Working Together: Action research with service users to improve person centred care

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Background

• Patients voices not being heard
• Desire to involve service users to improve person centred care
• Edinburgh and Lothians Health Foundation grant – 12 month project
• Steering Group - equal patient, carer and practitioner representatives
• Researchers – 1 academic & 1 service user
Aims

• Collaborate with service users throughout the research process, including a service user co-researcher and service-user led steering group

• Learn from service users’ experiences to inform analysis of person-centred care in two settings

• Develop and implement a programme of practice development in response to findings.
Project Design

• Direction from patient & carer representatives on Steering Group – hospital and community focus

• Identification of two clinical settings based on review of complaints and discussion with managers:
  - Emergency Department
  - Evening District Nursing Service

• Governance procedures – service evaluation, approval from quality improvement leads and Caldicott Guardian
Methods

• Mixed methods - conducted 2014 – 2015
• Action research (Meyer, 2006)
• Theoretical framework: Framework for Person-centred Nursing (McCormack & McCance, 2010)
• Adopted 4 main components of the framework:
  – Pre-requisites: attributes of the nurse
  – The care environment
  – Person-centred processes
  – Evaluating the outcomes of person-centred care
Methods

Qualitative

• Ethnographic approach – non-participatory observations and informal interviews with staff and service users
• Emergency Department (ED) – 34 hours observation
• Evening District Nursing Service (EDNS) – 55 hours observation
• Semi-structured interviews with service users (n=8)

Quantitative

• Staff – Person-Centred Nursing Care Index (McCance, Slater & McCormack, 2008) (ED n=6, EDNS n=9)
• Patients – ‘Tell Us Ten Things’ – routine feedback (ED n=93, EDNS n=6)
Data Analysis

- Thematic analysis using deductive reasoning (Fereday & Muir-Cochrane, 2006)
- Preset analytic themes based on 4 main components of person-centred nursing framework (McCormack & McCance, 2010)
- Analysis by academic researcher with reflexive discussion with service user co-researcher
- Commentary and feedback on findings with members of Steering Group
- Reports disseminated to nursing teams
Results
Emergency Department

- **Key findings**: person centred care being supported through multi-disciplinary working, one-patient pathway and nurse practitioner role.

- **Areas for development**: leadership; care of frail elderly; meeting fundamental physical care needs; support of reception staff.

- **Feedback**: 7 workshops held with all levels of staff facilitated by chief investigator and service user researcher.
Agreed Actions

- **Leadership** – new de-brief model of handover across the teams; support for new starts; feedback on performance; further emotional support for staff

- **Communication** – name badges; consistent use of ‘7 stages of communication’; staff involvement in decision-making

- **Physical care & care of the frail elderly** – renewed focus on care rounding, snacks & drinks

- **Supporting reception staff** – extra training & effective communication
Results
Evening Service

• **Key Findings**: compassionate person-centred care evident despite task-orientated processes; valuable service supporting people to remain in own homes; range of skills and adaptability of the team; friendly supportive atmosphere.

• **Areas for Development** – Information sharing within the team and between evening and day service; staff involvement in decision making; working collaboratively with service users to schedule visits; developing methods for feedback from service users.
Agreed Actions

• Workshop co-facilitated by chief investigator and service user researcher.

• **Communication** – set up process for effective communication; pre visit guidance sheet; integration of staff across day and evening service; ongoing self-directed workshops

• **Meeting service user expectations** – leaflets to explain service and additional support services (3rd sector); new feedback questionnaire based on “Tell Us Ten Things”
Wider Impact

• ‘7 stages of communication’ used across wide range of development programme

• Emergency Department – action plan multi-disciplinary rather than nursing alone

• Learning from Evening District Nursing Service being spread to day service
Evaluation of service user involvement in Steering Group

• Focus group with service users – led by academic researcher
  – Themes: motivation for involvement; information sharing; changes over time; the research process
• Need for greater involvement and information sharing during analysis and implementation phase

“.. I’ve never felt that my lack of knowledge about the NHS has been a problem…”

“I think it’s a shame that it’s finishing now, because hearing the feedback from the training was really interesting… and I think it’s a shame to stop here. I think there’s possibly more that we could input there.”
Conclusion

- Collaborative process with service users drove the project direction
- Person-Centred Nursing Framework (McCormack & McCance, 2010) – helpful as both nurses and service users could engage with core themes
- Ethnographic methodology crucial, particularly involvement of service user researcher in non-participant observation – different lens
- Ongoing programme of practice development that has potential for wider impact.
References


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