

# Health and social care management for older adults with multimorbidity: A holistic approach



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# Aim

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To describe the core components of a holistic view of health and social care management for older adults with multimorbidity



# Why?

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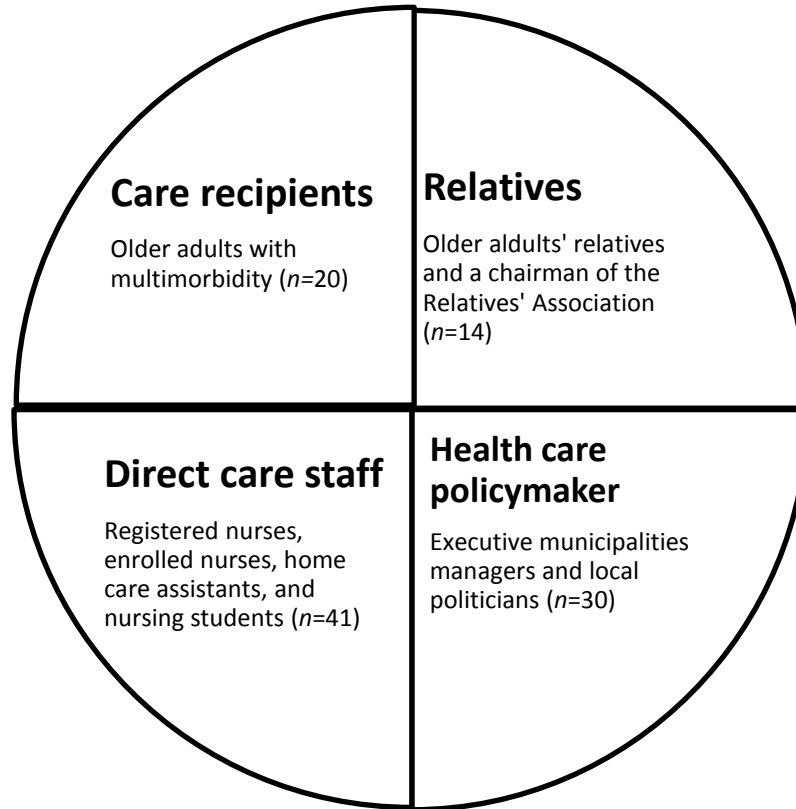
- Unclear scientific evidence of risks and benefits of treatment
- Difficulties to conduct research and improve outcomes with populations that have complex problems
- Need for further pragmatic studies and a shift in the health care management approach



