

Optimal NHS service delivery to care homes: a realist evaluation of the features and mechanisms that support effective working for the continuing care of older people in residential settings

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Plain English summary

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Plain English summary

Residents in care homes rely on primary health-care services for access to medical care and specialist services. The OPTIMAL study asked what features of health-care provision to care homes are associated with positive outcomes for residents, the NHS and care home staff.

First, we reviewed the evidence around working with care homes. Then, to test our developing theory of what works well and in what circumstances, we identified three sites that had organised health care to care homes differently. One had designated care home teams, one had invested in extra general practitioner provision to care homes and one had limited care home-specific provision. The care home managers in this third site had also received leadership training. We recruited four care homes per site and tracked the care that 242 residents received over 12 months. We interviewed residents, family members, health-care professionals and commissioners.

The findings indicate that NHS services to care homes should ensure that NHS and care home staff have time to discuss, plan and review care together both for individual patients and all residents. Commissioning of health-care services should recognise the importance of this work to the NHS and invest in personnel to work with care homes. It takes time for practitioners to learn how to work with care homes. When seeking to reduce demand from care homes on hospitals and other NHS services it is important that ongoing support, particularly for people with dementia, is still available to care homes.

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