Organising Support for Carers of Stroke Survivors (OSCARSS): A work-in-progress Process Evaluation

Sarah Darley, Emma Patchwood, Kate Woodward-Nutt, Sarah Knowles, and Audrey Bowen on behalf of the OSCARSS Research Team,
NIHR Collaboration for Leadership in Applied Health Research and Care (CLAHRC) Greater Manchester and University of Manchester MAHSC

Introduction

This is a process evaluation of OSCARSS, an ongoing cluster randomised controlled trial of a staff behaviour change intervention *(full details on poster OG09).*

The process evaluation will help make sense of the final trial outcomes and using mixed methods intends to assess:

• whether the intervention is implemented per protocol
• how context influences outcomes
• sustainability and scalability of the intervention

Theoretical approach

Data were generated and will be analysed drawing upon Normalization Process Theory (May and Finch, 2009).

Normalization Process Theory includes four constructs that help to explain how staff:

• understand the intervention **(Coherence)**
• get involved in the intervention **(Cognitive participation)**
• use the intervention **(Collective action)**
• evaluate the intervention **(Reflexive monitoring)**

The questionnaire distributed to staff within the intervention arm contained items reflecting these four constructs taken from the NOrmalization MeAsure Development (NoMAD) tool (Finch et al. 2013).

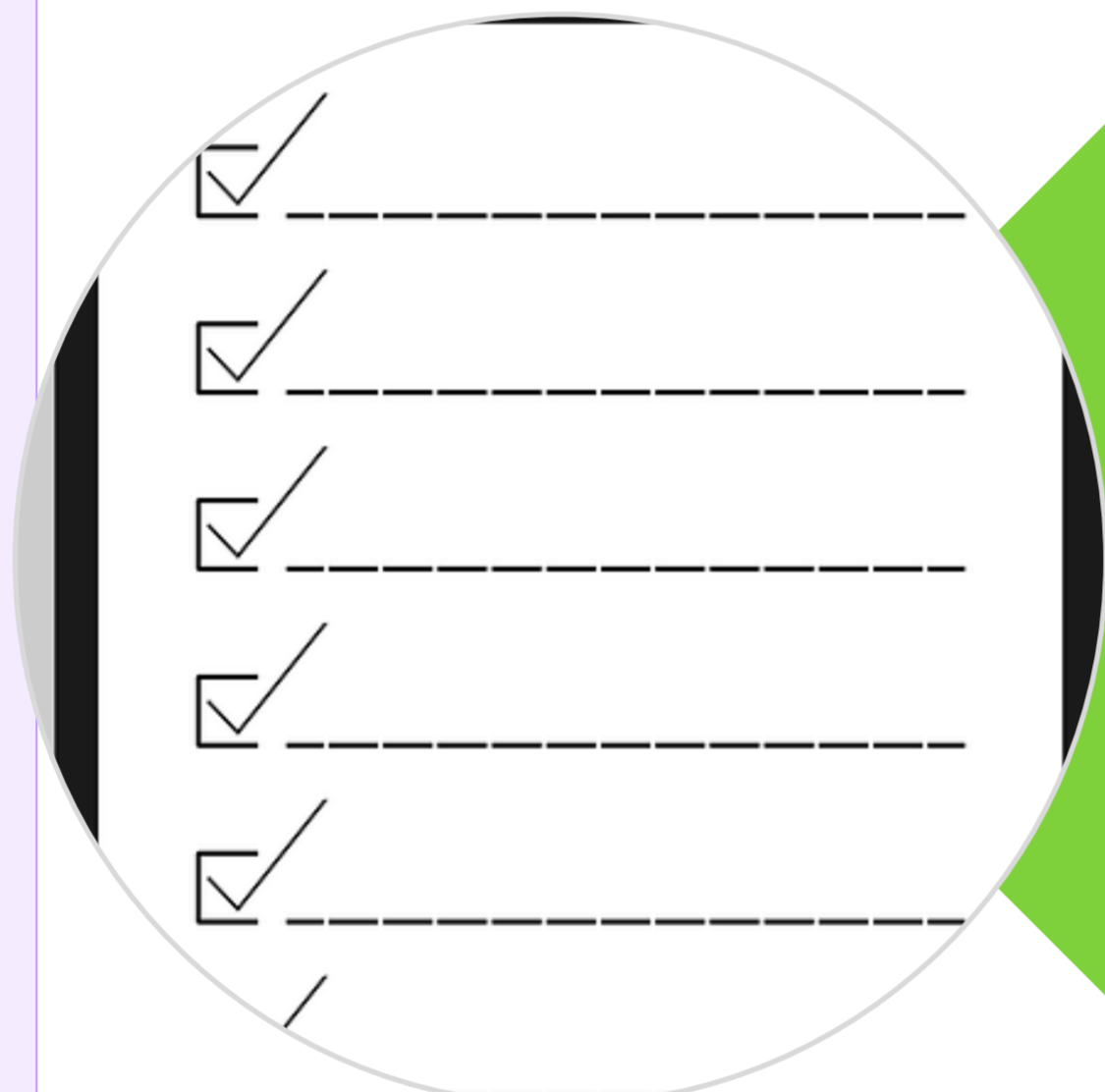## Data methods and progress
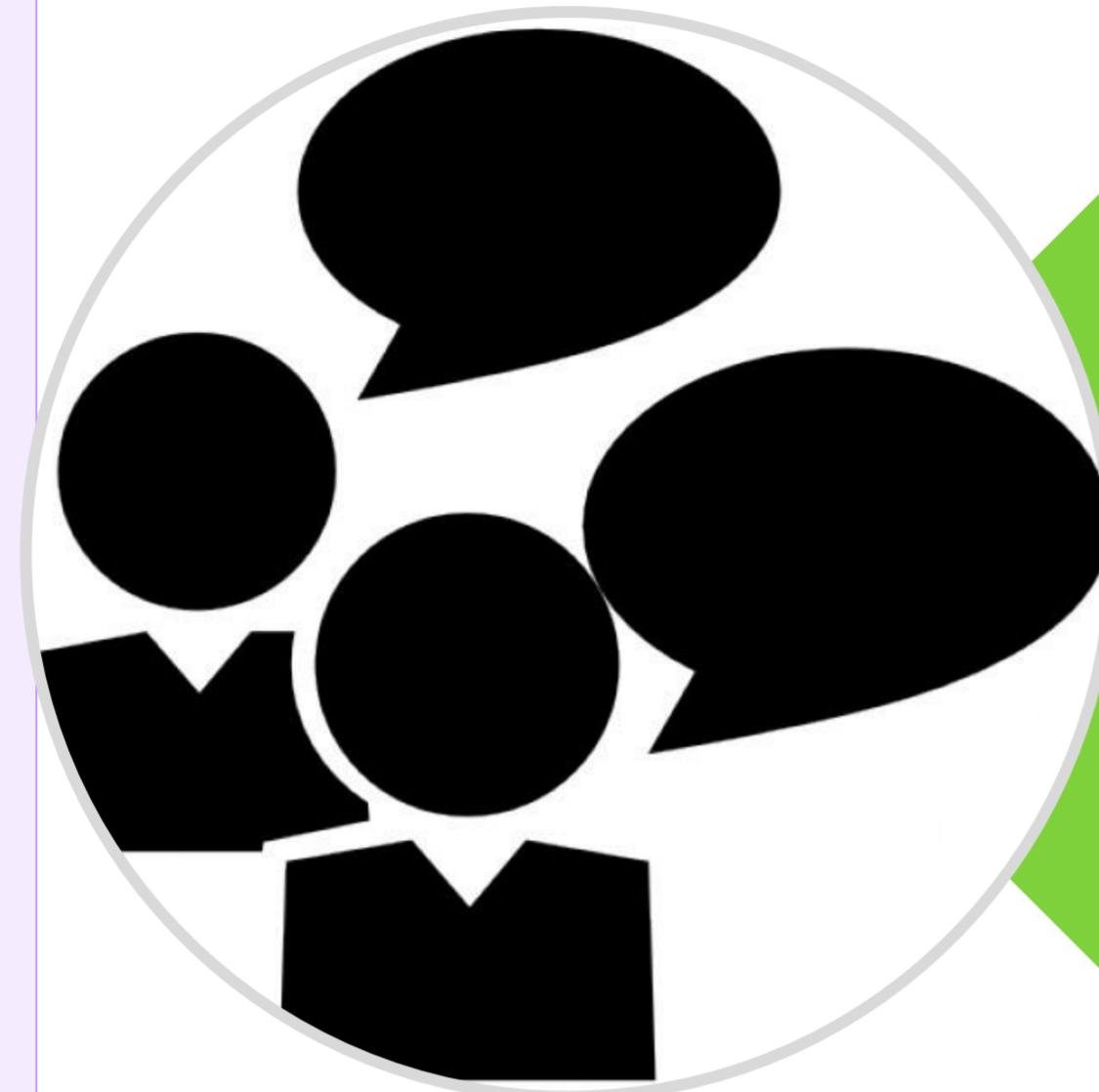
Qualitative interviews with carers