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## Method

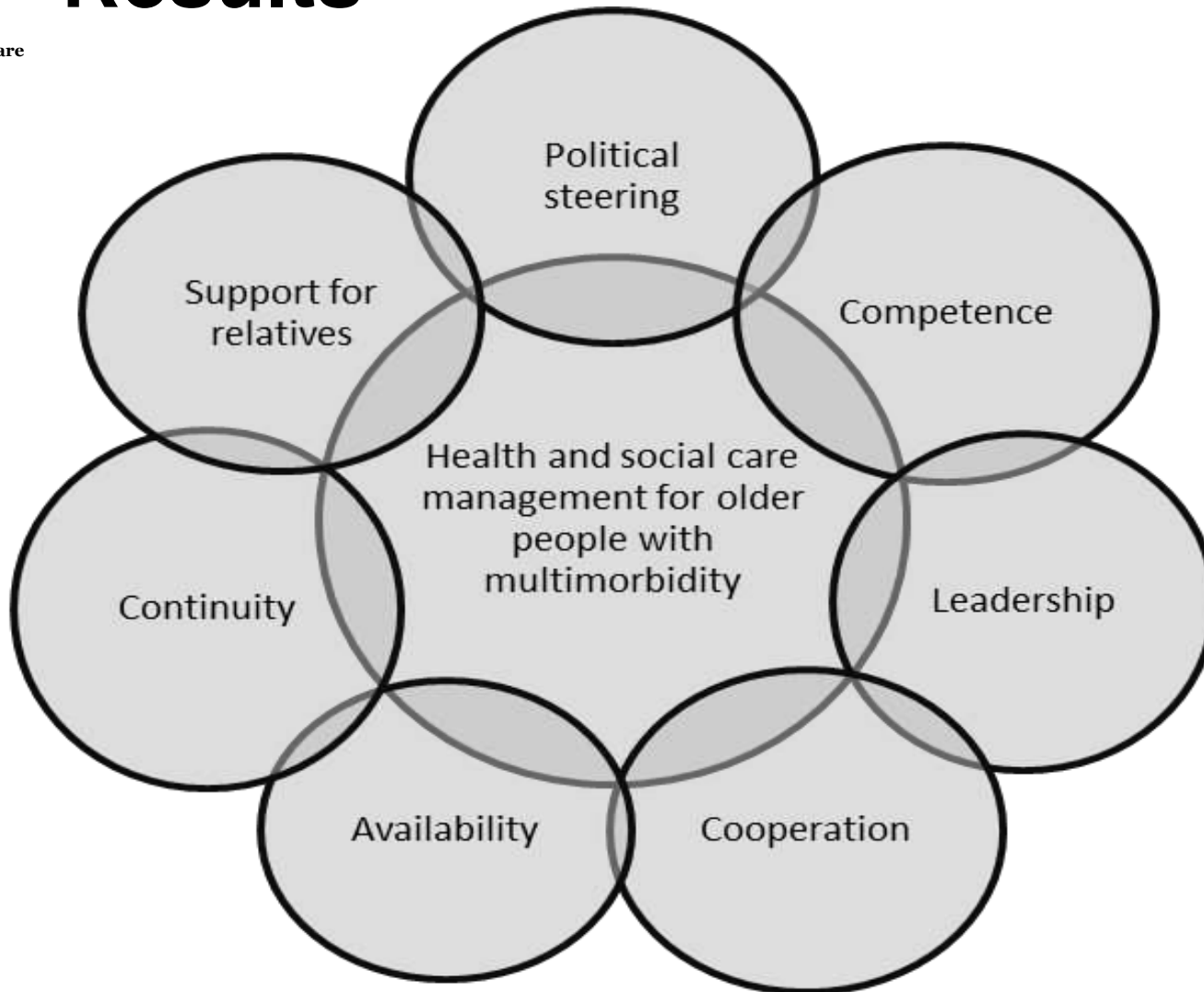
- Individual interviews
- Group discussions
- Content analysis





# Results

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# Political steering

- Current laws leads to a polarization of health care and social care
- Economic and resource reallocation from institutional care to municipality care
- Shifting home care from the county councils to the municipalities
- Long-term decision making, multi-perspective, equitable health care with a focus on the individual
- Health and social care should work from a health perspective in addition to a disease perspective



# Leadership

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- Clear leadership as meeting needs in an optimal manner with long-term perspective, continuity, and flexibility



# Cooperation

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- Coordination functions that perform and coordinate both health and social care
- Facilitating cooperation require involvement of
  - Caregivers and a care coordinators
  - Based on individual needs
- In sum, older adults and their relatives are demanding a holistic and completely responsible health and social care system





# Competence

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- Increased competence among all professionals may lead to
  - Improved understanding and willingness to promote cooperation, availability, and continuity of health and social care
  - Reduce mistakes in health and social care
  - Increase the focus on preventive interventions



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# Support for relatives

- Relatives are an important resource and greater support is needed
- Support relatives' caregiving activities and also include relatives as part of care teams
- More comprehensive support is necessary
  - Respite care



# Availability

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- Of home care with multiprofessional teams
  - Avoidance of emergency room trips
  - Home visits by physicians to provide direct admission to a hospital ward
  
- Easily access to care staff
  - Communicative skills with older people
  - Sympathetic encounter



# Continuity

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- Is crucial to health and social care for older adults with multimorbidity
- Proposals for improving continuity
  - Common planning of health and social care
  - Core group of care staff
- Encourage relationships on a personal level between care staff and care recipients



# Conclusions

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The holistic model can contribute to prohibiting fragmentation of health and social care that affects both patients and relatives



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“... how do they think, those people in charge? Do they talk to each other? No, everyone just does their own part. Why don't they ask the old folk or us relatives? 'What can we do for you to make you feel good?' Someone should take care of this ...” (Relative)



# What can we do to make you feel good?

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# Thank you!

