

Focus groups with healthcare professionals at study sites topic guides

Focus groups with healthcare professionals at the intervention sites topic guide

Title of project: ImproveCare - The management of clinical uncertainty in hospital settings

DRAFT TOPIC GUIDE FOR FOCUS GROUPS WITH HEALTHCARE PROFESSIONAL PARTICIPANTS WORKING ON INTERVENTION WARDS

I am interested in exploring with you, your views on the AMBER care bundle, how you find caring for patients with advanced illness who are deteriorating, clinically unstable and likely to die during their episode of care, despite receiving treatment, and also the study we have been conducting on your ward.

Over the next 40 minutes I'd like to ask you some questions and for you to answer me in your OWN words. There is no RIGHT or WRONG answer to ANY of my questions.

INTRODUCTORY QUESTION

I'd like to start this **focus group** by asking if you could each introduce yourself by giving your name, your job title and how long you have been in your present post [each person is asked in turn].

I WANT TO START BY ASKING YOU ABOUT YOUR VIEWS OF THE AMBER CARE BUNDLE.

- To what extent do you think the AMBER care bundle needs to be refined or adapted to make it more acceptable/more relevant to the patients you are caring for and their families?

Reasons why - probe

- I would like you to consider the different aspects of the AMBER care bundle - which bits do you think can remain the same and which need to change for the ward you are working on and why?
- What aspects do you find difficult about caring for these patients? Can you give examples?

- Probe: How do you recognize patients who are deteriorating and there is uncertainty as to their recovery or continued decline leading eventually to end of life.
- Probe: How do differentiate between this group and people who you consider are actively dying?
- Can you explain to me how you and your colleagues talk to patients and their families about their situation? – what does this lead to?
- Probe: How do you find this?
- Probe: How are you supported with this? Prompt: Is there a system in place on the ward for providing emotional support to members of the healthcare team?
- How frequently and how long are conversations that take place with patients and their families?
- In what ways do you think these conversations and plans that are then made produce the outcomes that are important to patient and their families?
- I would be grateful if you would tell me what you feel you and your colleagues feel about the AMBER care bundle.
- What do you consider to be the benefits from the AMBER care bundle? Probe...
- What do you consider to be the harms from the AMBER care bundle?
- Are you in any way unhappy with any aspect of the content or delivery of the AMBER care bundle? What specifically, and why?
- What are your views on the way in which the AMBER care bundle was implemented on this ward? What worked and why and what could have been done differently, and why?

- I would like you to consider to what extent is the right amount of the AMBER care bundle getting to the right recipients in the right way?
- Do you think those who are delivering/supporting patient with the AMBER care bundle on this ward adhere to how it was explained and according to the manual? If not, in what ways?

TEAM WORKING

- How well do you feel health care professionals work together in this sort of situation?
- What is done well? What could be done better? Give examples where possible.
- Can you tell about what leadership there is or champions who can support you when you are managing the care of a patient whose clinical situation is uncertain?
- How does staff turnover on the ward influence how the team works together?

DIGNITY AND RESPECT

- Have you received any training in dignity and respect in care of the patients and their families in hospitals?
- Probe: Could you please give me examples of how dignity and respect is maintained at this ward?
- What can be done better? Give examples where possible.

NOW I'D LIKE TO TALK WITH YOU ABOUT THE STUDY WE HAVE BEEN CONDUCTING ON THIS WARD

- Tell me how comfortable and willing clinicians have been about recruiting patients (and their

families) to this trial.

- Are there any ways in which the trial procedures could be improved to?
- The same applies to the process of obtaining consent for patients and their families. Are there any ways in which this could be improved too? For example think about the type and level of information we are providing potential participants. Could this be improved to improve recruitment?
- Do you think this study has had any unanticipated negative impacts on those who are recruited to the study? How do you think these impacts could be minimised?
- Now let's consider the two outcomes we are using to measure the success of the AMBER care bundle. In what ways do you think these are relevant to patient and their families? If you don't think they are relevant, explain why?
- Do think those who have been involved in this trial feel that they have experienced or noticed improvements or harms in some outcomes that we have not included this trial? What are they?

