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## **CHARMER Work Package 3 TOPIC GUIDES**

**Research and Development Team members (Site set up) [30 min]**

**Implementation team [45 minutes]**

**Ageing Specialty Research Staff including PIs [60 minutes]**

**Recruited practitioners – geriatricians and pharmacists (Intervention sites only) [60 minutes]**

**Patients [45 minutes]**

**Consultees [45 minutes]**

**Primary care members with prescribing role [45 minutes]**

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**Research and Development Team members (Site set up) [30 min]****Introduction:**

I am a researcher working on the CHARMER study. The CHARMER study is a programme of research to develop and test an intervention to support geriatricians and pharmacists to proactively deprescribe unnecessary or harmful medicines for older people in hospital.

I am keen to hear your thoughts on how the study went from your perspective – both positive and negative aspects. There are no right or wrong answers. The information you provide will help us to understand what worked/went well and what could be improved. Today, I will be recording our discussion but only myself, the researchers working on the study and the person who transcribes the interview will hear what we say. When the interview is transcribed, we remove any identifiable information such as your name so that we have an anonymised record of what we talked about. After the interview is transcribed, we will securely destroy the recording of the interview.

If we use any quotes from you in our reports, you will not be able to be identified in any way. You can also stop the interview at any time and without giving a reason.

Do you have any questions for me before we start?

**Firstly, can you tell me about your role?****Can you tell me about how the site approval process for the CHARMER study happened, from your perspective?**

Prompts:

Time required; documentation review; discussions

**What worked well?****What didn't work so well and how could we improve this?**

Prompts:

Was there anything that you think particularly had an impact on approval of the study at your site?

Were there particular documents that helped with the process?

What was your experience of the communication between yourself, the PI and the CHARMER research team during approvals and set up?

Is there anything else we could do to support sites with set up for the CHARMER study?

**Is there anything else that you would like to discuss that we have not covered?**

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**Implementation team [45 minutes]**

Introduction: I am a researcher working on the CHARMER study. The CHARMER study is a programme of research to develop and test an intervention to support geriatricians and pharmacists to proactively deprescribe unnecessary or harmful medicines for older people in hospital.

Today I'd like to ask you about your experience of being involved in the implementation/delivery of the CHARMER study. I am keen to hear your thoughts on how the study went from your perspective – both positive and negative aspects. There are no right or wrong answers. The information you provide will help us to understand what worked well and what could be improved.

Today I will be recording our discussion but only myself, the researchers working on the study and the person who transcribes the interview will hear what we say. When the interview is transcribed, we remove any identifiable information such as your name so that we have an anonymised record of what we talked about. After the interview is transcribed, we will securely destroy the recording of the interview.

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You can also stop the interview at any time and without giving a reason.

Do you have any questions for me before we start?

Can you tell me a bit about yourself and your role?

**What was your role in the CHARMER study?****Can you tell me about your experience of being involved in the CHARMER study?**

Prompts:

What went well? What could be improved?

**What do you think of the CHARMER intervention?**

Prompts:

What did you think about the different components of the intervention?

Do you think all components are useful?

For each intervention component (as appropriate): how did you find this? Was it useful?

Could it be improved, and if so how?

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**Can you tell me about the implementation/delivery of the CHARMER intervention?**

Prompts:

How were the implementation events structured?

How many healthcare professionals were invited and how many attended the implementation days? If not everyone attended, what were the reasons?

How do you feel the participating geriatricians and pharmacists interacted during the implementation sessions?

Can you tell me why you think this happened?

Did they interact/engage more with certain components of the intervention?

**Can you tell me about the information you received before you began the implementation/delivery of the CHARMER intervention?**

Prompts:

How many days did you spend preparing for the implementation days? How did you prepare for the implementation?

What aspects did you find useful?

What aspects do you think could be improved? How did you find the implementation manual?

**What impact do you think the CHARMER intervention has had?**

Prompts:

What have you noticed?

How do you think this has happened?

**Do you feel there were any factors at your site that either helped or hindered the CHARMER intervention?**

Prompts:

These could be related to for example, people, technology, structures etc.

Was the intervention adapted or changed in any way during the implementation days?

How did that happen and what was the effect of doing this?

Is there anything else that you would like to discuss that we have not covered?



