

Abstract

Topic: Health services research

Title: Perceptions of safety in palliative home-based care services in a Norwegian municipality: A comparison of the views of patients and their family members

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Text: A strategy in Norwegian health-care policy is to transfer a portion of health services from hospitals to communities. This strategy also applies to services for patients in palliative or terminal phases of their illnesses. To realize this plan, it is vital that patients and family members feel safe with the care they receive.

The aim is to explore, in the context of palliative home-based care services, potential differences in judgments of aspects of the safety of the care within dyads of patients and family members, including potential relationships between perceived safety in the context of care and individual quality of life.

The study will include sixty patients who receive palliative care at home in a Norwegian municipality, and their family members (n=60). Data collection is ongoing. A patient and family member version of a modified QPP (Quality from Patients' Perspectives) is used for measuring the following aspects of safety: symptom relief, help with daily activities, information, user-involvement, continuity of care, competence of staff, availability of help, respect and concerns. The questions encompass two response-scales: perceived reality and subjective importance. In addition, a questionnaire about quality of life (EQ-5D) is used. Wilcoxon's signed rank test will be used to identify potential differences within the respective patients-family member dyads of safety ratings. Relationships among safety from patients' perspectives and demographic and quality of life related variables will be examined with Spearman's correlations.

Preliminary results show that patient-family dyads have high levels of agreement in ratings of perceived reality of safety of palliative home-based care services. Family members generally rated the subjective importance higher than the patients.

When the data collection and analysis are completed, the results may provide guidance regarding the future improvement of palliative home-based care services

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