



# Interprofessionele zorg als maatstaf voor patient-centered care bij personen met de ziekte van Parkinson

Miet De Letter

*Avondcolloquium 'Parkinson' - 28 september  
2022*



Belangrijkste  
mijlpalen in  
recent  
onderzoek naar  
de ziekte van  
Parkinson?

Erkenning dat PD een multisystemische aandoening is die een impact heeft op de motorische en niet-motorische functies en bijgevolg op

professioneel  
handelen

psychosociaal  
functioneren

identiteit  
van de patiënt



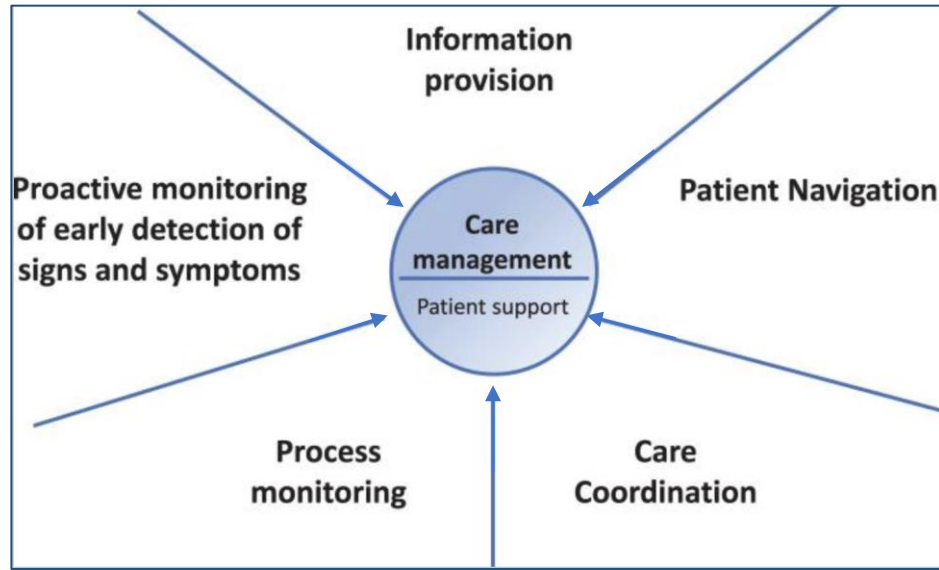
Zorgverleners en de mantelzorgers dragen bij tot de QOL

Personalized care?  
of  
Patient-centered care?



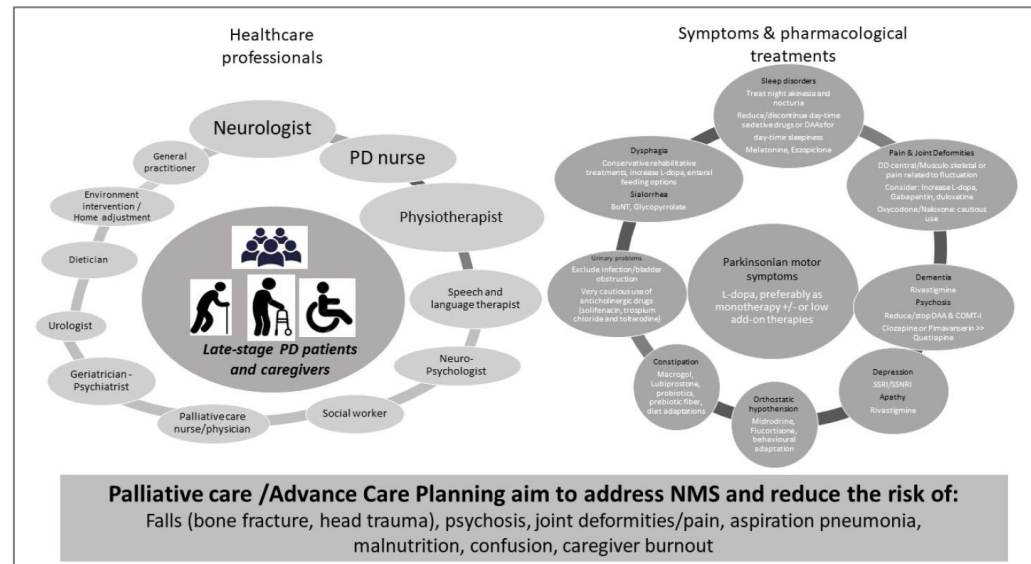
# Personalized Care Management for Persons with Parkinson's Disease

Angelika D. van Halteren<sup>a</sup>, Marten Munneke<sup>a</sup>, Eva Smit<sup>b</sup>, Sue Thomas<sup>a</sup>, Bastiaan R. Bloem<sup>a</sup> and Sirwan K. L. Darveesh<sup>a\*</sup>