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**Ageing Specialty Research Staff including PIs [60 minutes]**

## Introduction:

I am a researcher working on the CHARMER study. The CHARMER study is a programme of research to develop and test an intervention to support geriatricians and pharmacists to proactively deprescribe unnecessary or harmful medicines for older people in hospital. Today I'd like to ask you about your experience of being involved in the CHARMER study. I am keen to hear your thoughts on how the study went from your perspective – both positive and negative aspects. There are no right or wrong answers. The information you provide will help us to understand what worked well and what could be improved. Today I will be recording our discussion but only myself, the researchers working on the study and the person who transcribes the interview will hear what we say. When the interview is transcribed, we remove any identifiable information such as your name so that we have an anonymised record of what we talked about. After the interview is transcribed we will securely destroy the recording of the interview. If we use any quotes from you in our reports, you will not be able to be identified. You can also stop the interview at any time and without giving a reason.

Do you have any questions for me before we start?

**Can you tell me about your role in the CHARMER study?****Can you tell me about your experience of being involved in the CHARMER study?**

Prompts:

Why did you decide to be involved in the study?

How did you find the study?

What worked well? What worked less well and what improvements are needed?

**(PIs only) Can you tell me how you found the set up process for CHARMER at your site?**

Prompts:

How long did approvals and set up take?

Can you tell me about your experience of meetings with the CHARMER research team before and during set up?

Can you tell me about the documentation you received? Can we provide additional information or present information in a different way?

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**What do you think of the CHARMER intervention?**

Prompts:

What did you think about the different components of the intervention?

For each intervention component (as appropriate): How did you find this? Was it useful?

Could it be improved, and if so how?

**(Pls only) Can you tell me about your experience of being involved in the implementation/delivery of the CHARMER intervention?**

Prompts:

How were the implementation events structured?

How many healthcare professionals were invited and how many attended the implementation days? If not everyone attended, what were the reasons?

How do you feel the participating geriatricians and pharmacists interacted during the implementation sessions? Can you tell me what you noticed? Can you tell me why you think this happened?

Can you tell me more about how you felt people interacted/engaged with the different components of the intervention?

Do you think any improvements are needed to the intervention or its delivery?

**What impact do you think the CHARMER intervention has had?**

Prompts:

What have you noticed?

Why do you think this has happened?

**Do you feel there were any factors at your site that either helped or hindered the CHARMER intervention?**

Prompts:

These could be related to for example, people, technology, structures etc.

Was the intervention adapted or changed in any way during the implementation days?

How did that happen and what was the effect of doing this?

*If time:***How did you find the process of recruiting people into the study?**

Prompts:

What worked well? Are any changes needed?

Did they have particular questions about the study?

What types of questions, if any, did potential participants have about the study?

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**Can you tell me about your experiences of collecting data within the CHARMER study?**

Prompts:

Were there data that were easier to collect?

Were any data items burdensome to collect?

Could we make any changes to data collection processes, if so what?

How was your experience of the collection of data from patients and consultees?

Some of the data collection was by phone, how did this go?

Is there anything else that you would like to discuss that we have not covered?

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**Recruited practitioners – geriatricians and pharmacists (Intervention sites only) [60 minutes]****Introduction:**

I am a researcher working on the CHARMER study. The CHARMER study is a programme of research to develop and test an intervention to support geriatricians and pharmacists to proactively deprescribe unnecessary or harmful medicines for older people in hospital.

Today I'd like to ask you about your experience of being involved in the CHARMER study. I am keen to hear your thoughts on how the study went from your perspective – both positive and negative aspects. There are no right or wrong answers. The information you provide will help us to understand what worked well and what could be improved. Today I will be recording our discussion but only myself, the researchers working on the study and the person who transcribes the interview will hear what we say. When the interview is transcribed, we remove any identifiable information such as your name so that we have an anonymised record of what we talked about. After the interview is transcribed, we will securely destroy the recording of the interview.

If we use any quotes from you in our reports, you will not be able to be identified. You can also stop the interview at any time and without providing a reason.

Do you have any questions for me before we start?

Can you tell me a bit about yourself?

**Can you tell me about your role in the CHARMER study?**

**Can you tell me about your experiences in the study?**

Prompts:

Why did you decide to take part? What worked well? What didn't work so well? How could we improve this?

**What do you think of the CHARMER intervention?**

Prompts:

Did you access and use all components or only some? (as relevant e.g. pharmacist accessed all pharmacist components etc)

What did you think about the different components of the intervention? For each intervention component (as appropriate): how did you find this? Was it useful? Could it be improved, and if so how?

