

Views

Of

In-patient

Care

A measure of service user perceptions of acute in-patient care.

### Main Themes from the data

- I.Admission
- 2. Care & Treatment
- 3. Medication
- 4. Staffing
- 5. Therapy & Activities
- 6. Environment
- 7. Diversity

# **Diversity**

"I've had instances on there as well where they've said to us on a Sunday, 'do not trouble me'. This particular nurse said, 'do not trouble me, or any of you. This is Sunday, it's Bible day, so don't ask me for anything'. I've had another one say to me, 'you lot are evil because you don't believe in Jesus'. Now it's fine for people to have their religion. I'm not against anybody's religions, but do not use their religions on us because we're not there for religion. We're there to get ourselves well".

#### Recruitment

The demographics were intended to mirror those of an inner London acute ward, and these figures reflect all phases.

M = 69F = 48

Gender

Age Range 19—71

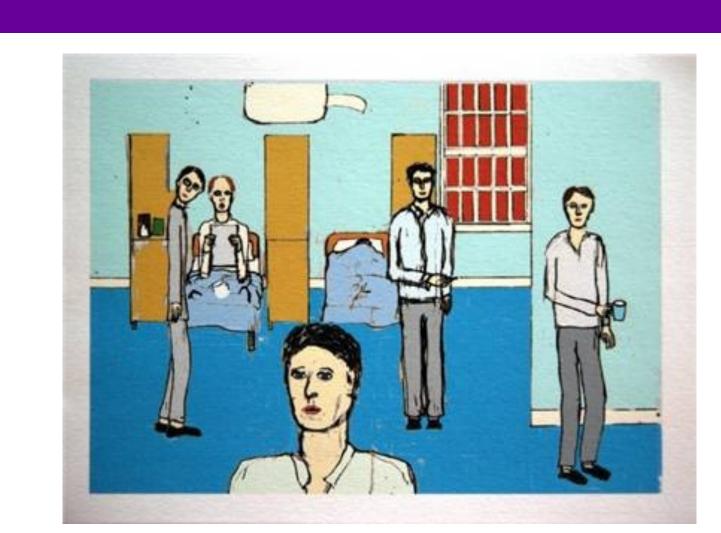
Ethnicity

White British = 55 BME = 62

TOTAL: 117

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Lasting Improvements to Acute In-patient Settings: LIAISE part 1 of the PERCEIVE project, C.I's Professor Wykes, Dr Rose, IOP, SURE



Guy Ward Dormitory I

### Research Aim:

To develop new measures of service user and staff perceptions of inpatient care, using a participatory research model pioneered by Dr Diana Rose (SURE, IOP).

### Samples:

- 2 user groups of acute inpatient services:
- staff (nurses and health care assistants)
- service users admitted to South London & Maudsley NHS Foundation Trust acute in-patient services within the last 2 years.

# **Reference Groups:**

Identified major themes from their experiences of either delivering or receiving services. These were incorporated into a flexible topic guide for the focus groups.

#### **Pilot Studies:**

Focus groups of 5-8 people met to discuss and expand on the topic guides. All groups were audio-taped and transcribed.

#### Focus Groups:

4 focus groups of 5-8 people met to discuss their experiences of delivering or receiving services. Each group met twice for the purpose of respondent validation. Focus groups were facilitated by either nurse researchers or service user researchers to exploit the participatory theme. Participants were paid £15 for each attendance. Retention at the repeat groups was 87% (staff) and 90% (service users).

# **Analysis & Measure Creation:**

Throughout the focus group process, each session was analysed using NVIVO software to identify key themes. The analysis generated items which the groups considered to be most important. These questions formed the content of the questionnaires.

### **Expert Panels:**

Draft measures were presented to 2 expert panels and the measures were adjusted, refined and reduced.

# Reference Group:

The draft questionnaires were then presented back to the original reference group for feedback.