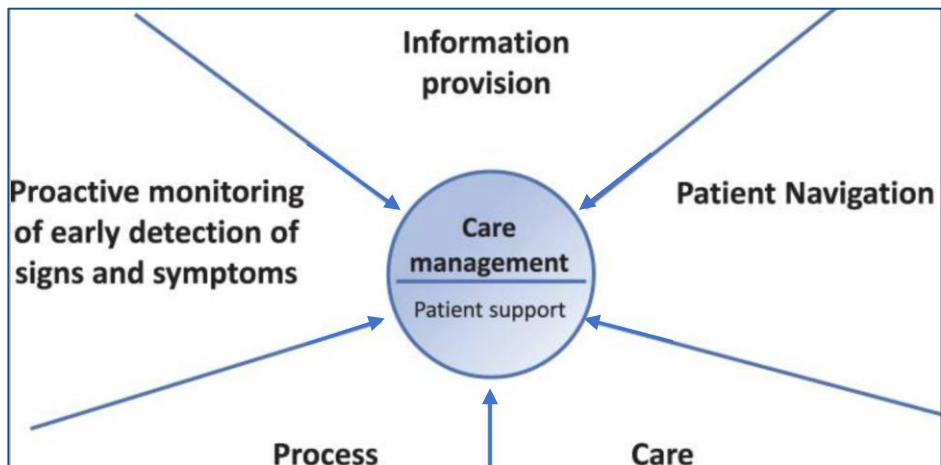
## Personalized Care in Late-Stage Parkinson's Disease: Challenges and Opportunities

Margherita Fabbri<sup>1,\*</sup>, Miguel Coelho<sup>2</sup>, Michela Garon<sup>3</sup>, Roberta Biundo<sup>4,5,6</sup>, Tiago A. Mestre<sup>7</sup>, Angelo Antonini<sup>3,8</sup> and on behalf of iCare-PD Consortium<sup>†</sup>

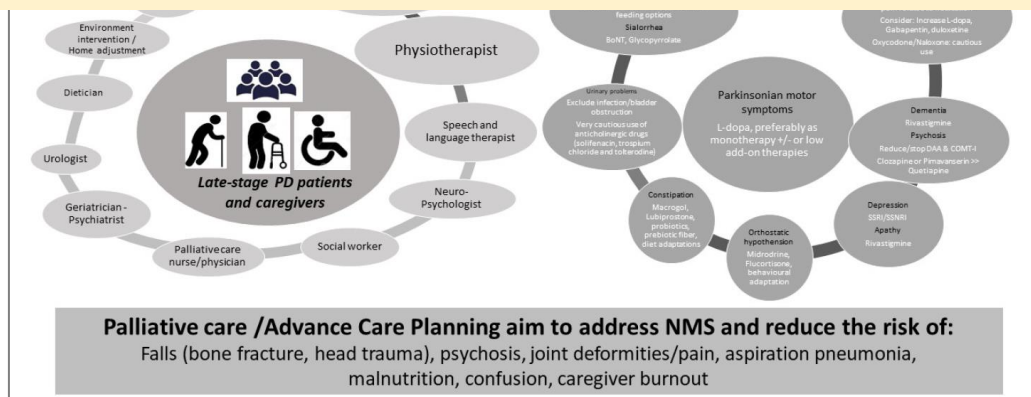


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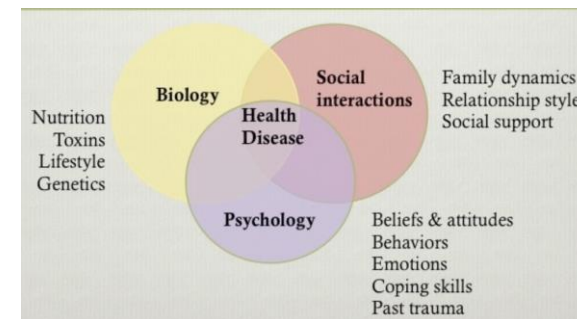
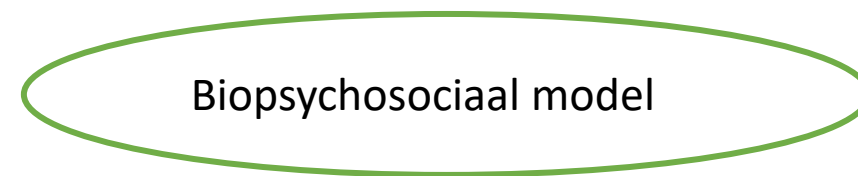


# Physician – centered care



# Moving from physician-centered care towards patient-centered care for Parkinson's disease patients

Martijn van der Eijk<sup>1</sup>, Frouke A P Nijhuis, Marjan J Faber, Bastiaan R Bloem





## Moving from physician-centered care towards patient-centered care for Parkinson's disease patients

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## Patient – centered care

Niet langer passieve, maar  
actieve PD patiënt  
**(EMPOWERMENT!)**

**'Participatory Medicine'**  
= Personen met PD die als  
partners van zorgverleners  
werken aan een optimale  
gezondheid

# Is er evidentie voor patient-centered care bij PD?

Journal of Neurology (2018) 265:764–773  
<https://doi.org/10.1007/s00415-018-8761-7>

ORIGINAL COMMUNICATION



## Patient-centered integrated healthcare improves quality of life in Parkinson's disease patients: a randomized controlled trial

