An Exploratory Study of Discharge Planning Home Visits within an Irish Context-
Investigating Nationwide Practice and Perspectives

Abstract

Research Purpose and Aims
Discharge planning home visits are a routine part of occupational therapy clinical practice. However, there is a dearth of evidence to support or refute their efficacy and limited policies or standards to guide clinical practice (Sampson et al, 2014). This study aims to investigate current clinical practice during home visits and the value that occupational therapists’ attribute to home visits within an Irish context.

Research Design
Mixed methods survey questionnaire with census sampling.

Research Methods
A survey questionnaire was developed from current literature and piloted on a sub sample. 52 target sites including acute, rehabilitation and convalescence settings were contacted via a gatekeeper for participation. 122 participants completed an electronic or postal survey. Quantitative data via likert scales and was analysed using the SPHINX package. Thematic analysis was used for qualitative data.

Results
Quantitative data identified time spent per visit, departmental and hospital size, number of visits and report writing times e.g 89% complete 1-5 visits per month and 74% spend between 1 hour to 1 hour 30mins per visit. A 50% compliance rate was found for 37 out of 43 suggested areas of assessment during visits. Rich qualitative data identified clinical criteria, risks, benefits and ways to improve home visit practice.

Conclusions and reflections on impact for practice/ theory
Findings conclude that home visits are routinely carried out by occupational therapists and that there is consistency in clinical practice within an Irish setting. Occupational therapists value home visits as clinical assessments.

Two learning outcomes
A reflection of clinical practice during home visits in the Republic of Ireland which could expand the knowledge base regarding current practice and clinical reasoning regarding home visits.
Guide policies regarding home visits and could serve as a comparison in order to standardise practice and justify the need for home visits.
Location
Ireland

Year
2017

Related Integrated Care keywords
- SERVICE, FUNCTION AND CARE INTEGRATION / COORDINATION – TRANSITIONS

Pervasiveness
Large scale in a region

Status
Operational

Links
https://www.ijic.org/articles/abstract/10.5334/ijic.3660/