Conducted at:

- Study entry, N=21 (Intervention=11, Control=10)
- 3 months post intervention, N=11 (Intervention=4, Control=7)

All interviews completed! Analysis underway

Online questionnaires with frontline staff

Conducted at:

- pre-randomisation, N=67
- 18 months post intervention, N= 41 (Intervention=20, Control=21)
- 24 months post intervention, N=38 (Intervention=20, Control=17)

Data collection and analysis completed!

Qualitative interviews with frontline staff, and managers

Conducted at:

- 24 months post intervention, N=31 (Manager=11, Intervention=12, Control=8)

All interviews completed! Analysis underway

Data analysis

• Questionnaire data will be descriptively analysed, including the NOMAD items
• Interview data will be thematically analysed drawing upon Normalization Process Theory
• All data will be synthesised drawing upon Normalization Process Theory to meet the aims of the process evaluation.

Emerging findings

Analysis is in early stages, however emerging findings from the online staff questionnaire show:

• Understanding of the potential value of the intervention **(Coherence)**
• A belief that the intervention is a legitimate part of their role and an openness to working with other colleagues on it **(Cognitive participation)**
• OSCARSS training was sufficient for staff to implement the intervention **(Collective action)**
• A perceived value of the effects of the intervention on their work **(Reflexive monitoring)**

Next steps

Analysing carer and staff interview data:

• Coding data inductively and deductively using Normalization Process Theory
• Identifying broader themes

Synthesising the data:

• Integrating the descriptive data from the questionnaire to the broader themes

Triangulating the interview and survey data intends to produce a detailed understanding of the implementation of the intervention, the context it is being implemented within, and staff perceptions and experiences of using it.

References

Finch et al. (2013). Improving the normalization of complex interventions... *Implementation Science*, 8:43

May and Finch. (2009). Implementing, Embedding, and Integrating Practices: An Outline of Normalization Process Theory. *Sociology*, 43(3): 535-554

@CLAHRCGM @sardarl @audreybowenprof @DrPatchwood

Sarah.Darley@manchester.ac.uk