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**What impact do you think the CHARMER intervention has had?**

Prompts:

What have you noticed?

How do you feel the intervention impacted on discussions you have with patients?

Can you tell me about how your experience of having discussions with patients and/or their carers about their medicines? How did these conversations happen? Were they easy or difficult?

Were there any barriers to having these conversations or anything that could be changed to make these discussions easier?

How confident did you feel about undertaking proactive deprescribing? Do you feel you need any other training or skills to undertake this?

Did you notice other colleagues doing proactive deprescribing?

Do you feel the intervention had impacts on any other aspects? If yes, can you tell me more about these impacts and how they happened?

What are your thoughts on proactive deprescribing? Important part of your role? How have your proactive deprescribing activities changed? Can you see benefits of proactive deprescribing?

**Do you feel there were any factors at your site that either helped or hindered the intervention?**

Prompts:

These could be related to for example, people, technology, structures etc.

Are/were there any events or initiatives happening at your site that you think may have had an impact on the intervention?

Do you think any changes needed to the intervention itself/mode of delivery for it to be delivered smoothly at your site?

*If time:*

**Can you tell me about your experience of being recruited into the CHARMER study?**

Prompts:

What made you decide to take part?

Did you have enough information when approached or were there things you wanted to know?

Do you think any changes need to be made to the process of recruitment? (If yes): can you tell me what these would be?

**We are interested to find out about the data collection process within CHARMER. Can you tell me about your experiences of providing data during the CHARMER study?**

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## Prompts:

Time needed? Were there things that were easier to provide/complete? Were any data burdensome to complete? Could we make any changes to data collection, if so what changes do you think are needed?

Is there anything else that you would like to discuss that we have not covered?

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**Patients [45 minutes]****Interview 1:**

## Introduction:

I am a researcher working on the CHARMER study. The CHARMER study is a programme of research to develop and test a method to support consultants and pharmacists to review and stop unnecessary or harmful medicines. I'm interviewing you because you were at one of the hospitals that took part in CHARMER and I'd like to hear your thoughts about your experience in hospital.

I am keen to hear your thoughts on how the study went from your perspective – both positive and negative aspects. There are no right or wrong answers. The information you provide will help us to understand what worked well and what could be improved. Today I will be recording our discussion but only myself, the researchers working on the study and the person who transcribes the interview will hear what we say. When the interview is transcribed, we remove any identifiable information such as your name so that we have an anonymised record of what we talked about. After the interview is transcribed we will securely destroy the recording of the interview.

If you do disclose anything which might identify a risk to yourself or to others, I would have a duty to let someone know, such as your GP, but I would tell you if I thought this were the case.

If we use any quotes from you in our reports, you will not be able to be identified.

You can also stop the interview at any time and without giving a reason.

Do you have any questions for me before we start?

**Can you tell me what led to you going into hospital and how long you stayed in hospital?**

**Can you tell me about what happened whilst you were in hospital?**

**Whilst you were in hospital, can you tell me if anything happened with any of your medicines?**

(If yes) Prompts:

Who discussed this with you?

How did you feel about the discussion?

What were the decisions made about your medicines and how were you involved in these decisions?

How did you feel about these decisions?

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**Do you remember being asked if you would like to be involved in the CHARMER study? A research nurse or doctor may have asked you.**

Prompts:

Can you tell me about the conversation you had before deciding to take part?

Do you remember if you had any questions about the study?

Do you remember being given an information sheet about this study? If yes, what did you think of the study information sheet that you received?

Did it provide complete information about the study? If not, what more do you think should be included/made it clear?

Do you feel you received enough information about the study, or would you have liked to have received any other information?

**Since you left hospital, what has happened?**

Prompts:

Have you seen your GP or pharmacist? If yes, have you had any discussions about your medications with them?

[If medicines reviewed in hospital], have any of your medications changed since leaving hospital? [Explore medications that were stopped in hospital or dosage reduced and whether these were re-started or increased; and explore any medications started in hospital that have been stopped since discharge]

**Part of being in the study has meant that you have phone calls with a nurse, and they ask you about your thoughts and feelings about how your current health impacts your daily life. How did/do you feel about answering these questions?**

Prompts:

Could we do anything differently when asking you these questions?

Is there anything we haven't covered today that you would like to discuss?



