

Nairobi Newborn Study

Standard Operating Procedure 5.0 [SOP5.0]: Nursing interview

Written by Georgina Murphy
Version 1: 27.10.14

1. Purpose and scope

Standard Operating Procedures (SOPs) are required to assure quality, to reduce errors, and to standardise activities and tasks throughout the Nairobi Newborn Study.

For the purposes of this SOP, the location in which inpatient newborns are cared for is referred to as the 'neonatal unit' and the location in which mothers delivery newborns is referred to as 'delivery ward'. The unit and ward might physically be in the same location within some facilities.

2. Staffing, equipment, and resources

The interviewing of nursing staff will be conducted by the research assistant. It is therefore that person's responsibility for following SOP5. A laptop programmed with the nursing questionnaire is required for data collection.

Bring with you to the facility:

- A copy of the following SOPs: SOP5.0, SOP5.1, and SOP5.2, all relating to administering the nursing questionnaire.
- A notebook and pen to record any answers you are unsure about or any comments.
- Nurses questionnaire consent forms (several copies)
- Folder to securely hold signed consent forms
- Training information sheet (several copies)
- List of nurses to be interviewed at the facility (if available)
- Laptop, mouse, charger
- Petty cash

3. Procedure

3.1 Preparing for the interview

- i. Review the questionnaire and SOP before going to the facility to ensure that you are comfortable and clear with all the questions.
- ii. The day before conducting the nursing questionnaire at a facility, visit or ring the facility. Ask them for details of who will be on duty at the facility on the day and time you intend to visit. Using the instructions below, identify those nurses who will be interviewed. Ask for these nurses' contact details.
- iii. The day before, either approach in person or ring the nurses who you intend on interviewing. Explain the study briefly, emphasis that you have permission from the facility (provide name of staff who gave the permission) for the study and interviews, and ask if they could make some time for you the next day for a short anonymous interview. Emphasis that you will give them more information the following day, when you will ask for their consent and they have the option to opt out at that stage. If you are talking to them in person then leave a copy of the consent form with them. Tell them that you will be happy to buy them a snack and soda to have during the interview. Give them your phone number.
- iv. On the day of interviews, bring with you to the facility the list of items above. Ensure that you also have the phone number of your contact person at the facility.

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- v. When you arrive at the facility, introduce yourself to your contact person and explain how the day will proceed. Ask your contact person to introduce you to the nurse in charge, or other member of staff you can help you with the selection of nurses to be interviewed (as outlined in 3.2, if not already done)
- vi. Location: It is important that the nurse feels secure and comfortable during the interview and that he/she can concentrate on your questions. Therefore, before you start it is best to select an office or other suitable space where you and your respondent can talk alone and where disturbance is kept to a minimum. You may need to use different rooms to be near where the staff are working (i.e. maternity ward and newborn unit) to keep the time staff are away from their clinical duties to a minimum. Ask staff and managers to help you if you have difficulty finding a suitable place.

3.2 Identifying nurses to interview

It is best not to arrive at the end of a shift as some of the eligible nurses may have left the facility by the time you get to interviewing them.

- i. Speak to the nurse(s)-in-charge of the neonatal unit and delivery ward, or another appropriate staff member, in order to obtain a list of nurses who are currently on duty in the neonatal units and delivery ward.
 - Only include nurses who are on a full-shift with responsibilities. Thus students and interns are only to be included if they are independent and have the same level of responsibility as a fully qualified nurse (this will likely only occur in small facilities).
 - If there are nurses who are on-duty in both the neonatal unit and the delivery ward at the same time, request that their primary responsibility be given and assign them on your list to the neonatal unit or delivery ward according to their primary responsibility. If their responsibilities are equally assigned to both the neonatal unit and maternity ward, then add them to both lists. Only interview these nurses once, but on the questionnaire select that they are on duty in both the neonatal unit and delivery ward. They will then be asked questions relating to both types of care and their interview will be longer.
- ii. For each list separately, do the following. If there are three or fewer nurses on the list then invite all nurses on the list to partake in the study. Where there are more than three nurses on the list then a random selection of half of the nurses should be selected as follows. Rank the names on the list according to the alphabetical order of their second names. Select each odd numbered (i.e. the first, third, fifth, and so forth) name on the list in order to obtain a sub-list of nurses, which is half the size of the original list of all on-duty nurses, to invite to partake in the study. If the total number of on-duty nurses is an odd number (n) then invite $n/2 + 1$ nurses, i.e. include one extra nurse in the list of those to invite to partake compared to those not to invite (e.g. If 5 nurses are on-duty, invite 3 to partake).
- iii. Invite the nurses identified above to partake in the study and provide informed consent as outlined in 3.2 below.
- iv. In facilities with more than three nurses on-duty in a given location, if a nurse declines to participate then another on-duty nurse from that location should be invited to partake in the

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place of the nurse who declines. These replacement nurses should be selected from the list of all on-duty nurses ranked in alphabetical order. Begin at the top of the list of those who have not yet been invited and select the next nurse to be a replacement nurse. E.g. if 1st, 3rd, 5th, 7th nurses on the original list were invited, but one of more decline to partake, then invite 2nd, 4th, 6th, etc as appropriate and in that order. Therefore, the number of nurses participating in the study should ideally be equal to half of the on-duty nurses at the facility, even if some eligible nurses decline to participate.

