

Person-Centred Care in an Australian Hospital Avoidance Program: A Qualitative Study of Participants' Experiences

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Context

- Hospital avoidance programs aim to **reduce hospital demand** for people who present frequently to hospital.
- Programs are **characterised** by early identification of target population, care coordination, service integration, enhanced access to primary care, multidisciplinary teams, and disease management.
- A **core principle is person-centred care** enabled by a collaborative and respectful relationship between the provider and person.

Our Program

- **Monash Health:** largest public health service in Victoria, Australia, offering primary, secondary, and tertiary health services to 1m people.
- **Complex Care program** supports people frequently presenting to hospital to get back to the community through a structured and proactive approach.
- Care coordinators, nurse practitioners, physicians, and allied health work as a team to meet the needs of people with **chronic heart failure, chronic respiratory failure, and complex psychosocial needs.**



Monash Health catchment map

Aim

- Little is known about the **experience** of people with chronic and complex needs in this and similar hospital avoidance programs.
- **We aim to examine the extent to which person-centred care is incorporated into the Complex Care program.**

Methods

- **Design:** phenomenological qualitative approach.
- **Participants:** purposive sample of 19 staff and 26 recent clients.
- **Data collection:** semi-structured interviews.
- **Data analysis:** Braun & Clarke's thematic analysis¹ with a lens of the principles of person-centred care.

Preliminary Findings

- Recruited **19 staff:** 17 interviewed (care coordinators (10), allied health (2), team leader, program manager, chronic disease nurse practitioner, chief experience officer, physician).
- Recruited **26 clients:** 23 interviewed, 3 declined.
- Interviews will be completed by November, 2018.
- Staff and clients agree on what is most important to clients: **be listened to and informed about their health condition.** Prior to the program, clients had not experienced this in other health care encounters.
- The program underwent **considerable organisational change** to deliver services based on clients' needs and preferences, using data and clinical guidelines to improve accountability and client outcomes.

Next Steps

- Findings of interviews will inform further exploration of person-centred care in this program through **analysis of the medical records** of the clients interviewed, **observation of the specialist clinics** attended by clients, and **document analysis** of key program and policy documents.

Mandy's Experience (Client)

"They all talk to me and treat me like I'm a person, because I'm not just a sick person, I'm a mum and I'm a member of this community ... I'm not just patient 70621 that has lots of complex issues, I'm Mandy, and that's really important."

Ashley's Experience (Staff)

"Patients are the driving force behind those care plans, so it's what their priorities are and what matters to them ... you don't really get success with patients if you're writing down things that you think should be important for this patient, without asking them what it is they really want."

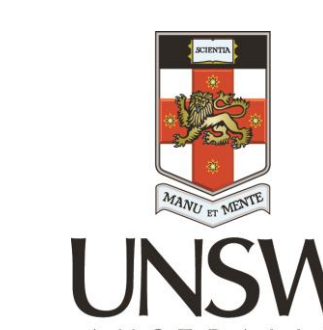
References: [1] ¹Braun V & Clarke V. 2006. *Using thematic analysis in psychology*. Qualitative Research in Psychology, 3, 2, 77-101.

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