

BERGEN KOMMUNE

BENEDICTE LØSETH, HEAD OF SECTION

DEPARTMENT OF HEALTH AND CARE 17.03.2017

The Department of Health and Care Services

is responsible for:

- Care services aimed at the elderly, disabled and handicapped
- Health care including public health, preventive services, treatment and emergency care
- Child welfare
- Mental health services for children and youth
- Alcohol licensing









Health and care in all phases of life!

Ca. 8 000 employees Budget of ca. 6,3 billions



The City of Knowledge



Kunnskapskommunen

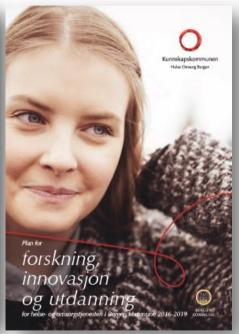
Helse Omsorg Bergen





Plans in Bergen!









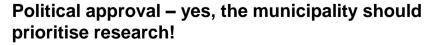
Planer i Byrådsavdelingen siden 2014

Bipartisan agreement. Unanimously approved by the City Council



Why a municipal plan?

- We need new knowledge The municipality can not develop on its own. Collaborate!
- All of the department's services are research topics!
- A proactive role in collaborating on applications for external funding of research projects. Research collaboration!
- Ensure that what we do aligns with Best Practice
- Knowledge based
- More public sector ph.ds. Aim: To establish a research community internally
- Funding: 0,1% of the municipality's budget for research
- Education form the basis of premises







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* Kommunene har bekreftet intensjon om avtale

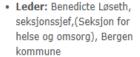


Project group



Kunnskapskommunen

Helse Omsorg Bergen



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- Marianne N. Solbakk (PhD), fou-rådgiver, Bergen kommune
- Annette K. Servan, rådgiver, Bergen kommune
- Eirik Vestrheim, rådgiver, Bergen kommune



PROSJEKTGRUPPEN:
Fra venstre: Eirik

Vestrheim, Benedicte Løseth, Karen
Christensen, Sabine Ruths, Hilde
Heggelien, Brynjulf Stige, Terje Manger,
Steinar Hunskår og Monica W. Nordtveit.
Bilde: Flishateh Farstad

- · Karen Christensen, professor, Det samfunnsvitenskapelige fakultet,
- · Brynjulf Stige, professor, Det humanistiske fakultet, UiB
- Sabine Ruths, professor, Det medisinsk-odontologiske fakultet, UiB
- Marjolein Memelink Iversen, senterleder, Senter for kunnskapsbasert praksis, HiB
- Hilde Heggelien, etatssjef Etat for hjemmebaserte tjenester, Bergen kommune
- Anita Lyssand, seksjonsleder fag og utdanning Helse Bergen
- · Steinar Hunskår, forskningsleder, professor Uni Research
- Else-Marie Løberg, fagsjef Divisjon psykisk helsevern, Haukeland Universitetssykehus, professor, Institutt for klinisk psykologi, Universitetet I Bergen
- Frøydis Bruvik, forskningssjef, Haraldsplass Diakonale Sykehus
- Elisabeth Fosse, Instituttleder, Professor i helsefremmende arbeid, HEMIL-senteret, Universitetet i Bergen





Kunnskapskommunen

Helse Omsorg Bergen

Prioritised areas

- Clinical practice
- Organisation and management
- Digital tools and welfare technology in health and care
- Demographic changes
- Disease prevention and health promotion
- The Healthcare Interaction Reform: Changes in responsibilities and duties between state and municipality
- Cross-disciplinary and unified development of services
- User participation



Projects 2016, externally funded

- «Smart omsorg»: Innovasjon med forskermedvirkning (soiforsk). HELSEVEL, forprosjekt. Uni Rokkansenteret
- Klinikk på tvers. Irene Elgen, Haukeland Universitetssykehus/ UiB. HELSEVEL, forprosjekt.
- Helhetlig behandlingsforløp demens, til nytte for pasientene, familienettverket og helsetjenestene.
 Frøydis Bruvik, Haraldsplass Diakonale Sykehus.
 BEHANDLING, forprosjekt.
- Involved in about 30 applications
- Some granted awaiting response on the others
- How to prioritize between good projects?



- Effects of music instrument lessons on brain plasticity, mood, and quality of life in Alzheimer patients (ALMUTH), Stefan Koelsch, Department of Biological and Medical Psychology, University of Bergen, BEDREHELSE, NFR.
- " OPTET Optimeringsteknologi i hjemmebaserte tjenester». Sintef, RFF- Oslofjordfondet
- Implementation and Action for Knowledge Translation (IMPAKT) in practice and education. Birgitte Graverholt, HiB, HELSEVEL



Implementation and Action for Knowledge Translation (IMPAKT) in practice and education

Birgitte Graverholt, Leader, Centre for Evidence-Based Practice, Western Norway University of Applied Science

NOK 10.000.000 from HELSEVEL, Norwegian Research Council (total budget NOK 15.000.000)

AIMS:

- Reduce the gap between scientifically based knowledge and practice in nursing homes
- Develop a quality improvement model that can be implemented i other nursing homes







Helse Omsorg Bergen



Public Sector PHD in Bergen Municipality Janiche Helsen Pedersen

"Facilitated physical education to High-school students with situational anxiety - thoughts on, and experiences with, physical education and view of théir own body"

October 2016 - September 2019



Public Sector PHD in Bergen Municipality Gunhild Johnsen Hjetland

DEM.LIGHT – Therapeutic light rooms for patients with dementia in nursing homes. Design of diurnal variation for improved sleep, mood and behavioural problems.