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**Interview 2:**

## Introduction:

I am a researcher working on the CHARMER study and we spoke X months ago. The CHARMER study is a programme of research to develop and test a method to support consultants and pharmacists to review and stop unnecessary or harmful medicines. I'm interviewing you because you were at one of the hospitals that took part in CHARMER and I am keen to hear your thoughts on what has happened since your last interview with me – both positive and negative aspects. There are no right or wrong answers. The information you provide will help us to understand what worked well and what could be improved.

Today I will be recording our discussion but only myself, the researchers working on the study and the person who transcribes the interview will hear what we say. When the interview is transcribed, we remove any identifiable information such as your name so that we have an anonymised record of what we talked about. After the interview is transcribed we will securely destroy the recording of the interview.

If you do disclose anything which might identify a risk to yourself or to others, I would have a duty to let someone know, such as your GP, but I would tell you if I thought this were the case.

If we use any quotes from you in our reports, you will not be able to be identified.

You can also stop the interview at any time and without giving a reason.

Do you have any questions for me before we start?

So today I am interested in hearing what has happened since we last met. Last time, you had left hospital X weeks before.

**Since we met last for an interview, what has happened?**

Prompt:

How has your health been?

***(If appropriate) Last time you told me that some of your medicines changed in hospital.***

**Have your medicines stayed the same or have they changed since we last spoke?**

Prompts:

Have you started any new medicines? Have you stopped any medicines? Do you know why these medicines changed?

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**(If appropriate) How did you feel about the changes made to your medicines?**

Prompts:

Did you agree with the changes?/How did you feel about the changes?

Did you understand why your medicines were changed?

Did you discuss the changes with anyone (e.g. family member)?

**Have you seen your GP or pharmacist since we last spoke?**

Prompts:

If yes, can you tell me about these visits? Have you had any discussions about your medications with them?

**Part of being in the study has meant that you have phone calls with a nurse, and they ask you about your thoughts and feelings about how your current health impacts your daily life. How did/do you feel about answering these questions?**

Is there anything we haven't covered today that you would like to discuss?

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**Consultees [45 minutes]****Introduction:**

I am a researcher working on the CHARMER study. The CHARMER study is a programme of research to develop and test a method to support consultants and pharmacists to review and stop unnecessary or harmful medicines. I'm interviewing you because you were at one of the hospitals that took part in CHARMER and I'd like to hear your thoughts about your relative's experience in hospital.

I am keen to hear your thoughts on how the study went from your perspective – both positive and negative aspects. There are no right or wrong answers. The information you provide will help us to understand what worked well and what could be improved.

Today I will be recording our discussion but only myself, the researchers working on the study and the person who transcribes the interview will hear what we say. When the interview is transcribed, we remove any identifiable information such as your name so that we have an anonymised record of what we talked about. After the interview is transcribed we will securely destroy the recording of the interview.

If you do disclose anything which might identify a risk to yourself or to others, I would have a duty to let someone know, such as your GP, but I would tell you if I thought this were the case.

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You can also stop the interview at any time and without giving a reason.

Do you have any questions for me before we start?

**Can you tell me what led to your relative/friend going into hospital and how long they stayed in hospital?****Prompts:**

When did they go to hospital? Was this an emergency or planned hospital stay?

**Can you tell me about what happened when your relative/friend was in hospital?****Whilst they were in hospital, can you tell me if anything happened with any of their medicines?****Prompts:**

Who discussed this with you?

How did you feel about the discussion?

What were the decisions made about their medications and how were you involved in these decisions?

How did you feel about these decisions?

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**Do you remember being asked if you would like to be involved in the CHARMER study? A research nurse or doctor may have asked you.**

Prompts:

Can you tell me about the conversation you had before deciding to take part?

Do you remember if you had any questions about the study?

Do you remember being given an information sheet about this study? If yes, what did you think of the study information sheet that you received?

Do you feel you received enough information about the study, or would you have liked to have received any other information?

**Since your relative/friend left hospital, what has happened?**

Prompts:

Have they seen their GP or pharmacist?

If yes, have you had any discussions about their medications with them?

[If medicines reviewed in hospital], have any of their medications changed since leaving hospital? [Explore medications that were stopped in hospital or dosage reduced and whether these were re-started or increased; and explore any medications started in hospital that have been stopped since discharge]

**Part of being in the study has meant that you have phone calls with a nurse, and they ask you about your thoughts and feelings about how your relative/friend's current health impacts your daily life. How did/do you feel about answering these questions? Could we do anything differently when asking you these questions?**

Is there anything we haven't covered today that you would like to discuss?

