


Chapter 5

Integrating Clinical Evidence Into Holistic Home Care for Families and Caregivers

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ABSTRACT

Family caregivers play a pivotal role in sustaining the health and well-being of individuals requiring long-term or specialized home care. However, the absence of structured, evidence-based approaches often places caregivers at risk of physical, emotional, and economic strain. This chapter examines integrative home care frameworks that merge clinical evidence with holistic health practices to optimize both patient and caregiver outcomes. Drawing on empirical studies, clinical guidelines, and interdisciplinary care models, it explores strategies for managing chronic

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illnesses, promoting mental health resilience, and enhancing caregiver competence. The discussion addresses the synergy between biomedical interventions, psychosocial support, and culturally responsive care, offering a comprehensive perspective on home-based health delivery. Emphasis is placed on actionable pathways for translating clinical research into practical caregiving interventions, including the use of standardized assessment tools, tailored education programs, and coordinated community resources.

INTRODUCTION

The integration of clinical evidence into holistic home care is supported by several conceptual models that provide structured frameworks for aligning family involvement, multidisciplinary collaboration, and evidence-based practices (EBP). These models offer practical and theoretical guidance on transforming fragmented home care into a cohesive, research-informed system.

One of the most prominent models is the Home-based Longitudinal Investigation of the multidisciplinary Team Integrated Care (HOLISTIC) framework, developed in Taiwan. This nationwide prospective cohort study, launched in 2020, tracks health outcomes, caregiver burden, healthcare utilization, and economic implications over a 24-month period among home health care recipients (Chen et al., 2021). The HOLISTIC model emphasizes comprehensive assessment across physical, psychological, social, and financial dimensions while integrating family caregivers as active stakeholders in care delivery, monitoring, and decision-making. Early findings from the protocol suggest that multidisciplinary, evidence-based planning significantly reduces hospitalizations and improves continuity of care in home-based settings (Chen et al., 2021; Lin & Huang, 2022).

Another important model is the Patient and Family Engaged Care (PFEC) framework, which promotes shared decision-making between healthcare professionals, patients, and family caregivers. The PFEC model integrates EBP by ensuring that caregivers are involved not only in care implementation but also in research design, quality improvement processes, and outcome evaluation (Carman et al., 2016). Recent updates to the model highlight the importance of integrating digital tools, clinical guidelines, and caregiver education to tailor evidence-based interventions to diverse home environments (Vaismoradi et al., 2023).

The RAND Family Caregiver Integration Framework further contributes by identifying systemic barriers to caregiver inclusion in clinical practices, such as inadequate training, lack of legal access to medical records, and communication gaps between families and healthcare teams. This framework recommends policy support for standardized caregiver education, proxy access to patient data, and inclusion of

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