

An Interview with Lise Lotte Bundesen, Managing Director of the Ida Institute



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The Ida Institute is an independent, non-profit organisation located in Denmark and funded by a grant from the Oticon Foundation. Here Audiology Matters Editor, Amanda Casey, speaks to Lise Lotte



The Ida Institute building, Naerum, Denmark.

Bundesen, Managing Director of the Ida Institute, about her role in developing the Institute and its key aim to positively impact hearing impaired persons and hearing care professionals around the world by making patient centred care the core of hearing care practice.

What has led you to your involvement with the Ida Institute?

In 2007, the Oticon Foundation approached me with a concept to establish an educational institute that would be funded with a generous grant from the Foundation. They saw my experience as the initiator and driving force behind the progressive environmental activities and policies of global healthcare company, Novo Nordisk, and felt that I would be qualified for the challenge of shaping and directing the new institute.

I enthusiastically accepted the challenge. How often in life do you get the chance to start something from scratch – with the funding already in place? I also felt as if all my previous experience in the fields of strategy, communication, environmental affairs, ethics and social responsibility would come together and be useful in this one new endeavour.

What do you think have been the biggest challenges in developing and establishing the organisation?

Early on, I recognised the need to establish the Ida Institute as an independent, non-profit institute. An independent status would inspire confidence that innovation, change and free access would not be limited or shaped by other agendas. It was important that hearing care professionals from around the world accepted Ida Institute as a credible, independent voice to help affect positive change within the profession. The Institute was formally established as an independent non-profit organisation in June, 2008.

In order to help build credibility, we also formed our first Advisory Board in 2008. It consisted of respected thought leaders in hearing health to consult on Institute strategy and initiatives. The distinguished Advisory Board members brought a depth and range of expertise that enabled us to ready Ida's first seminar series and plan for future initiatives. I am forever grateful to these people who lent us their credibility in the beginning. Today, our Advisory Board consists of several of the original members as well as new members. It continues to

provide valuable counsel and support as the Institute expands into new arenas of audiology and patient centred care.

I was determined that the Ida Institute would bring a unique value to hearing care. My thinking was clear on this. If we could not create something that was unique, why do it?

Finally, collaborative development had to be at the heart of everything we did. It would not be credible to go out and tell people what they should do differently. We had to work together with the people in the field of audiology to identify unmet needs and determine how to create change.

To help bring this vision to life, I recruited a dedicated, multi-disciplinary staff that brought the strengths of experience in various disciplines to the process of establishing and launching the Institute.

You have developed a number of resources for audiologists to use in practice. How have you identified what tools would be useful and what processes have you used to create them?

The Ida seminars are mini think-tanks that bring together the experience of audiologists from around the world with a variety of perspectives from our faculty members. Each seminar is a creative, open-ended innovation process that emphasises active listening, active engagement and reflection through the use of ethnographic videos, mirror exercises and reflective journaling. The strength of the seminar is connecting current knowledge and the real-world experience of audiologists and then co-creating new solutions. In this way it is a bottom-up, creative innovation process, based on experience and reflection on own practice. It is creating solutions for audiologists by audiologists.

Themes emerge from the seminar series. We may then combine similar tool ideas or have one main tool idea and develop other ideas as constellations around the tool. This has led to the development of a comprehensive Ida toolbox for audiologists to reflect on their own patterns of behaviour and facilitate desired changes in their clinical routines.

How have you arrived at these themes and what changes were you hoping to see arise from their exploration?

Through conversations with clinicians all over the world, via tool development, Ida workshops and seminars, ethnographic field visits and observations in clinics, we get a sense of the themes or issues that are current / topical / challenging within the profession. We discuss these ideas with our Advisory Board, and together we build and expand on these ideas to create inviting and thought-provoking topics for our seminars.

For the actual development of a specific theme we work with a faculty of experts from around the world, who contribute their considerable knowledge, insight, time and enthusiasm before, during and after a seminar.

What differences do you notice between different countries' approaches to audiology?

There is no doubt that each country and region brings its own set of challenges, because they work within different cultural and organisational frameworks and in various contexts – commercial, medical or biopsychosocial. At the same time, people recognise that wherever you are in the world, the situation that professionals are in when they're in front of a patient is basically the same.

A universal theme that we come across time and again, is the need to manage the human dynamics within a consultation and the thirst amongst professionals to share their experiences and stories with each other. Seminar participants see an enormous benefit in being part of a global community and network to continue to build knowledge in the profession and be part of a collaborating community.

