

SPIDER: Self-regulated learning Promoted by learning In and from Diverse nEtwoRks. Designing networked learning in two primary care contexts.

Primary care is traditionally embedded in both community and health care systems. The complexity of problems in primary care has increased due to e.g. demographic changes, multimorbidity, overflow of care from other specialties, technical possibilities and consecutive ethical dilemmas. Contemporary views on healthcare adopt a health-based oriented vision (positive health), with focus shifting from a disease-oriented approach towards a patient oriented approach in networked care. Furthermore, the concept of value-based healthcare (a combination of received value from healthcare and the balance of value and costs) asks for collaboration in networks, including patient's networks. Such developments require additional competencies for GPs, including better and new ways of collaboration within both medical and public health networks. It requires (future) GPs to continue to learn throughout their career.

The recently updated national GP training plan states that 'Purposeful use of networks creates additional opportunities for self-regulated learning (SRL) and can contribute to promoting lifelong learning'. Therefore, we consider it relevant to add networking perspectives to primary care education and to explore how these perspectives contribute to the fifth aim of the research agenda of Huisartsopleiding Nederland (lifelong learning GP). Although care is moving towards networked care and networked learning has been acknowledged in the revised national GP training plan, it is not known how GP-trainees optimally profit from SRL in and from networks. Little is known on how to promote and facilitate networked learning in the context of a distributed learning environment such as the GP training program. It is unclear what added value promotion of networked learning actually has for trainees, including development of life-long learning professionals. In this research proposal we aim to explore perspectives and possibilities regarding learning in and from networks from a social networking perspective, resulting in the following objectives:

- To describe the body of knowledge in scientific and grey literature on the contribution of networks to the learning process of GP-trainees
- To explore the way GP-trainees learn in and from networks in the context of prevention and End-of-Life Care (EoLC).
- To define unused opportunities to learn in and from networks and to develop educational interventions to capitalize opportunities in the context of prevention and EoLC.
- To implement and evaluate educational interventions

We will study learning in and from networks in two contexts where networking is relevant from a societal perspective (theme 2 from the research agenda): prevention and EoLC. These two different settings have specific characteristics. In prevention the network consists of partners in the allied health professional- and public health domain. Learning how to connect and access these networks is needed to optimise personalised preventive care and to reduce inequity and limited accessibility. GP-trainees have to balance between societal demands (focus on primary prevention) and core-tasks as set by the professional body of GPs (indicated personal prevention). In EoLC network-partners are found in the social network of the patient, in the hospital, in spiritual care and in community nursing. The normative positions of network-partners may vary and may lead to moral tension. The GP-trainee has to learn how to balance perspectives, including her own, in the strive to a dignified death for the patient.

In co-creation with GP-trainees, GP-trainers and teachers we will explore possibilities to further develop learning in and from networks. Following the steps of analysis, design and evaluation we will develop educational interventions to enhance SRL learning in and from networks.