3.3 Obtaining informed consent

- i. Informed consent must be obtained from each nurse before interview. This consent should be done on an individual basis. In some facilities, where the number of nurses to be invited to partake in the study may be large, you may want to do the consenting process for all relevant nurses before conducting the interviews. This way the nurses will know that you will want to interview them at some stage that day before they go home. Otherwise, the time taken to interview the first nurses might be longer than the length of a shift and the nurses you need to interview may have left the facility. However, consenting must still be done one-on-one with each eligible nurse.
- ii. Ask the nurse-in-charge to suggest someone at the facility who might act as a witness for the consenting process. This person should not be a member of the research team or a staff member who might exert pressure on the nurse to participate in the study. The same person can act as a witness for more than one consent form/interview.
- iii. Ask to be introduced to the nurse by the nurse-in-charge or relevant staff member.
- iv. Explain who you are to the nurse and tell them that you would like to interview them as part of a study on maternal and newborn care in Nairobi.
- v. Invite the nurse to discuss this in a location in which they are comfortable. This may be a private location but there must be a witness present for the consenting procedure.
- vi. Explain that the interview aims to find out directly from staff about their knowledge of care guidelines and about their experience of working in this facility. Be clear that he/she is free to choose to take part or not. Explain that the interview will be conducted in a private space and all results will be completely anonymous, so only the researchers will know what answers they provided. Only combined results from all the interviews will be reported in order to try to inform ways to improve care on the county level. Further explain that the questionnaire is not an exam, they will not be graded and will not be compared against any colleagues or other nurses.
- vii. Provide the nurse with a copy of the information sheet and consent form and explain that the details are outlined fully in the information sheet.
- viii. Allow them as much time as they need and want to read through the information.
- ix. Ask them if they have any questions about the information they have read or the study.
- x. If they are happy to provide consent, indicate where they can sign.

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- xi. Ask the witness to sign that they have witnessed the signing of the consent form.
- xii. Fill in the investigator section of the consent form.
- xiii. Provide the participant with a copy of the information sheet.
- xiv. Safely store the signed copy of the consent form in the appropriate folder. *Proceed to 3.3.*
- xv. If the nurse declines to partake in the study, thank them for their time. Do not pressure the nurse to participate. Enquire for a reason, making clear that they do not have to provide one but it is only for your records so that we understand better why people might not want to participate. Record the reason for non-participation in your study notebook. *Proceed as indicated in 3.1 iv.*
- xvi. If a nurse on your list is no longer present in the facility when you come to consent or interview, then proceed as indicated in 3.4 i.

3.4 Interviewing

- i. Once consent has been obtained, ask the nurse when he/she is free to conduct the interview.
- ii. Reiterate to the nurse that the questionnaire is confidential, their name will not be recorded and no one at the facility will be told the answers given by any individual nurse interviewed. The results from the nursing interview will only be presented after combined with other nurse interviews from many facilities to ensure that no one is identifiable. Explain that no mark/grade will be given and they will not be rated or compared against any other nurses.
- iii. Show the nurse the first page of the questionnaire and show them that you are not entering their name but instead a unique identification number that will not be traceable back to them as an individual.
- iv. Ask the nurse if they have any questions before beginning.
- v. Open the laptop and load a new entry for the nursing questionnaire. Explain to the nurse that you will record answers on the laptop and that you are unable to show them the screen as the answers to many of the questions are written there.
- vi. Do not let the nurse see the questionnaire.
- vii. Explain:
 - the questionnaire is a combination of questions in quiz like form and scenarios,
 - for each question there may be only one correct answer or many correct answers; the nurse should provide all answers that they think are relevant,
 - the interview is not a test and they will not be judged on their answers, they should just try to relax and answer what they can,
 - if they don't know the answer to a question, they can say so and you will move on to the next question, but where possible they should try to answer.

