



INTERVIEW GUIDE: Health professional perspectives on minimising treatment burden and maximising patient capacity

Background Information for the Interviewer

In situations where there is a lack of knowledge, questions will be posed in a manner which takes account of such a limitation.

The interview will be semi-structured in format, and thus the exact wording and prompts used may vary between participants to encourage them patient to share their views.

Introduction Procedure with Patients

1. Give complete name.
2. Identify self as a researcher from the Department of General Practice and Primary Care at the University of Glasgow.
3. Give short explanation of the purpose of the study:

'I would like you to help me understand the factors that influence how you plan or provide healthcare for stroke survivors. I am interested in particular about how we can provide healthcare that minimizes the burden on stroke survivors and maximizes their capacity to manage their own health. Please feel assured that no one will be able to identify you from what you say when talking to me and everything you tell me will be treated in the strictest confidence. As findings are recorded, please do not state the names of any patients or other identifiable information during the interview'

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If at any time you want to stop, or have a break, please feel free to let me know.

'I will be recording the interview, so I can remember all that you have said to me.'

PARTICIPANT PROFILE

Subject ID:

Age:

Gender: Male () Female ()

Profession:

- Stroke consultant ()
- Stroke doctor in training ()
- Stroke nurse ()
- Physiotherapist ()
- Occupational therapist ()
- SALT ()
- Psychologist ()
- Practice nurse ()
- GP ()
- Policy maker ()
- Health service manager ()
- Other () Please state:

Do you work in the:

- Hospital Setting ()
- Community ()
- GGC offices ()
- Government offices ()
- Other ()

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How long have you worked in this job?

- <1 year ()
1-5 years ()
5-10 years ()
>10 years ()
Practice nurse ()

Date and Time of Interview:

The interviewer will therefore explore the following general areas in an open fashion:

Information provision

Do you feel that information provision is currently adequate for stroke survivors?

If not, how could it improve?

What facilitates and prevents good information provision?

Multimorbidity

Do you think that comorbidities are dealt with adequately by stroke services?

If not, how could this be improved?

What facilitates and prevents stroke services dealing with comorbidity?

Who should deal with comorbidity e.g. community stroke team / hospital doctors / primary care?

Care co-ordination

How well do hospital teams and community stroke teams communicate?

How well do primary and secondary care communicate?

How well do health and social services communicate?

What facilitates and prevents the above communication?

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Hospital stay

Do you feel the hospital stay could be improved for stroke survivors?

If so, how?

Do stroke survivors undergo enough rehabilitation when in hospital?

Is the nursing care adequate?

What factors would prevent and facilitate improvements to the hospital stay?

The discharge process

What are the pros and cons of the current discharge process that patients undergo?

How could it be improved?

What would facilitate or prevent such improvements?

Access to services in the community

Do you think that stroke survivors have adequate access to stroke services in the community?

If not then what services are difficult to access and why do you think that is?

What would improve and prevent better access to these services?

Medications

How could stroke survivors be helped to understand their medications better?

How could stroke survivors be helped to adhere to medications?

Are stroke survivors prescribed too many medications?

How often should these be reviewed and by whom?

Financial aid

Do you think that stroke survivors get adequate financial aid following their stroke?

If not, how could this be improved?

What factors facilitate and prevent this aid reaching stroke survivors?

Who should provide support with this process?

Shared decision making

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Do you think that shared decision making is helpful to stroke survivors?

What do you think facilitates and prevents shared decision making?

Supporting the social network

Does an individual's social network (friends, family, neighbours) influence their ability to manage their health and follow treatments?

If so, how?

How can health and social services provide social support for stroke survivors and enhance their social network?

What factors may prevent or enhance the provision of such support?

Self-efficacy

Do health services currently promote self-efficacy in stroke survivors?

How might they do this better?

What are the potential barriers and facilitators to this?

Physical disabilities

Do health services adequately support stroke survivors with physical disabilities in the community?

How might they do this better?

What are the potential barriers and facilitators to this?

Cognitive difficulties

Do health services adequately support stroke survivors with cognitive difficulties in the community?

How might they do this better?

What are the potential barriers and facilitators to this?

Psychological difficulties

Do health services adequately support stroke survivors with psychological difficulties (e.g. low mood, anxiety) in the community?

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How might they do this better?

What are the potential barriers and facilitators to this?

At close of Interview

The interviewer will ask the participant if there are any issues they would like to mention which haven't been covered.

And thank the participant, and reiterate that all they have discussed is confidential.

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