

F O R E W O R D

Editorial: a focus on Post-Graduate specializations

At the University of Studies of Parma (Department of Medicine and Surgery) several Post-Graduate specializations, specifically dedicated to the health professions, have been active for many years.

Most of them are 1st level Post-graduate specializations, such as: the Post-Graduate specialization in “Case / Care management in the hospital and on the territory for health professions”, the Post-graduate specialization in “Palliative care and pain therapy for health professions”, the Post-graduate specialization in “Management of risk of infection related to health care”, the “Post-graduate specialization in critical area”, the Post-graduate specialization in “Expert in innovative educational methodologies in the social-health field”. Others, such as “Training strategies in the social and health environment; European standards and innovation” are instead 2st level Post-Graduate specialization.

Despite the heterogeneity of the topics covered by these Post-Graduate specializations, they all share the same vision. In particular, the rationale underlying the shared vision is given by the fact that the Post-Graduate specialization is a type of highly specialized and high profile training and that the participants who attend these study programmes are professionals with a previous work experience and know-how. This is the starting point for training and can also represent a personal contribution to the dissemination of ‘knowledge’ among professionals, when favored.

The vision, therefore, develops around the following seven transversal macro areas.

1. Cultural development of participants: the research. Although the Post-Graduate specializations for the health professions are essentially professional, it’s considered essential to act also on the ‘professional culture’ of the course attendant. The main tool (among others) is research activity, which is particularly important in these Post-graduate specializations. The research activity consists in elaborating in small groups, starting

from a specific issue, a research project/protocol, submitting it, if necessary to the Ethics Committee and then working to collect data, process it and write the final report, which will constitute the Post-Graduate specialization’s final dissertation. This research activity is preceded by a brief introduction to research methodology followed by on-site training, monitored by tutors who are research experts (mostly PhDs), supported, where possible, by sector experts working in clinics or in the field. On several occasions the works produced are submitted to field-related conferences (e.g. ANIARTI, SICP, SIPeM) and can also be disseminated through scientific publications. In particular “Acta BioMedica Health Professions” publishes numerous research papers of the various Post-Graduate specializations.

2. Orientation of the Post-Graduate specialization to the assisted person and his/her family and not only to the clinical case. An important space, especially in clinical Post-Graduate specialization’ programmes, is given to the assisted person and the family as a ‘single core’ of care. In line with the biopsychosocial model, physical, emotional, social and spiritual factors in different proportions play an important role in every illness. The health professional’s task is therefore to recognize not only the organic components, but also the psychosocial and spiritual processes involved in the disease and to take these into account. Whether psychosocial stress is present can be clarified by the doctor only in the framework of a psychosocial anamnesis. This describes the interactions among the biological, psychological, social and spiritual processes, integrating the disease with illness and sickness. The approach to an advanced assessment of needs of the ill person is thoroughly explored, considered in his multidimensionality, using also relational tools, such as the patient’s agenda (that is the evaluation of expectations, wishes, ideas and interpretation of the condition of each individual and the analysis of the context in which the person is living in) and the

narration (made up of an interview with open questions to the person carried out by professionals with competences in the use of this tool) to collect in-depth the personal needs of the 'care core'. Necessities ranging from the more properly bio-physiological dimension (e.g. changes to needs such as feeding, hydrating, resting, moving), to the psycho-socio-value dimension (e.g. coping strategies, resilience, need for communication/relationship, to co-construct one's own treatment plan, the modification of one's own body image or self-perception in illness and the meaning attributed to the new condition of life.

In this sense, an engagement dimension is tackled, not only of the ill person, but also of his/her family and the curing team. For this purpose, there are already present in literature, also in Italian, assessment scales of to which extent the ill person, and his/her main caregiver, as well as the professionals can be engaged. By using these and other tools, we can hypothesize a growth of all the actors of the care team (ill person, family, professionals) through which the ill assisted person can really create and share with the curing team his/her own cure and the caring project.

3. Orientation to skill development. The Post-Graduate specialization programmes for health professionals must be oriented towards developing skills that are used on the field. The work on the expected skills for each Post-Graduate specialization (and not only on learning objectives) is an activity in progress that involves all the training staff, as well as the participants. The internship is the privileged (but not unique) field of development of clinical, interpersonal, and educational skills. The traineeship thus becomes a privileged moment of learning, especially if carried out in an accredited and quality-approved place. Traineeships are planned together between learner and tutor, also in relation to the training programmes offered by the affiliated centers. Some traineeship is organized abroad, upon request of the participants.

3.1. Relational skills and team work. Training for the development of communication skills and basic relationship to the assisted person and the family and within the multidisciplinary team, are then dealt with, in each Post-graduate specialization, according to the specific features of the intervention context of the Post-Graduate specialization. In relation to these specific

skills, communication laboratories are active for each Post-graduate specialization, and are held in settings equipped and managed by experienced professionals. These laboratories are mainly activated with role-playing on cases identified by the learners themselves, reinterpreted and discussed by them, with peer supervision and experts.

