Paediatric ‘care closer to home’: Stakeholder views and barriers to implementation

Background

- Providing care closer to home by moving health services out of hospitals into community locations has been advocated as a way of improving access to healthcare, increasing patient satisfaction and relieving demand on hospitals.

- There are very few studies on moving children’s outpatient services into community settings.

- CLAHRC researchers were asked to evaluate two consultant-led outpatient clinics provided in the community by Birmingham Children’s Hospital NHS Foundation Trust.

- The researchers interviewed a wide range of NHS clinicians and managers from the hospital and community as their views can affect the development and success of new services.

What were the views of NHS stakeholders on providing consultant-led, paediatric outpatient clinics in the community?

Turn over to find out more
Findings

- Participants felt that the concept of care closer to home was sound in theory, but that there were significant financial and practical challenges in practice.

- Services must, at the very least, replicate hospital outpatient care standards and provide equal access for families.

- The hospital was thought to deliver the ideal outpatient service model, but reproducing this in the community using a ‘drag and drop’ approach had few additional benefits. To be effective, models of care closer to home require service redesign as well as relocation.

- Delivering care in the community affected providers’ sense of professional identity, so meanings attached to the place of care should be considered in service redesign.

Recommendations for practice

Shifting outpatient clinics into the community will require service redesign as well as physical relocation. New services should take into account the views of service providers and service users.

References


What is CLAHRC for Birmingham & Black Country?
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