovations in Educating Health Workers to Address the Changing Needs of the Population

Leadership, Communication & Intercultural Education

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Outline

- Introduction to International Network for Health Workforce Education
- Leadership Training for Health Professionals
- Communication Training for Health Professionals
- Intercultural Training for Health Professionals
- Policy Implications for Europe
- Questions





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International Network for Health Workforce Education

“We strive to bridge the gap between health workforce educators, researchers and policy makers as part of our commitment to improving the education and training provided to health professionals internationally.”

- Health workforce education needs to realize and benefit from the great potential that lies in our diverse, knowledge-rich, global society.
- We tap into the expansive knowledge resources of the global health workforce education community by creating the first truly international, inter-professional, and multi-stakeholder free membership network.
- Through connecting our members we break down the barriers of professional silos, organizational hierarchy, and geographical distance.
- Free membership services include: a Social Network, Forums, Webinars and Specialist Working Groups





Leadership Training: What & Why

- **What:** Leadership training for health professionals has been on the rise since the early 1990's when '**new public management**' changed the opinion of policy makers and catapulted leadership skills to the top of the public-sector agenda. Rising **financial and operational pressures** on health systems in recent years have placed an ever increasing responsibility on all health professionals to conduct their activities with the wider health system in mind. Healthcare education has thus looked to **increased leadership training** as a way of equipping health professionals to deal with such pressures.
- **Why:** Health professionals need to understand and implement the right behaviours to build alliances with a **wide range of professionals and across organisational boundaries** to serve the needs of diverse communities with increasingly complex needs. The success of future healthcare delivery will rely heavily on the **behaviours adopted by healthcare leaders** at all levels being able to work with diverse colleagues and patients in the wider health system.





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National Reality in the UK

The screenshot shows the Nursing Times website. The main headline reads: "Keogh finds 'disconnected' leadership and understaffing at United Lincs". The website header includes the Nursing Times logo, a search icon, and a user profile icon. To the right, there is a "Support The Guardian" button, "Subscribe" and "Find a job" links, and the The Guardian logo. Below the Guardian logo are navigation links for "News", "Opinion", "Sport", "Culture", and "Lifestyle". A "Healthcare Network" section is visible with the headline "Ailing NHS leadership needs urgent treatment".

The screenshot shows the Independent website. The main headline reads: "For too long, NHS management has not been held accountable for its failures". The website header includes the Independent logo, "News", "InFact", and "Politics" links, and search, UK flag, user profile, and menu icons.

*For too long, NHS management
has not been held accountable for
its failures*





Good Practices in Leadership Training

- Health Education England (HEE) established the **NHS Leadership Academy** which provides leadership development to NHS staff that aims to **improve leadership behaviours and skills**. It offers a range of tools, models, programmes and expertise to support individuals, organisations and local partners to develop leadership skills across the NHS. Up to the end of 2016, a total of over **40,000 NHS employees** had completed or registered on one of the leadership programmes run by the Academy.
- The **NIHR Clinical Research Network** is a managed network charged with providing research delivery support for NHS commissioned services. The NIHR recognise that much leadership development has been focused on individuals and personal skill development but equally important are strong peer networks, which will enable cross boundary working and strong systems understanding. The “**Advanced Leadership Programme**” aims to achieve a cohort of national **leaders with the clinical research delivery workforce** who are able to lead confidently across networks and have a deep understanding of the research delivery system they are operating in.





Proposals for Leadership Education

- Remember that leadership is a **complex concept** which involves the **interactions between the leader and the social and organisational environment**
- By improving leadership behaviours, you can **increase patient safety**
- Implement leadership development training for the **whole health workforce** at every professional level.
- Ensure that all training is conducted in an **inter-professional** manner to enable collaborative practice within health systems (e.g. iPEG Inter-Professional Game)
- Do not just focus on the “here and now” but ensure that leadership is taught in the context of **horizon scanning and future developments**
- Understand the potential of the **digital technologies** to transform health systems and clinical research delivery in everyday healthcare settings





Communication Training: What & Why

- **What:** Effective communication between health professionals themselves and with patients has been found to **improve the overall functioning of the healthcare system**. Research proves it has a positive impact on readmission rates, understanding treatment options, adherence to treatment, following the medication schedule with consistency and overall positive health outcomes for patients.
- **Why:** Communication seems to attract little attention, especially during medical and nursing training. There is evidence that **students' communication skills deteriorate**, while teaching these skills is neglected due to workload and clinical work commitments. Additionally, vocational training opportunities on health communication are limited. Thus, communication skills of a busy physician/nurse are often not adequately developed and the need for health professionals to become better communicators remains important.





