

HESAV-SCHOOL OF HEALTH SCIENCES

PROFESSIONAL AND INTERPROFES- SIONAL PRACTICES IN HEALTHCARE

Multidisciplinary research, serving the health care field

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Professional and inter-professional practices in healthcare

Communication with patients, informal caregivers and all professionals involved in health care interventions is a key element in improving the quality of care and ensuring the collaborative practices required to coordinate patient care, be it within an institutional, ambulatory care network or home care context.

Communication is a central aspect of health care activity as it plays a key role, notably in terms of quality care for patients and their relatives, therapeutic education, support to patient autonomy and adherence to treatment. While a consensus exists on the importance of communications skills with patients, informal caregivers as well as professionals engaged in joint care work, there is little evidence-based knowledge on its concrete modalities.

HESAV research projects thus focus on evaluating various communication strategies available to health care professionals in order to study their impact on health care interventions and on treatment objectives.

Yet today's greatest challenges lie in the field of collaborative practice. How do professionals share their knowledge and apply their skills to benefit patients as well as other care professionals in order to improve the quality of care interventions? Our research seeks to analyse the concrete modalities of collaborative practice, that are essential to the coherence of care practice as well as to all aspects of care transitions and follow-through of a patients' treatment pathways. It has the goal of gaining a better understanding of the specific professional roles of members of health care teams as well as of enabling them to broaden their field of intervention through furthering their ability to learn from others and with others. Such knowledge is fundamental if professionals are to be able to act at the structural level, within health care institutions; it is also crucial for training and skills development, so that inter-professional collaboration can be promoted.

Recherches en cours.

Mentorat HES-SO : Soutien
à la relève, pour les femmes
des domaines santé et tra-
vail social

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With support from Swissuni-
versities, HES-SO, HESAV, La
Source, HETS&Sa-EESP.

Current research

E-NEO: Developing the skills and knowledge of neonatal resuscitation students with a collaborative e-learning module in Switzerland and Lebanon.

CLAIRE DE LABRUSSE

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With support from
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Neonatal resuscitation is a key element of the newborn care in the delivery room. In 2014, the Lancet Series on Neonatal Survival proposed new targets to accelerate the reduction of neonatal mortality (Sustainable Development Goal 3) which still affects approximately 2.9 million newborns worldwide, or 4, 5 per 1000 live births in Lebanon, and 3 per 1000 live births in Switzerland. One of the success factors in the management of resuscitation procedures is the competence of the caregivers to prepare the appropriate equipment, as well as their expertise to perform resuscitation procedures.

Training by E-Learning was chosen for its many educational advantages conducive to skills development. This not only impacts the knowledge and skills of students, but also the health of at-risk newborns and their families. By the assignment of their duties in the delivery room, midwives and nurses are on the forefront of births. Moreover, it has been shown, both in the training of midwives in neonatal resuscitation at the Haute Ecole de Santé Vaud (HESAV) and in Lebanese training, that no specific emphasis is placed on the preparation of the resuscitation table. Therefore, training with an e-learning module to acquire knowledge in a structured way in neonatal resuscitation, while exercising its critical sense seems particularly suitable for students. Scientific cooperation between Switzerland and Lebanon, with the same objectives of training and improving the health of newborns is proposed in this project.

The objective of the E-NEO project is to develop the skills and knowledge of neonatal resuscitation students with a collaborative e-learning sequence in Switzerland for midwifery and nursing students (respectively in 2nd and 3rd year of Bachelor) ; and in Lebanon (respectively 3rd/4th and 3rd Bachelor).

[SexoOnco: How nurses address sexuality in oncology](#)

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With support from
Commission scientifique du
domaine santé HES-SO,
HESAV

Hes·so

Haute Ecole Spécialisée
de Suisse occidentale

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More and more people are surviving significantly longer after cancer. Quality of life has then become a major issue for the Swiss health system. The impact on sexuality is often one of the most problematic aspects of patients' quality of life after cancer. If introducing sexuality stakes in oncology is today more and more advocated, nurses, yet placed at the forefront of clinical contact and patient follow-up, struggle to systematically address this issue. This project is based on interviews (n=30) conducted with nurses practicing in oncology departments and dealing with cancers affecting both directly and indirectly the genital and reproductive organs. The aim is to examine which representations and practices of nurses addressing the issue of sexuality in the field of cancer. The project will also help to grasp the positioning adopted by nurses within the profession and vis-à-vis other professionals engaged in the care of sexuality in oncology.