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- viii. Once you have assigned the identification number (IDNO) for the questionnaire, write this number on the top of the consent form.
- ix. Follow the questions as outlined in the questionnaire programme. Read out the questions to the nurse. DO NOT read out the instructions.
- x. Mark an answer from the list if it has been mentioned by the nurse in response to a question. Refer to SOP 5.1 for specific instructions on each question.
- xi. **For section 1 (personal details):** the answer options need not be read out, however, they can be if the nurse would like clarification. Where the correct answer is not an answer option, make a comment in the comment bubble. This section is not an assessment, we want to accurately capture the response of the nurse.
- xii. Once you select if the nurse is on-duty in the newborn unit or maternity ward, the RedCap tool will automatically restructure the questionnaire so that only relevant questions are asked. Therefore, do not skip any questions, even if they seem irrelevant to you.
- xiii. **For section 2 (knowledge):** the answer options MUST NOT be read out. DO NOT prompt for answers unless specifically indicated to do so in the question instructions (see Questionnaire Instructions SOP5.1 and Vignette instructions document). The answer by the nurse need not be word-for-word the same as written in the answer option for it to be selected, however, the details and essence should be the same. DO NOT accept answers that are vague. If an answer option has two details in a single option and the nurse mentions only one detail correctly, do not mark the answer. In some of these cases, prompting is permitted, please see step by step instructions of the questionnaire for details.
- xiv. During section 2, explain to the nurse that they should answer what they think the CORRECT answer(s) is, rather than what is routinely done.
- xv. **For section 3 (interventions):** Read out the answer options. You may find it faster and easier to say 'For the following section I will ask you about the interventions performed at the facility. I would like to know if these interventions are always, sometimes, or never performed at the facility.' Then read each intervention in turn.
- xvi. For section 3: clarify that you would like to know how frequently these interventions are performed for patients when the nurse thinks the procedure is NECESSARY/NEEDED.
- xvii. **For section 4 (equipment):** Explain to the nurse that they should think about the last 10 times they NEEDED an item, on how many occasions the following items were available.

3.5 Finishing the interview

- i. When the interview is over, thank the nurse for their time and ask if they have any questions.
- ii. Explain that there will be a feedback session on the findings from the study to which they should be invited by their facility. Reiterate (as in the consent form) that no information about the nursing interviews will be provided on an individual facility basis. Only summary data will be provided to protect the identity of nurses.

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- iii. Ask the nurse to avoid talking to nurse colleagues about the questionnaire until you have finished all your interviews.
- iv. If the nurse would like some feedback on how they did, then you can provide some general remarks such as 'you may want to revisit your training on resuscitation'. Be sure to be polite and non-judgemental. If they are interested in improving then provide them with the 'Training Information Sheet' (appendix 1) which provides links to resources for self-training and national guidelines.

3.6 Possible challenges

- i. **Absent nurses:** If, when you go to interview a nurse from your list, the nurse is no longer available for interview, proceed as follows.
 - Find out if the nurse will be free later in the day. If so, then proceed with the next interview and come back to the nurse when he/she is ready to be interviewed.
 - If the nurse is no longer willing to be interviewed, then proceed as described in 3.1 iv.
 - If the nurse has gone off duty/left for the day, then (a) try to find out who has come on duty in their place and recruit that person to replace the nurse. If (a) is not possible then (b) proceed as though the nurse has declined to partake and continue as outlined in 3.1 iv. Be sure to make a note of these protocol changes in your study notebook.
- ii. **Interrupted interviews:** If your interview is interrupted and the nurse cannot continue, proceed as follows:
 - Ideally try to continue the interview as far as the end of section 2. Ask the nurse if you could then continue with sections 3 and 4 another time, explaining that they are short and no longer in quiz format.
 - Save the interview as far as you have reached and try to arrange with the nurse another time on the same day to finish the interview.
 - If you are unable to finish the interview and have not at least finished sections 1 and 2, then select another eligible nurse from the facility to interview. If there is not another eligible nurse or logistical constraints prevent you from interviewing further nurses, then discuss how to proceed with your supervisor.
- iii. **Requests for feedback and training**
 - Once you have finished the interviews with nurses, you may be asked by the senior staff for feedback on what you have found. It is very important that you maintain the confidentiality of the nurses that you have interviewed. General statements such as 'review newborn resuscitation with staff' might be appropriate, however, do not provide any details of what the staff got right or wrong. General feedback at the end of the study will be provided to each facility if they are interested in receiving it.
 - If asked about how we can help with training, suggest the following resources for in-house training: Royal College of Paediatrics and Newborn Health – online ETAT+ course; and <http://www.idoc-africa.org/> where they can find the ETAT+ lectures. If they are willing

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to pay for training then the Kenya Paediatric Association does ETAT+ training at a fee. We as a research team will not be providing any training.

4. Related procedures and documents

- Questionnaire Instructions guidelines: SOP5.1
- Vignette guidelines document: SOP5.2
- Training information sheet (appendix 1)

5. SOP-user signature log

By signing in the table below, I confirm I have read and am familiar with the SOP for the nursing interview.

Name	Signature	Date

Thank you for participating in the Nairobi Newborn Study nursing questionnaire.

To find information about maternal and newborn care guidelines, you may be interested in exploring the following weblinks:

- iDoc Africa: <http://www.idoc-africa.org/> (ETAT+ course)
- Basic Paediatric Protocol for Kenya: http://www.idoc-africa.org/images/documents/Basic_Paediatric_Procotols_November_2013.pdf
- Kenyan Guidelines, Standards and Policies Portal – Maternal and Child Health: <http://guidelines.health.go.ke/#/category/27>