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**Interview 2:**

## Introduction:

I am a researcher working on the CHARMER study and we spoke X months ago. The CHARMER study is a programme of research to develop and test a method to support consultants and pharmacists to review and stop unnecessary or harmful medicines. I'm interviewing you because you were at one of the hospitals that took part in CHARMER and I am keen to hear your thoughts on what has happened since your last interview with me – both positive and negative aspects. There are no right or wrong answers. The information you provide will help us to understand what worked well and what could be improved.

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If you do disclose anything which might identify a risk to yourself or to others, I would have a duty to let someone know, such as your GP, but I would tell you if I thought this were the case.

If we use any quotes from you in our reports, you will not be able to be identified. You can also stop the interview at any time and without giving a reason.

Do you have any questions for me before we start?

So today I am interested in hearing what has happened since we last met. Last time, your relative/friend had left hospital X weeks before.

**Since we met last for an interview, what has happened?**

Prompts: How has your relative/friend's health been?

***(If appropriate) Last time you told me that some of your relative/friend's medicines changed in hospital. Have their medicines stayed the same or have they changed since we last spoke?***

Prompts:

Have they started any new medicines? Have they had any medicines stopped? Do you know why these medicines changed?

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**(If appropriate) How did you feel about the changes to their medicines?**

Did you agree with the changes?

Did you understand why their medicines were changed?

Did you discuss the changes with anyone?

**Have you seen their GP or pharmacist since we last spoke?**

If yes, have you had any discussions about their medications with them?

Is there anything we haven't covered today that you would like to discuss?

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**Primary care members with prescribing role [45 minutes]**

## Introduction:

I am a researcher working on the CHARMER study. The CHARMER study is a programme of research to develop and test an intervention to support geriatricians and pharmacists to proactively deprescribe unnecessary or harmful medicines for older people in hospital.

I am keen to hear your thoughts on how the CHARMER intervention from your perspective in primary care— both positive and negative aspects. There are no right or wrong answers. The information you provide will help us to understand what worked well and what could be improved. Today I'd like to hear your thoughts and experiences relating to what happened to patients, who were involved in the CHARMER study, after they left hospital and accessed primary care. I'm particularly interested in hearing about how their medicines were managed.

Today I will be recording our discussion but only myself, the researchers working on the study and the person who transcribes the interview will hear what we say. When the interview is transcribed, we remove any identifiable information such as your name so that we have an anonymised record of what we talked about. After the interview is transcribed we will securely destroy the recording of the interview.

If we use any quotes from you in our reports, you will not be able to be identified.

You can also stop the interview at any time and without giving a reason.

Do you have any questions for me before we start?

Can you tell me a bit about yourself and your role?

**How do you feel about proactive deprescribing being undertaken in hospital?****Can you tell me how many of your patients, that you are aware of, were involved in the CHARMER study?**

## Prompts:

How did you find out they were in the study?

Did they discuss the study or their hospital stay with you?

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**What was your experience after the patient was discharged from hospital?**

Prompts:

Can you tell me what happened after your patient(s) discharge from hospital?

Were any medications changed during their hospital stay?

Have they made an appointment to see you?

Have you had any discussions about their medications being deprescribed?

Which types of medicines? Can you tell me about how communication/coordination between the hospital and primary care happened?

Can you tell me about the quality of the discharge letters for these patients? What type of information was provided? Was there information that was helpful or information that was missing?

**(If applicable) How do you feel about the decisions that were made in hospital for your patient(s) regarding their medication?****How do you think the patient's experience was?**

Prompts:

How do you think your patients and carers found their stay in hospital and decisions around their medicines?

Do you feel that patients understood what had happened during their hospital stay?

Did you have any discussions with your patients' carer after their discharge from hospital?

Can you tell me what questions they had or how they found the decisions about their relative's medication?

**Were deprescribing decisions made in hospital maintained/implemented or changed?**

Prompts:

Can you tell me about the communication between the hospital and primary care?

Were there any parts in the process that worked well?

Are any improvements that could be made to the CHARMER intervention/process?

How do you feel the CHARMER intervention has impacted you? (this could be positive or negative)

Is there anything we haven't covered today that you would like to discuss?