

Web-based Individual Plan in Norway: An opportunity for improved cooperation?

Jorunn Bjerkan^a, Ragnhild Hellesø^b

^a Norwegian Centre of Electronic Health Records (NSEP), Faculty of Medicine, Norwegian University of Science and Technology,

^b Faculty of Medicine, Institute of Health and Society, University of Oslo

Abstract and Objective

“Individual Plan” (IP) is an approach to organizing multidisciplinary care in Norway. A web based tool, SamPro, is designed for supporting this planning. In a qualitative study we explored the challenges and opportunities that a web-based tool for IPs offers to patients and professionals in their collaborative care teams. Patients expressed they become empowered through communication and documentation possibilities. Plan coordinators experienced an improved overview in the plans. Being a system super user became an additional task for them. Other professionals involved in the groups did seldom collaborate and document through the system. They reported technical problems and insecurity more often.

Keywords:

Individual plan, Integrated care, Patient-centred care.

Introduction

In Norway, “individual plan” (IP) is a legally mandated system for coordinated organization of health and social care services, and reflects general guidelines with individual adaptations. This planning emerged from initiatives involving patients, professionals and politicians. People who have complex and long-term needs for health or social services of any kind are entitled to such a plan. Patient involvement is central. A web-based tool named “SamPro” was designed to cover both the legal framework for IPs and the communication functions made possible by working on the Internet.

Methods

A pilot implementation of SamPro in four municipalities and three affiliated hospitals in the central region of Norway were conducted. We analyzed project documentation and observations of 76 patients and their IP groups consisting of a total of 158 professionals. 30 semi structured interviews were included in the material.

Sampro Functionality

The legal framework of IP emphasized plan administration like name of the coordinator and written patient consent. Another important area was the plan document including patient mapping, goals, actions and evaluations. Due to internet pos-

sibilities additional functionality for communication and overview was included as SamPro was developed and tested. Documentation and follow-up activities could be shared within each group. Planning activities could be supported by the internal calendar or messaging system even followed up by an SMS alert. This alert was implemented as a choice for quick information to group participants of important changes in the plan. Log on and changes being made in the plan was monitored and displayed at the front page. Access level could be fragmented for actors involved.

Results

Patients appreciated having online access to their own plan, either controlling the process or contributing according to their own wishes. Some patients extended the plan functionality beyond its intention for personal notes or diary. The communication module supplemented their access to professionals through another channel: internal messaging. Less active patients were hindered by technical issues. Plan coordinators appreciated communication possibility and overview. In spite of equal access and shared planning responsibility, most of the plan content was still documented by the coordinator. Inactive coordinators made plan process stop. This was increased as coordinators were given an additional task as system operator and super user. Other professionals in the IP groups showed low activity and expressed more often insecurity or resistance according to web based collaboration. They seldom took responsibility for writing, even in their own professional area.

Conclusion

This study illustrates both possibilities and barriers involved in the use of web-based tools for supporting multidisciplinary and multi-organizational collaboration. The study shows that implementation of web-based coordination tools is challenging both for patients and providers regarding the degree of participation, their roles, and how to interact with each other through a new medium.