

Instructions for facilitating the focus groups

Introduction: This document provides a guide for conducting a focus group discussion and the issues to be covered to assess the impact of Primary Care (PC) reform in Saudi Arabia on patient experience. Specifically, the focus groups will explore:

- Advantages and disadvantages of this reform
- Views and perceptions of the patients on the PC reform
- The specific areas of patient experience that are affected by the PC reform
- Any other relevant emergent issues related to the reform

Participants: Patients who have been registered for more than four years in recently reformed primary care centres and who have had at least two visits per year will be invited. Ideally participants should reflect variation in gender, age, education, and health conditions.

Participant Consent: Participants will sign consent form to participate in the focus group. The participants will have a copy of the consent form, and the original consent will be kept with the Principal Investigator (PI). Participants will be informed that the focus groups will be audio-recorded.

Demographic data: Demographic data of focus group participants will be collected anonymously using paper and pencil as participants arrive.

Facilitator/Moderator: Running an effective focus group is a skill and requires planning. The PI will be the facilitator for all focus groups. He has completed appropriate training. Training materials have been developed for the note taker (Appendix 1).

Discussion guides: A discussion guide is included in this document. It will facilitate the focus group discussion by highlighting key topics that need to be covered. It will be used flexibly, so as not to interfere with the flow of the discussion. At the focus group discussion, the facilitator encourages participants to explore topics in depth, and to reflect and raise their own issues.

Data collection: The discussions will be audio-recorded if agreed by participants, and transcribed and translated for analysis. The recordings will be securely stored until transcribed and then destroyed. The transcription will not contain any information that would allow individuals to be linked to specific statements. Confidentiality will be strictly preserved.

Time and Place for Focus Group: The focus groups will be conducted in selected primary care centres based on the selection criteria and by coordinating with general directorate of health affairs in each region. Each focus group will take about an hour, and can have a ten minute break after each session for refreshments. Participants will receive clear details of where and when the focus group will take place and how long it will last by phone call after they agree to participate, and a reminder text message will be sent one day before the meeting date.

FOCUS GROUP: DEMOGRAPHIC DETAILS SHEET

Identifier ID: PCC / PART

Please answer the following questions in the spaces provided, circle or tick the most appropriate options.

1. Age:

2. Gender: (please tick as necessary) ☐ Male ☐ Female ☐ Other

3. What is the highest level of education you have attained?

- ☐ Primary school
- ☐ Intermediate school
- ☐ Secondary school
- ☐ College
- ☐ University (Undergraduate)
- ☐ University (Postgraduate)
- ☐ Other: (please, specify) _____

4. How many visits to this primary care centre have you done per year in the last two years (approximately)? _____

5. How many years have you been registered with this primary care centre?

- ☐ <1 Year ☐ 1-2 Years
- ☐ 2-5 Years ☐ 5-10 Years
- ☐ >10 Years

6. Do you have any chronic disease?

- ☐ Yes. Please, list here all your chronic conditions.

- ☐ No

Thank you for taking the time to complete this sheet

FOCUS GROUP: DISCUSSION GUIDE

Facilitator's welcome, introduction and instructions to participants

Welcome and thank you for volunteering to take part in this focus group. You have been asked to participate as your point of view is important. I realise you are busy and I appreciate your time.

Introduction: This focus group discussion is designed to understand your current thoughts and feelings about the reform of this primary care centre which may affect your experience or the services that presented to you. The focus group discussion will take around one hour. May I start recording the discussion to facilitate its transcription and analysis?

Anonymity: Despite being recorded, I would like to assure you that the discussion will be anonymous. The recordings will be kept safely in a locked device until they are transcribed word for word, then they will be destroyed. The transcribed notes of the focus group will contain no information that would allow individual subjects to be linked to specific statements. We hope that you will feel at ease to talk and express your views and experiences freely. I and the other focus group participants would appreciate it if you would refrain from discussing the comments of other group members outside the focus group. If there are any questions or discussions that you do not wish to answer or participate in, you do not have to do so; however please try to answer and be as involved as possible.

