The views of homeless people and healthcare professionals on palliative care and the possible use of a consultation function: a focus group study.

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Aims

• (1) Providing insight in experiences of homeless people and professionals with palliative care by identifying barriers and facilitators

• (2) Investigating whether a consultation function can contribute to improving palliative care for homeless people

Background

• 30,000 homeless people in the Netherlands, number is still growing

• 80% male, 16% 50-65 years

• Complexity of problems: often psychiatric disorders, alcohol/drug dependence and/or intellectual disorders, rough lifestyle and living conditions, multiple comorbidities, competing priorities and not complying with procedures. Therefore, many disciplines are involved.

• Multidisciplinary collaboration and staff training are necessary to improve access and quality of palliative care for the homeless

• Access to palliative care is minimal, due to homeless people themselves, limited knowledge of professionals and organization of care.

• Locally consultation has been used to overcome the above

Method

• Four multidisciplinary focus groups with professionals (n=19) and two focus groups with severely ill homeless people who stayed at specialized wards in nursing homes (n=15)

• Purposive sampling of professionals in organizations for (palliative) care to the homeless

• Opportunity sampling of homeless people

• Thematic analysis

Insight in experiences

Six themes regarding experiences of professionals and homeless people with palliative care

• This palliative care is complex and differs from regular palliative care

• Differ greatly between professionals, institutions, cities

• Experience of less self-determination than desired

• Different perceptions on care provided

• Trustful relationships are essential

• Low-threshold and flexible care is needed

Consultation

• Consultation can help professionals by play an important role in improving palliative care by linking disciplines, supporting professionals and providing appropriate palliative care to homeless people

• Consultation would be of added value, in particular by exchange of expertise between professionals

• Homeless people see consultation as opportunity of training professionals in showing more understanding, providing tailored palliative care and better collaboration between professionals

• Regional situation, characteristics and role of a consultant in providing information and education must be considered

Conclusion

• This study provides concrete suggestions for the organization of a consultation function in order to improve palliative care for homeless people.

• However, consultation is not the only option to improve palliative care for this target group. Bundling knowledge from different disciplines and advocacy for the homeless, i.e. by experts by experience, are also needed.