National Reality in Europe

- The situation is **radically different across members states** within Europe but training programmes do exist in most of the countries.
- There are large differences in the **quality and quantity** of education and training in each country and the possibility to attend trainings is not sufficient in Europe.
- Developing health communication training that can be **used universally** across Europe is of utmost importance.
- Most of the training is conducted via **short-term** seminars and **in isolation** from other formal training.
- Training often does not provide detailed **technical skill and practical exercises** (such as role-playing activities).
- In some member states certain health professional groups are mandated to undergo training while others are not, causing a **disparity in knowledge across the health workforce**.





Good Practices in Communication Training

- Memorial Sloan Kettering's innovative **Comskil** education programme, commenced in 2015, has been teaching health professionals how to communicate with patients in a productive and sensitive manner (USA)
- The **Basel Consensus Statement** proposed a comprehensive set of competencies and educational objectives for communication and social competencies in undergraduate medical education. The statement can be used to orientate curriculum reform and development in medical education (Austria, Germany, Switzerland)
- Over the past 16 years Kaiser Permanente has enhanced clinical communication through the creation of a unifying clinician-patient communication framework for teaching and research called the **Four Habits Model**. The Model has seen sustained improvement in patient satisfaction scores (USA)
- In the **United Kingdom and Ireland**, there are multiple available training opportunities for all healthcare professionals in both formal and non-formal training. However, most of these courses have high fees and are often provided as add-ons which can deter health professionals from attending.





Proposals for Health Communication Training

- Communication skills should be **incorporated from the beginning** of a health professionals' education and reinforced throughout the length of their courses.
- Validation of skills through a comprehensive programme of **continuing professional development** (CPD) should be implemented
- It is key to **practice with patients** as much as possible to **reinforce theoretical knowledge** gained in the classroom.
- Do not forget the needs and the **importance of the patient** in all communication training (such as bedside training etc).
- Healthcare professionals identified specific communication elements which should be included in training as: professional-patient communication (including listening strategies), ways of communicating with different target groups and ways of communicating difficult diagnoses.





Intercultural Education: What & Why?

- **What:** Cultural competence involves **reducing health disparities** and **providing optimal care regardless of race, ethnic background, native language and religious or cultural beliefs**. Cultural competence training is important in healthcare as human interaction is key to delivery of care, patient safety, patient satisfaction and public health.
- **Why:** Increasingly, healthcare is affected by **demographic developments**, making the field of intercultural competence for healthcare professionals extremely important. Health professionals are faced with major challenges in bringing intercultural competence into their professional environment.





National Reality in Partner Countries

- Partner countries consist of Austria, Greece, France and Spain
- Recent increase in migration has led to **changing demographics** within all partner countries.
- These changes have **impacted on health services and the provision of healthcare** to patients comprising many different cultures, values, beliefs and customs.
- The **demographic and status of migrants varied greatly** in each partner country.
- All partner countries, even those with highly developed health systems (Austria), reported a **structural lack of framing conditions** to offer professional transcultural healthcare and treatment.
- Gaps in education of health professionals were recorded in all countries and the **health workforce recorded daily challenges** directly linked to dealing with intercultural issues.





Good Practices in Intercultural Education and Health Systems

- **Intercultural mediation initiatives** under the European funding framework (Greece)
- “MiMi Health Pilots Project” trained migrants to become “health pilots” **closing the gap between migrants and the health system** (Austria)
- Programme to **send health professionals abroad** to become more culturally aware of health needs (France)
- “Infoskop” a mobile education platform which can be used to gain **information in a number of languages** before undergoing certain medical operations (Austria)
- Promotion of **educational resources** such as dictionaries, images, videos and translation tools to reduce communication barriers (Spain)
- Certification of “**Migrant Friendly Hospitals**” which employ more than 36 different nationalities among medical, nursing and auxiliary staff (Austria)





Proposals for Intercultural Education

- “Provision of healthcare should be provided by health care professionals according to the needs **expressed by the help seekers themselves**, not according to the needs perceived by health professionals”
- Create **patient centred systems** that are underpinned by an understanding of cultural issues.
- **Overcoming language barriers is fundamental** when designing interventions tailored to the needs of culturally diverse groups.
- There is **high demand for intercultural healthcare interventions** by health professionals and these should be implemented immediately.
- Intercultural education should also be introduced to **continuing professional development (CPD)** of health professionals.





Policy Implications for Europe

- **No umbrella solution** that will improve healthcare skills for health professionals.
- An **inter-disciplinary and multi-stakeholder approach** is needed.
- Implement legally binding **changes to all health professionals' curricula**.
- **Multi-sector policy actions** is required to ensure success, not just Departments of Health.
- Use both **formal and non-formal methods** to introduce changes in education and training.
- Some good practices available but there is **no copy and paste solution**.
- **Further research, social dialogue and policy implementation** is drastically required.





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Further Information



Leadership Academy

COMDENT



National Institute for
Health Research