Ground rules

- The most important rule is that only one person speaks at a time. There may be a temptation to jump in when someone is talking but please wait until they have finished.
- There are no right or wrong answers
- You do not have to speak in any particular order
- You do not have to agree with the views of other people in the group
- Does anyone have any questions? (Answers).
- OK, let's begin

Warm up

- First, I'd like everyone to introduce themselves. Can you tell us your names?

Introductory question

I am just going to give you a couple of minutes to think about this PC centre reform? Is anyone happy to share his or her views about that?

Guiding topics and questions

1. General views and experiences about the reforms (the key issues related to the reform)

- What are the key issues related to this reform from your point of view?
- What is important for you of this reform?
- What are the most points of this reform that touched your experience, or have direct impact on your experience?
- What do you think are works well of the reform?
- What do you think are works less well?

2. Important aspects of experience (Patient experience measurement instrument design)

Please, tell me about your experience of the services in this centre? Could you please tell me more about?

- Accessibility (The location of the and ease of access to the services) Mawid
- Coordination with the hospital when you need a referral and when you come back after finishing with the hospital (coordination), Ehalati
- Continuity of seeing the same GP and medication and support, and
- Comprehensiveness of the services which mean that you find everything you are looking for when you visit the
- Could you please put in order as much as you can of the factors that you think affect your experience? Start with important factors if possible

Wrapping up question

- Of all the issues we've discussed today, what would you say are the most important issues you would like to express about this reform?

Conclusion

- Thank you for participating. This has been a very successful discussion
- Your opinions will be a valuable asset to the study

- We hope you have found the discussion interesting
- If there is anything you are unhappy with or wish to complain about, please contact me or contact the project leader, his details are in the information sheet. Or, call the support number for any other concern.
- I would like to remind you that any comments featured in this report will be anonymous
- Before you leave, please hand in your completed personal details questionnaire

Training materials for the facilitator and note takers

Facilitating focus groups

The role of the facilitator is to establish rapport with the participants, ask the questions of interest to the researcher, and encourage all participants to share their thoughts and to keep the discussion on track. Whenever possible, sessions should be held in relaxed and comfortable surroundings. The room used for a focus group should match the size of the group; too large or too small makes people uncomfortable. Avoid rooms full of windows, with telephones, or that are high traffic areas as these can be distracting—as can rooms with elaborate furnishings. The surroundings need to be perceived by participants as “safe”, as a place where they can express opinions and views without fear (fear of giving the “wrong answer” as well as fear of sanction or retribution). Refreshments should be provided. Sitting in a circle or around a table seems to work best; people feel less exposed and this arrangement seems to increase interaction and participation.

Each session should last an hour or an hour-and-a-half, and no more than two hours. Take into account the differences of the group—language, cultural, normative and value differences. Group dynamics must remain utmost in mind. Confidentiality should be assured. If audio- or videotaping is planned, consent must be obtained. Most researchers now ask participants to sign a consent form, whether proceedings are being taped or not.

Many researchers also ask participants to provide some anonymous personal demographic data, such as age, gender, education or those facts which have an impact on the focus of the research (see Ethics section).

Facilitators should plan a welcome, introducing themselves and any colleagues, and explaining their role to the group. It is important to outline the purposes of organising the group and what is to be accomplished. Facilitators might start the process with general questions that “warm up” discussion. This activity of introductions and making participants comfortable generally takes about 10 to 15 minutes. If the proceedings are to be taped and the facilitator is concerned about the participants’

comfort zone, taping everyone's voices sequentially and then playing the tape back may help diffuse apprehension.

It is important to structure things so that the data will be unbiased and reflective of the group's thoughts. Expect surprises. Listen carefully. It is important to appear neutral and non-judgemental. Validate what is being said, acknowledge comments from individuals and encourage expansion and discussion by other group members. Encourage participants to respond to the questions by discussing them with each other rather than the facilitator.