Carsten Eggers<sup>1,2</sup> · R. Dano<sup>1</sup> · J. Schill<sup>1</sup> · G. R. Fink<sup>1,3</sup> · M. Hellmich<sup>4</sup> · L. Timmermann<sup>1,2</sup> · On behalf of the CPN study group

**Table 1** Overview of procedures

| Procedure   | Part of CG | Part of IG | Acting team member  |
|---|------------|------------|---|
| Regular Parkinson's consultation hours (every 3 months)   | Yes        | Yes        | Community neurologist, movement disorder expert, PD nurse |
| Individual treatment plan (based on recommendations of community neurologist, movement disorder expert, PD nurse) | No         | Yes        | Community neurologist, movement disorder expert, PD nurse |
| Home visits   | No         | Yes        | PD nurse  |
| Telephone hotline   | No         | Yes        | PD nurse  |
| Therapeutic modifications due to assessment of PD nurse, feedback of patients, feedback of therapists             | No         | Yes        | Community neurologist, movement disorder expert, PD nurse |

N = 300, team: algemeen neuroloog, movement disorders specialist en Parkinson VPK



# Is er evidentie voor patient-centered care bij PD?

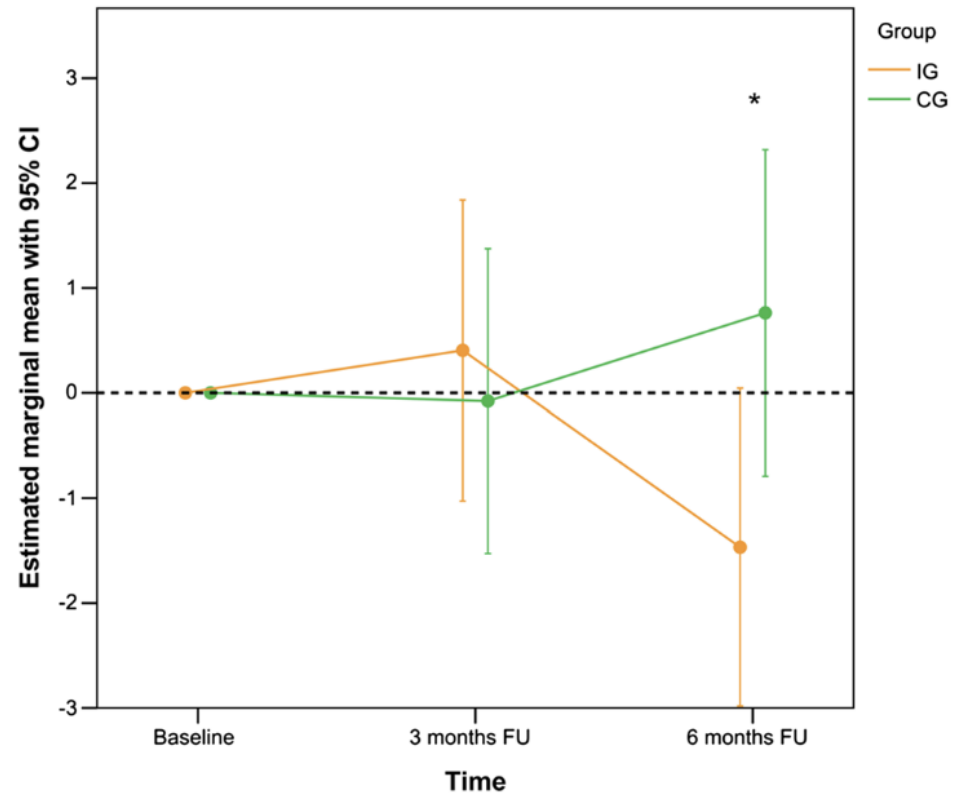
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**Fig. 2** Changes of the primary outcome parameter PDQ-39 over 6-month time in the intervention group and control group. The asterisk indicates the significant change between IG and CG between baseline and 6-month FU



REVIEW ARTICLE



<https://doi.org/10.1057/s41599-022-01221-5>

OPEN

## Patient-centered care and interprofessional collaboration in medical resident education: Where we stand and where we need to go

Arpita Gantayet-Mathur<sup>1</sup>✉, Karenn Chan<sup>2</sup> & Meena Kalluri<sup>3</sup>

