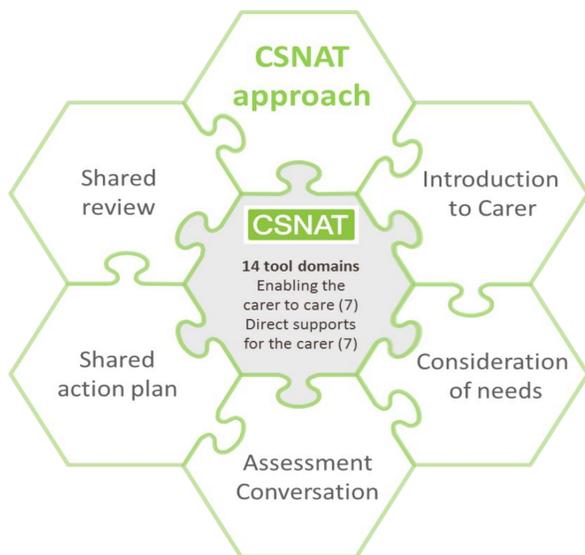


The influence of organisational context on staff attitudes to the implementation of the Carer Support Needs Assessment Tool (CSNAT) intervention in end of life care

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Background

- The Carer Support Needs Assessment Tool (CSNAT)^{1,2} intervention facilitates support for family carers during end of life care. It involves a change in practice from a practitioner-led practice, to a **carer-led** assessment process³.



- An important precursor for practice change is the attitude to the new, evidence based practice (EBP). Aspects of the organisational context, such as leadership strength and how facilitative the culture is to change, may influence staff attitudes to the new EBP and affect its implementation.

Aim

- To examine the relationship between the **context of the service and staff attitudes** to the CSNAT intervention prior to implementation.

Methods

- The implementation of the CSNAT approach was investigated in **36 palliative/end of life care services** within the UK.
- Survey packs were administered to practitioners at each service and included:
 - The Alberta Context Tool (ACT) to assess the overall **context** e.g. supportiveness of the culture, influence of leadership, satisfaction with staffing levels.
 - A survey to assess **staff attitudes** to the CSNAT approach.
- Correlations between the ACT concepts and staff attitudes were analysed.

Results

- 462 surveys were administered: 35% (163/462) response rate.
- The role of respondents varied: 45% (74/163) were Community Nurse Specialists; 25% (40/163) Registered Nurses; 4% (7/163) Social Workers; 2% Medical Practitioner (3/163); 22% (36/163) 'Other'.
- Overall, practitioner attitudes were positive in the pre-implementation phase indicating that practitioners were receptive to use of the CSNAT approach within their practice and service.

Table 2: Correlation matrix illustrating the relationship between organisational context and staff attitudes to the CSNAT approach

	Act Concepts			
	Culture	Connections/ Social capital	Resources	Staffing
CSNAT approach will be acceptable :				
- in my practice	.206*	.292**		
- in my service	.223*	.245**		.220*
CSNAT will be appropriate to use:				
- in my practice	.198*	.191*	.239**	.223*
- in my service	.267**			.251**
CSNAT will be beneficial to:				
- my practice	.198*	.246**	.252**	.236**
- my service	.267**	.232**	.212*	.246**
CSNAT will be achievable within:				
- my practice			.234**	
- my service	.206*			
Can see value of CSNAT to:				
- my practice		.195*		
- to my service	.212*	.230**		

+only correlations with $p < .005$ displayed
* $p < .005$ ** $p < .001$

Positive attitudes to the new EBP were related to:



Conclusion

- There is a potential to enhance practitioner readiness and motivation for change through modifications to organisational context. A CSNAT toolkit is being developed to help ensure organisational readiness for the implementation of the CSNAT approach.

¹Ewing, G & Grande G - on behalf of the NAHH (2012). Development of a Carer Support Needs Assessment Tool (CSNAT) for end-of-life care practice at home: A qualitative study. *Palliative Medicine*; 27(3):244-256.
²Ewing G, Brundle C, Payne S and Grande G (2013). The Carer Support Needs Assessment Tool (CSNAT) for use in palliative and end-of-life care at home: A validation study. *Journal for Pain and Symptom Management*; 44(3):395-405.
³Ewing G, Austin L, Diffin J, Grande G. (2015). Developing a person-centred approach to carer assessment and support. *British Journal of Community Nursing*; 20(12):580-584.