POSTER ABSTRACT

Older People and Carers’ experiences of ‘Hospital-at-Home’

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Introduction: Hospital at home (HAH) is an acute model of care that provides episodes of care to acutely unwell persons in their usual residence, i.e., their own home or in a care home. Providing intense and integrated care and treatment packages enables people to remain in their familiar environment and avoid the potential harm from in-patient stays.

Background Research: Currently, hospital-at-home research in the United Kingdom and internationally is limited regarding the lived experiences of older people and their unpaid carers. When older people and carers are excluded from research or not considered, we cannot understand how their experiences of services impact their everyday lives. The research also provides insight into how professionals can support people outside of hospitals more effectively by integrating this care model with other statutory services, such as social care, occupational and physiotherapy. Hospital-at-home initiatives can potentially reduce the risks associated with hospitalisation, such as infection, mental health and physical decline. Older people, carers and health and social care professionals may find this exciting and helpful research.

Involvement: The research is nested into a wider research programme which people with lived experience have framed. There is also a panel of people with lived experience of receiving adult social care and those who support them, all of which form the approach to public and patient involvement.

Data Collection & Methodology: There will be approximately 65 participants in this qualitative study, including health and social care staff, older people, and unpaid carers. All participants will be offered a one-off 60-minute semi-structured interview allowing them to respond in their own words. This contrasts with previous HaH studies in the United Kingdom that rely on fixed yes or no responses in surveys or questionnaires. Inductive Thematic Analysis is being used to analyse the data. As the data collection and analysis is still in progress, results are not fully concluded; however, the aim is to have themes fully developed from the data before the conference in May 2023. Some initial themes have emerged from the interviews with professionals, including risk, person-centred care, communication, and service delivery.

Findings: The findings will create learning opportunities for an international audience, for example, concerning effective interprofessional working and person-centred care in HAH. Indeed, there is evidence of international HAH models in the literature review so that any new learning can be cascaded internationally via this conference. For example, when referring to communication, there could be an effective communication system developed at the point of discharge from HAH back to the care of their general practitioner, as this is an area of concern emerging from the professional interviews. The next steps will be to complete the research and
give feedback to the local site in England where the research is taking place and to the Applied Research Collaboration (ARC) that has funded the research. This will highlight ideas and improvements for the future of community-based health and social care for older people and their carers.