

How do care environments shape COVID-19 healthcare?

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Background:

The quality and delivery of healthcare are contingent on the adaptability of care environments, particularly in times of emergency and disruption. This study investigated how care is shaped through the material practices and spaces of healthcare environments during the COVID-19 pandemic.

Methods:

This study used a critical interpretative approach to synthesize qualitative research investigating the experiences of healthcare workers involved in COVID-19 care in Australia and internationally. An iterative search strategy was employed, guided by an analytical focus around the materiality of the healthcare environment. Literature was screened for eligibility and purposively included on the basis of likelihood to contribute to the development of theory. Data were analysed to develop a synthesising argument for how healthcare workers can be better supported through their material environments, including as part of systemic responses in times of emergency.

Results:

38 studies involving 2507 participants were included in the final synthesis. Across studies, healthcare was delivered within in-person, virtual, and hybrid environments, which underwent spatial, material, and temporal transformations (both intentional and unanticipated). These transformations enabled, and produced barriers to, 'good' (or 'good enough') care, and thus shaped the quality and delivery of care. Local everyday care practices were also located in, and shaped by, global experiences, knowledges, and practices of COVID-19 care. The synthesis mapped these care relations and identified examples of adaptations that attended to the materiality of the care environment (and the effects of these adaptations in supporting care).

Conclusion:

The findings of this study demonstrate how healthcare environments enable and constrain modes of care. Practices of care are shaped through the materiality of spaces and objects, including how these change in the face of pandemic disruption. The healthcare environment thus needs to be viewed as a critical adaptive element in the optimisation of care.

Disclosure of Interest Statement:

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