

## CODING SYSTEM

- Focus group interviews with nursing staff, GPs and GP assistants -

| THEME   | THEME IS CODED IF...  | EXAMPLE   |
|---|---|---|
| <b>State of implementation</b>  | <p>...general statements are being made about if, when and how the project was implemented.</p> <p><i>It is <b>not</b> encoded if:</i></p> <p>...the statement is better described by a sub code.</p>   | <p><b>Doctor2:</b> I mean we don't even use it (CCC) yet, so we don't have any experience yet.</p> <p><b>Interviewer:</b> I don't really have an overview yet about to what extend you started with CoCare and to what extend some parts of the project have been implemented but weren't documented in the CoCare-Cockpit. Can you give me some more information?</p> <p><b>Doctor1:</b> The laptops as well as the ultrasound scanner are here.</p> |
| <ul style="list-style-type: none"> <li><b>Barriers for implementation</b></li> </ul>            | <p>...general aspects regarding obstacles of the project are being discussed, e.g. costs.</p>   | <p><b>Respondent:</b> The second approval was missing, the one where the doctors write their number down. Because of that I didn't register the residents in the system. That is a difficulty.</p>  |
| <b>CoCare-Cockpit (computerized documentation system; CCC)</b>                                  | <p>...respondents make general statements about the CoCare-Cockpit (CCC).</p> <p><i>It is <b>not</b> encoded if:</i></p> <p>...the statement is better described by a sub code (see below).</p>   | <p><b>„Respondent1:</b> I had troubles with the records. I conducted a medical round with Doctor3 and then I should make a record in our software and the doctor should make a record in his computer. This was my first experience. (...) And Doctor3 was a bit overwhelmed. He started but then he needed help from the nursing home coordinator, and he said: „No I can't do this here, I rather do it in my practice, when I have time. “</p>     |
| <ul style="list-style-type: none"> <li><b>Use and Benefits of the CoCare-Cockpit</b></li> </ul> | <p>...respondents make statements regarding the purpose or the benefits of the application of the CCC.</p> <p>... respondents specify what/ which measures is/ are being documented in the CCC</p> <p><i>It is <b>not</b> encoded if:</i></p> <p>...respondents remark to which extend the CCC is being used (→ <b>state of implementation</b>)</p> | <p><b>„Respondent2:</b> Well, mainly we always have (...) documented the medication, the changes and all of that.”</p> <p><b>Doctor1:</b> Yes. I document the medical rounds (...).</p>   |
| <ul style="list-style-type: none"> <li><b>Barriers to use</b></li> </ul>                        | <p>...the topic is about general difficulties regarding the application of the CCC.</p> <p>...interviewees talk about challenges, which make the documentation in the CCC more difficult or impossible.</p> <p><i>It is <b>not</b> encoded if:</i></p> <p>...the topic is about challenges regarding the double documentation.</p>                  | <p><b>Doctor1:</b> I agree. I didn't even manage to log into the CCC. Did you? In the CCC?</p> <p><b>Doctor2:</b> No, because somehow you have to go to the nursing home. It is not possible this way.</p> <p><b>Doctor3:</b> It also takes quite a while to get inside. Well, if you build this tunnel, it takes a long time.</p>  |