Focus group with healthcare professionals at control sites topic guide

ImproveCare study - The management of clinical uncertainty in hospital settings

- We are interested in exploring 2 main areas: Firstly, your experiences of caring for patients with advanced illness who are deteriorating, clinically unstable and likely to die during their episode of care, despite receiving treatment. Secondly, your reflections on taking part in the ImproveCare study.

INTRODUCTORY QUESTION

- I'd like to start this focus group by asking if you could each introduce yourself by giving your name, your job title and how long you have been in your present post [each person is asked in turn].

A-EXPERIENCE OF CARING FOR PATIENTS WITH ADVANCED ILLNESS

- Can you tell me about your experiences of caring for patients with advanced illness who are deteriorating, clinically unstable and with risk of dying during their episode of care.
- What are the challenges in caring for these patients? Can you give examples?
 - Probe:** How do you recognize a patient who is deteriorating and there is uncertainty as to their recovery or continued decline with increasing risk to end of life.
 - Probe:** How do you differentiate between this group and people who you consider are actively dying?
- Can you explain to me how you and your colleagues talk to patients and their families about their situation?
 - Probe:** How do you find this?
 - Probe:** How are you supported with this? Prompt: What systems are in place on the ward to provide emotional support for members of the healthcare team?

- How do you feel about caring for patients that are still receiving very active treatment yet are unstable and you are concerned that they may be deteriorating? Give examples where possible.

B-INFORMATION AND COMMUNICATION WITH PATIENTS/FAMILIES

- Can you tell me about what training you have received on communication around breaking bad news or discussing difficult issues?
- How do you find discussing difficult issues with patients or those close to them?
Probe: How well supported do you feel with this?
- How well informed do you feel patients are about their illness and plans for treatment and care?
- How do you feel that patients and their families receive get consistent and timely information from members of the ward team?

C-TEAM WORKING

- How well do you feel health care professionals work together when you are managing the care of a patient whose clinical situation is?
- Can you give an example of what is done well? What could be done better?
- Can you tell about what leadership there is or champions who can support you?
- How does staff turnover on the ward influence how the team works together?

D-INVOLVEMENT IN DECISION MAKING

- Can you talk me through an example of good practice which helped you in caring for patients with advanced illness that are unstable, deteriorating and with a short prognosis?
- What are the opportunities for all voices to be heard in the multidisciplinary team when making decisions about a patient's care and treatment plans?
- What are the opportunities to understand the reasoning behind decisions or plans made by other members of the multidisciplinary team?
- To what extent is everyone in the team able to speak up if they have concerns about the decisions or plan for a patient?

- How are patients and families involved in decision making about their care preferences?

Prompt: Provide examples of all of the above where possible.

E-DIGNITY AND RESPECT

- Could you talk me through an example of how dignity and respect is maintained on the ward
- What can be done better? Give examples where possible.
- Can you tell me a little more about any training you have received in dignity and respect in care of the patients and their families in hospital?

F- EXPERIENCES OF THE IMPROVECARE STUDY

- How comfortable and willing have you found clinicians have been about recruiting patients (and their families) to this trial.
 - How could we improve the trial procedures?
 - Eligibility and recruitment
 - Information for patients and families
 - Data collection tools and processes
 - Processes of consent
 - Do you think the study had any unanticipated negative impacts on patients who participated? How do you think these impacts could be minimised?
 - What benefits do you think people experienced through taking part in the trial?
 - We measured communication and information, and experiences of care as the main outcomes in the trial. How relevant are these to patients with advanced illness and clinical uncertainty, and for their families?
 - Is there anything else you would like to add in relation to your experience of caring for patients with advanced illness in the last 1-2 months of their life? Or the trial?
- Please do email/phone us if you have comments to add. Thank you

