

The Learning Circle Story: Building Capacity in Continuing Care

Rationale

Continuing care (CC) environments reflect growing complexity when balancing the needs of those requiring care with the capacity of those delivering care services. This complexity highlights both the opportunity and challenge in supporting staff with effective continuing learning strategies. This project focused on supporting staff through the use of Learning Circles (LCs), a form of collaborative learning that brings practitioners together in workplace learning groups to identify and address practice priorities.

Project Overview

The purpose of this project was to establish and evaluate LCs that support clinical practice changes and effective workplace learning for direct care providers. Initiated in September 2014, this project established and evaluated nine LCs across seven organizations within Alberta.

In this project, a LC consisted of 6-8 participants who met 1 to 1.5 hours monthly for six months, and was led by a facilitator who used strategies to help adult learners work together, analyze current practice challenges, and develop common solutions.

The evaluation was framed by a participatory action research approach and the philosophy of Appreciative Inquiry (AI).

Participating Facilities:

- AgeCare Sagewood
- Bethany Collegeseide
- CapitalCare Kipnes
- Excel Society
 - Balwin Villa
 - Grand Manor
- LifestyleOptions
 - Whitemud
- St. Michael's
 - Vegreville Manor
- Wing Kei

Findings

- LCs are effective when there is a balance between organizational priorities and staff learning needs.
- Eight case studies and a toolkit were developed to support knowledge mobilization within the participating organizations. The toolkit can be used to encourage other organizations or sites to initiate a LC. LC sustainability requires support from staff, facilitators, and management.
- The implementation and effectiveness of LCs require skilled facilitators, and supportive management to address logistical challenges.
- LCs contribute to practice change by creating time and space for reflection and communication. Staff learning and team development are fundamental to practice change.

Project Deliverables

- LC toolkit for facilitators, site administration and management to provide necessary knowledge, structures and resources for planning, implementing, and sustaining LCs; <http://www.iccer.ca/toolkit.html>

- An evaluation approach that explored the inclusion of CC sites, as central to the evaluation processes and outcomes;
- A Learning Circles Forum for CC providers to share experiences and best practices about new and emerging LCs; and
- Strengthened processes and practices within an existing collaborative network (i.e., ICCER) to share best practices and provide continual support for LCs beyond the project timeframe.

Summary

The LC provides a powerful mechanism for collaborative learning and team development. This contributes to increased staff capacity and may improve quality of life for residents. Within LCs, staff reflect on their practice in a meaningful way and are encouraged to experiment with new care strategies in the workplace. The LC enables team development by allowing staff to communicate and build better relationships with each other. Such communication skills and working relationships are carried forward beyond LCs and translate into greater team collaboration. In turn, team development contributes to improved staff capacity by ensuring staff have the knowledge, skills and attitudes to provide quality care. These positive changes in the workplace help increase quality of life for residents through improved practice, enhanced quality of care and better relationships with staff, residents and families.

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