

Rural Health and Research **Congress** #RHRC2019

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In their shoes: A qualitative project exploring patient experience in a rural hospital



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What factors do restricted weight-bearing patients believe affect their health journey in the rural setting?



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In their shoes....



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Health Journey Type A and B described in this Data.

Type A – Closer to Home

Type B – Rural Respite & Recovery

Primary Referral Hospital

Large Base Hospital

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Themes

RESILIENCE

ENGAGEMENT

EMPOWERMENT

ACCESS

BELONGING

Loss of Independence

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Belonging

- *“The awful thing for me was when they sent me to Town C”... “When we bought a house here [in Town B] .It was because we were near everything...And my husband had to pay somebody to take him down to visit me....” (Participant N).*
- *“The nurse took me out. I didn’t know her.....I knew her father you see? I knew him for years.” (Participant B)*
- *...”I mean they look at me as an old person, which is fair enough. The fact that I don’t feel or act like an 80 year old but they expect me to I think”. (Participant C)*



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Access

“Their knowledge. The people who work in these places. Their knowledge of what they have to do to try to help you.” (Participant E).

“... initially for the first few days, no physio, no anything. I kind of had to figure it out for myself because the girl was away. And I wasn’t a rehab person. I was in a different category. But Mr A (AHA) said “oh . no”. We need something to look after her”. So he took it on for a while, and then the physio team in Town A [Outreach rehabilitation] spoke via Skype and sort of told me what I needed to do..... I wasn’t allowed to do much yet because I was in the cast. (Participant S)

“Everything was good. Just the problem with the toilet, that’s all,. Because they were too busy, see. They were very busy, I understand that but it’s not nice to wait” (Participant N)



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Engagement

- “ We used to go out for a cup of coffee in town, come back. It was like a holiday, I tell you now. Apart from the pain, but it was a holiday” (Participant N).
- “I knew the date on my record. That day I had to go home” (Participant N)
- if the sister had come back and said” “Now is there anything you would like to ask about what the doctor said?”. That would have helped I think. (Participant J)
- “ The doctors, the nurses and the physios all seem to work separately and as I grew up and going through various hospitals after various accidents, once the doctor hit the floor the nurses attached themselves to him like a limpet. They would go with them wherever they went and that doesn’t happen here.” (Participant C)



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Empowerment

- “ In the beginning, yes [used continence aids]. In the beginning I had to, but once I started walking and look after myself, I showered myself, everything I did myself” (Participant N).
- “It always surprises me that people don’t question. They go into hospital and expect the nursing staff and doctors to take over.” (Participant C)
- “I had a splint on my leg and trying to get to the toilet and I wasn’t supposed to get out of bed to go to the toilet. And, often, they didn’t like helping me to go to the toilet, I felt.” (Participant E)
- “I played bridge in hospital which means that I had to have a room where I could set up a bridge table and do all of that and they helped with that. That was terrific. And, I had our regular fours come in to the hospital to play bridge” (Participant C)



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Resilience

- ‘I think rural people can put up with things.’ (Participant C).
- I’m not too good about asking for help. Except I’ve got a fantastic husband. He’s used to it. (Participant C)
- He [son] got sick. That’s why he paid somebody to take my husband to visit me in Town C [a 1 hour drive]. It was a bit too much for him at that time....(Participant N).

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What is new? Technology applications

Connection	“To talk on the iPad. To talk to them. I felt like I was home”. (Participant N)
As an occupation	I’ve got an iPad and I’d read a lot of books on that. (Participant C)
As part of health care	• “initially, I had learnt off the Skype [telehealth rehab team] what I should be doing...I just really did it. To strengthen up. Once I go strong again, it was only a matter of time.” (Participant S)
A reminder.....	• [discussing use of computers on ward] ...“but I would mind if it got to the stage where they’re depending on being diverted towards that rather than the patient wouldn’t you? I mean I can’t explain that exactly but you’ve got to care and if you get into this technology, you stop caring. ” Participant C

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In summary... factors Restricted weight-bearing patients believe affect their health journey in the rural

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- Quality, expert Care – right care, right time
- Access –as close to home as possible, accept travel but also accept telehealth
- Family, friends, community-> belonging and supports
- Engagement
- Empowerment towards independence
- Technology

“Just not to send you away. Keep you here!” (Participant N).



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References

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- *ANZ Hip fracture guidelines.*

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