|   |  |  |
|---|--|--|
| <p><b>Medical rounds</b></p>                    | <p>...the regular, common CoCare rounds in the nursing home are being discussed (attended by doctors and nurses).<br/>         ...interviewees discuss whether the frequency of medical rounds or doctor's visits changed since the implementation of CoCare.<br/>         ...respondents make statements about the benefits of the regular CoCare rounds, even if this benefit is potential or prospective.<br/>         ...respondents discuss challenges regarding the implementation of the regular CoCare medical rounds.</p> | <p><b>Interviewer1:</b> That means previously it has been different?... the rounds have been more spontaneous? Or..<br/> <b>Respondent3:</b> Yes, we did know when the doctor was coming. But regarding the preparation &gt;<br/> <b>Interviewer1:</b> There was none.<br/> <b>Respondent3:</b> &gt; from my side.. well there wasn't any. But now I know when the doctor is coming [...] we then print some papers and I can write down: What do I want actually? And this will then be discussed.</p>  |
| <p><b>Medication checks</b></p>                 | <p>...respondents make statements about the medication checks that should be conducted regularly as a part of CoCare.</p>  | <p><b>Respondent3:</b> That medication check. Well, for me it is the main part of this project.<br/> <b>Interviewer2:</b> Yes, interesting.<br/> <b>Respondent3:</b> Well (clears her throat) because I think that during a normal medical round the doctor surely doesn't document which medicaments were changed and so on. And here is... The overview is simply there. Most of the mistakes are related to the medication etc. And now both sides have an overview.</p>  |
| <p><b>Communication and cooperation</b></p>     | <p>...interviewees discuss the communication and the cooperation in the nursing home and the surgery.<br/><br/>         ...respondents state whether they witnessed changes of the cooperation and communication between the doctors and the caregivers since the intervention started.<br/><br/> <i>It is <b>not</b> encoded if:</i><br/><br/>         ...it is about the communication/ cooperation between the doctors.</p>   | <p><b>Respondent4:</b> (...) I've made such a new experience for example with <i>doctor2</i>. We didn't call her the day before, because I didn't know that we are allowed to call her on Sunday evenings as well.<br/> <b>Interviewer2:</b> O.k.<br/> <b>Respondent4:</b> And the next day I called her because she was responsible for a patient. And she said: In the future you can call me day and night, please.<br/> <b>Interviewer2:</b> O.k.<br/> <b>Respondent4:</b> That was a new experience for me. Normally I wouldn't call her at Sunday night ... well it wasn't night it was half past eight.</p> |
| <p>• <b>General practitioner team teams</b></p> | <p>...the work of the newly build doctor teams is being discussed.<br/><br/>         ...the caregivers or the doctors express how they perceive the work of the doctor teams.<br/><br/>         ...it is about the communications structures between the doctors.<br/><br/> <i>It is <b>not</b> encoded if:</i><br/>         ...those involved talk about medical specialists (<b>→medical specialists</b>).</p>   | <p><b>Respondent4:</b> For example that the doctors talk with each other and not just with us (the nurses). That would be a kind of triangle where maybe something could be lost. It is a real benefit if the doctors communicate with each other in person.</p>   |
| <p><b>Medical specialists</b></p>               | <p>...respondents talk about the cooperation and care by medical specialists.</p>  | <p><b>Interviewer:</b> How are your cooperation's with medical specialists? How good?<br/> <b>Doctor1:</b> Good. Great.</p>  |

|  |   |  |
|--|---|--|
|  | ...the respondents make statements about the medical treatment situation by medical specialists.  | <b>Respondent5:</b> It is good, yet.   |
| <b>Extended availability</b>                           | ...respondents make statements about the advanced reachability of the doctors (on weekdays until 09:00 pm) as a part of the intervention.<br><br>...it is being talked about to what extend the advanced reachability has been implemented.                                     | <b>Interviewer:</b> The project CoCare offers you the possibility of an advanced reachability until 09:00 pm. Did you make use of it? Or do you have it already?<br><b>Doctor1:</b> Yes.<br><b>Doctor3:</b> We already ensured a presence around the clock. Every week one of us is on duty. If one of the doctors is not available it is always possible to reach someone else. Usually this has been from 06:00 pm until 08:00 pm. Now this is extended by one hour. |
| <b>Case conferences, quarterly and annual meetings</b> | ...the topic is about case conferences, quarterly or annual meetings.   | <b>Interviewer:</b> Did you perform quarterly and year meetings? How is the situation?<br><b>Doctor2:</b> Yes. Next quarterly period we will do it as well.  |
| <b>Standard courses of treatments</b>                  | ...respondents make statements about the treatment pathways.<br><br>...the topic is about the trainings in which the treatment pathways are being explained.<br><br><i>It is not encoded if:</i><br>...the statements are about the IT training (CCC).                          | <b>Doctor1:</b> I also think that the care pathways could be advanced. Well, on the one hand one could further enlarge upon the subject of urinary tract infection. And what else did we discuss earlier on? Now I forgot it again. Well, infection ... maybe even blood sampling, well I ... bacterial pneumonia, yes/ no, well ...<br><b>Female doctor1:</b> Yes, pneumonia.<br><b>Interviewer:</b> Well, change requests in the sense of more care pathways ...     |
| <b>Management of suprapubic catheters</b>              | ...respondents report about whether the ultrasound scanner arrived.<br><br>...for what purpose and to what extend it is applied.  | <b>Interviewer:</b> I mean, and the ultrasound scanner is quite new too. So this is a real possibility.<br><b>Respondent:</b> Yes, and it didn't arrive for such a long time. It has been announced much earlier.  |
| <b>Overall rating</b>                                  | ...respondents give their opinion about if they would support to implement the project into the regular care.<br><br>...a general point is being made about the assessment of the project.<br><br>...interviewees answer the question about the general benefit of the project. | <b>Interviewer:</b> Do you have any other opinions about CoCare (...)?<br><b>Respondent5:</b> Well, I think because of the fact that there is a shortage of doctors we have to keep on the task. (...) I think the project is useful, (...).<br><b>Doctor1:</b> Of course, the project should be evaluated positively because the system is genius and it would be a pity if it wouldn't be taken over into the regular care.  |