

CONFERENCE ABSTRACT

Attitudes of health professionals and patients in a geriatric hospital towards patient involvement

17th International Conference on Integrated Care, Dublin, 08-10 May 2017

Joern Kiselev, Eva Mellenthin, Elisabeth Steinhagen-Thiessen

Charité Universitätsmedizin Berlin, Germany

Introduction: Patient centered care and the systematic involvement of patients in the care process is an imperative feature of Integrated Care. However, some dissent exist on how to achieve this goal while taking into account his medical and personal situation, values, knowledge and willingness to be involved. This can be a difficult process, especially in geriatric patients who are characterized by older age and the presence of two or more chronic conditions. At the same time, health professionals (HP) often have a high workload and therefore only limited time to invoke the necessary process to involve a patient. Therefore, we conducted a qualitative study on the potential conflicts between patients and HP in the process of patient involvement. This study was part of Project INTEGRATE, a European-wide project on identifying facilitators and barriers in the development and implementation of integrated care.

Theory and Methods: The study was based on the concept of Patient Involvement (PI) as an interactive process between the patient and the HP in which both sides have their own concept of the current situation, needs and values. It consisted of a series of focus groups conducted in Germany with patients and HP regarding their attitude and perceived barriers in their communication with the aim of involving the patient in the care process in a large geriatric hospital.

Results: Different concepts on how and why patients should be involved could be detected. While most HPs demonstrated a very task-specific attitude towards patient involvement, the patient themselves were very critical about the insufficient information flow regarding the care process and their condition as a whole. This led to conflicting viewpoints, misunderstandings and, consequently, to a level of mistrust on the side of the patients.

Conclusions: The results of this study underlines the need of HPs to better understand the needs and the current state of knowledge of their patients. For this, teaching communication skills have to play a greater role in the educational process for HPs as well as the implementation of structured educational processes to increase the knowledge and health literacy on the patients' side.

Kiselev; Attitudes of health professionals and patients in a geriatric hospital towards patient involvement

Lessons learned: These results should give clinicians and researchers in the field of geriatrics and integrated care a better understanding of the underlying potential conflicts in the communication between patient and HP regarding the involvement of the patient.

Limitations: As our study is limited to a qualitative approach and representing research from one geriatric hospital in Germany, the results should not be used to draw generalized conclusions. However, they should offer a deeper insight into the matter and provide a basis for the improvement of curricula for HP and the necessary basic information and health literacy for patients.

Future research: Future research should concentrate on the interactive communication between patient and HP, especially in regard to geriatric patients as well as a suitable process for identifying the patients' desire or willingness (or lack thereof) to participate in his own care process.

Keywords: patient involvement; geriatric care; communication skills; health professional education