



ABI JOURNAL CLUB



A qualitative evidence synthesis exploring people after stroke, family members, carers and healthcare professionals' experiences of early supported discharge (ESD) after stroke

Elaine O. Connor Eamon Dolan, Frances Horgan,
Rose Galvin, Katie Robinson

PRESENTER: Alison M McDonald, PT

LAND ACKNOWLEDGEMENT

Nova Scotia Health is located in Mi'kma'ki, the ancestral and unceded territory of the Mi'kmaq People, and we acknowledge them as the past, present, and future caretakers of this land.

May this acknowledgment demonstrate a commitment to working to dismantle ongoing legacies of oppression and inequities and recognize the current and future contributions of Indigenous communities in Nova Scotia.



Disclaimer

The goal of the ABI Journal club is to foster skills of research critique, promote interprofessional interaction and encourage the inclusion of evidence-based practice.

Please join us in creating a safe and approachable learning environment.

Please note that although presenters may have an interest in the article that is presented, they may not necessarily be an expert in that field.

This event is for your learning only. Please do not distribute slides or recordings. Recordings can be distributed by Journal Club organizers only.

Article: A qualitative evidence synthesis exploring people after stroke, family members, carers and healthcare professionals' experiences of early supported discharge (ESD) after stroke

Why is this a good paper to read for journal club?

- This was a good qualitative study design
- Current: February 2023 (submitted Oct 2022)

How/why did you pick it?

- An Early Supported Discharge service will be starting soon as part of the ABI Program
- Articles in research article synthesis come from countries with similar health systems to ours



Why is this issue relevant

- The incidence of stroke is increasing as population ages
- Stroke continues to be a major cause of disability
- Transition home is key – salience and specificity matter
- International best practice guidelines endorse ESD as a form of rehabilitation for those with mild to moderate stroke
- ESD leads to significant cost savings and reduction in both hospital LOS and long-term dependency



What drove the researchers to want to explore this further

- James Lind Alliance - Priority Setting Partnerships
- Stroke rehabilitation does not happen just in one place so there is a need for researching people with stroke and carers experiences of the stroke pathway/continuum
- Healthcare is looking for significant cost savings and reduction in both hospital LOS and long-term dependency but we mustn't lose the voice of the person with stroke, carers and HCP



THE PRIMARY ISSUE DISCUSSED IN THE ARTICLE

What is the significance of this problem?

- Experiences and views of Early Supportive Discharge(ESD) of people after stroke, family members, carers and healthcare professionals (HCP) will be a huge factor in the success and sustainability of ESD
- This is best answered by a synthesis of qualitative evidence

Highlight historical interventions/theory relevant to this issue

- Other reports of qualitative studies on the experience of ESD from perspective of people after stroke, carers and HCP have been published
- 2 main themes:
 - 1) psychosocial aspects of ESD and
 - 2) Logistical components of ESD
- Several qualitative studies on this topic have been reported

Highlight why the authors decide to write this paper on this topic now.

- Previous database searches were limited:
 - Topic needs to be updated:
 - Cite a review done in 2018, no publications after 2016 were included
 - Only 3 databases searched:
 - MEDLINE, CINAHL and Embase

HISTORICAL INITIATIVES

Highlight why the authors decide to write this paper on this topic now.

- Authors wanted to explore all the experiences and views of people after stroke, family members, carers and HCP regarding ESD to inform future service developments and research
- Did this by increasing the number of databases searched and search terms used



BACKGROUND INFORMATION

Types of studies:

- Primary studies that used recognized methods of qualitative data collection and analysis
- Mixed method studies where qualitative data could be extracted

Topics of Interest:

- Experiences or views of people after stroke, family members, healthcare providers/managers of ESD programs

ESD Model of Care:

- People with mild to moderate stroke have accelerated discharge from acute setting to their home environment to continue their rehab at home



BACKGROUND INFORMATION

Search Selection:

- 11 databases: CINAHL, PubMed Central, Embase, MEDLINE, PsychINFO, Sage, Academic Search Complete, Directory of Open Access Journals, The Cochrane Library, PsycARTICLES and Scopus
- Years: 1995 to January 2022
- 3 Key Concepts: “early supported discharge”, “stroke” and “qualitative” in conjunction with MeSH terms
- The first 5 pages of Google Scholar results were searched using the three key concepts
- Included peer reviewed publications and theses



