Perceptions and experiences of residents and relatives of emergencies in care homes: systematic review and meta-synthesis

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Our aim

To provide a comprehensive synthesis of the perceptions and experiences of care home residents and their relatives, who have experienced medical emergencies in a care home setting
Methods & Results

- ENTREQ guidelines - Review protocol registered on PROSPERO
- Searched 5 electronic databases - Qualitative and mixed methods studies
- Inductive thematic analysis (Thomas & Harden, 2008)
- CASP Qualitative Checklist
- The search strategy identified 6,140 citations
- 10 studies, published between 1989 and 2020, from four countries (Australia, Canada, UK, USA) were included
- All included studies were considered of acceptable quality
Theme 1: Infrastructure and process requirements in care homes to prevent and address emergencies

Issues encountered:
• lack of experienced/knowledgeable nursing staff
• poor access to medical advice & diagnostic facilities
• staff shortages

Theme 2: The decision to transfer to hospital

• Ambivalence among residents and relatives about transfer to ED
• Residents felt they were not always consulted
• Differences in perspectives of residents, family members and staff led to conflict in transfer decisions
• Financial barriers to transfer
• ED was often felt to be the only safe option
Theme 3: Challenges of transfer and hospitalisation for older patients

- Residents felt safer transferred to an ED for urgent care, but viewed it as busy, chaotic and demanding; felt ignored or forgotten
- Relatives concerned that resources were inadequate to provide care to older patients
- Relatives felt they had an important role in the ED as advocates and medical historians

Theme 4: Good communication vital for desirable outcomes

- Information sharing and communication were important, but not always clear or adequate
- Relatives felt confident in nursing staff to communicate with them and welcomed the information provided
- But felt lack of communication between professionals/organisations was a factor in transfers to hospital and was perceived to have adversely affected patient safety.
Theme 5: Legal, regulatory and ethical concerns

- Relatives had an important role as advocates for residents
- But felt healthcare staff sometimes ignored their legal authority
- Ethical concerns included end-of-life decisions, which they found particularly challenging aspect of their role
- Relatives were aware of advanced directions, but these were sometimes considered less relevant

Theme 6: Trusting relationships enabled residents to feel safe

- Positive relationships engendered trust and lead to better care and positive outcomes
- Trust in the trained professional looking after them also helped residents feel safe
- Trust sometimes was sufficiently important to excuse adverse events
Conclusions

• The emergency care experience for care home residents can be enhanced by ensuring resources, staff capacity and processes for high quality care

• Important factors:
  • Building trusting relationships, underpinned by good communication
  • Attention to ethical practice