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Title

Point-of-care testing in care homes: a qualitative interview study with UK care home staff

Priority 1 (Research Category)

Geriatrics

Presenters

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Abstract

Context: Nearly half a million older people live in care homes in the UK. They require greater input from GPs, receive more antibiotics and have a higher admission rate compared to older people living in the community. In particular, episodes of acute functional decline without a clear cause in this population represent a diagnostic challenge to healthcare professionals and can result in antibiotic prescriptions or hospital admissions, although this may not always be the most appropriate management strategy. One solution may be to introduce more point-of-care tests (POCTs) into the care home setting. Objective: To understand how UK care home staff currently use/interpret POCTs and the perceived value of additional point-of-care testing in care homes. Study design and analysis: Qualitative interview study with UK care home staff, including managers, nurses and carers. Participants were recruited through advertisements circulated via email, social media and word of mouth. Semi-structured interviews were conducted over the phone between January 2021 and April 2022. Thematic analysis was facilitated by NVivo software. Results: 25 care home staff were interviewed, with a range of experience and a mix of nursing and non-nursing backgrounds. Most had experience of using POCTs including urine dipsticks and lateral flow tests for COVID-19. They felt that fingerpick samples were easier to obtain than urine samples or nasal/throat swabs. Perceived advantages for care home residents of additional point-of-care testing included familiarity with the professional doing the test, a quicker diagnosis when unwell, and potential hospital avoidance. Some participants also mentioned being able to rapidly isolate residents in the case of an infectious outbreak. Perceived advantages for care home staff included having more information when reporting concerns about a resident to outside healthcare professionals. However, they also highlighted the need for training and that any new test would have to be easy to interpret. Some also felt that any requirement for upskilling care home staff to perform POCTs should be recognised. Conclusions: Care home staff are receptive to expanding point-of-care testing within the care home. Their views on ideal test characteristics can be used when considering candidate tests to evaluate in this setting in the future.