

# SPACE Study: Managing care for older people in community hospitals

## Key Findings

### Patient interviews

showed that patients preferred:

- ◆ Continuous communication with healthcare staff during their stay, with no restriction on time or topic
- ◆ Communication with family about care and treatment, particularly over the phone to avoid burden
- ◆ All information shared with their GP
- ◆ Hospitals closer to home

Overall, 30 patients who took part were able complete the interview. But some struggled to understand the fictional nature of the questions.

### Consultations with staff

Key themes from focus groups discussions were 'managing an older patient population', 'communication' and 'using documents to support continuity of care'

Staff wanted standardised documents to support communication with patients, families and between clinical teams.

Documents need to be clear and quick to use while capturing a complete picture of the patient.

Staff wanted adequate training and support to ensure documents are used and interpreted correctly.

## Why is this important?

People are living longer and often with several conditions. This means there may be uncertainty as to how well a person will recover. We need to support both recovery and plan for potential decline. Using standardised documents can enhance how we manage care and improve outcomes for patients. However, their use in community hospitals is unknown.

## What was the aim of this study?

To explore the priorities and preferences for patients, families and healthcare staff to manage care for people in community hospitals, during clinical uncertainty, using documents. We also explored how accessible patients found our structured approach to identify preferences and priorities for care.



### Who did the study?

The study was led by **Dr Catherine Evans** as a joint study between King's College London and Sussex Community NHS Foundation Trust, and funded by the **National Institute for Health Research (NIHR)\***.

### Further study and contact details:

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## What did we do in the study?

### Patient interviews

Patients completed a questionnaire booklet. The booklet detailed eight sets of choices describing two fictional healthcare services and participants were asked to choose one. The combination of the 8 choice sets indicated patients' preference and the priority of those preferences.

A research nurse guided patients through the questionnaire and choice sets. This method was piloted with the first 5 patients to take part. Their interviews were audio recorded to inform understanding.

### Consultations with staff

We invited staff from four community hospitals. We tried to ensure all professions were represented within our groups including nurses, occupational and physiotherapists, social workers and geriatricians. Consultations were held at the four community hospitals to aid attendance.

Staff were asked to discuss the following questions:

- ◆ What are the key characteristics of documents for clinical practice?
- ◆ How can we enable staff to use documents in clinical practice?

Staff attendees discussed their responses in focus groups. Staff made recommendations for each question and agreed their top three as a group.

## What did we find out?

### Patient interviews

Patients wanted continuous communication and assessment of their concerns and preferences throughout their stay in a community hospital. Patients also wanted to be able to discuss as many topics as possible, such as shared decision-making and future care needs.

Communication with family was a priority for patients. But this needed to be balanced with not burdening their families. Patients preferred staff to communicate with their family by phone and to be cared for in a community hospital closer to home to enable family and friends to visit.

*How it concerns me, yes, because my family's within 15 miles – Patient B03021*

Patients wanted their GP's to have all the information available about the care and treatment received while in hospital, despite often limited availability of a named GP.

*Yeah, you would need to, yeah, I think it needs to be ongoing – Patient B02022 on communication*

*Yeah and, you know, the family think, I wouldn't want them out of it completely, if they wanted to come in and discuss things I'd like it to be an option yeah but not feel that they were pressurised into it – Patient B02022*

We found it feasible to collect data in this way with this population with a research nurse as a guide. Some patients did struggle with the fictional nature of the questions but 91% of those who took part completed at least 6 of the 8 question sets.

### Staff consultations

We conducted four consultations with 48 healthcare staff and one individual interview. This produced a final set of 20 recommendations on documents for managing care. Key themes within focus group discussions were around 'managing an increasingly older population with uncertain outcomes', 'continuous communication' and 'using documents to support continuity of care'.

Findings showed a need for documents that aid communication with patients, families and other clinical teams. Documents must be clear and concise while capturing the patient as a whole and introduced with training. Staff wanted documents to travel with the patient to communicate with other healthcare staff.

*'making the information movable between care settings so the information is fluent and the same' A01008 Older people mental health liaison*

### Publication

This research is in the process of being published and will be freely available online in the future.