Globally, there is an ever-increasing move to a patient / person centred approach that focuses on patients and their needs, values and expectations. Our work seems to be adding fuel to this shift within the field.

How do you think the Institute is helping to bring about organisational or cultural change in hearing care?

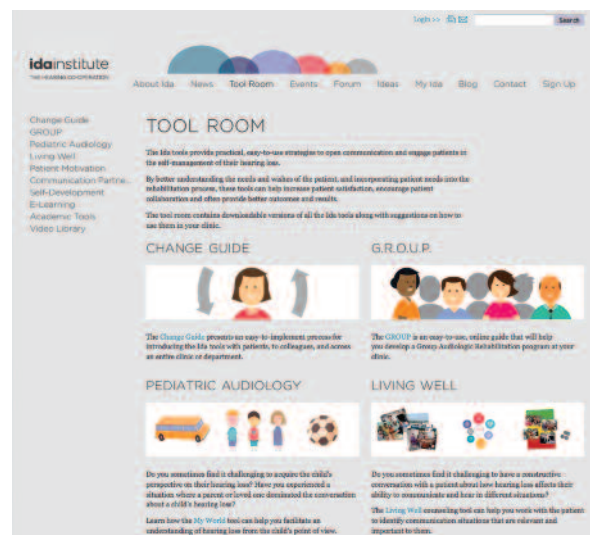
In our conversations with the audiology community a recurring theme is the changing nature of the profession within the shifting landscape of the world of healthcare. Our experience has been that making significant changes in practice worldwide has been challenging and complex.

We facilitate innovative processes where professionals have the opportunity to collaborate with each other and explore new possibilities. We enable them to be creative in generating solutions together – to think outside the box or to imagine possibilities beyond the constraints of the framework in which they work. This collaborative process seems to energise the community, and has generated a number of tools and processes to support patient centred care. But participants have also discovered an enormous renewable energy source, which is a worldwide community of audiologists who may have some cultural differences, but who share many common concerns and a united desire to better address the needs of their patients.

What feedback do you get on the use of the Ida tool?

For some practitioners our tools are a new way to approach patients, for others they are a way of enhancing their practice. The tools seem to have a broad appeal to professionals; they are used extensively in universities and integrated into their courses. Some universities have even used our website and forum discussions for university assignments and a number of universities have used our university course.

Independent private practitioners have used the resources and tools for their own practice but also to 'brand' their approach to patients with their employees. Some of the self-development tools, such as the reflective journal, have been used to facilitate staff discus-



The Ida Institute Tool Room, available from www.idainstitute.com

sions, peer mentorship and group collaboration within a practice. There are larger hearing aid dispensing chains that use our tools routinely in staff training and for new recruits.

As a non-profit organisation, we rely upon our engaged, active, global Ida network to share their experiences, successes and challenges. We continue to explore strategies to collect and present feedback and outcome in a more structured way so that we can better understand how Ida can become a more effective and valuable force for change in hearing care.

What do you hope to achieve in the next five to 10 years' time?

Much has been accomplished – but there is still a lot to do! We are currently working on our strategy for the next three to six years. Reach and impact are very high on our agenda. We are exploring how we can scale our activities to reach more people than we do today. We are also looking to better engage and mobilise a larger community more actively from a distance – for example via webinars, co-creation challenges and online learning groups.

We expect to create a Speaker's Bureau that would support Ida community members with their speaking engagements – for example, by providing materials, speakers notes, videos and other support materials – as well as provide a showcase for their presentations. With time a growing factor for practitioners, we are creating Quick Tools, 1-page versions of the original Ida tools that can be both effective and time efficient.

Ida Institute will continue to collaborate with the global community to foster a better understanding of the human dynamics associated with hearing loss. Our goal is to work towards making person-centred care the standard in the field of audiology by making it easier, more comfortable and more time realistic for practitioners to bring the patient's perspective into the clinical setting.

To find out more about the Ida Institute Toolbox, go to www.entandaudiologynews.com/assets/Uploads/Pdfs/ENTMJ13-Ida-toolbox.pdf to view exclusive content for ENT & audiology news readers.



Interviewed by
Amanda Casey,
Director of Audiology Programmes,
Aston University, Birmingham UK.
E: a.e.a.casey@aston.ac.uk