

Investigating Patient-Directed Factors in Declining Participation in Ohio State’s Hospital at Home Program

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Background

- The Hospital at Home (HaH) program at the Ohio State University has greatly expanded in the past few years.
- Despite the ongoing growth, a significant number of eligible patients decline participation in the program.
- Understanding the reasons behind these decisions is essential to identify barriers to enrollment, address misconceptions, and better tailor the program to meet patient and caregiver needs.
- This study aims to investigate reasons for declining participation in order to better expand access and improve patient-centered care.

Methods

- In this study, patients who were eligible for Ohio State’s Hospital at Home program were interviewed regarding their reasons for declining participation.
- 372 total patients were identified as having declined participation in this academic institution’s HaH program from January 2023 to December 2024.
- Of those 291 provided interview responses which were analyzed to categorize reasons for declining participation.
- Quantitative and qualitative metrics were developed based on responses in efforts to identify barriers to participation.

Results

Reasons for declining HaH participation were categorized into key domains: patient preference, family/caregiver preference, living situation, needs/logistics, and health/safety concerns. These categories were further evaluated through identifying the most common concerns in each category.

Category	Count	Concerns	Actionable Insights
Patient Preference	187	• Prefer to stay in the hospital (multiple mentions).	• Evaluate each patient's specific concerns and address them directly with reassurance and a clear care plan. • Develop marketing videos featuring patient testimonials to add hesitations and build trust
Family/Caregiver Preference	35	• Family members prefer hospital stay for patient safety. • Family members uncomfortable with home care logistics.	• Engage with family members to discuss and address their concerns. • Provide family and friend transport and schedule around their availability • Offer family education sessions about home care processes and safety.
Living Situation	42	• Multiple pets and home cleanliness issues. • Presence of young children or elderly family members. • Home under construction or too busy.	• Assess each patient's living situation and create a tailored home care plan. • Coordinate with community resources to help address environmental challenges.
Needs/Logistics	23	• Need for ongoing medical assistance like IV medications. • Logistical concerns about transportation and vehicles. • Requirement of continuous aid services.	• Provide clear discharge plans with transportation and home aid services. • Ensure seamless transition from hospital to home care with follow-up support.
Health/Safety	15	• Exposure to COVID-19 and compromised immunity. • Concerns about managing care at home for themselves or family members.	• Implement strict infection control measures and provide guidance for patients and families. • Transition to new RPM platform with continuous monitoring • Reassure patients of continued health monitoring and support through home visits or telehealth.

What We Learned

- Understanding why patients decline Hospital at Home (HaH) participation is essential for expanding access to this care model.
- This study highlights five key barriers to patient participation: patient preference, family/caregiver preference, living situation, logistical challenges, and health/safety concerns.
- By identifying these barriers, healthcare teams can develop targeted interventions to address concerns and increase patient confidence in receiving acute care at home.
- These insights are critical for optimizing HaH program growth and alignment with the needs and expectations of diverse patient populations.

Conflicts of Interest

None for all authors