BACKGROUND INFORMATION

Selection Procedures:

- 2 reviewers independently read each full text article
- Third reviewer was consulted to read any full text article when consensus not reached:

Critical Appraisal and Data Extraction:

- 10-item Critical Appraisal Skills Program (CASP) checklist for qualitative studies

Thematic Analysis:

- Thematic synthesis is commonly used for a qualitative evidence synthesis

WHAT WERE THE INTENDED OUTCOMES OF THIS RESEARCH?

THE SPECIFIC AIMS OF THE PAPER

- Authors wanted to explore all the experiences and views of people after stroke, family members, carers and HCP regarding ESD
- Use this information to inform future service developments and research



Methods: Article Search Selection

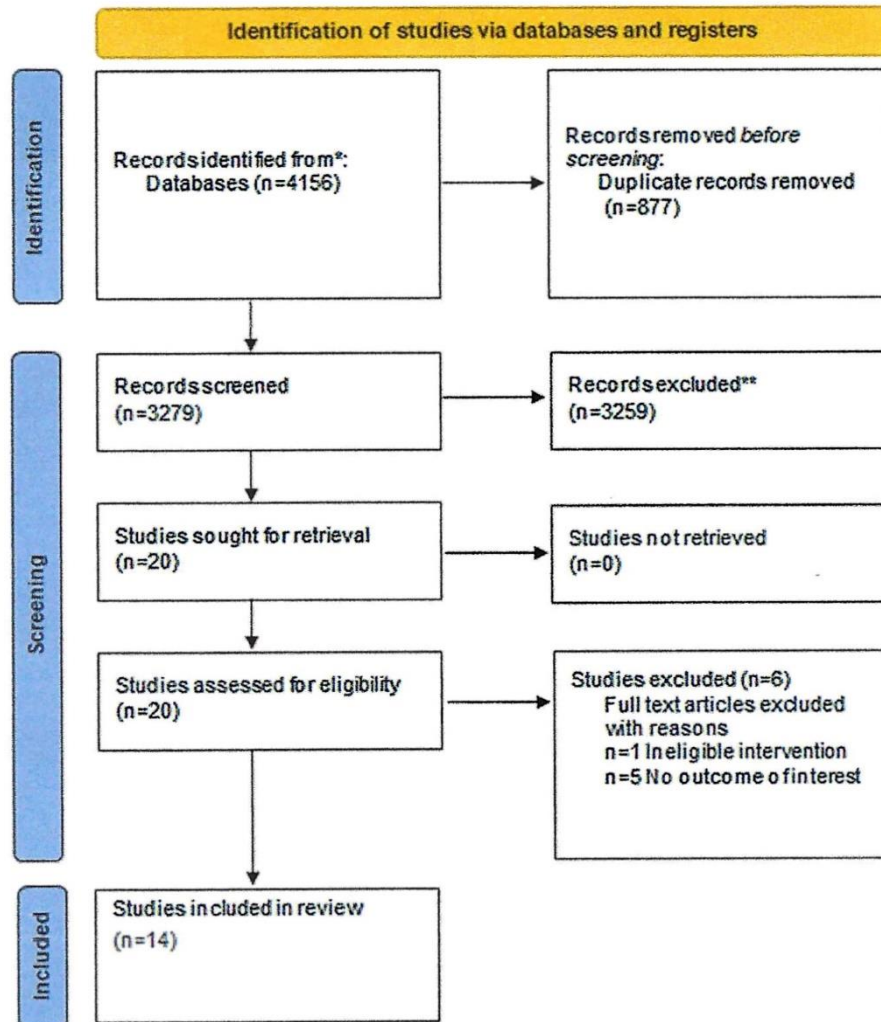


Fig 1. PRISMA flow diagram.