The Birth of a Father, extension of an existing project

YVONNE MEYER

In collaboration with
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With support from
Promotion Santé Suisse,
Soutien à des projets
d'action cantonaux (PAC)



Gesundheitsförderung Schweiz
Promotion Santé Suisse
Promozione Salute Svizzera

There is minimal information and awareness tools for men who are becoming fathers. However, the scientific literature argues unanimously that the committed involvement of partners significantly improves the well-being and health of the whole family. That is why in 2018 two midwives of HESAV, in partnership with a specialist in the field of paternity from the Männer.ch Association, produced the film «The birth of a father». This documentary, conceived in 5 episodes, traces the diversity of realities which contribute to the process of becoming a father. The 18 fathers interviewed present themselves frankly. In addition, 14 professional representatives of the perinatal professions discuss the conducive practices aimed at the inclusion of fathers in their practice. The press's coverage of the film's release included the following review: «It is not always easy for these men to be recognized by perinatal professionals as a parent in their own right. Young fathers, caregivers and specialists testify «(Cooperation 01.04.19). Thanks to the support of Health Promotion Switzerland, this project, initiated in French speaking part of Switzerland, will be extended to the all country and even more widely on the web. To do this:

- the film will be subtitled in English, German and Italian,

-

10 meetings «in the presence» of fathers, future fathers, mothers and future mothers will be organized in collaboration with various organizations, mainly in the cantons of Bern, Zurich and Basel. These meetings aim, through the film, to encourage exchanges about practices where fathers can get involved with their partner and the baby, about the organization and distribution of tasks at home, about the care of the baby, about the paternity leave, etc.

-

a workshop for perinatal professionals will address the decentralization of the dominant socio-health model with its strong focus on maternal and child care, to discuss more inclusive family practices

Media coverage will accompany the project. Otherwise, the salient elements collected during the meetings and workshop will be included in the final report.

Couples' perception of maternal drinking: a sociocultural approach of an "ordinary" risk.

RAPHAËL HAMMER

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With support from SNSF,
Division I.



SWISS NATIONAL SCIENCE FOUNDATION

Consuming alcohol during pregnancy and breastfeeding is a public health problem characterized by uncertainty regarding the effects of a low or moderate intake. Health policy-makers have adopted a precautionary approach and recommend complete abstinence from alcohol as the safest choice. In this context, maternal drinking is not only a public health challenge but also an important sociological issue.

Drawing on a socio-cultural perspective that explores how people experience risk as part of their everyday lives, this longitudinal qualitative project aims to better understand how couples conceptualize and manage the issue of alcohol consumption during pregnancy and breastfeeding. The objective is to examine the values, norms, knowledge and constraints that shape the meaning of alcohol use as a health risk. The project will focus on risk perception as a two-fold process, by considering how the issue of alcohol use is dealt with in the transition to pregnancy and breastfeeding stage, and how such a transition is managed within the couple relationship.

The research design includes two series of semi-directive interviews with about 40 couples expecting their first child in two cantons of Switzerland (Vaud and Zurich). In the first series, pregnant women and their partner will be interviewed separately. In the second series, the mother only will be interviewed during the breastfeeding stage.

The project intends to contribute to sociological and midwifery debates about the influence of risk discourses and uncertainty on health attitudes in the contemporary medicalisation of motherhood. By providing an understanding about couples' representations and partners' role, especially in connection with moderate or occasional alcohol consumption, it will have implications for healthcare professionals involved in pregnancy and maternity care, as well as for public health stakeholders.

Interprofessional meetings in institutions.

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With support from Federal
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Interprofessional collaboration is an area of growing significance in healthcare, yet remaining a challenge in practice. Good communication and a patient-centered approach are both prerequisites for effective interprofessional collaboration, and require a constant effort to share information amongst teams. This research project funded by the Federal Office of Public Health focuses on interprofessional meetings in institutions (internal medicine and rehabilitation) in both French- and German-speaking Switzerland. It is composed of three interrelated subprojects.

The first part of the project is concerned with the practical implementation of interprofessional meetings and its impact on the efficiency and quality of collaboration. Drawing from video recordings of interprofessional meetings, we will answer the following questions:

- How do team processes unfold during interprofessional meetings in internal medicine wards and rehabilitation centres?
- What are the processes leading to effective interprofessional collaboration ?

Second, based on the obtained results in the first part and on semi-structured interviews with team leaders, we will identify the challenges they face with respect to interprofessional team building and leadership:

- What kind of meeting (with respect to structure and team composition) is perceived by team leaders as the most efficient, and why?
- What challenges arise in interprofessional team building and leadership ?

Third, we will compare interprofessional practices in two linguistic and cultural regions (French- and German-speaking Switzerland).