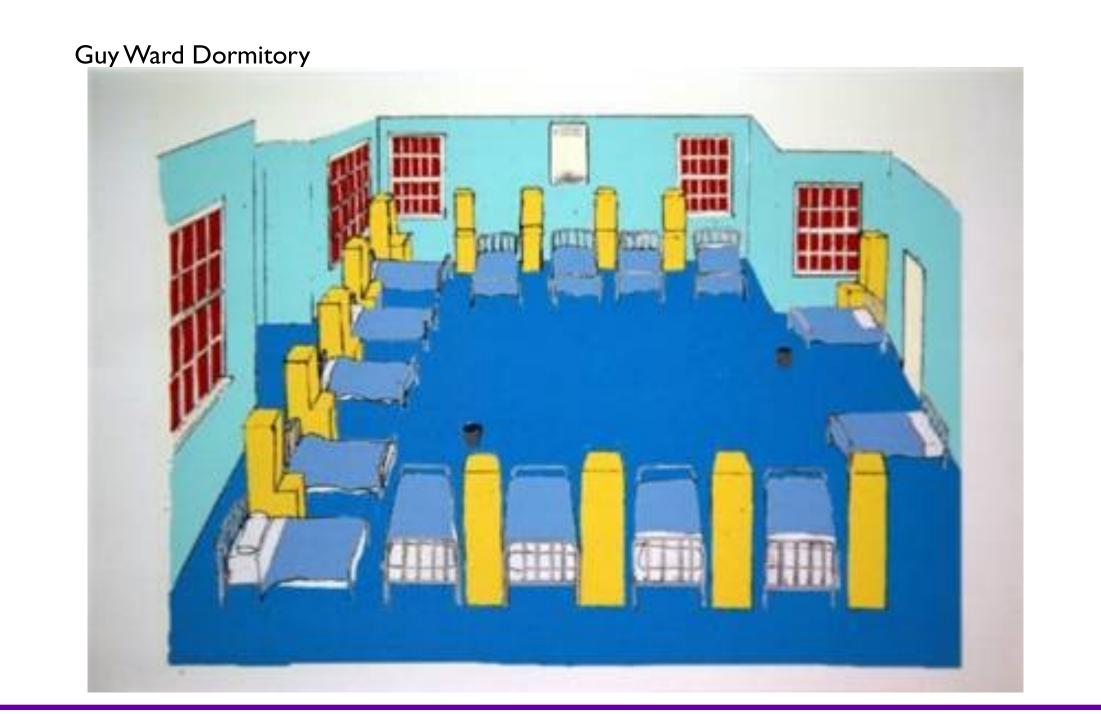
### Feasibility Study:

40 members of staff and 40 service users in hospital were asked to complete the measures. 97.5% service users and 95% staff agreed that the questionnaire was easy to understand and complete.

### **Psychometric Testing:**

Reliability: Internal consistency was assessed using Cronbach's alpha (VOICE = 0.94; VOTE = 0.87). Test retest reliability was assessed using Lin's concordance coefficient (VOICE = 0.91 (95% CI = 0.84 to 0.98); VOTE = 0.76 (95% CI = 0.64 to 0.88). Criterion validity was assessed using Pearson's correlation coefficient to compare VOICE and VOTE with another, similar measure (VOICE, r= 0.881) and (VOTE r = 0.45)).

Factor analysis and additional validity tests will soon be completed on a larger sample.



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KING'S College

LONDON Founded 1829

**University of London** 

Views On

Therapeutic **E**nvironments



A measure of staff perceptions of acute in-patient care.

### Main themes from the data

- I. Core Interventions
- 2. CPD (training)
- 3. Patient Care
- 4. Management (bed management)
- 5. Safety
- 6. Team Working

# Concern re: bed management

You take this up in clinical supervision, you take it up with your colleagues, and you say what are we doing here? This lady is saying I'm 8 over 10 suicidal and you're saying, "Well if you cut your wrists, go to A&E and we're putting you on leave". It's very difficult on you having to make that balance. You feel you're letting down the patients. They're saying I'm not ready but you're not listening to them you're saying I hear what you're saying but you've got to go which is traumatising for the nurse as well because you go home and you're saying I hope that lady is going to see the sun rise tomorrow.

#### Recruitment

The demographics were intended to mirror those of an inner London acute ward and these figures reflect all phases.

### Band

TOTAL: 131

Ward managers = 7 Charge nurses = 24 Staff nurses = 56 Nursing assistants = 43

Student nurses = I

Age Range

21—58

Gender

M = 56

F = 75

Ethnicity

White British = 44 BME = 87

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