

## **Appendix 14**

### **Evaluation Methods – Client Focus Groups**

#### **Aim**

This component of the Community Health Risk Management Project aimed to explore clients' perceptions of community nursing services and the appropriateness of having lifestyle risk factors addressed. This information was expected to enhance our understanding of the acceptability of risk factor management to community health clients and it could be a useful guide in the development and implementation of future risk factor models.

#### **Objectives**

1. To form an understanding of clients' perceptions of the role of community health nurses;
2. To form an understanding of clients' expectations of the services that community health nurses provide;
3. To ascertain client receptiveness to community nurses screening for lifestyle risk factors;
4. To ascertain client receptiveness to the lifestyle risk factor interventions offered by community nurses .

#### **Method**

Data was collected through two client focus groups. This method can be used to explore poorly understood issues, test hypotheses or assist with the interpretation of quantitative data (Stewart and Shamdasani 1990: 10, 15). Focus groups in this enquiry provided data about a little researched poorly understood phenomenon- clients' perceptions of the community nurse role with regard to the inclusion of risk factor management in client consultations.

#### **Participant recruitment**

A list of prospective participants from teams 1 and 2 was generated from the community health information system (CHIME). Prospective participants had to have been seen by a community health nurse within 1-6 months of the focus group and to be 18 years or older. The project officer for each team and the community nurses who attended these clients culled the names of individuals of unlikely candidates. These included, for example, clients who were unable to travel to the focus group, unable to communicate in a group forum or who were terminally ill.

One hundred and thirty one eligible clients were identified from the client pool of Team 1 and 66 clients were eligible from the client pool of Team 2. After consultation with the community nurses a total of 32 and 57 clients were identified as appropriate to invite in Teams 1 and 2 respectively. Prospective participants were sent a written invitation, the participant information sheet and consent form. Those who did not RSVP by the due date were phoned by the respective project officers to determine whether the invitation had been received and their interest in participating. A total of 8 clients agreed to participate in Team 1 and 5 clients in Team 2. All clients who agreed to participate attended the focus group.

Focus groups were not offered to Team 3 clients because this team is atypical of community health services. In addition the geographical isolation of these clients precluded their participation in this component of the project.

## **Questions**

Questions explored clients:

- understanding and expectations of the role of the community health nurse (ie. general function and nursing tasks);
- views about the appropriateness of community health nurses screening them for lifestyle risk factors, and
- views about the appropriateness of community health nurses offering assistance (interventions) to help them better manage their lifestyle risk factors.

## **Focus Group Implementation**

- Focus groups were conducted during the day and lasted between 70 and 80 minutes.
- One group was held in a hospital education centre while the other was in a community hall.
- A light lunch / refreshment was provided.
- The evaluation officer conducted the focus groups and the Project Leader made hand written notes which recorded, for instance, the order of speakers, and non verbal cues.
- Focus group discussions explored broad issues associated with community nursing and risk factor management nursing activities as per the questions above.

## **Focus Group Analysis**

Data analysis process

- Focus groups were transcribed verbatim and transcriptions read.
- Themes relating to each question were coded and stored with the assistance of the qualitative software, Nvivo 7.
- Themes were cross-checked with interview data and revised accordingly to ensure they captured the range of responses offered by participants to the various questions.
- Themes were categorised.

## **References:**

Stewart D.W. & Shamdasani P.N. (1990) Focus Groups. Sage Publications London.