At the end of the three phases, results will be put in perspective and shared with the participating team for feedback and validation.

The results of this study yield a better understanding of team processes in interprofessional meetings, and help identify challenges with regard to team building and leadership. We will also be able to draw recommendations for practice and to offer interprofessional training according to linguistic and cultural specificities of the two main regions of Switzerland. This research project seeks thus to contribute to a more efficient collaboration in interprofessional meetings.

Musical listening in a seclusion room (CSI) in a psychiatric environment.

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Restraint measures in the care of psychiatric patients are very controversial, in Switzerland and in other European countries alike. Seclusion room (CSI) or secure room (the name varies from one institution to another) stand for a lockable space intended to reduce sensory stimulation so that patients can regain control over their psychological condition and their behavior. The clinical use of those spaces is problematic in many ways: it is an assault on personal freedom, autonomy and dignity of patients; the therapeutic function and the effectiveness of the seclusion are not proven; low sensory stimulation itself may be laden with risks, and above all, this type of intervention makes it difficult to establish a caring relationship based on dialogue and interaction.

The use of music to fill the silence of the room and thus to contribute to reducing the feeling of loneliness and abandonment as expressed by the patients seems to be a promising idea, especially if they have the opportunity to manage themselves the music device, which restitutes them back certain autonomy and a degree of control over their immediate environment. These considerations formed the starting point for an action-research project (Amenhotep, 2012-2016) which allowed the development of a music-hearing device that complies with very strict safety rules specific to acute psychiatric wards, and to make a choice of music tracks that were subsequently categorized according to their emotional content. Currently, several rooms are equipped with this device in three psychiatric hospitals in Switzerland and in neighboring France (Lyon).

The main objective of the project «listening to a music in CSI» is to assess the feasibility of an empirical applied research protocol by testing some of the theoretical assumptions formulated by the clinical teams previously involved in its development. The project must observe if the patient's use of the device takes different forms according to their needs at the moment; if the device facilitates new forms of interaction between caregivers and patients; and, finally, if its implementation and use have an impact on the subjective well-being at work of the former and on the subjective experience of seclusion in CSI of the latter.

Pedagogising elder care.
Sociology of continuous
training as means to humanize
care homes.

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SWISS NATIONAL SCIENCE FOUNDATION

Medicalised care homes are often talked about with criticism, and demands for their improvement have been constant. A re-professionalisation of elder care workers through continuous training has imposed itself through a political and social consensus as one of the means to ensure such improvements.

Training institutes that provide training courses, and therefore partly implement this reform, insert themselves in interactions between residents, employees and managers with the goal to improve the lives of the elderly. This model of a dual reform of both care homes and of professional practices brings on a change in social relations and is structured by specific knowledge circulations. Knowledge exchanges take place in a field, that of ageing, where soft skills and know-how with and about the elderly are at stake.

The present sociological research will study this area in the French-speaking part of Switzerland and the reconfigurations brought on by continuous training. The study of both the production and reception of training programs offered by two different institutes in care homes will shed light on the cultural challenges faced by the ageing of the population, where research has ordinarily aimed the sanitary and economical effects of the phenomenon.

We will study to that end:

1. On a micro level, the reconfigurations of practices and social interactions among caregivers and residents and, secondly, the innovation work and the effects of management through skills in situations observed and thirdly in grey literature.
2. On an intermediate level (meso), the elaboration of knowledge, their process of validation and legitimisation, of reproduction and distribution will be studied.
3. On a macro level, attention will be brought to institutional changes and the normalisation work that will come from these changes.

These three levels of analysis will allow us to jointly seize the evolution of training today in the field of ageing in institutions, as well as more general social reforms that this evolution stems from and participates in.

Evidence through imaging.
Socio-anthropological analysis of medico-legal expert evaluations at the time of forensic imaging.

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SWISS NATIONAL SCIENCE FOUNDATION

Even though surgical autopsy is still central to the forensic investigative device, for the past fifteen years several medical imaging technologies (CT-scan, MRI, angiography) have been added to the different scientific tools used to identify the causes of death. Switzerland is at the forefront in developing forensic radiography. The different research teams working on virtual autopsy describe it as a revolutionary technology because it limits human interventions on the corpse and increases scientific inquiry neutrality. While legal medicine is historically founded on the dissection of corpses, these new visualisation techniques break the conventional way of investigating death. Neither this virtual turning point, nor its professional and social issues have ever been studied from a socio-anthropological perspective – our research intends to fill this gap through an ethnography of a Swiss forensic medicine center, the University Center of Legal Medicine (CURML) in Lausanne and Geneva, an expert pole in forensic radiology.

