Interview topic guides

Section 1: Staff Topic Guide

Interview topic guide: Staff delivering service

Purpose: Understand PIFU model being delivered and experiences of staff leading the service **Interviewees:** Consultants, nursing staff, allied health professionals, administrative or support staff

Time: 45-60min

N.B. Numbered questions indicate interview priorities and bullet points are prompts

Overview of today's interview

- The interview should last around 45 mins, depending on how much you would like to say.
- We will ask questions about what you see the aims and goals of PIFU to be, how PIFU is working in your service, how you've experienced setting up and running PIFU in your service, and what sort of impact you've seen on staff and patients.
- Not at all a judgement or an evaluation of the performance of your service, we're very much trying to understand different ways of using PIFU so don't worry if you're not sure how to answer a question.
- If you do not want to answer a question, you do not have to, and we can stop the interview at any point.
- You, the service and the trust will not be identifiable in any of the published outputs from the study.
- (If not shared already) it would be very helpful for our study, if possible, for you to share any local SOPs or guidance documents with us after this interview.
- Have you got any questions before we start?

START [Turn recorder on]

Obtain verbal consent

Background and Aims

- 1. Please tell me about your current role in the service
- 2. In your broad understanding, what are the purposes or aims of PIFU? (clinical, practical)
 - Problem it is aiming to solve / catalysts for change

Origin and set up of model

- 3. How did PIFU first come to be started in the service?
 - i. Who was involved?
 - ii. What was your role?
 - iii. How were outpatient follow-ups handled before?

The Model

- 4. Please describe the pathway talk me through the sorts of patients you see and the PIFU patient journey, including patient selection, onboarding, booking processes, and discharge
 - i. Patient selection (assessment / eligibility)
 - ii. Patient and carer induction and sign on (patient education)
 - iii. Patient monitoring and tracking (methods of monitoring, support to do so...)
 - iv. Booking appointments
 - v. Triage (how is it decided if those who contact need an appointment?)
 - vi. How are requests prioritized and considered vs other appointments? (capacity management)
 - vii. Safety netting (any clinical review, adaptations for higher risk?)
 - viii. Discharge / review (criteria, automatic discharge, post-discharge process)
 - ix. Data collection / reporting
- 5. How is PIFU different from how outpatient follow-ups were handled before? (specialty specific?)
- 6. What if any technologies are used to support the delivery of PIFU?
- 7. What was done in terms of staffing to support these changes?

Delivering/implementing PIFU

- 8. What factors made a difference when you were implementing these changes?
 - i. Role of senior leadership and management
 - ii. Specialty / condition-specific factors
 - iii. Examples and guidance through FutureNHS / early adopters
 - iv. Any concerns about any of these being withdrawn? Why?
- 9. What challenges have you experienced during the implementation/ delivery of PIFU (and how have these been addressed)?
- 10. What if any adaptations have been made to the model / pathway since first implementing? What other changes would be helpful?
 - i. Staffing
 - ii. Processes / set up of model

iii. Based on what information? (Data, clinician/patient feedback, specific incidents, new quidance...)

Staff experience and engagement with PIFU

- 11. How has PIFU affected your day-to-day role?
 - i. Workload
 - ii. Experience
 - iii. Job satisfaction / work-related stress
 - iv. What about the wider team (clinical and admin staff)?
 - v. Change over time in impact or staff attitudes

Patient experience and engagement with PIFU

- 12. What has been the impact of PIFU on patients? (Ask if done any patient engagement/feedback)
- 13. What difference has PIFU made to the experience of patients / carers?
- 14. Are you aware of any variation in experience / outcomes for different patient populations?
 - i. Age, gender, race, level of education
 - ii. What impact has this had in practical terms?
 - iii. Any adaptations to address these, if present?
- 15. What challenges have you encountered when engaging with patients on PIFU?
- 16. What action have you taken to address potential barriers to accessing the service for different groups/ individuals?

Impact

- 17. What impact is PIFU having (including on areas mentioned at start)? (if not too early to say)
 - i. Service level (number of appts., DNAs, f2f appts., capacity vs need...)
 - ii. Wider health care services (primary care, emergency hospital services...)
 - iii. Culture, inter-professional working
 - iv. Patient outcomes and engagement (clinical, quality of life, satisfaction, safety)
 - v. Staff outcomes (workload, capacity, satisfaction, stress)
 - vi. If too early to say, how will you know when or whether it is having an impact?
- 18. Do you have any reflections about data that is or is not being collected to measure the impact of PIFU?
- 19. What impact has the service / model had on health inequalities? Is this currently being systematically measured?
- 20. What if any unintended consequences have there been using PIFU (whether positive or negative)?

Opportunities and risks

- 1. Going forward, what do you see as the biggest opportunities for PIFU?
- 2. What are the biggest risks associated with PIFU, compared to standard practice / fixed follow-up? How are these being managed?
 - i. Patient safety (Reported incidents or near misses)
 - ii. Inequalities

- iii. Clinical management / quality
- iv. Staff / patient experience

Closing questions

- 3. What have you learned from the PIFU experience and what advice would you give to another team running a PIFU services like yours in their own trust?
 - i. Is there anything you'd like to do differently in the future?
- 4. Is there anything else you would like to share with me that I have not asked you?

Thank you. We really appreciate you taking the time to speak with us. Please feel free to be in touch with any follow-up thoughts.

END [Turn recorder off]

Section 2: Patient Topic Guide

IRAS project ID: 319517, REC Ref: 23/LO/0143

Introductory script for all interviewees

My name is [xx] and I'm part of a research team from the Nuffield Trust and University College London. The Nuffield Trust is an independent organisation which conducts research into healthcare services. We're independent of your health care team and the PIFU programme.

