"A transition towards digital home visits in social care and home health care during the corona pandemic"

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Systems developer program Gothenburg University 1984 – 1987

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    Programmer systems developer, project management, development manager
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Visiting researcher and instructor at Michigan State University 2014 – 2016

PhD at Mid Sweden University 2020, "The benefits of Digital Technical Information"

Post Doc Karlstad University focusing on e-health

Our group focuses on e-health in various perspectives. The foundation is that the context has a health approach combined, whether it is on a general level, like this study, or more specific, such as stroke rehabilitation. The health approach is always combined with digitalization in some ways, whether it is software or hardware, like an information system or communication sensors. Added to this can be systematic processes, such as stakeholders' value.

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Introduction

Social care and home health care is provided by the municipalities in Sweden

As a consequence of social distancing during the Corona pandemic, ordinary home visits in social care and home health care needed to be reduced in Swedish municipalities.

To compensate for this reduction in meetings In Real Life (IRL), digital technology for communication and meetings could be considered an alternative as a way of upholding continuity

Digital technology is critized for being more of an end in itself than means for improved care

There is a need to better understand challenges experienced by professionals in social care and home health, how they deal with these challenges and how they experience the possibility to digitize meetings.

Therefore, the purpose of this study was to explore the transition toward increased use of digital home visits in social care and home health care in a Swedish municipality.

Theoretical background

Digital transformation is a holistic effort to revise core processes and services of government beyond the traditional digitization efforts. It evolves along a continuum of transition from analog to digital to a full stack review of policies, current processes, and user needs and results in a complete revision of the existing and the creation of new digital services. The outcome of digital transformation efforts focuses among others on the satisfaction of user needs, new forms of service delivery, and the expansion of the user base.

Several challenges relate to this transformation:

(1) The user has to adjust to the new digital settings

(2) Make everyone social present

(3) Instability in technology

(4) Management has to support the transformation

Survey

A web-based survey was conducted during April 2020. The study was conducted in a middle-sized Swedish municipality with approximately 64000 citizens.

The respondents included in this study were district nurses/nurses, physiotherapists, occupational therapists and social workers working within the health and social care administration.

The survey included questions related to access to and knowledge about ICT and views on possibilities and challenges toward using ICT. The survey included questions with fixed answers, as well as open-ended questions.

82 professionals responded to the survey: district nurse/nurse (n=21), physiotherapist (n=16), occupational therapist (n=26), social worker (n=19). The majority worked within home care (n=46), in special housing (n=14), with clients with developmental disabilities (n=19), with daily living support for clients with neuropsychiatric diagnosis (n=2).

Analysis

The questions with predetermined alternatives for answers were analysed and presented with descriptive statistics. These questions were focused on which modes of telephone by landline, smartphone, laptop, stationary computer, and how he/she had used the different modes of communication.

The three open-ended questions discuss possible meetings to digitize, meetings viewed as not possible to digitize, and challenges while digitizing meetings. The three open-ended questions were initially approached on an overall level to get familiar to the answers.

After our initial analysis, we further explored the material and categorized answers. The categorization was based on the answers, reflecting an inductive analysis.

Findings

All respondents reported access to at least one piece of technical equipment that allowed digital communication.

All professionals had access to some type of communication software; we found the type varied across participants.

In relation to the question about sufficient knowledge, 28 respondents (34%) consider that they lacked sufficient knowledge about ICT, 22 (27%) that they had sufficient knowledge whereas 31 (38%) had good or very good knowledge.

Twenty-nine respondents (35%) considered that they had no access to the equipment required whereas 53 (65 %) considered that they had sufficient, good or very good access to the equipment required. Thirty-two respondents (39%) considered that they had no access to sufficient support, 25 (30%) that the support was sufficient and 25 (30%) that access to support was good or very good.

Meetings viewed as possible to digitize

The answers presents a broad spectrum of meetings, such as internal or external personal meetings, staff meetings concerning citizens, or meetings with citizens

Meetings where citizens are not a participant in the meetings, such as interprofessional meetings without citizens or professional meetings

Meetings where citizens are discussed, so-called care planning, case meetings or follow-up, can be digitized

Even meetings that could be considered to need physical interaction, home visits, are listed as possible digitizable meetings. The conditions specified in the opportunity to digitize home visits and other visits with citizens are that everyone has access to and knowledge of digital aids and that the citizen does not have a hearing impairment or suffers from cognitive impairment. Some respondents also stressed that meetings with citizens with dementia also can be digitized, with help from relatives or home care staff

Meetings viewed as impossible to digitize

When it comes to meetings that are viewed as impossible to digitize, these mainly relate to meetings with citizens where the physical meeting must take place. The respondents emphasize several such meetings, like palliative care, taking care of wounds, injections, sampling, or testing of technical aids at home.

The meetings that were considered to be somewhat possible to digitize were those that were about trying out or changing something in relation to technical aids needed in the home.

Other meetings that are viewed as difficult to digitize are those where the citizen suffers from cognitive or hearing impairments. Several respondents are frank on the difficulties to digitize such meetings. Another perspective is that some respondents view internal staff meetings as not suitable to digitize and relate it to the importance of the physical contact during and after a meeting. Several respondents emphasize education as hard to digitize, both for newcomers and education for experienced colleagues.

Challenges while digitizing meetings

The respondents emphasize several challenges with digitizing meetings, where some of them are technical challenges, lack of knowledge, both own knowledge and the citizens, work assignments that cannot be digitized, and security.

Another challenge is related to the lack of knowledge of how to use technology. Quite a few communicate uncertainty when it comes to their own knowledge of technology, and that this is a challenge for digitalization.

Another aspect of lack of knowledge is related to a shifting knowledge level within work groups. This causes an imbalance between individuals, which hampers efficient use of digital technology.

A third aspect is citizens' lack of knowledge in combination with a lack of resources, especially when it comes to older citizens.

The challenge to create confidence in digital meetings; for example, the body language does not proceed in the same way.

Conclusions

Based on the results from the survey, some challenges to use ICT were reported including problems with instability in technical equipment, the professionals' and citizens' knowledge on how to handle technical equipment, and access to support for technical equipment. Added to this is the process of transition from physical meeting to the digital meeting where not all meetings can be transformed to keep high quality, such as meeting with citizens with hearing or cognitive impairment. Despite these challenges, the overall impression was that the respondents used digital meetings whenever possible and saw a lot of potential in the transition from physical to digital meetings. Their handling and perspectives were operational, solving problems when they occurred and not waiting for strategies or management instructions.

Further research

It is of further interest to detail investigations on various perspectives on meetings that can be digitized and the challenges related to digitizing them. One way of doing that is to focus on one group of work roles, as well as deepen the empirical material by interviews. Another interesting focus is that of the shown operational bottom-up perspective on handling the digitization and further investigating operational, as well as management views on the digitization of social care and home care.