



NHS Service Delivery and Organisation National R & D Programme

NHS SERVICE DELIVERY AND ORGANISATION R&D PROGRAMME

PROGRAMME OF RESEARCH ON CONTINUITY OF CARE

Applicants are invited to submit research proposals on three topics:

1. Collaborative linkages inside and between organisations.
2. Patients' and carers' views of continuity of care in primary care.
3. Patients' and carers' experiences of continuity of care in long term conditions and the relationship of continuity of care to outcomes.

Introduction

The NHS Service Delivery and Organisation (SDO) programme is a national R&D programme that has been established to consolidate and develop the evidence base on the organisation, management and delivery of health care services.

The aims of the SDO R&D programme are to:

- ensure that good research-based evidence about the effectiveness, cost-effectiveness and equity of different models of service is available and accessible
- generate the evidence base to encourage managers and others to implement appropriate change
- identify and develop appropriate R&D methods
- promote the development of expert R&D capacity
- involve service users and other stakeholders in the R&D programme.

The SDO Programme is inviting proposals to conduct a series of projects on the theme of **Continuity of Care**.

Preparatory work undertaken

During the autumn of 1999, the National Co-ordinating Centre for NHS Service Delivery and Organisation R&D (NCCSDO) conducted a national listening exercise of those who use and deliver health care to inform the SDO programme¹. **Continuity of Care** was one of the themes which emerged from this process.

Following the listening exercise, the SDO Programme commissioned a scoping report from a team of researchers at Imperial College, Brunel University and the University of Southampton in order to understand the extent and quality of existing evidence in this area.² The scoping exercise was designed to advise the SDO programme what further R&D should be commissioned in this area. It was envisaged that this might include comprehensive literature reviews and primary empirical

research. The report indicated that continuity of care is a complex concept, and that a multi aspect definition involving six elements is required.

Potential applicants are advised to read the two documents referred to here for more detailed information on the listening exercise and the scoping report on continuity of care. These documents can be downloaded from the SDO Programme website (www.sdo.lshtm.ac.uk).

Previous call for proposals for short term projects

Following the scoping report, in November 2000 the SDO Programme issued a call for proposals for a series of four short term projects, each of which will 6 months or less to complete. The contracts have now been awarded and the projects consist primarily of literature reviews and brief surveys of current good practice in the following areas:

1. Investigation of the factors promoting continuity of care for people with severe mental illness whose needs span primary, secondary and social care.
2. What are the current and future barriers to continuity of care in organisational and work force issues?
3. Transitions from child to adult health and social care services for people with disabilities or chronic diseases: what is good practice in ensuring continuity of care?
4. Investigation of the factors promoting continuity of care for older people across the interface between health and social care.

(Full details of these calls can be found on the SDO Programme website: www.sdo.lshtm.ac.uk)

Current call for proposals

The current call for proposals concerns three empirically based projects. The SDO Programme will develop mechanisms for the various projects commissioned within the **Continuity of Care** programme to form a coherent stream of research. Successful applicants will be informed of these mechanisms.

Those interested in submitting a proposal for any of the topics should note that a one stage commissioning process is being used and applicants are invited to submit full research proposals by **25 April 2001**.

1. Collaborative linkages inside and between organisations

The SDO Programme is interested in commissioning research which will extend our understanding of the general characteristics of structures and relationships between and within health and social care organisations which contribute to the enhancement (or otherwise) of continuity of care. Note should be taken of the broad range of the multi aspect definition of continuity of care in the scoping report commissioned by the SDO Programme.

A central question concerns the types of collaborative linkages and relationships between departments and organisations that lead to high or low levels of continuity of care.

In order to address this question, applicants should give consideration to the following:

- How relationships between individuals are relevant to relationships between organisations. The way different professionals relate across organisational boundaries and traverse such boundaries is of particular interest. Health care teams which work across boundaries are important to consider in building collaboration.
- How the concept of trust between individuals and organisations is relevant, and what factors may help engender such trust.
- How organisational structures, alliances and partnerships (these include joint ventures, networks, coalitions, partnerships and alliances) and the associated organisational research literatures (both theoretical and empirical) are relevant to issues of collaboration within and between organisations.

