

## HEPPY Project

### Workshop on module 6, "University Level Courses for Health Carer Professional Workers"

Turin, Italy, 06 July 2013

## Minutes

### Participants to the Workshop:

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#### Health carers:

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Sabrina Grigolo presents the heppy project underlining the results obtained and some aspects which are important for the project group.

So far the results obtained at a local level are:

More than 200 narratives descriptions collected by caregivers, patients, professional workers

Realized more than 20 residential training events

6 blended moduls

1 experimental path at the OIRM Sant'Anna Hospitals of the Città della Salute e della Scienza based in Turin.

3 experimental paths in same schools

More than 700 people involved

More than 10 associated partners

More than 50 dissemination events

Other requests of implementation path are being evalutated

We can realize that the interest for this project has increased.

Here are same explanations:

the methods used give value to the experiences and to the different cultures

They also underline different knowledge in the relationship professional workers, patients and family.

Give back dignity and respect to people

These are methodologies consistent with our times since they meet the need of people to be known for their own characteristics, knowledge, life stories, etc

Illness doesn't mean disease. Nowadays is more and more important to consider the meaning of disease comparing with illness.

People requires respect and dignity. And this should be a fundamental principle for the health institutions.

The Nobel Price for the economy Amartya Sen has pointed out the need to replace the material wellbeing to the idea of feeling well meaning the condition of the human being who can do or can be, starting from the available resources and capacities of people to transform this means in results.

The Joint Programming Iniziative "More years, more lives: the potential and challenges of Demographic Change" has given a different definition of the new patients of today.

He is a patient who is more aware, more informed, and free looking for information. He requires respect and recognition for his choices.

From the organisation point of view, we need to acknowledge the patients, family and caregivers capacities using the protocols and procedures as working tools in order to help the professional workers to make their

choices.

During the next presentation, Lorenza Garrino, Rizio Zucchi and Augusta Moletto described the experiences realised at university level.

Common bases is the narrative description as a tool to build the therapeutic education path family – school – health system.

The narrative description is useful to look back the past and tell it today getting and experience to be used to act in the present and build up the future.

To tell about the past is consequently a very important element to give life its real meaning.

the use of narrative description in the training path of university of turin started in 1998, when the narrative method in the clinical tutor training began. The clinic approach, which right now is working in different modules of the tutorial training plan, aims to underline the experiences people remember as very important in their training path<sup>1</sup>.

In the master “models and methods of the tutorship in the training and development of nurse and obstetricians profession, started from 2010-2011 at our University, the narrative description tool is used for an analysis work and supervision of its own tutorial and educational activities.

In same clinical internship setting of Nurse degree in Turin since 2007 the diary tool has been used by students as a method to think out their experiences.

Keeping a diary helps the student in his professional and personal development and gives a great contribution to improve his clinical and relational knowledge, his personal sensitivity in the care process.

In the master “Palliative medicine” at the University of Turin in the module of “training and motivation of the staff” has been used the tool of narrative description in order to make the participants reflect on their own professional experience in the end stage life of patients.

One of optional activities for the students of Course in nursing science of University of Turin realized since 2005 is “Methodology Parents Pedagogy Laboratory” according to guideline about this methodology shared with you.

The title of last presentation is “The resilience in the relationship professional workers – family and patient as goal for the training course at university level”. The authors are William Liboni and Maria Carpi from Un Passo insieme foundation. You can see the link <http://www.unpassoinsieme.it/>.

Two definitions of the term “Resilience”:

As capacity to stand the stress, to ride out problems and to be well motivated following our aims

The resilience isn't a condition but it is a process: the resilience is improved by “struggling for existence”.

From evidence based medicine point of view, some parts of our brain are stimulated by the resilience, the empathy, the trust and the fear. We can confirm which are the important elements for our life.

Our brain change during all phases of our life and we can be able to learn something new every day.

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<sup>1</sup> Garrino L. Torresan M. Gregorino S. Massariello P. Dimonte V. *La formazione per Tutor Clinici: analisi del percepito a distanza di un corso di formazione* Tutor, 2012, 3 (12):5-16

Doctor Liboni describes an life experience of lifelong learning. An old person can be able to learn and to speak in other language if this action is finalized to a specific goal for his/her life.

Substantial evidence confirms that thinking and coping skills that promote resilience can be learned in all phases of life.