Patient centered care (PCC) and interprofessional collaboration (IPC) remain important goals for all healthcare systems. While these tenets are a cornerstone of training for nursing and allied health professionals (AHPs), their role in internal medicine resident (IMR) training is unstructured and limited. We performed a narrative review to answer two questions, firstly 'what is known about the attitudes and behaviors of internal medicine (IM) physicians and trainees with respect to PCC and IPC and how does this compare to AHPs?' and secondly, 'what evidence based interventions have been trialed to promote PCC and IPC in medical training?' We searched databases including Cochrane, Medline, Embase, CINAHL and MedPortal. We reviewed 102 publications and found that medical residents tend to value PCC less than non-physician trainees. Hierarchical professional attitudes and a poor understanding of AHP roles are barriers to IPC, whereas diminished time for direct patient care, neglect of the patient's context and social determinants of health, and lack of self-reflection are barriers to PCC. Published educational interventions for IMRs and AHPs have included classroom sessions, structured ward- and clinic-based interprofessional (IP) work, post-discharge care, home visits, and reflective practice. Interventions were evaluated using questionnaires/surveys, focus groups, tests, primary outcome assessments and ethnographic analysis. The most promising interventions are those that allow learners time for multidisciplinary observation, holistic patient assessments, engagement in care transitions and reflective practice. Based on the review findings we have made recommendations for integration of IPC and PCC training into IMR curricula. Future educational interventions should allow IMR observerships in a multidisciplinary team, introduce residents to the patient's environment through home visits, incorporate patient/family perspectives in care, and include narrative reflections as part of professional development. Based on our findings and recommendations, these experiences can provide IMRs with much-needed exposure to collaborative, patient-centric care early in postgraduate training.

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## Valkuilen voor interprofessionele zorg:

- Vasthouden aan de professioneel hiërarchische positie
- Onvoldoende kennis over de rol van de andere zorgverleners in het team
- Zelf beperkt in tijd om aan directe patiëntenzorg te doen.
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## Is er wetenschappelijke evidentie voor interprofessioneel samenwerken?

De meest beloftevolle 'patient-centered care' en 'interprofessionele' interventies zijn deze waarin een **multidisciplinair team** een **holistische patiëntenevaluatie** maakt waaruit een **interdisciplinair zorgplan** voortkomt dat **flexibel** genoeg is om tijdig bij te stellen.



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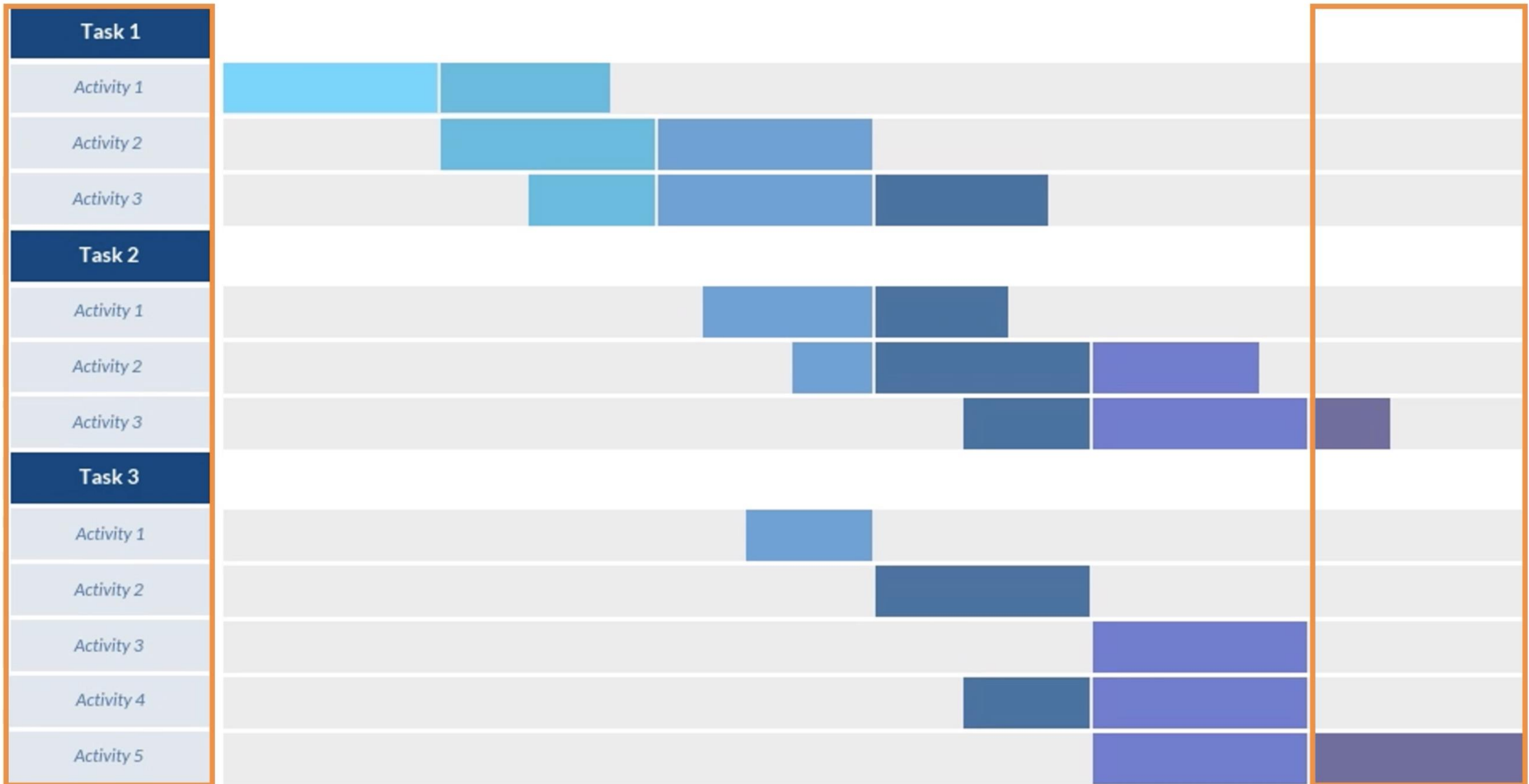
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| Mar 3-7 |   | Mar 10-14 |   | Mar 17-21 |   | Mar 24-28 |   | Mar 31 - Apr 4 |   | Apr 7-11 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------|---|-----------|---|-----------|---|-----------|---|----------------|---|----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| K       | E | L         | V | M         | D | P         | K | E              | L | V        | M | D | P | K | E | L | V | M | D | P | K | E | L | V | M | D | P | K | E | L | V | M | D | P |



