Hospital-at-Home as a Medication Safety "Buffer": Patient Experiences During the Transition to Home-Based Self-Management

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Background

Hospital-at-Home extends clinical care into patients' homes, but little is known about how patients manage medications during and after care.

Objective: **This study explored how patients manage medications during and after the program and identified opportunities to improve medication safety.**

Approach

25 Patients with Polypharmacy from UW Health Home-based Hospital Care (HBHC) Program were recruited for 2 interviews

Interview 1 — **During HBHC Or 7 days within discharge**

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Interview 2 — **30 days after discharge**

Interview Guide SEIPS 3.0

1.Person x Journey (Warm-up & Context)	**2. Person x Physical Environment** (Daily Functioning & Home Setup)
3. Tasks x Tools Technology (Medication Use & Organization)	**4. Organization x Tools**
5. Adaption x Tasks	**6. Outcomes x Person** (Impact on Life)
7. Person x Organization (Attitudes toward deprescribing)	**8. Organization x Journey** (Suggestion for HBHC improvement)

Five Key Findings

20 patients completed both interviews | **74.5** years median age | **60%** male | **20** median prescribed medication (9 -50)

1 Routine anchor self-management

- Habit and pill box support daily medication management
- HBHC highlighted self-management systems rather than changing long-term behaviors



2 Family caregivers provide support

"He (P5's son) usually puts together my weekly pillbox. With all the medications where they go…He will remind me some. He also sets them out in their packaging. And then he'll make sure you come back and make sure I've taken." – P5

3 Organized packing can limit understanding

- UW Health Pharmacy provided blister packs to simplify daily medication tracking.
- However, the two patients who used this service demonstrated the least understanding of their medications





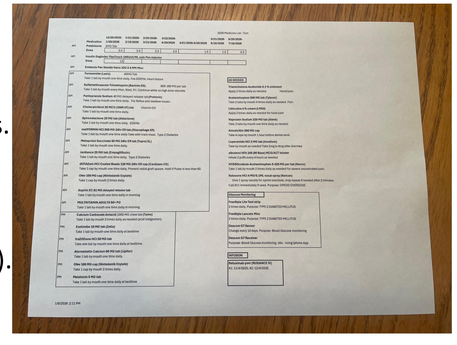
4 Patients desired clinician-guided deprescribing when appropriate

From Patient attitudes toward deprescribing questions:

- Satisfied with current medication and willing to deprescribing
- Prefer shared decision-making

5 Interview itself can be an intervention

- 3 patients identified medication-management problems during the interviews.
- A patient created an Excel-based system after the first interview(shown in the picture).



What we learned

Ask during home visits
Use structured medication conversations to uncover difficulties and safety concerns

Assess home routine
Review how patients organize, understand and take their medication

Tailor support
Involve caregivers, address knowledge gaps and build on existing routines

Plan for discharge
Help patients adapt their medication systems for use after HBHC support ends

Future research
Evaluate how best to integrate and sustain these practices across programs

Conflicts of Interest: None for all authors