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***THE TRANSITION FROM MULTI-DISCIPLINARY TEAM TO INTER-
DISCIPLINARY TEAM: THE IMPACT OF INTEGRATED HEALTHCARE ON THE
NATURE AND IDENTITY OF HEALTH SOCIAL WORK PRACTICE IN AOTEAROA
NEW ZEALAND***

A thesis presented in partial fulfilment of the requirements for the degree of

Master of Social Work

at

Massey University, Palmerston North,
New Zealand

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2018

ABSTRACT

Integrated healthcare aims to transform the health system and improve health outcomes, while managing national health spending, by providing a more co-ordinated, collaborative and cohesive response to patient-centred care. Inter-disciplinary teams (IDT) have become synonymous with integrated healthcare, as it provides a framework for conceptualising an alternative approach to patient-centred care, within the District Health Board (DHB). This study explored how the transition from a multi-disciplinary team (MDT) to an IDT structure, within the DHB, influences the nature and identity of health social work practice. The subjective experiences of the twelve registered health social workers, who participated in this study, reflect the unique Aotearoa New Zealand context at different stages of the transition from an MDT to an IDT.

Critical theory and a constructivist theoretical framework guided this qualitative research study, in which health social work is conceptualised within the broader context of competing and inter-related socio-political, cultural and economic demands. Semi-structured interviews were conducted with each of the participants, from across Aotearoa New Zealand. The data from these interviews was collated, according to emerging themes and patterns and analysed in relation to relevant national and international literature.

The participants in this study were unanimous in their support of the transition to an IDT, citing the correlation between increased professional collaboration and improved patient outcomes. The findings from this study reveal that while the nature and identity of health social work practice remains unchanged, the transition to an IDT affords further opportunities for practitioners to demonstrate competence and to gain credibility. Findings highlight that exposing other disciplines to the unique knowledge and skills that social work brings to patient-care, positions the profession as integral to the functioning of the IDT.

The significance of this study and the recommendations that have emerged, highlight the need for DHBs to be more transparent about the rationale for change and to involve health social work at every stage of the transition to an IDT. This study concludes that distinguishing between the MDT and the IDT, and providing professionals with ongoing education and support around working collaboratively as an IDT, creates sustainable change. The bicultural nature of health social work in Aotearoa New Zealand offers opportunities to strengthen integrated healthcare, by drawing on Whakawhanaungatanga, the practice of appreciating and growing relationships and kotahitanga, which involves bringing people together. These serve as unifying concepts within the IDT.

ACKNOWLEDGEMENTS

- To all those who participated in this research study - Without your passion and your depth of insight, this research study would not have come to fruition. You were generous with your time and with your experiences. You are steadfast in your dedication to your role and to your patients and their family and whānau. I am proud to call myself a health social worker alongside you. Thank you.
- To my thesis supervisors, Lareen Cooper and Hannah Mooney. I could not have asked for two more committed and supportive supervisors. From the very beginning you were engaged in this research and shared my enthusiasm for this topic. Your research expertise and academic guidance encouraged and inspired me to complete this thesis. Thank you. You are both an inspiration.
- To Andrew - without your support, I would not have embarked on this journey and pursued my academic dreams all those years ago. From the very start, you gave me the confidence and taught me to believe in myself. You make so much possible for me. Thank you for always being there.
- To my incredibly beautiful, compassionate, supportive and intelligent daughters Astrid, Erin and Greer. You have grown up knowing the importance of education and you make it possible for me to achieve my goals. You bring me joy and I am incredibly blessed to be your mother. I could not have done this without your support. Thank you.
- To my parents, Graham and Valerie. I know you would be proud. Thank you for teaching me the value of education. *"They can never take away your education"*. I kept my promise.
- To all my lecturers at Massey University, Palmerston North, over the past four years. You have been part of my academic journey. Thank you all.
- To my colleagues and friends, who encouraged and supported me to keep focused on completing the task. I learn so much from you.
- To Ray, for making the time to patiently proofread this thesis. Thank you very much.
- To Jillian, whose patient, compassionate and gentle spirit epitomises the perfect teacher.
- To Goldie, my warrior. You will never know how much you mean to me.

Ehara taku toa, he takitahi, he toa takitini

***My success should not be bestowed onto me alone, as it was not individual success but
success of a collective***

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