# Rol van de huisarts in het interdisciplinair zorgplan?



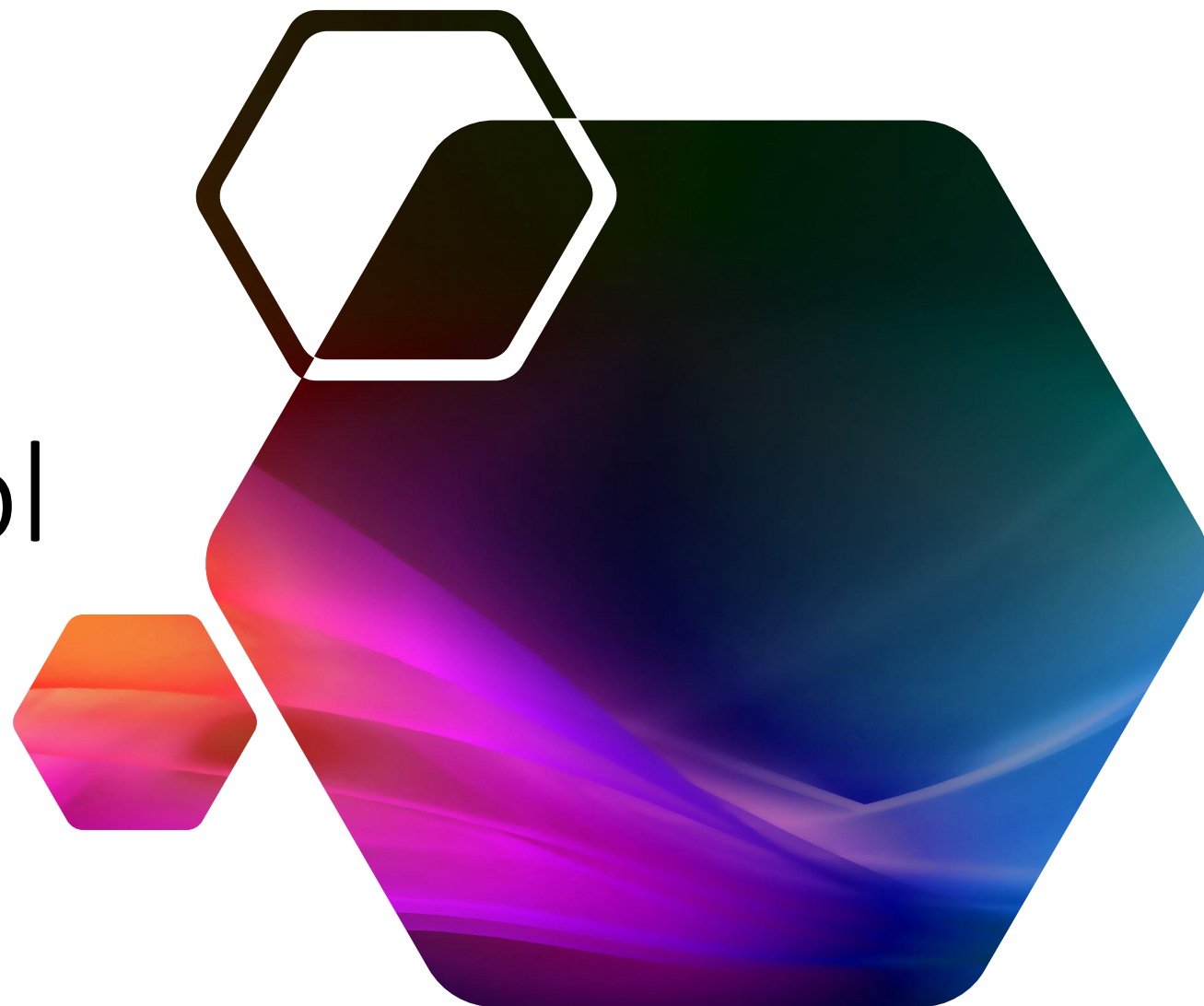
Coördineren van het team



Patient-centered:

- Partner in het helpen behalen van de doelstellingen van het interprofessioneel zorgplan bij de persoon met PD
- Belangrijke schakel tussen het interprofessioneel team en de neuroloog

Quality control





# The Interprofessional Practice & Education Quality Scales (IPEQS)

IPEQS : meet de kwaliteit van interprofessionele samenwerking in de klinische praktijk en in het onderwijs.