Inspired by a pragmatic sociology of expertise that considers the role of technical objects in the demonstration device, this research project analyses the innovation that forms forensic imaging, in regards to the implications of investigative practices and the demonstration of causes of death. It questions the revolutionary nature of virtual autopsy and seeks to evaluate the transformations produced by those technical innovations concerning the production of evidence as well as their specificities compared to other investigation techniques.

Our study differs from the current state of knowledge suggesting an original articulation between expertise activity, forensic radiology techniques and dead body ontology. It combines a reflexion on the technological innovation process, the place of this innovation in the investigative device, and the status of the corpse in this device. In opposition to many analyses stating that investigative and medical imaging techniques reduce body to an object, we hypothesize a form of agency of the dead body. Making the body “talk”, the investigative device places the body in a liminality position: the forensic imaging techniques play a special role as they simulate biological life and, in the case of post-mortem CT-angiography, are able to “revive” the body, artificially restoring blood stream.

Identifying the complementary and integrative medicine (CIM) practices of healthcare professionals in canton Vaud's Northern Psychiatric Sector (DP-CHUV/SPN) and the individual determiners of their intention to use CIM.

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Hes-so
Haute Ecole Spécialisée
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The situations of people affected by psychiatric disorders and subsequently hospitalised are complex. They require healthcare options combining multidisciplinary approaches.

Approaches applying complementary and integrative medicine (CIM) are increasingly offered to these patients as therapeutic options. As the hospitals in French-speaking Switzerland integrate these new practices ever more frequently, it appears that healthcare professionals consider themselves insufficiently trained in CIM. Furthermore, patients lack reliable information on these approaches.

The present study aims to describe the influence of individual determiners on psychiatric professionals' intentions to use CIM. This will put into perspective all the psychosocial factors which either facilitate or hinder the integration of CIM practices into the therapeutic care options they give to patients.

The study uses a mixed-methods approach: a quantitative questionnaire, developed from a qualitative approach using focus groups and interviews, will be distributed to 197 psychiatric healthcare professionals in canton Vaud. The questionnaire will undergo a rigorous validation procedure so that at the end of the present study it can be used more widely in the psychiatric hospitals of French-speaking Switzerland.

Current PhD research

Patient Perspective on Interprofessional Collaboration between Nurses and Physicians to Improve Patient Safety.

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Interprofessional collaboration (IPC) has become a key strategy as there are high numbers of deaths in healthcare caused by failures in the system and process of care. One primary strategy proposed by organizations, such as the WHO and the Institute of Medicine, involves strengthening the cohesion, coordination and communication within interprofessional healthcare teams. However, interprofessional collaboration remains problematic. The WHO stated that patients and families have the right and responsibility to participate in their care to ensure their safety. A patient-centered approach of IPC will give patients a voice and lead to more detailed understanding of IPC on the care process. It will be possible to look beyond power issues between healthcare professionals. Hence, patients, who should be the focus of collaborative practices, can be valuable partners in the description of the collaborative process and its influence on patient well-being and safety.

Study Aim

This study will explore patients' experience of interprofessional collaboration, and innovative recommendations, truly patient-centered, will be developed. Research question: What is the patients' perspective regarding interprofessional collaboration? What is the impact of collaboration on patient care and well-being and safety, from the patients' point of view? How do the patients see their role in interprofessional collaboration?

Methods

The study design is based on "Grounded Theory" methodology. Data will be collected through interviews with patients (in hospital and afterwards at home). Patients will also be invited to keep a diary during their hospital stay. Data will be collected until saturation in three inpatient services (maximum 10 patients per service) of three departments at the Inselspital, University Hospital of Bern, Switzerland.

Conclusion

With this study, the patients' role in IPC will be described in detail. Subsequently, a patient-centred model of IPC will be developed. Areas for interventions to improve IPC will be identified. It is then possible to develop tailored interventions to support patient-centred IPC.

The construction of care by medical imaging production in radiographers' actual activity.

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The radiographer activity consists in the production of images throughout the completion of examinations which relies on the “cure” paradigm that founded the practices of modern scientific medicine. It is aimed in objectify the physical-chemical phenomena through the implementation of technology dedicated to cure or screening diseases. However, it requires a permanent presence for patients insured by radiographers that allows the development of a personal experience of security and of interpersonal trust. It covers activities that fall within the paradigm of «care». Under the sign of «cure» the patient has a body and fall in voltage and oppose to the «care» where the patient is a body. The several meanings of the concept of «care» would be used such as: attention («caring about»); responsibility («taking care of»); competence («Giving care»); responsivity («care-receiver»)¹

Our aim is to understand the construction of care within the medical procedures performed by radiographers when dealing with the patients. This is to clarify and think the «diagnostic skills» mobilized by radiographers in the conduct of examinations to respect the relational, communicative and reflective dimensions of their practice. The concept of «responsibility» is also mobilized to explore the tension between the paradigms of the «cure» and «care» that underlie the practices of modern scientific medicine.

