



Norwegian Centre for  
E-health Research

# Use of Electronic Tools in Norwegian FACT Youth Teams: A User Perspective

Erlend Bønes, Conceição Granja, Terje Solvoll

Norwegian Centre for E-health Research, Tromsø, Norway

Nord University, Bodø, Norway





# Erlend Bønes

- PhD student
- Employed at the Norwegian centre for Telemedicine from 2002-2015
- Employed at the University hospital of North Norway from 2016-2019
- Experience with e-mental health projects





# Introduction



# What is FACT?

- Flexible Assertive Community Treatment
- Developed in the Netherlands, implemented in several European countries
- Long term, integrated care to people with severe mental illness
- Multidisciplinary teams, aiming to cover as many services as possible





# FACT youth teams

- Teams that target patients aged 12-25 years old
- Teams should have a leader, coordinator, child and youth psychologist, child and youth psychiatrist, family therapist, user specialist, and a work/education specialist
- At the time of the study there was 3 FACT youth teams in Norway



# FACT youth teams

- Traditional services have had problems reaching youths with complex issues
- Unclear responsibilities and a lack of integration of services



# ICT solutions in FACT youth teams

- Electronic whiteboard
  - Patients in need of intensive follow-up are displayed on the whiteboard
  - Patients who are more stable receive individual case management
- Electronic health records
  - In Norway, there are different EHR systems in primary and secondary care
- A study has shown issues with ICT solutions for FACT teams targeting adults



# Method





# Method

- 3 teams included
- Semi-structured interviews
  - Interview guide
  - Presented use cases as a starting point for open-ended discussions about the use of ICT solutions
- Preliminary data analysis



# Results



# Electronic whiteboards

- Standalone solutions made in Microsoft Excel
- No integration to the EHR or other solutions
- All 3 teams would like the whiteboards to have integration to the EHR or be a part of the EHR
- Teams wish for larger focus on family and network in the whiteboards



# Electronic whiteboards

- 2 of the teams want to extract statistics from the whiteboards
  - Number of patients, number of patients on compulsory treatment, number of patients with specific diagnoses, number of patients who get follow-up from child welfare services
  - Want to justify their funding
- Want to see deadlines related to standardized patient pathways and treatment plans on the whiteboard



# Calendars

- Several solutions in use: EHR, Outlook for specialist care, Outlook for primary care
- Would like a common calendar to coordinate the team
- Some degree of safety in knowing where the team members are



# Electronic health records

- For FACT youth teams there is a dilemma about what should be written about family members in the EHR.

*“This is a very large discussion, that we discussed for many, many, many hours in mental health for children and youth. It is not irrelevant if Mom has her issues, when the children are in the condition they are in. It is hard to know how to balance it. What can be written in the child’s journal, that the child at some point will have access to.”*



# Discussion



# Discussion

- There are several issues with the EHR solutions of FACT youth teams in Norway, mainly related to integration and access to data
- Many of these issues are the same for FACT teams targeting adults
  - Larger focus on family and network in youth teams
  - Improved ICT solutions for should be able to serve both types of teams





# Study limitations

- Only 3 teams included



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Erlend Bønes

PhD candidate

Phone: +47 976 55 680

E-mail: [erlend.bones@ehealthresearch.no](mailto:erlend.bones@ehealthresearch.no)