Het individueel functioneren



Het functioneren in team

Het functioneren in team

De kwaliteit van de organisatie

Vyt, 2020



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# Evidentie voor interprofessionele werking bij PD?

RESEARCH ARTICLE

## Assessing the facilitators and barriers of interdisciplinary team working in primary care using normalisation process theory: An integrative review

Pauline O'Reilly<sup>1\*</sup>, Siew Hwa Lee<sup>2</sup>, Madeleine O'Sullivan<sup>3</sup>, Walter Cullen<sup>4</sup>, Catriona Kennedy<sup>2</sup>, Anne MacFarlane<sup>3</sup>

Table 2. Normalisation process theory: Coding frame for integrative review of interdisciplinary team working in primary care.

| Sense making  | Enrolment   | Enactment   | Appraisal  |
|---|---|---|--|
| <ul style="list-style-type: none"><li>• How is the idea of interdisciplinary team working understood by participants?</li><li>• How do they compare it with existing practices—is it regarded as something usual or novel?</li><li>• Do all participants see its potential value?</li><li>• Can participants from individual professional groups make sense of the work that interdisciplinary team work would create for them?</li></ul> | <ul style="list-style-type: none"><li>• Do participants think it is right for them to be involved in interdisciplinary team working?</li><li>• Can they drive this way of working forward?</li><li>• How and why do the participants come to take part in an interdisciplinary team?</li><li>• What keeps them motivated to continue taking part?</li></ul> | <ul style="list-style-type: none"><li>• What resources (financial, policy, staffing) are available to support interdisciplinary team working?</li><li>• Do participants have appropriate skills and clarity about effective divisions of labour?</li><li>• Do participants have trust and confidence in their own work and the work of other colleagues in the team?</li><li>• How are team working activities organised and structured and do they “fit” with existing routines?</li></ul> | <ul style="list-style-type: none"><li>• Can participants evaluate the impact of interdisciplinary team working, using informal or formal evaluations to ascertain its impact?</li><li>• Do participants from individual professional groups think it is worthwhile for them?</li><li>• Do participants across professional groups agree about its value and impact?</li><li>• Can existing practices be changed to sustain team working?</li></ul> |

Included studies: n=49 (2004-2014)  
11 countries, Canada 17 studies

**Conclusion:** limited evidence → majority of interdis teams = doctors & nurses



# Multidisciplinary care for Parkinson's disease: not if, but how!

B Post,<sup>1</sup> M van der Eijk,<sup>2</sup> M Munneke,<sup>3</sup> Bastiaan R Bloem<sup>4</sup>

TABLE 2 Specific aims of the ParkinsonNet healthcare concept are shown in the first column.<sup>23</sup> The second column shows the results for each of these aims, as demonstrated in a large cluster controlled trial<sup>24</sup>

| Aim of ParkinsonNet   | Goal attained in trial  |
|---|---|
| To improve Parkinson's disease specific expertise among allied health personnel, by training a selected number of therapists according to evidence based guidelines | Succeeded (improved knowledge of guidelines; better use of guidelines in clinical practice)             |
| To enhance the accuracy of referrals by neurologists  | Succeeded   |
| To boost patient volumes per therapist, by stimulating preferred referral to ParkinsonNet therapists  | Succeeded (case load more than doubled for ParkinsonNet therapists compared with usual care therapists) |
| To stimulate collaboration between therapists, neurologists and patients  | Succeeded   |
| To improve patient outcomes   | Failed  |
| To contain healthcare costs   | Succeeded   |

# Evidentie voor interprofessionele werking bij PD?

TABLE 1 Barriers that obstruct the implementation of optimal multidisciplinary care for patients with Parkinson's disease

1. Insufficient expertise among health professionals
2. Poor interdisciplinary collaboration
3. Inadequate communication, both across participating professionals and between professionals and patients
4. Lack of financial support for a multidisciplinary team approach

Multidisciplinary care for Parkinson's disease:  
not if, but how!

# The evidence for multidisciplinary care in Parkinson's disease

Sarah C. Lidstone , Mark Bayley  & Anthony E. Lang

## Oorzaak voor beperkte evidentie voor multidisciplinaire zorg in PD < methodologie

- Variatie in multidisciplinaire zorg  
community network-based model, a day-hospital model, an academic clinical-based model, an intensive inpatient rehabilitation model.
- Team-based PD zorg  
nog onvoldoende gedecentraliseerd + horizontaal en vertikaal geïntegreerd in de gezondheidszorg
- Alternatieve evaluatiemethoden/-modellen zoeken om evidentie te onderzoeken



# Uitdagingen voor interprofessioneel patient-centered care

- Expertise ontwikkelen bij elke discipline van het team
- Interdisciplinair leren samenwerken via opleiding en observatie
- Communicatieplatform binnen team ontwikkelen
- Beperken van wachttijden voor interprofessionele zorg