Applicants are invited to propose the care groups they wish to focus on in this research. These might include services for older people in the community, for example. (As the Commission for Health Improvement and the Audit Commission are presently carrying out a joint study of the implementation of cancer networks, applicants are requested **not** to direct their research to cancer services.)

Applicants are also invited to propose the setting in which the services under consideration are delivered. These might include the current formation and development of Primary Care Trusts and Care Trusts, for example.

Applicants should clearly outline their plans for the dissemination of their findings.

Applicants should indicate how each stage of their proposed research project (including the dissemination of results) will take into account both

- the advice concerning the involvement of users issued by the Consumers in NHS Research Support Unit³; and
- the need to involve those who plan, manage or deliver services (for example, by convening a steering group for the project).

Funding of £300,000 is available for this topic. The project should take no longer than three years to complete and start no later than 1st October 2001.

An interim report will be required at an interval to be agreed with successful applicants. A final report (in a form to be agreed in advance with the SDO Programme) will be required no later than one month after the completion of the project.

Successful applicants will also be required to make a short oral presentation concerning their completed project to the SDO Commissioning Board.

2. Patients' and carers' views of continuity of care in primary care

The SDO Programme wishes to commission research which will allow us to understand the views of different patients and carers about the importance of various types of continuity of care compared to other aspects of care, such as ease of access, and technical competence of professionals. Understanding this range of views will enable services to be better tailored to the needs and desires of different groups. This is particularly important in primary care, as the whole population is entitled to be registered with a general practitioner, and thus the greatest diversity of views will be apparent. Note should be taken of the broad range of the multi aspect definition of continuity of care in the scoping report commissioned by the SDO Programme.

The question the SDO Programme wishes researchers to address is: for which segments of the population is continuity of care in primary care important and why?

Although the starting point for any study should be GP practices, primary care is very broadly defined for these purposes to include new walk in centres, NHS Direct and all community services, such as chiropody and pharmacy services, for example, and complementary therapies, where relevant.

This project should involve a study of the views of different groups of registered patients concerning continuity of care in primary care, using a cross sectional study of a range of GP practices, carefully differentiating patient groups by aspects such as lifestyle (for example, whether people are employed) and social and family relationships (for example, whether people live alone or are parents of young children or care for older relatives).

Account should be taken of the organisational context within which care is delivered. This context could include, for example: organisational structures, team-based working, functional structures, geographical structures, diagnostic group structures, patient group structures, organisational size, leadership, interprofessional working and the environment (comprising such matters as the health care needs of the population served) in which the organisations are operating.

Applicants should clearly outline their plans for the dissemination of their findings.

Applicants should indicate how each stage of their proposed research project (including the dissemination of results) will take into account both

- the advice concerning the involvement of users issued by the Consumers in NHS Research Support Unit³; and
- the need to involve those who plan, manage or deliver services (for example, by convening a steering group for the project).

Funding of £300,000 is available for this topic. The project should take no longer than three years to complete and should start no later than 1st October 2001.

An interim report will be required at an interval to be agreed with successful applicants. A final report (in a form to be agreed in advance with the SDO Programme) will be required no later than one month after the completion of the project.

Successful applicants will also be required to make a short oral presentation concerning their completed project to the SDO Commissioning Board.

3. Patients' and carers' experiences of continuity of care in long term conditions and the relationship of continuity of care to outcomes

The scoping report commissioned by the SDO Programme recommended that longitudinal studies of patients' experiences of continuity of care were vital because too little is currently known about the patients' perspective on this issue. This includes both their experiences and their preferences.

The scoping report also noted that very little evidence exists concerning the relationship between continuity of care and outcomes of care (other than satisfaction) experienced by patients. It is important to improve the evidence base in this respect to determine the contribution continuity of care makes to health outcomes. **The call for proposals therefore contains two elements, both of which must be addressed by applicants. However, applicants need not include all of the care groups stipulated below in their proposals.**

(a) Patients' and carers' experiences of continuity of care

The SDO Programme wishes to commission work on patients' and carers' experience of continuity of care and their views on what constitutes good quality services in this regard, using longitudinal studies of patients' journeys through care in relation to different types of illness. These studies should look in detail at patients' experience of continuity, bearing in mind the broad range of the multi aspect definition of continuity of care in the scoping report. The times, places and circumstances in which continuity is particularly valuable to people need to be explored. Conversely, the occasions when discontinuous care is valued should be examined.

