

Tackling the rhetoric: an evidence-based support needs tool to enable supportive care in advanced nonmalignant disease

A. Carole Gardener¹, Gail Ewing², Morag Farquhar^{3,1}

Background

Problem:

Delivery of supportive and palliative care to patients with advanced non-malignant diseases such as COPD is hampered by the challenge of prognostication and unpredictability of disease trajectories

Possible solution:

 An alternative approach is delivery of care and support in response to patient-identified need

Aim

 This study aimed to develop a support needs tool for patients with advanced COPD, to enable patients to identify and express their support needs

Methods

Two stage qualitative study:

Stage 1:Identification of domains of support need in advanced COPD via:

- rapid review of literature
- analysis of qualitative data from the Living with Breathlessness Study (n=20 purposively sampled patients with advanced COPD)
- focus groups (n=3) with patients with advanced COPD

Stage 2: Development of the Support Needs Approach for Patients (SNAP) tool

- formulation of identified domains of need into questions (tool items)
- review and refinement of draft tool in stakeholder workshops (n=5; with patients, community respiratory team, and primary care practices) to establish acceptability and suitability for clinical practice

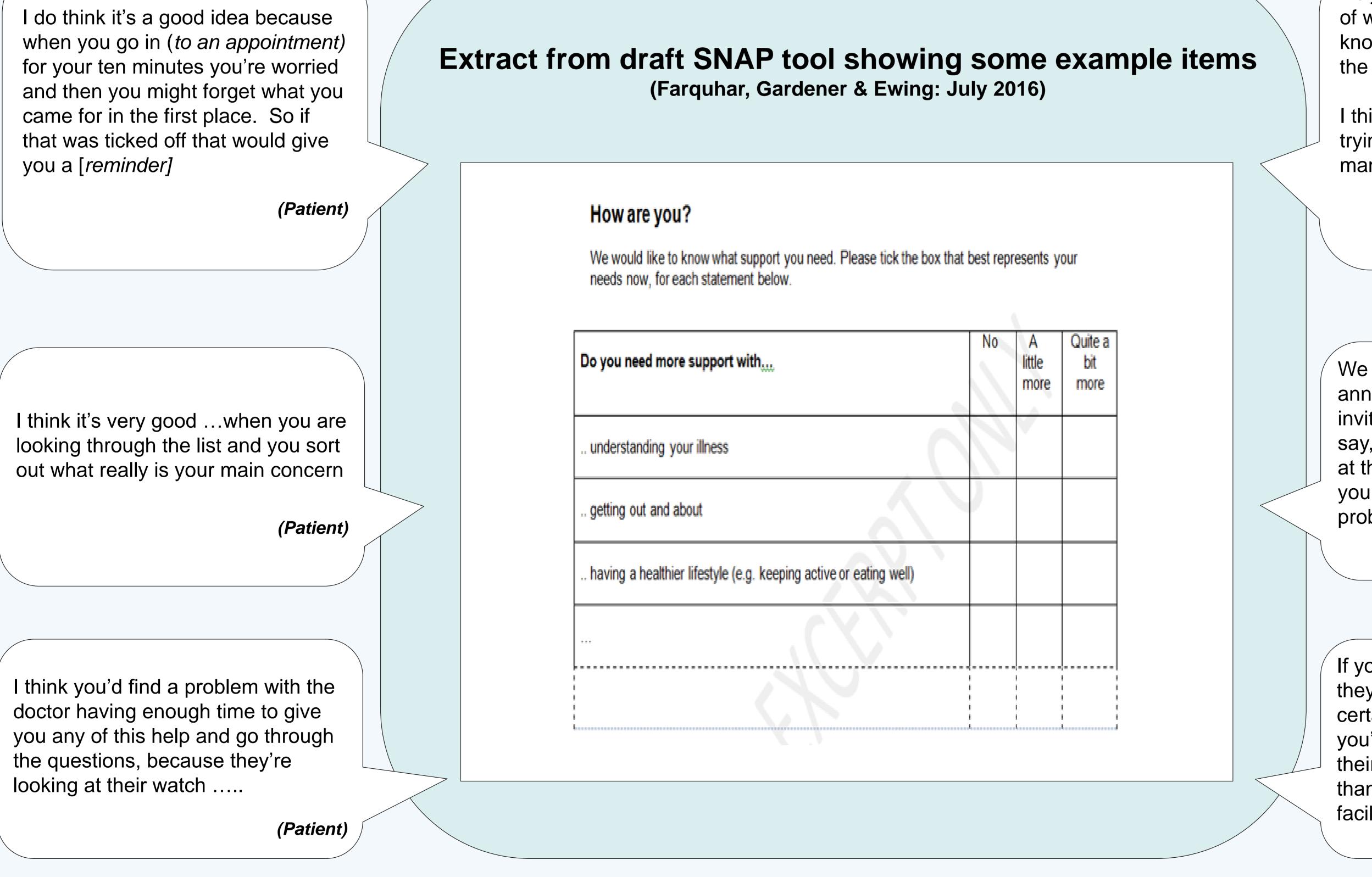
Results

The developed SNAP tool is:

- provided by the clinician but completed by the patient
- asks patients to consider whether they need more support in relation to 16 broad areas (domains) of support need

Stakeholders:

- described the range of evidence-based domains of support need as comprehensive, and the layout as patient-friendly
- broadly endorsed SNAP tool and approach, but concerned about number of domains, time required within the consultation, and meeting patient expectations. (These issues will be tested in a future study)



It's just the patient being in charge of what they want to do, you know.... It's not about us, it's about the patient

I think it works nicely because we're trying to encourage patients to selfmanage so it kind of supports that.

> (Community Respiratory Team members)

We send out invitations for COPD annual reviews anyway, written invitations; it would be very easy to say, "Please could you have a look at the enclosed [...] and bring it with you because it will help us solve problems."

(GP)

If you're getting them to fill this in they (the patients) will then have certain expectations as to what you're actually able to achieve and their expectations may be higher than our facilities ... to actually facilitate that change

(GP)

Conclusions

- The SNAP tool has potential to help patients with advanced COPD, and other non-malignant diseases, identify and express their support needs to enable delivery of supportive care.
- Follow-on work is testing tool validity and feasibility of the approach.

Carole Gardener Primary Care Unit Dept. Public Health & Primary Care University of Cambridge CB2 0SR acg68@medschl.cam.ac.uk @acgardener

Contact:

Affiliations:

2. Centre for Family Research, University of Cambridge

1. Dept. of Public Health and Primary Care, University of Cambridge 3. School of Health Sciences, University of East Anglia



This paper presents independent research funded by the National Institute for Health Research School for Primary Care Research (NIHR SPRC). The views expressed are those of the authors and not necessarily those of the NIHR, the NHS or the **Department of Health**