At the outset, be a listener and observer; stimulate interaction by drawing participants into the discussion who haven't yet spoken. Later on in the discussion, intervene when necessary to nudge debate to a natural conclusion and to encourage discussion around inconsistencies. Within-group disagreement can be used to encourage participants to elucidate and clarify their specific point of view. Above all, keep the discussion on track.

The questions developed for the group's consideration are not meant to be all-inclusive or restrictive; rather, they should reflect the general areas to be covered. The facilitator should be very familiar with the topic area and able to pose supplementary questions, using probing comments/questions or prompts which will facilitate understanding of opinions and beliefs of the participants, enabling exploration of the group's opinion.

The selection of facilitators should take into consideration more than just training or background. It is important to have facilitators or moderators (or recorders) who have special expertise or credibility or some feature that is essential to the success of the study, such as being of the same gender, age, occupational group or ethnic background.

Recording

Working in groups of two—one staff member facilitates and another records or transcribes—is ideal. While the facilitator keeps the group focussed and on topic, the recorder should take detailed notes and observe the dynamics of the group, such as verbal and non-verbal cues, body language, and how and with whom participants interact. Noting the match between verbal and non-verbal behaviours is important to understanding the data obtained from the focus group and determining the presence of any bias. The recorder should watch for discordance, for comfort levels with specific topic areas, for obvious cases of social desirability response bias and responses to controversial or sensitive issues. Moreover, what *is* and what *is not* said is of equal importance. (Some researchers prefer to hold focus group meetings in specially-designed rooms with two-way mirrors, so that observers can monitor the body

language and interactions of the group members, who, though informed of the observation, usually lose any initial inhibition as they respond to the task of answering questions.) These observations become an important part of data collection, revealing subtleties that may be missed.

It is important that the recorder not draw any conclusions while listening to the discussion, but remain open-minded. The recorder should then type up his/her field notes and record any overall impressions as soon as possible after the conclusion of the interview. The facilitator and recorder should then discuss their impressions of the information gathered to identify those parts of the process that were strong (or weak), using this information to improve subsequent focus groups and possibly modify or provide supplementary questions for the planned research question sequence.

Recording the data

Most usually, focus group discussion is captured by audiotaping the proceedings and transcribing the tape to allow good quality analysis and to conserve the data in a fashion that is usable by other members of the researcher team (or even other researchers in other contexts). Some researchers prefer to videotape focus group discussion. Both of these modalities *can* be perceived as intrusive by some participants and *may* affect the free expression of thoughts and feelings about the issues under discussion (see sections on Facilitating and Ethics). Videography equipment is expensive, and audiotape transcription is also costly (transcription services charge approximately £25-50/hour and up; transcribing a 1.5 hour tape can take 6-8 hours).

Audiotaping is the most frequently used method for most focus groups. For best quality, clarity and evenness of recording, place the machine in the centre of the table where possible. Accessory microphones will provide better clarity than the microphone built into the machine. Many researchers recommend using fresh batteries for the recording device with each use as one does not always keep an eye on the progress of the tape and might not notice battery failure. Others have reported that current-operated machines may slow or stop for no apparent reason, which may be attributable to power surges that tape recorders are rarely designed to handle. Researchers also report difficulties with voice activated recording equipment that can fail to pick up low voices or those of soft-spoken persons.

Using a research team member as recorder offers some benefits; this person may be especially attuned to the group dynamics and body language of participants through familiarity with the research question and its sensitivities. Debriefing after a focus group when two research team members have heard and observed the group allows comparison of perceptions and understanding of the important messages of

the group. People can differ in their interpretation of a discussion and may pick up nuances that the other missed, so this function can be very valuable.

Some researchers develop data collection tools (pre-designed sheets) for recording purposes; some take free hand notes. These methods can be cost-conserving if budgets and/or timelines are tight. Choice should depend on which is most appropriate for the specific project.