# Hoe realiseren in Vlaanderen?

- Expertise ontwikkelen binnen het team → Interprofessionele, gespecialiseerde opleidingen
- Opleiding en observatie → Multidisciplinair team
- Communicatieplatform ontwikkelen → Fysiek/digitaal
- Beperken van wachttijden → Thuisomgeving

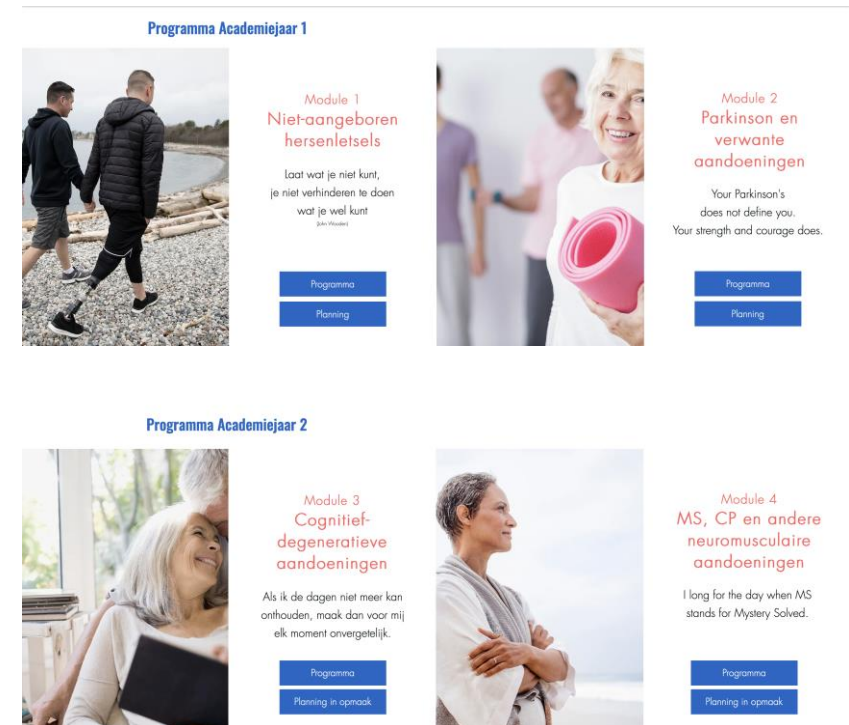
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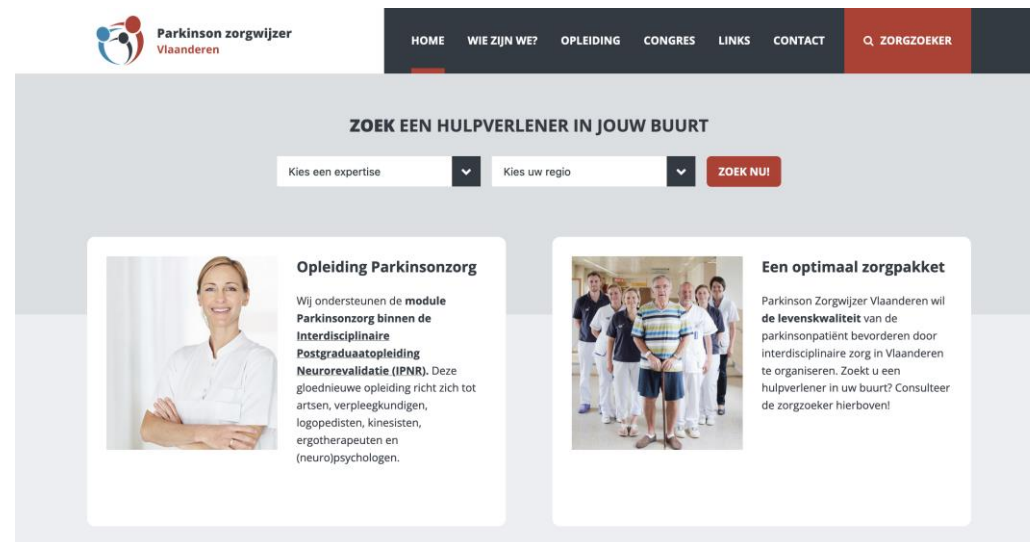
[www.ipnr.be](http://www.ipnr.be)

Voor artsen, (neuro)psychologen, kine, ergo, logo en vpk



# Hoe realiseren in Vlaanderen?

- Expertise bij elke discipline van het team → Interprofessionele, gespecialiseerde opleidingen
- Opleiding en observatie → Multidisciplinair team



The screenshot shows the website for Parkinson Zorgwijzer Vlaanderen. At the top left is the logo with the text 'Parkinson zorgwijzer Vlaanderen'. A dark navigation bar contains the following links: HOME, WIE ZIJN WE?, OPLEIDING, CONGRES, LINKS, CONTACT, and a search icon labeled 'ZORGZOEKER'. Below the navigation bar is a search section titled 'ZOEK EEN HULPVERLENER IN JOUW BUURT'. It features two dropdown menus: 'Kies een expertise' and 'Kies uw regio', followed by a red 'ZOEK NU!' button. Below the search section are two featured articles. The first article, titled 'Opleiding Parkinsonzorg', includes a photo of a woman and text about supporting a module of interdisciplinary postgraduate training (IPNR) for various professionals. The second article, titled 'Een optimaal zorgpakket', includes a photo of a group of people and text about improving quality of life for Parkinson patients through interdisciplinary care.

