Complex care needs: Implications for clinical education and training

This project was funded by the ClinEdQ Research and Publication Initiative to consider healthcare complexity and its implications for clinical education. The summary below outlines the key outcomes of the project.

Summary
The purpose of the project was to produce a report and a journal article on healthcare complexity and its implications for clinical education.

The products of this initiative are:

- Report on Complexity and health care: health practitioner workforce services, roles, skills and training, to respond to patients with complex needs

  *This purposive, thematic review describes aspects of health care complexity of relevance to the health practitioner workforce and services, particularly skill development and training. It examines some key factors contributing to complexity and elucidates some of the challenges and potential in responding to patients with complex needs. The review acknowledges that a number of initiatives which are potentially important elements of a response to complexity in health care are already underway in Queensland Health. These include a number of research initiatives, training activities and workforce changes, such as extending scope of practice, building workforce flexibility, and promoting new models such as consultancy and case management. The review concludes that complexity is a vital consideration for the future of health care, and specifically for the clinical education of current and future practitioners.*

- Journal article titled Conceptualizing healthcare complexity: Implications for clinical education

  *This article seeks to discuss healthcare complexity and suggest implications for clinical education in reference to the International Classification of Functioning, Disability and Health (ICF). A simple tally was conducted across all categories of the 22 established ICF core sets for complex health conditions. The tally indicated that across 22 complex conditions, the ‘Activities and Participation’, ‘Environment’ and ‘Body Function’ ICF domains were used more frequently in core set inventories documenting complex conditions than descriptors from the ‘Body Structures’ domain. This preliminary glimpse into the nature of health care complexity suggests a need for clinical education that is responsive and relevant to this important concern.*

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