Furthermore, it will be important to understand how patients and carers relate the many forms of continuity to each other; and to other aspects of service delivery, such as speed of access (i.e. do patients and carers make trade offs between different aspects of care?). The implications of these findings for service delivery need to be addressed in the research.

Moreover, the organisational structures, cultures and processes, and other relevant policy issues (such as policies concerning the deployment of professional staff) will be important elements in these studies. The research should examine the range of structures and processes that NHS and other organisations use to promote continuity of care and identify those which prevent or inhibit continuity of care.

Studies should also examine the extent to which patients' and carers' expectations and experiences of continuity of care are congruent with the professional and managerial perspectives in the settings used by those patients.

(b) The relationship between continuity of care and outcomes

Alongside the studies of patients' and carers' experiences of continuity of care, applicants are requested to propose linked studies on the effect of continuity of care (or its absence) on the outcomes of care. Careful consideration should be given to the choice of appropriate outcomes, depending on the care groups involved. In this way we hope to generate knowledge about the possible relationships between continuity of care and effectiveness of services.

The projects discussed here will constitute a major element in the SDO **Continuity of Care** research programme, involving a series of linked studies of patients and carers from different care groups. The following groups will be included (although not necessarily in the same research proposal):

- People with chronic illness, such as diabetes or asthma
- People with serious mental health problems
- People with cancer— a sample of several types of cancer would be preferable e.g. breast, lung and prostate.
- People with physical disabilities, such as people who have had a stroke.

For each of these care groups, the proposed studies should include both elements of the research outlined above. Applicants should assemble a sufficiently broad research team with appropriate skills to deal with both the issues of patients' and carers' experiences of continuity of care and the measurement of the effect on outcomes of variations in continuity of care.

Applicants should clearly outline their plans for the dissemination of their findings.

The SDO Programme will co-ordinate the research commissioned under this call by requiring successful applicants to attend meetings together to discuss such issues as the methods to be employed on each project.

Applicants should indicate how each stage of their proposed research project (including the dissemination of results) will take into account both

- the advice concerning the involvement of users issued by the Consumers in NHS Research Support Unit³; and
- the need to involve those who plan, manage or deliver services (for example, by convening a steering group for the project).

Funding of £3,000,000 is available for this topic. £750,000 is available for each care group listed above. Projects should take no longer than five years to complete.

Interim reports will be required at intervals to be agreed with successful applicants. A final report (in a form to be agreed in advance with the SDO Programme) will be required no later than three months after the completion of each project. Successful applicants will also be required to make a short oral presentation concerning their completed project to the SDO Commissioning Board.

Proposals

Applicants are asked to submit **full** proposals by **25 April 2001 at 12pm** to:

Mrs Donna Cox,
Commissioning Manager,
NCCSDO,
London School of Hygiene and Tropical Medicine,
99 Gower Street,
London
WC1E 6AZ.

TEN HARD COPIES of the proposals should be submitted (minimum font 10pt), using the A4 Full Proposal Application form. Please note we will not accept electronic submissions or hand written proposals. The application form is available as a Word 97 file or Rich text format from the SDO website:

<http://www.sdo.lshtm.ac.uk/calls.htm>
or by email from donna.cox@lshtm.ac.uk

¹ Fulop N, Allen P. *National listening exercise: a report of the findings*. London: NCCSDO, 2000.

² Freeman G et al. *Continuity of Care: report of the scoping exercise for the SDO programme of NHS R&D*. 2000

³ Consumers in NHS Research Support Unit. *Involving Consumers in Research & Development in the NHS: Briefing notes for Researchers*. 2000
<http://www.hfht.org/ConsumersinNHSResearch/>

Addendum

This document was published by the National Coordinating Centre for the Service Delivery and Organisation (NCCSDO) research programme, managed by the London School of Hygiene & Tropical Medicine.

The management of the Service Delivery and Organisation (SDO) programme has now transferred to the National Institute for Health Research Evaluations, Trials and Studies Coordinating Centre (NETSCC) based at the University of Southampton. Prior to April 2009, NETSCC had no involvement in the commissioning or production of this document and therefore we may not be able to comment on the background or technical detail of this document. Should you have any queries please contact sdo@southampton.ac.uk.