Problems related to sleep, mood and behaviour are common among patients with dementia.

Light is the most important factor in adjusting sleeping patterns

80 patients are included, each receiving 16 weeks of treatment/control condition

September 2016- August 2019

BERGEN BOMMUNE













Research and Innovation Award 2016

Forsknings- og innovasjonsprisen

Prisen deles ut til et miljø, eller en person, som har gitt et fremragende bidrag til forskning og innovasjon i helse- og omsorgstjenestene i Bergen kommune.



Vant kommunens første forsknings- og innovasjonspris

Kjell Krüger fikk prisen for å ha bidratt med forskning og nyvinning som er tatt i bruk på kommunens sykehjem.

Award committee

- Benedicte Løseth (Head of Section, Department of Health and Care, Bergen municipality)
- Mikkel Grüner (Leader, Committee of Heath and Care, Bergen municipality)
- Hilde Heggelien (Head of Department of Home Based Services, Bergen municipality)
- Reidar Jakobsen (Acting Research Director, Uni Research Health)
- Monica Wammen Nortvedt (Dean, Faculty of Health and Social Sciences, HVL; and Professor II, Department of Research and Development, Bergen municipality, HelseOmsorg21council)
- Jostein Storsæter (Main union representative, Norwegian Nurses Organisation)



Including psychologists in primary service research

Psychologists – being both scientists and practitioners – facilitate the translation of psychological research knowledge and "the state of the art" into the multiprofessional practices and services development.

Bringing psychologist closer to research – or research closer to the psychologists – can facilitate development, and thereby be of importance at both a community and a society level.

(Norwegian Psychologist Association, 2017)



Research in primary services needs to...

- Generate and apply knowledge relevant for the municipality
- Participate in public health activity (folkehelsearbeid) needs, means, effect on a community/society level
- Strengthen the link/between the municipality administration, services and research
- Bring forward the primary service perspective
- Bring back the universities, to ensure they educate practicioners relevant to the primary field of praxis



The relevance of community psychology research...

- Study persons in their contexts, with assets and needs
- · Cross professional eyes and engagement for collaboration,
- Focus on promotion and prevention, empowerment and easy accessible and coordinated services for those who need extended and continued help.
- Qualitative and quantitative studies, also longitudinal.
- Changing societal conditions/structures as a way to promote good health and life quality and prevention of ill health and misery.
- Building environmental conscience/awareness,
- Reducing poverty, empowerment in challenged subgroups,
- Access to high quality and cooperative services
- Building welfare benefits, quality childcare and schools,
- Architectural psychology and city/ neighbourhood planning etc

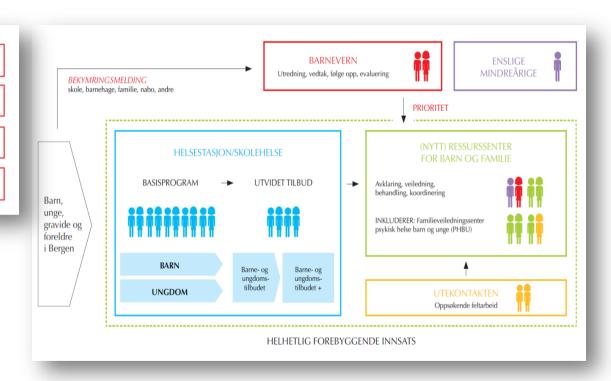


TIDLIG INNSATS

SAMORDNET INNSATS

ÅPENHET OG DELTAKELSE

SMART RESSURSBRUK

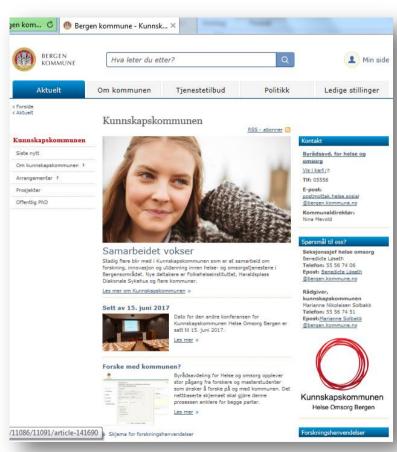




Other possible research topics:

- Evaluation research evidence based methods, old practises, new settings
- Potential of user involvement/joint decisions.
- Potential of person in context (family, friends, social settings, schools and workplace)
- Service development and Cross professional organizing
- Promotion and prevention at peoples main grounds (kindergardens, schools, workplaces, local communities)
- Mental health perspectives in public health activities
- The importance of diagnosis and cause (medical models) vs the importance of understanding peoples needs and personal goals (psychological-, social-, system-, solution focused models).







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