Kaart

Satelliet

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**373 resultaten**



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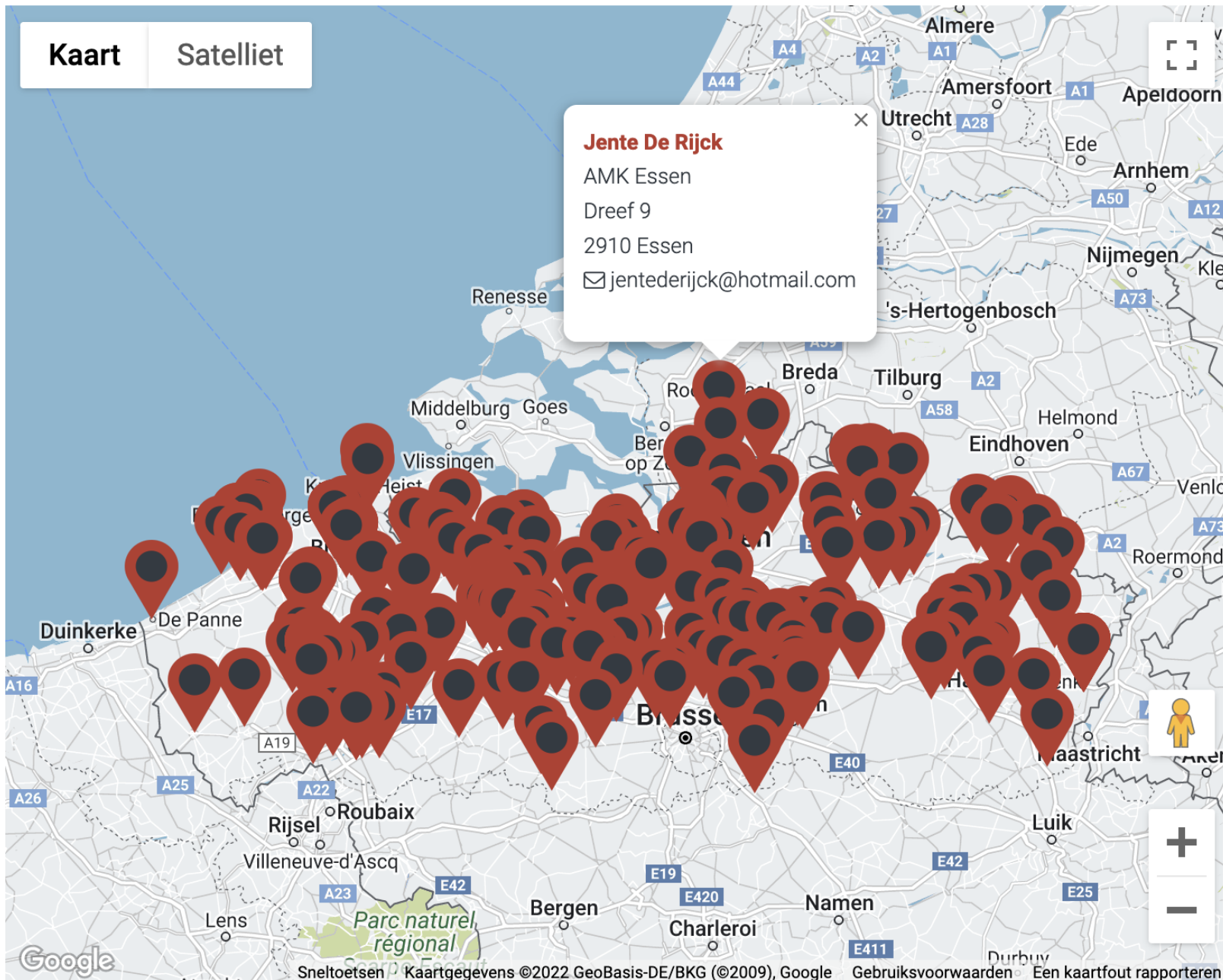
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# Interprofessioneel patient-centered handelen





# Take home messages

- Interprofessionele zorg is maatstaf voor patient-centered care
- Opleiding?
  - [www.ipnr.be](http://www.ipnr.be)
- Doorverwijzing?
  - Zie zorgzoeker op [www.parkinsonzorgwijzervlaanderen.be](http://www.parkinsonzorgwijzervlaanderen.be)
- Informatie voor patiënten?
  - Boek: Het hemd met de onmogelijke knopen
- Zelf bijscholen rond medische/revalidatie-aanpak bij de ziekte van Parkinson?
  - Boek: Parkinsonrevalidatie, een interdisciplinair plan

# Veel succes!

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