CONFERENCE ABSTRACT

Reablement in Flanders: An exploration of the Flemish context. Voices of those receiving care.

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Introduction: The primary care sector in Flanders, Belgium is undergoing an intense period of reform. Care is shifting from acute, disease oriented care to chronic, integrated care to incorporate health, well-being and quality of life.

There is a need to understand and describe the chances for and barriers to reform of primary sector care services. Reablement is an approach, or service model, that has been researched to a gold standard in different countries worldwide, and can be described as a multidisciplinary short term community based service aimed at helping people who receive home care to be more independent with their daily activities and to participate more in their wider communities. Results show cost savings, reduced readmission to hospital and reduced admissions to nursing homes as well as increased satisfaction for the client in their everyday meaningful activities.

There is a need to understand the context in which a reablement service could occur by illuminating the daily living experiences of people who are living at home with a chronic condition and who are receiving paid home care in Flanders, the potential reablement service users. This study starts with describing the effect receiving home care has had on their daily lives, what their feelings are about this and whether the person had been able to continue to engage in their meaningful activities of daily living at home and in their wider communities.

Methods: This qualitative design study utilises a phenomenological, epistemologically based approach in order to capture individual experiences. From data gathered through individual interviews, the aim was to illuminate the lived experiences of older people with chronic conditions and what it means to receive paid care at home. This study therefore adopted an Interpretative Phenomenological Analysis (IPA) methodology as this approach is particularly suitable for understanding the lived experience.

Results: 6 interviews, resulting in 6 hours of data were analysed. 9 themes were generated which illuminate the persons experiences, these themes are also reflected in the principals of person centred care and goal oriented care.

The person receiving home care described how the system works means they feel powerless when regarding decisions around their care. The need for flexible and dynamic care was highlighted as was the persons need to engage in activities outside their home together with people they know. The person receiving care described how understanding them and who are they are is integral to good care, and that what they do is part of who they are and this needs to be taken into account by those providing care.
Discussion and conclusion: This is the first study involving stakeholders in primary care in Flanders that looks at the chances for reablement.

Working with national care providers we now aim to conduct Reable-Labs in different primary care settings in order to provide real life examples of reablement and its outcomes in the Flemish sector.