The data from a joint analysis of the radiographer's activity in actual work situations are performed to shed light on the day-care building within the production of medical imaging. And thus, to understand radiographers' practices by objectifying the gap between the meanings directly prescribed by medical technology and indirectly served by the professional practices.

¹Molinier P., Laugier S., Paperman P., (2009). Qu'est-ce que le care ?, Paris : Éditions Payot & Rivages.

Health policies on preventing the transmission of Chagas parasite in Switzerland and experiences of migrant pregnant women from Latin America.

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Health policies on preventing Chagas transmission during pregnancy in non-endemic countries are usually poorly developed. In Switzerland, although the population is protected from parasite transmission by blood transfusion surveillance and organ donation measures, medical control of Chagas parasite transmission during pregnancy is only practiced in Geneva and Lausanne.

Thus, the absence of a national screening policy for Chagas disease during pregnancy raises the issues of how public health priorities are elaborated.

Furthermore, little is known about the experiences of pregnant women who are screened and monitored for a Chagas disease. In a context of migration, health can be a topic in competition with other concerns (financial, housing ...), moreover, the diagnosis of Chagas can be experienced as a factor of stigma and discrimination. Finally, this silent infection present an uncertain evolution towards a disease and treatments are not very effective at the chronic stage. Pregnant women could face a dilemma between being screened for the benefice of their children's health and not wanting to know their own parasitological status.

Drawing on semi-structured interviews with Latin American migrants and Healthcare providers, I examine two questions:

1. What are the socio-political determinants that influences the policy around the prevention of Chagas parasite transmission in Switzerland ?
2. How women experiences the screening and monitoring of the Chagas disease in a context of maternity ?

The aim of this research is to observe how a migrant population perceives its disease and the health system in order to highlight the obstacles and factors influencing the care process and to adapt the professional practice according to the needs expressed or identified. This thesis will also lead to a societal reflection on issues of prevention policies and their impact on migrant populations in general, as well as on innovations and social processes that lead to their uses or their rejections.

Completed research

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End 2018

Patient perspectives on interprofessional collaboration between healthcare professionals during hospitalization: a qualitative systematic review.

Occupational trajectories of University of Applied Sciences' Graduates in gender-atypical field: men in health and social work, women in engineering and architecture.

Identifying the complementary and integrative medicine (CIM) practices of healthcare professionals in canton Vaud's Northern Psychiatric Sector (DP-CHUV/SPN) and the individual determiners of their intention to use CIM.

Identification of facilitators and barriers for the access to healthcare for asylum seekers of afghan and erythrean origins in the canton of Vaud, Switzerland, and proposals for actions.

Interprofessional collaboration: How do health professionals interact with each other in collaborative practice situations ?

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Sara Keel (HESAV)

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Séverine Rey

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Céline Schnegg (HESAV)

End 2014

Quality Criteria in mammography with breast implants.

The social space of nursing in Western Switzerland. Topology of a profession.

Risks of alcohol consumption during pregnancy: couples' management and professional issues.

Discharge from rehabilitation centers: how are decisions taken? Analysis of the interaction between patients and health professionals.

Seeing, thinking and doing with images: technological mediation and professional practices in the medical radiology technologist community. An anthropological study.

Completed research in collaboration

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Bergliot Strøm (Norway)

Cláudia Reis (Portugal)

Kirsi Rannisto (Finland)

Touvo Parviainen (Finland)

End 2018

E-BREAST: Education and training in early detection of breast cancer for health care professionals.

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Giving birth: expectations & experiences of first time mothers in Switzerland.

Completed PhD research

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End 2018

How to make tangible the fetal risk of alcohol use? A sociological analysis of truth tests within concerned arenas, from science to public health and clinical practice

Véronique Hasler

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End 2018

A social and cultural history of physiotherapy in Western Switzerland (Twentieth century).

Patricia Perrenoud

Director of thesis

Prof. Ilario Rossi, Faculty of Social Sciences
and Political, University of Lausanne

End 2016

Relational care around maternity: the
experience of independent midwives as
a confronting mirror to Evidence Based
Practice.

All research can be found on the
website of HESAV

<http://recherche.hesav.ch>



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