We are currently carrying out a study looking at and evaluating patient experiences of patient-initiated follow-up (or 'PIFU') in outpatient services. PIFU is intended to give you and / or your carer more control over your care, by allowing you to arrange your follow-up appointments as and when you need them rather than follow a set schedule. PIFU can also sometimes be referred to as Patient-Initiated Contact (PIC), or open booking appointments. The aim of the study is to understand the impact of PIFU on patients and contribute to the further development of the service. We will feed back the results to the NHS and they will be made available to the general public too.

Is today still a good time for us to do the interview? It should last between 30 and 60 mins depending on how much you would like to say. [If yes, proceed]

We will ask questions about your experience of patient-initiated follow-up, the things that worked well and what could have worked better. There are no right or wrong answers, and don't worry if there are things you can't remember in detail – we're just keen to hear your reflections.

If you do not want to answer a question, you do not have to, and we can stop the interview at any point for any reason. We can take a break, reschedule to another day, or conduct the interview in two halves if you prefer. Are you happy to continue today? [If yes, proceed] I have received your consent form. Can I confirm that you still consent to take part in the interview today? Just to reiterate, everything in this interview will be kept confidential and

you will not be identified in any way in our results. We will not share anything you say with your healthcare team so please feel free to speak freely. [If yes, proceed]

We would like to record the interview to help with note-taking – can I confirm this is OK? [If yes, proceed]

Do you have any questions before we start?

Great, then I'll start the recording. [Confirm recording is on]

Questions for those who have used PIFU services

Main question		Follow up questions (prompts)		
	Please start by introducing yourself and — to the extent that you feel comfortable - briefly tell us about you came to be involved with the PIFU service.	 Healthcare situation Previous use of outpatient services How long they have been on PIFU pathway (short or long-term) 		
2.	Can you recall how you were first introduced to PIFU?	 Who introduced it and what did they say? When were you told about it (at what point in care)? Was anyone else involved (e.g. an interpreter/ carer)? 		
3.	How was PIFU first explained to you?	 Difference with usual care How were the purpose, advantages or disadvantages of PIFU explained to you? 		
4.	What were your first impressions of PIFU at this point?	 Did you have any questions or concerns? If so, were they resolved? Was it clear what was expected of you as the patient? To what extent did you feel like PIFU was your decision? 		
5.	What – if any - information, resources, education or training did you receive about PIFU?	 Leaflets, letters? What symptoms or issues were you asked to be aware of and make contact if concerned? 		

6. Were you told how to get in touch with the service if you needed?	What – if any - other support was available?			
Experience of PIFU pathway				
7. Since using PIFU, have you had to seek further support and help (to escalate your care) because of changes in symptoms or any concerns you had, or to request an appointment?	 If yes, what happened? What was the process? Who did you get in contact with/speak to? Did you have an appointment or get some advice? Was there support and/or an appointment available in an acceptable timeframe? If not, how would you go about seeking support if you needed? 			
8. What – if any – other support or contact have you received from your healthcare team?	 Have you had any other contact from the healthcare team? Are you aware of whether your GP (and any other healthcare professionals involved in your care) know that you are on PIFU? 			
9. Have you been required to attend any other appointments?	 E.g. with other healthcare professionals, screening appointments 			
10. What – if any – other support have you received?	 From family/ friends/ carers From other healthcare professionals such as GPs or hospital doctors not involved with your PIFU pathway 			
11. What was your understanding about what would happen at the end of PIFU pathway?	 Do you know for how long the PIFU service is available to you? Do you know how to leave the service either because you are well or because you want to return to "usual care"? If you have already been discharged, what happened? If not, are you clear on what will happen? 			

Overall reflections and recommendations	
12. If a friend who was in a similar position to you was offered PIFU, would you recommend it to them (compared to a standard pathway with fixed appointments)?	If so, why?If not, why not?
13. Is there anything that would have improved your experience of PIFU?14. Is there anything else you would like to	Information/ support
share about your experience of PIFU?	
Questions for those who have not used PIFU	
 Please start by introducing yourself and – to the extent that you feel comfortable - briefly tell us about how you found out about the PIFU service. 	
Introduction to PIFU	
Can you recall how were you first introduced to PIFU?	
3. How was PIFU first explained to you (difference with usual care)?	How were the purpose, advantages or disadvantages of PIFU explained to you?
5. What were your first impressions of PIFU at this point?	 Did you have any questions or concerns? If so, were they resolved? Was it clear what was expected of you as the patient?
6. What were your reasons for declining PIFU?	
7. Is there any extra information or support	

Demographic questions (for all interviewees)

8. Is there anything else you would like to share about your experience of PIFU?

you would have liked to help make your

decision?

The final set of questions are about your demographic characteristics. By demographic characteristics we mean we want to understand more about who you are and your background. This is so we can make sure we speak to people from different backgrounds and understand how PIFU might be impacting people differently.

These questions are entirely optional. If you don't want to tell me the answer to any of these questions, that is absolutely fine. Please don't feel any pressure if you're not comfortable.

Are you a patient or carer?	
What best describes your gender?	
What is your age?	69
What best describes your current household/	
living situation?	
What is your ethnicity?	
Would you describe yourself as having a	
disability?	
Which of these best describes your current	Working full time/ working part time/
work situation?	self-employed/ student in higher
	education unemployed/ homemaker/
	retired/ full-time carer (of dependent
	child or adult)/ not in work due to poor
	health or disability
What best describes your level of education?	
What is your first language?	

Closing

That brings us to the end of our questions. I will switch the recording off now. [Confirm recording has been switched off]