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| **Summary Abstract :**  **UK Conversation Guide Research**  **1. ‘Face validity’, acceptability and relevance of the Serious Illness Conversation Guide, for use within the UK health care setting.**  The Serious Illness Conversation Guide (‘the guide’) is an evidence-based clinical tool to support clinicians to have focused conversations with their patients regarding current and future care. The aim of the conversation is to find out what matters most to the patient in regards of their care, and through this promote shared decision making.  Prior to pilot implementation of the Serious Illness Care Programme in the UK, work was required to assess whether the guide was appropriate for use in the UK setting.  **2. RESEARCH AIM**  To examine the ‘face validity’, acceptability and relevance of the Serious Illness Conversation Guide for use within the UK health care setting.  **3. METHODOLOGY**  A mixed methods approach was taken, engaging with a wide range of stakeholders, including healthcare professionals and members of a patient and public involvement (PPI) group from within The Clatterbridge Cancer Centre.  The research was structured as follows:  ***Stage 1 - Nominal Group***  Nominal Group Technique (NGT)1 was used to reach consensus, comprising 3 expert groups of healthcare professionals; with expertise in Oncology, Palliative Care and Communication Skills. |  | ***Stage 2 - Cognitive Interviewing***  Cognitive interviews,2,3 specifically using the ‘think aloud’ technique,4 were conducted on a one to one basis, to understand how participants perceive and interpret the prompts within the Guide.  ***Stage 3 – Final Stakeholder Review and Consensus of the Serious Illness Care Guide***  Multiple stakeholders, including representatives from the Patient Council and NHS England reviewed results from the Nominal Group and Cognitive Interviews before we achieved final agreement on amendments to the Guide.  **4. RESULTS**  ***Stage 1 - Nominal Group***  Fourteen participants attended:   * 5 oncology consultants * 4 palliative care experts: 3 palliative care consultants, 1 Specialist Trainee in palliative care * 4 communication skills experts: 3 Senior Lecturers in communication skills; 1 palliative care consultant and communication skills lecturer   Consensus gained:   * Conversation guide could provide support for clinicians to initiate difficult conversations with patients with serious illness * Minimal amendments to wording suggested however final changes to be put forward following Cognitive Interviews with Patient and Public Representatives. |

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| ***Stage 2 - Cognitive Interviews***  Six Patient and Public Representatives took part in the cognitive interviews. Overall, participants felt the guide was a useful ‘conversation piece’, promoting a ‘partnership’ approach to care planning, empowering patients to talk about what is most important for their future care:   * Participants valued the attention to the patients ‘holistic’ needs as an individual, rather than exclusively focusing on their ‘disease’ * Education and training is key; participants had concerns that use of the guide could create an artificial ‘interview’ situation. Clinicians will require skill to incorporate prompts into a ‘natural’ conversation * All participants agreed the final phrase in the guide, “we’re in this together”, could undermine the patient centred aim: consensus that this prompt be removed.   **5. Conclusion**  Results suggested that, pending modifications informed by cognitive interviews, the guide would effectively support clinicians in initiating high quality serious illness conversations. Although the guide, and the programme as a whole, was viewed as a potentially positive intervention, robust research and evaluation on its effect was recommended and that further evaluation of the efficacy of the guide in clinical practice should be conducted prior to any local or national ‘roll out’. |  | **6. REFERENCES**  1. Delbecq, A. L., Van de Ven, A. H. (1971) ‘A Group Process Model For Problem Identification and Program Planning’, *The Journal of Applied Behavioral Science* 7(4): 465-492.  2. Presser, S., Couper, M.P., Lessler, J.T., Martin, E., Martin, J., Rothgeb, J.M., and Singer, E. (2004) ‘Methods for Testing and Evaluating Survey Questions’, *Public Opinion Quarterly,* 68(1): pp. 109-130.  3. Campanelli, P. (1997) ‘Testing Survey Questions: New Directions inCognitive Interviewing’*, Bulletin de Méthodologie Sociologique,* 55(1): pp. 5-17.  4. Czaja, R. (1998) ‘Questionnaire pre-testing comes of age’, *Marketing Bulletin,* 9: pp. 52–66. |