

Telefonrådgivning, en verksamhet i tiden Studier ur ett patient- och sjuksköterskeperspektiv

AKADEMISK AVHANDLING

som för avläggande av medicine doktorsexamen vid Sahlgrenska akademien
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Hörsal Arvid Carlsson, Academicum, Medicinargatan 3, Göteborg,
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av

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Avhandlingen baseras på följande delarbeten:

- I Marklund B, Ström M, Månsson J, Borgquist L, Baigi A, Fridlund B.
Computer-supported telephone nurse triage: an evaluation of medical quality an costs
Journal of Nursing Management 2007;**15**:180-7
- II Ström M, Marklund B, Hildingh C.
Nurses' perceptions of providing advice via a telephone care line
British Journal of Nursing 2006;**15**:1119-25
- III Ström M, Marklund B, Hildingh C.
Callers' perceptions of receiving advice via a medical care help line
Scandinavian Journal of Caring Sciences. 2009 Oct 5. [Epub ahead of print]
- IV Ström M, Baigi A, Hildingh C, Mattsson B, Marklund B.
Patient care encounters with the Medical Care Help Line: a questionnaire study
Submitted



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Medical Care Help Line- duty of today Studies from callers' and nurses' perspective

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Abstract

Background : Care encounters and nurses' advising over the phone are increasingly common in the Western world today. This new area in the profession needs more research due to its' importance in daily life.

Article I: *Aim:* To evaluate a telephone nurse triage model in terms of appropriateness of referrals, patient's compliance with given advice and costs. *Design:* Evaluative. *Method:* Consecutive patients (n= 362) who phoned the medical care help line (MCHL) during four months. *Results:* The advice was considered adequate in 97.6% cases. The patients' compliance to self-care was 81.3%, to primary health care 91.1% and to the accident and emergency department 100%. The nurses referred self-care cases (64.7%) and accident/emergency cases (29.6%) from a less adequate to a more appropriate level of care. The cost saved per call, when recommended self-care was €70.3, primary health care €24.3 and accident/emergency care €22.2. *Conclusions:* The telephone nurse triage model provided adequate guidance to the level of care and released resources thus benefiting both patients and the health care system. **Article II:** *Aim:* To describe how nurses perceive their job of providing telephone advice to patients. *Design:* Qualitative. *Method:* Interviews with 12 nurses were analyzed using a phenomenographic approach. *Results:* The nurses perceived their work as stimulating, autonomous and challenging. They also felt exposed, needing extensive knowledge and being criticized due to the frontline position. Despite this the work was perceived as manageable if being responsive, not anxious about their prestige, determined and having self-awareness. *Conclusion:* Providing advice over the phone was perceived as positive and stimulating despite its exposed position. **Article III:** *Aim:* To describe patients' perceptions of receiving advice via a MCHL. *Design:* Qualitative. *Method:* Interviews with 12 patients were analyzed using a phenomenographic approach. *Results:* The patients perceived the help line as a professional, reliable and easily accessible asset, that served as a partner with whom one could discuss one's reflections and feelings and that promoted self-care as well as functioning as a 'back up'. The service was perceived as satisfactory when the nurses were calm, friendly, confirming and showed respect. Compliance and acceptance are enhanced when patients feel involved in the decision-making process. The accessibility was perceived as simple and time saving. *Conclusions:* Seen from the patient's perspective, the telephone contact was a simple, easily accessible and secure alternative that was appreciated and used. Caring encounters gave rise to feelings, influenced by the agreement between one's own needs and expectations, the encounter between human beings and the care provided. **Article IV:** *Aim:* To describe how patients' sex, age, educational and care level influenced their perceptions of caring encounters with a MCHL. *Design and instrument:* A questionnaire containing 14 Visual Analogue Scales (VAS) was designed by operationalisation of terms derived from a previous interview study with MCHL- callers and distributed to 858 callers. Validity and reliability were determined to be acceptable by a pilot study and factor analyses. *Result:* Response frequency 60.4 %. Three factors; interaction, service and product, emerged to describe high satisfaction with the MCHL. The items friendliness, respect, confirmation, accessibility and simplicity scored highest, whereas the 'joint decision-making', 'composure' and 'time' items had the lowest values. *Conclusion:* A new questionnaire with acceptable validity and reliability was designed on the basis of an interview study that explored patient encounters with the MCHL.

Implications: The appended studies have contributed new knowledge about MCHL and the interaction between the nurse and patient in the telephone encounter. These studies have provided increased understanding of the nurses' and patients' perspective and can be used as a basis for further development of MCHL, by education and research.

Keywords: Caller's perspective, costs, factor analysis, nursing attitudes, patient's perspective, phenomenography, primary health care, questionnaire, telenursing, telephone advice, telephone care, telephone nurse triage,