



Karolinska Institutet

Institutionen för neurobiologi, vårdvetenskap och samhälle,
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Discharged from Hospital and in need of Home Care Nursing – experience of older persons, their relatives and care professionals

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ABSTRACT

Background and aim: The discharge process (DP) is full of well-known risks. The general aim of this thesis was to shed more light into how different stakeholders experience the DP and evaluate the older persons' and their relative's preparedness for life at home after hospital discharge.

Materials and methods: Both qualitative (Studies I, II, IV) and quantitative (Study III) research methods were selected. In Study I different care professionals (n=32) were interviewed in eight focus groups. Study I used a phenomenological method. In Study II older persons with home care nursing (HCN) and their relatives (n=26) were interviewed, and a grounded theory method was used. In Study III data were collected through a questionnaire among older persons and their relatives (n=152) and the questionnaire's psychometric properties were evaluated. Study IV was based on the data in Studies I and II and used an excursive interpretation based on a phenomenological approach and reflective lifeworld research.

Results: The older persons and their relatives, as well as the care professionals, viewed the DP as ambiguous. Care and planning were described as fragmented. Three themes were important for care professionals' cooperation, actions and the outcome of the DP, but also associated with various difficulties and problems. The main concern of the older persons and their relatives was worry about not being sufficiently prepared for life at home. A theoretical model was created that illustrates whether the older persons and their relatives felt prepared or unprepared for life at home at discharge. The care professionals' skills were shown to be of utmost importance to satisfy the preparatory needs of the older persons and their relatives in three significant areas. The questionnaire showed that fifty-three per cent of the older persons and their relatives reported being insufficiently prepared. Factors associated with being insufficiently prepared were poor health at the time of the discharge and not asking for information. The DP is shown to be a critical event with illness making the meaning of life's fragility abruptly explicit and an unpredictable threat to getting on with one's life. The DP is characterised by experiences of being *in-between* that is *contextual*, *bodily* and *existential* for the older persons and the relatives accentuating their vulnerability. The relationship with care professionals and others, bodily conditions and life circumstances influence the *in-between* experience. Without the professional support and cooperation among them in the DP, the older persons run the risk of being lost and powerless throughout the DP.

Conclusions: The DP deeply affects older persons and their relatives. When care professionals use a disease-led approach in their encounter with older patients and follow solely medical routines, they may lose focus on the patients' health processes. The older persons' and their relatives' experiences of exposedness and vulnerability due to illness, bodily, existential or contextual uncertainty indicate a threatening existence in the DP. The older persons and their relatives can easily be lost in an *in-between* experience illuminating the difficulties embedded in the illness, care and the DP in an older person's life. Care professionals need to acknowledge the individual and their everyday world and give follow-up support at home. This would make the DP a strong bridge between the hospital and home. The PPLH questionnaire developed from the theoretical model can be used to provide information that may prove useful in improving the DP from the perspective of older persons and their relatives and also as an assessment tool to identify and satisfy needs among older persons and their relatives both at hospital and at home.

Keywords: discharge process, older persons, health, home care nursing

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