

POSTER ABSTRACT

Flexibility and reablement in home care in dementia

18th International Conference on Integrated Care, Utrecht, 23-25 May 2018

Mairead Bracken-Scally¹, Anne-Marie Brady¹, Louise Daly¹, Geralyn Hynes¹, Brian Keogh¹, Brendan Kennelly², Mary McCarron¹

1: Trinity College Dublin, Ireland;

2: National University of Ireland Galway, Ireland

Introduction: The Health Service Executive HSE and Genio provided funding to test out innovations in community care with the overall aim of enabling people with dementia PwD to remain at home for longer and prevent unnecessary hospital presentation. Two of these sites were independently evaluated using an exploratory mixed methods approach underpinned by the RE-AIM framework Glasgow et al. 1999 to assess reach, effectiveness, adoption, implementation and maintenance of project aims.

Short description of practice change implemented: Project One: Resources were focused on the provision of additional flexible home care hours for PwD and their informal carers. Hospital discharge was facilitated through provision of enhanced home supports including additional hours of home care and assistive technology. Additional dementia-focused education was provided to service providers.

Project Two: The project focused on reablement of PwD and provided flexible, person-centred home care supports from within existing resources and assistive technology. Dementia-specific training was provided for service providers. Community supports developed were intended to be integrated into new care planning processes being developed.

Aim and theory of change: To improve service provision and quality of life for PwD and their family carers through the provision of enhanced supports.

Targeted population and stakeholders: Both projects targeted those living at home with advanced dementia and their family carers. Awareness and education events were targeted at service providers with regular contact with PwD.

Timeline: Each project ran for two year period.

Highlights innovation, impact and outcomes: Despite a high burden of care documented, care requests made by family carers were relatively modest. Recognising and assessing the PwD and their family carer as a dyad enabled the delivery of a more personalised service. Reablement activities, where used, were viewed very positively and were associated with maintaining ability and creating the potential for enjoyment and social connectivity.

Comments on sustainability: National developments in the provision of community care services critically impact on the sustainability of these types of interventions. A cultural shift is required in order for an ethos of person-centred, individualised care with both the PwD and their carer in mind, to continue.

Comments on transferability: The unique context of care delivery in each of the community care areas is a potential risk to transferability.

Conclusions: Provision of innovative approaches to dementia care in the community proved extremely complex due to the range of stakeholders involved and their capacity to respond to the project's needs. There were also challenges derived from wider systemic issues affecting the provision of home support services throughout the county. Notably however, the provision of additional home supports was of value for PwD and family carers. The provision of additional, flexible and more responsive home support hours is critical to enable the PwD to remain at home for longer and to support family carers. Flexibility in the provision of community care services, especially regarding weekend services and block hours of care, should be considered to meet the needs of the PwD and carer to support the PwD to remain at home.

Keywords: dementia; integrated care; community care; service development; reablement
