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Changing clinical team practices in preparation of patients for Total Knee Replacement: Using Social Cognitive Theory to examine outcomes of an action research study

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KEYWORDS

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Service user involvement:

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Multi-disciplinary teamwork;

Nursing;

Practice development

Abstract *Aims and objectives:* To examine, through the lens of Social Cognitive Theory, the process of change when developing a preparation programme for patients awaiting Total Knee Replacement Surgery.

Background: Social Cognitive Theory has been used extensively in occupational psychology to explain and change human actions. It has not been widely used to examine the actions of clinical teams when developing practice.

Design: Action research.

Methods: Four action cycles were undertaken to develop an information booklet and multidisciplinary Knee Clinic at an acute hospital for patients waiting for Total Knee Replacement Surgery. The process of change, led by a staff and service user Project Management Group, was examined through fieldnotes, interviews, observation and a reflective diary. The data were analysed using the theoretical framework of Bandura's Social Cognitive Theory.

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Results: The change process was influenced by personal, environmental and behavioural factors. Self-efficacy and outcomes expectations of staff and service users varied and impacted the level of their involvement in the study. Environmental factors influenced the scope of the project. The behaviour of the Project Management Group facilitated change through the development of team working and involvement in the action cycles. The results of this initiative achieved clinical changes which had not occurred during previous attempts at service development.

Conclusion: Social Cognitive Theory is an appropriate and useful theoretical framework both for retrospective analysis and to inform planning of practice changes within the clinical setting.

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Editor's comment

Taking a fully conscious approach to changing practice for the benefit of patients is always held up as an ideal in health care practice. It is refreshing to see that this research (Lucas et al., in press) has considered the process of change as part of this aim by using the action research method and underpinning that with a specific theory which helps to embed change in practice. The result is an innovation that really meets the needs of the patients it is aimed at and is fully accepted by staff.

JS-T

Introduction

Understanding effective processes to achieve change is essential for service development to meet the challenges of contemporary healthcare. This paper explains the change process associated with a dynamic pre-operative programme for patients with osteoarthritis (OA) awaiting Total Knee Replacement (TKR) surgery.

In 2006, at a time of high orthopaedic surgery volume in England and a government target of 18 weeks from General Practitioner (GP) referral to hospital treatment, including surgery if appropriate (Department of Health, 2000), a number of national initiatives were developed to help acute hospitals redesign their orthopaedic services, such as the Orthopaedic and Better Care Without Delay (BCWD) Collaboratives (Bate and Robert, 2003). Preliminary analyses of work at the study site by the researcher (BL) had indicated that this programmatic 'top down' approach had enabled the orthopaedic clinical team to identify areas for change but had not fully realised the intended changes and many staff did not believe they could effect change. However a group of staff and service users, past TKR patients, indicated their willingness to work to develop the service. The action research project reported here developed from a preliminary study and was designed to develop the service and examine the process of change. Such projects remain important as the demand for surgery continues to rise and world-wide healthcare systems are endeavouring to find ways to maximise efficiency.

Background

Social Cognitive Theory (SCT) provides a framework for understanding, predicting and changing human actions. According to SCT people are neither driven entirely by inner forces nor automatically shaped and controlled by external stimuli, and their actions are a product of interaction between personal factors, behaviour and the environment (Bandura, 1977, 1986). In SCT, behaviour, cognitive and personal factors and environmental events all operate as interacting determinants of each other. Key personal factors are self-efficacy — the conviction that one can successfully execute the behaviour required to produce the desired outcomes (Bandura, 1977) - and outcomes expectations: a person's estimate that a given behaviour will lead to particular outcomes (Bandura, 1977). A literature review was undertaken to identify factors affecting the actions of individual professionals and teams in changing practice through the lens of SCT.

The search strategy for this project involved a search of seven electronic databases (CINAHL, MEDLINE, EMBASE, PsycINFO, Psychology and Behavioral Sciences Collection, Business Source Complete, and DH-Data) to identify English language literature published since 2000. Older seminal work was considered, such as that on self-

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