3.2. The strengthening of *light and sophisticated skills*, more widely known as "soft skills", and the consequent improvement of these skills in the social-health sector, is one of the crucial elements for health-care development, intended in its meaning of care relationship towards the patient. The correct use of these skills entails knowing how to implement techniques to make them effective. The combination of these techniques, when it fills the toolbox available for the healthcare personnel, can be defined by the term "light and sophisticated technologies." Analyzing methods and practices to enhance the skills related to patient orientation, such as example, group work, emotional communication and persuasion, team building, empathy and assertiveness, developing and improving a holistic approach (in the sense of "soma" and "psyche" care) towards the patient using the light and sophisticated technologies is one of the objectives of the Post-graduate specialization's study programme.

4. Personalisation of the study programme. We are convinced, and the experience confirms it from year to year, that each group of Post-Graduate specialization students is different from the others and from those of previous years. For this reason, together with the co-construction of the curriculum, are also used other tools that can help to build a classroom profile that is very useful for teachers who will intervene in the training course. The mostly use tools are given by an analysis of training needs, which is carried out on the first day of the Post-graduate specialization's program; this becomes very useful for recalibrating the development of the study programme. For the research, considering the heterogeneity of preparation, a not evaluative *entrance test* is prepared. This help to calibrate the intervention of the teachers on the research. Another important tool is the *autobiography* that requires the student to carry out a reflective writing of the undergoing experience. Autobiography is requested at the beginning of the Post-graduate specialization, in itinere and at the conclusion,

providing also important elements of evaluation of the Post-Graduate specialization itself.

5. Co-construction of the curriculum. The educational programs of the Post-Graduate specializations, by choice, are never predefined, because every year there are improvements to be made, based on the evaluation of the previous year and because the students should feel protagonists of their training, even suggesting specific areas of interest that can be included in the study programme. This dimension is then particularly developed for internships: various opportunities are offered, but the student can suggest and choose, also in relation to the skills already matured, venues that may not even be included in the standard study programme.

6. Use of on-line platform. Each Post-Graduate specialization makes use of an online information infrastructure that allows learners, tutors and teachers to share resources communicate, collaborate at distance, and “increase” classroom teaching activities. The university platform dedicated to post graduate studies (<https://elly.postlaurea.unipr.it/>) can therefore be used both to support teaching and for horizontal collaboration between students, creating in the era of social networks an added value to training in terms of acquisition and getting familiar with *soft skills*, as well as *problem solving* and *team-based learning*. The use of digital for the participants of the Post-graduate specializations allows not only a prompt consultation of the updated resources available to the learner, but also to make learning global and social as a shared experience in a hybrid context of virtual communities of practice. The use of one’s own devices as network access points is preferred. Finally, an online virtual laboratory with solutions for augmented and virtual reality is also available to learners, as well as an open archive that students can use to share resources and create web pages.

7. Inter-professionalism. All Post-Graduate specializations are open to inter-professionalism (with the exception of the one in “Palliative care and pain therapy for health professions”, regulated by law), among health professions, but also including professionals in humanistic disciplines. This choice is motivated by the fact that professionals of different areas, never met in their training courses, later have to work together, and are not prepared for this. Currently, the choice of inter-professionalism is not a choice that has brought signifi-

cant results, since the classrooms are still predominantly mono-professional, and are especially nurses. However, with the aim of going in this direction, opportunities have been created, within the training path, to meet other educational institutions and other professionals in training. Among them, for example, seminars with the participation of several Post-graduate specializations were organized, and above all has been tested the development of inter-professional Education, in which the Post-graduate specializations students were actively involved. The Inter- Professional Education is in fact considered as one key factor in the development of positive behaviors in the context of health care. In particular, the post-basic training is a key moment to raise awareness, train and help Post-Graduate specialization students to Inter-professional Collaboration.

Starting from the importance of teamwork, of the co-construction and above all of inter-professionalism, the use of innovative laboratory of Inter-professional Education was promoted. As will be specifically described in a contribution of this issue titled “Inter-Professionalism In Health Care Post-Basic Education: An Innovative Laboratory”, the participants of different Post-graduate specializations were able to collaborate to reach a common goal, thus promoting the Inter-professional Collaboration.

It seems important that even in scientific journals, such as this one, value is given to pedagogical aspects, and to innovative educational and learning strategies that are closely related to the quality of care and services.

Attention to the quality of training is a significant requirement, not only in relation to patient satisfaction, but also in function of the strategic importance of the development of certain professional skills in a context in which the demand for health takes on increasing complexity.

The broader aim is thus to foster a new culture of medical pedagogy which, dealing with the training of health personnel, produce measurable improvements in health services, as well as the development, the coordination, the enhancement of knowledge, research and studies, spreading the principles of this discipline in the training of health professionals.

Giovanna Artioli, Chiara Foà, Leopoldo Sarli