METHODS

Initial search: 4156 articles with 877 duplicate articles removed

Excluded: 3259 articles for not meeting inclusion criteria

Remaining: 20 full-text articles – eligibility assessed by the three authors

Final review: 14 articles

- All were in high income countries (World Bank)
- United Kingdom: 6 studies
- Sweden: 3 studies
- Denmark, Ireland, Canada, Australia and Norway: 1 article each



RESULTS

Five key themes were identified:

Theme 1: **ESD eases the transition home, but not to community services**

- “Before I actually came out of hospital, before coming home, I panicked slightly, and I thought going through my mind, how am I going to get around with the walker?.. I’ll never manage, what am I going to do?”

RESULTS

Theme 2: The home environment enhances rehabilitation

- “PwA pantomimed marching to depict the atmosphere in the hospital (points forwards to a cup of tea on the table). You can have a cup of tea yea yea Like we are now Yes (smile)

RESULTS

Theme 3: Organisational and interprofessional factors are critical to the success of ESD

- Flexibility to meet the needs of those post-thrombolysis and thrombectomy
- Inadequate data sharing and lack of linked/shared IT system was a barrier to communication between ESD and the acute hospital – benefits of regular service management (MDT) meetings and a Case Manager/Co-ordinator role

RESULTS

Theme 4: ESD is a goal focused and collaborative process

- "They (the municipal healthcare team) really came and stayed here and did something. They showed faith in positive development and supported me in that. It's important to convey that recovery can still happen, although the progress is slow."



RESULTS

Theme 5: **Unmet needs persisted despite ESD.**

- “We act like a kind of an ombudsman for the patient. We make it easier for the patients and you assist them in finding the right authority for their problems.”



COMPARISON/EVALUATION OF METHODS

How did they evaluate their method and what reference standards were used?

- They used the CASP Checklist for qualitative studies
- They conducted and reported this qualitative evidence synthesis has adhered to ENTREQ guidelines – they published their checklist for readers to see.

AUTHOR'S CONCLUSIONS

How did they summarize their work?

- 5 themes
- Table using the CASP Checklist used to assess the quality of included studies
- Quotes from participants

JOURNAL ARTICLE EVALUATION

Are the methods described in sufficient detail? Do they make sense? Should they have done something differently?

Could you figure out how to implement the intervention from what they wrote?



Was there any issues with sampling? Do the participants adequately reflect that the group that they represent?

What do you like about the method, implementation, and evaluation, especially with reference to the Acquired Brain Injury content?



What don't you like?

Can the results be used to solve other problems? How generalizable are the results?

What might come next?



SUMMARY

Authors' conclusions:

- ESD is experienced as a goal-oriented and collaborative process leading to positive outcomes
- ESD eased the transition from hospital to home but the transition from ESD to community services was often problematic



SUMMARY

Authors' conclusions (continued):

- HCP, carers and people after stroke agreed that the home environment enhanced rehabilitation
- Despite the provision of ESD services, a number of unmet needs persisted especially information needs and carer support needs



REFERENCES & RECOMMENDED READING

RESEARCH ARTICLE

A qualitative evidence synthesis exploring people after stroke, family members, carers and healthcare professionals' experiences of early supported discharge (ESD) after stroke

Elaine O. Connor ^{1,2}*, Eamon Dolan², Frances Horgan³, Rose Galvin¹, Katie Robinson¹

¹ School of Allied Health, Faculty of Education and Health Sciences, Ageing Research Centre, Health Research Institute, University of Limerick, Castletroy, Limerick, Ireland, ² Connolly Hospital, Blanchardstown, Dublin, Ireland, ³ School of Physiotherapy, Royal College of Surgeons in Ireland (RCSI) University of Medicine and Health Sciences, Dublin, Ireland



RECOMMENDED READING

Effect of early supported discharge after stroke on patient reported outcome based on the Swedish Riksstroke registry

- Anna Brandal, Marie Eriksson, Eva-Lotta Glader & Per

BMC Neurology Published: 12 March 2019

ACKNOWLEDGEMENT

THANK YOU to those who have assisted in choosing, evaluating, discussing & presenting!

THANK YOU to Annie's Café
<http://anniesplacecafe.ca/>

THANK YOU to Nova Scotia Health

THANK YOU to the Nova Scotia ABI Network

THANK YOU to the Brain Repair Center



CONTACT INFORMATION

Alison.McDonald@nshealth.ca

