

Scottish Person Centred Interventions Collaboration

SCOPIIC



Background:

One third of complaints to NHS Scotland are associated with care experience and relate to poor communication/ staff attitudes (ISD, 2011). A priority for NHS Scotland is to ensure that the way people are treated becomes as important as how quickly they are treated. The aim is to ensure high quality of care and positive care experiences for all patients.

SCOPIIC was commissioned by the Chief Health Professions Officer for the Scottish Government, in support of the Quality Strategy (2010). The studies focused on the evaluation of 2 interventions designed to change patient experiences of care – Caring Behaviours Assurance System (CBAS) and an augmented version of Releasing Time to Care (RTC+).

Aims and Objectives:

The main aims of the studies were:

- To provide a detailed operational definition of the interventions.
- To assess the impact of the interventions on patient and staff experience.
- To provide an indication of the degree to which the effectiveness of the interventions may be dependent on specific aspects of the clinical or organisational context.

Methods:

The interventions were evaluated in NHS Tayside using two stepped wedge trials with an embedded realist evaluation. Data on a range of staff and patient outcomes were collected both pre and post intervention. Primary outcomes were: 1) Patients' evaluations of nurse communication; 2) Nurses' perceptions of shared philosophy of care; and 3) Nurse reported emotional exhaustion. We collected a large number of secondary outcomes.

Findings (CBAS):

The stepped wedge trial included data from: 15 wards, 780 patients, 155 nursing staff, and 16 senior charge nurses. The realist evaluation included data from: 86 in-depth interviews with staff – pre intervention, immediately post, and 1 year on.

We found no statistical evidence to support the effectiveness of CBAS in improving the nurse or patient based primary outcome measures.

We found statistically significant improvements in two secondary outcomes:

- Nurses' positive affect.
- Senior charge nurse confidence to provide necessary treatment.

Findings (RTC+):

The stepped wedge trial included data from: 15 wards, 691 patients, 177 nursing staff of various grades, and 15 senior charge nurses. The realist evaluation included data from: 82 in-depth interviews with nursing staff and senior staff nurses, pre intervention, immediately post intervention, and 1 year on.

RTC-Plus was found to produce statistically significant improvements in two of the study's three primary outcomes:

- Patients' evaluations of nurse communication;
- Nurses' shared philosophy of care.

Statistically significant improvements were also found in:

- Patients' overall rating of ward quality
- Nurses' positive affect.
- Several items relating to nursing team climate.

Overarching Realist Evaluation Findings:

Implementation of ward based improvement programmes are not a one-off event. One size does not fit all. A number of factors that appear to influence the effective implementation of RTC+ and CBAS were identified:

Fit: How the initiative addresses the needs of the ward.

Relationships: The relationship the SCN has with the rest of the ward staff. How ward staff perceive their relationship with each other. The relationship facilitators have with the SCN and ward staff (e.g. credibility, personality etc).

Mode of delivery: Alignment of intervention delivery to the context of the ward. Adaptability of the intervention to the needs of the ward. Suitability of the ward receiving the intervention. Sufficient support to ensure successful implementation.

The importance of these factors in ensuring successful implementation depend on various ward **context factors:**

- The ward vision & culture.
- A presence of a positive SCN.
- And the wider ability for ward staff to engage.

ScoPIC Team:

University of Dundee:

Dr Debbie Baldie, Professor Martyn Jones, Dr Janice Rattray, Professor Peter Donnan

Glasgow Caledonian University:

Professor Suzanne Hagen, Ms Heather Strachan, Andrew Elders

University of Stirling:

Dr Carina Hibberd, Dr Edward Duncan, Dr Julie Taylor, Professor Margaret Maxwell, Ms Lucy Dickinson

NHS Tayside:

Mrs Eileen McKenna, Ms Tracey Passway, Mrs Kate Danskin, Mr Derek Colley, Ms Allyson Angus (Patient involvement)

University of Bangor:

Dr J Wilkinson (advisor), Professor J Rycroft-Malone (advisor)

NHS Forth Valley:

Mr Ben Sutherland

Edinburgh Napier University:

Professor Brian Williams

Contact Details:

General contact Stirling:

Karen Stanton
Unit 13 Scion House
University of Stirling
Innovation Park
Stirling
FK9 4NF

01786 466341

Karen.Stanton@stir.ac.uk

General Contact GCU:

Kim Stewart
Govan Mbeki Building
Glasgow Caledonian University
Cowcaddens Road
Glasgow
G4 0BA

0141 331 8100

Kim.Stewart@gcu.ac.uk

Twitter: [@nmahpru](https://twitter.com/nmahpru)

