Modelling partnerships for change in care placements: mapping opportunities for innovation by discharge to housing support schemes as an alternative to transfer from acute to community hospital settings
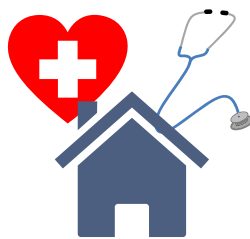
Emma McLorie, PhD student, Bangor University
Prof. Paul Brocklehurst, Dr. Lynne Williams, Dr. Sion Williams

BACKGROUND

Discharge planning from NHS acute care to community services has been identified as a problematic area in policy and practice (Health Watch England, 2015) and recognising patient and family preferences forms a key quality indicator for NHS and social care (NICE, 2012: The King's Fund, 2014). The decision-making process from acute care is complex (Waring et al, 2014), and successful outcomes depends on alignment between individual, team and system-level processes, hence why it is often referred to as a "wicked problem" (Williams et al, 2009).

AIMS & OBJECTIVES

- Mapping the potential of housing support schemes as a pathway to discharge
- Inclusive involvement of participants to assist in modelling partnerships for change
- Discover and bridge the fractured relationship between housing and health
- Model partnerships for change
- Assess the feasibility of a housing support scheme as a pathway

METHODOLOGY

Institutional Ethnography (Smith, 2006) seeks to understand the everyday experience and to map work governed by ruling relations thus seeking to promote organisational change (Campbell, Gregor:2002:11). By using an IE lens, non-participant observation and interviews were carried out during phase 1 to better understand the discharge process in hospital sites and housing support schemes.

Participatory Action Research (PAR) actively seeks to involve participants through the course of both participation and action in hopes change will occur. PAR will use already collected data to inform the online co-design workshops to bridge and form relationships between housing and health.

STUDY DESIGN

Mixed methods design using both qualitative and quantitative methods

Phase 1, Exploratory:
- Scoping Review
- Institutional Ethnography case work
- Statistical Review of relevant data

Phase 2, Action-oriented:
- Part one: interviews
- Part two: co-design workshops

Phase 3, Explanatory:
- Part one: Developing a synthesis
- Part wo: Intervention

CURRENT KEY FINDINGS

Phase 1: Scoping review results showed a gap in literature. It was found that housing support schemes a pathway was not often reported. However, care within the home was highly valued by both patients and family members.

Non-participant observation combined with follow-up interviews in both hospital sites (n=2) and housing support scheme sites (n=2) across north Wales found the following:

- Fractured relationship(s) between housing and health
- Housing scheme staff are often not viewed as professionals
- Discharge process is complex
- The desire & need for organisational change

WHAT'S NEXT?

Phase 2: IE seeks to promote organisational change (REF). However, PAR actively involves participants and action relates to problem-solving by involving *non-scientists* (Chevalier, Buckles, 2019:22). The direct involvement of using PAR will help shape and form co-design workshops involving key stakeholders. During these workshops, participants will be directly involved in designing and partaking in the research to help model a partnership for change.
Phase 3: Developing a synthesis and a company report to be used by the local health board and company partner.
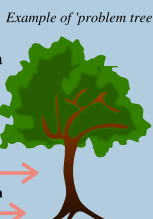
ONLINE CO-DESIGN WORKSHOPS

Four online co-design workshops will take place with key stakeholders: tenants, housing support scheme staff, GPs, nurses etc. It will consist of two parts

Part one: Previous data will be discussed and the relationship between housing and health, the possibility of a pathway to discharge.

Part Two: Participants will use a problem tree and a solution tree repair and shape the relationship between housing and health. Using these findings, participants will inform the synthesis and model for a housing support scheme as a pathway to discharge.

Example of 'problem tree'

Negative affects of central problem

Central Problem

Causes of central problem

(Candelo et al, 2003:155)

BENEFITS & IMPACT

- Ensures inclusive involvement
- Discovers a solution to the fractured relationship between housing and health
- Empowers participants and views them as active participants within the research
- Will assist in modelling partnership for change

CONCLUSION

The discharge process is complex. There is a greater need for both housing and health to work together to lessen the pressures of both the housing crisis and NHS. IE uncovered the discharge process and the fractured relationship between housing and health.

PAR will allow participants to be directly involved within the research and to help shape a model for change thus promoting social and organisation change.

ACKNOWLEDGEMENTS

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