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## **Coordination work in hospitals for patients with complex, long-term needs - a proposed conceptual framework**

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**Introduction/Rationale:** Many efforts are initiated in hospitals to improve continuity for patients with complex or long-term needs. Such work involves professionals taking on coordinator roles, either formally or informally, and the integration of coordination work in existing work practices. Negotiations are required among various actors on heterogeneous arenas to agree on how to understand and meet the coordination needs. However, there is no consensus in the use of terms, definitions or models for coordination work.

**Objective:** To draft a conceptual framework covering coordination needs, aims, resources and roles for use across the range of case-complexity and settings in hospitals.

**Method:** A qualitative study with individual and focus group interviews with 16 healthcare professionals with experiences of coordination work in diverse hospital settings across Norway. The empirical data was analysed developing a matrix displaying different dimensions of coordination needs and coordination work, further elaborated in light of literature.

**Results:** The work is in progress. Preliminary analysis show how the variation in coordination tasks, legitimacy of coordination work, and professionals' coordinator roles described by the participants can be categorised into three types of coordination practices:

- Coordinating according to a pre-planned pathway for a specific patient group
- Realizing service delivery according to ideals, regulations, guidelines or process flow-charts
- Coordination based on patients' emerging needs as they are perceived by clinicians

**Conclusion:** A conceptual framework, building on the experiences of professionals, covering coordination needs, aims, resources and roles can hopefully be used to elucidate, specify and facilitate coordination work in hospitals.