Some researchers also find it useful to record participant views and issues on a flip chart, which summarise important messages and can be taken away for transcription.

Attrition and Participant Compensation

Even though group candidates assure researchers that they will attend, routinely one or two participants will not show up. Confirmed commitment does not always ensure attendance. Oversubscribing an attendee list by 20 per cent is a good rule of thumb.

Attendance can often be encouraged by offering an honorarium, reward or stipend.

Travelling expenses (transit costs, parking costs, taxis) should always be covered. A flat rate for travelling expenses (regardless of travel modality) is preferred by some research teams, but be sure that it is equitable. Some facilitators have also used lottery tickets as gestures of gratitude or good will for focus groups of the general public. Be sure to tell attendees the time commitment up front.

Group Dynamics

As previously mentioned, it is very important to observe the interactions of the group participants to each other, as well as their reactions to the questions and opinions of others. Identify verbal and non-verbal cues, how the individuals participate and with whom, and whether or not the verbal statements match the non-verbal behaviours. The innuendo and interpretation by participants of the opinions of others can inform the research as much as spoken statements, as can observation of comfort levels with the topic areas and sensitive or controversial issues. The best way to observe all of this is by using two person teams (facilitator and recorder/observer) or observers behind two-way mirrors.

Source: Institute for Clinical Evaluative Sciences (ICES) <https://www.ices.on.ca/flip-publication/focus-group-in-health-services-at-ICES/files/assets/common/downloads/ICES%20.pdf>

Note-Taking Tips for Focus Groups

- **Designate one person (not a participant) to be the note-taker at each focus group.** It is important to know roles and responsibilities in advance so each person can prepare for the focus group.
- **Capture verbatim notes and record the conversation using a digital recorder.** Capture the conversation word for word so your notes capture exactly what participants said. Do not summarise what people share – type their statement in their own words. Exact notes are important because they will help you during the analysis stage to know precisely what people said and how their statements connect to the questions you are interested in. It also provides quotes in your reports. Use a digital recorder to record the conversation, with participants' permission. You can then transcribe the focus group or use the recording to fill in any gaps in your notes.
- **Ask for clarification if you do not understand something.** If someone says something that you were not able to understand, ask them to repeat or clarify what they said. While the facilitator is responsible for leading the conversation, the note-taker should ask clarifying or probing questions.
- **Keep time for the facilitator.** Monitor the time using a watch or your computer and tell your facilitator when s/he has 15 minutes and 5 minutes remaining so s/he can prioritise questions and end the focus group on time. When you share the time with the facilitator, do not interrupt the group. Instead, tell him/her quietly or show him/her with your hands.
- **Write down contextual notes about the focus group.** Note impressions or insights that describe the "feel" of the focus group or that seemed to affect the conversation. For example, how many people participated? How many of them were men/women? What was the age range? Did people enter the conversation late? Did people leave the conversation early? Were people particularly interested in talking about specific questions? These notes will help other people understand aspects of the focus group that are not in the verbatim notes. Indicate in the notes if people show non-verbal agreement or dissent through nodding/head shaking/other body language.
- **Clean your notes and add or complete reflection notes after the focus group.** Within 24 hours of the focus group, clean your notes so shorthand is spelled out and gaps are filled in. It

can be difficult to remember what people said after 24 hours. Make sure your notes are clear and can be understood by another person who did not attend the focus group.

Source: <http://learningforaction.com/note-taking-tips-for-focus-groups>

Power Point Presentation by Dr Monica C. Webb

Source: <https://assessment.ufsa.ufl.edu/wp-content/uploads/2017/08/Focus-Group-Training.pdf>

Moderating focus groups: 6 tips for beginners

Source: <https://uxdesign.cc/moderating-focus-groups-6-tips-for-beginners-b2bb38fd503>

Designing and Conducting Focus Group Interviews (Richard A. Krueger)

Source: <https://www.eiu.edu/ihec/Krueger-FocusGroupInterviews.pdf>