

RCN RESEARCH INSTITUTE

DIRECTOR:

Prof Kate Seers

OUR RESEARCH THEMES:

Patient and Public Involvement & Patient Experiences

Patient Reported Outcomes

Translating Knowledge into Practice

This newsletter presents selected highlights of our research. For details of the full programme please see our website.

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Website address:

<http://www2.warwick.ac.uk/fac/soc/shss/rcn>

RCN Research Institute



Newsletter

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Patient and Public Involvement

Enhancing the quality and transparency of patient and public involvement reporting in published research

Patient and public involvement (PPI) has become an important activity within health and social care research. To examine the state of the evidence base underpinning PPI, we undertook two systematic reviews on the impact of patient and public involvement, one focusing on health and social care services (led by Carole Mockford and funded by the Department of Health) and one focusing on health and social care research (led by Jo Brett and funded by the United Kingdom Clinical Research Collaboration).

A key problem drawing together the evidence was the poor quality of reporting,

making it difficult to judge the impact of PPI. Based on these systematic reviews we undertook a separate study to develop a checklist for reporting patient and public involvement in order to enhance the quality and transparency of reporting internationally.

The GRIPP (Guidance for Reporting Involvement of Patients and Public) checklist provides guidance for researchers, reviewers, funders and policy makers on the key information researchers need to report in their papers. We are working with the EQUATOR Network (<http://www.equator-network.org/> website) to undertake a further project to develop GRIPP 2, through a consensus process and produce the first international guidance which aims to raise the quality and transparency of PPI reporting.

Staniszewska S, Brett J, Mockford C, Barber R (2011). The GRIPP checklist: Strengthening the quality of patient and public involvement reporting in research. *International Journal for Technology Assessment in Health Care*, 27(4): 391-399.

Contact: Sophie Staniszewska

The work of the RCNRI aims to:

- ▶ Produce high quality research that improves patient care and impacts on policy
- ▶ Increase research capacity within nursing by providing high quality research training
- ▶ Contribute towards the RCN delivering on its strategic objectives

Contact: Kate Seers

RCN "Space to Think"

Kate Seers spoke at a recent "Space to Think" meeting hosted by the Nursing and Service Delivery Directorate at the RCN, London in October 2011.

Her talk, "**Implementing guidelines into practice:**

Challenges and Lessons learnt from the POISE Study" presented findings from the preoperative implementation study evaluation. It focused on the realities of changing practice and discussed lessons learnt and future directions. The session

discussed what you need in place to change practice, common barriers and practical suggestions for getting evidence into practice.

Contact: Kate Seers

Clinical supervision is crucial for developing expertise in emotional labour.

Professor Kate Seers and Professor Barbara Davies

RCN Coventry and Warwickshire

Liz Tutton gave a presentation on Emotional Labour to the RCN Coventry and Warwickshire Branch meeting. Emotional labour was illustrated drawing on research in relation to comfort, hope and professional practice.

The group were really engaged in the subject and a vibrant discussion followed the presentation. There was close identification with the

concept of hope and the real difficulties of supporting people through injury and illness. Balancing supporting hope and providing realistic information whilst managing concern regarding false hopes was explored. Examining different perspectives of reality and the importance of high levels of self awareness and expertise in the speciality were considered essential for work in this area.

The group felt that: greater awareness of emotional labour is required, clinical supervision is essential for developing expertise, the context in which nurses work requires active management to support emotional labour, and support for teamwork and realistic nursing roles is essential. The group plan to inspire a debate at congress on aspects of emotional labour.

Contact: Liz Tutton

Professor Barbara Davies



We were delighted to invite Professor Barbara Davies, Co-Director, Nursing Best Practice Research Unit, from the University of Ottawa, Canada, to the RCN Research Institute.

Whilst visiting Professor Davies provided an enlightening talk on her work in relation to nursing guideline implementation. The title of the presentation

was 'Collaboration between Practice and Academia: a 12-year partnership for nursing guideline implementation'. The focus of this work is to develop, implement and evaluate nursing guidelines.

Currently guidelines are available for a range of topics such as: falls, continence, therapeutic relationships, smoking cessation, and venous leg ulcers.

The team has very strong links with Government, the Health Service and Professional bodies so that support for the guidelines is built into the development process. Implementation involves cycles of audit, teaching and learning using a range of methods, followed by evaluation. The team are now working internationally with a range of countries.

Professor Davies has many publications but an example is:

Davies, B. Edwards, N. Ploeg, J. Virani, T. (2008) Insights about the process and impact of implementing nursing guidelines. *BMC Health Services Research* 8(1), 29.

Contact: Kate Seers

PhD Student: Julie Rasmussen

I am a PhD student in my third year at the RCN Research Institute and my studentship is funded by the NHS Institute of Innovation and Improvement. My study aims to provide insight into how protocols and guidelines are being used on a hospital ward to manage the risk of patients contracting *Clostridium difficile* infection.

In particular, my study explores how differing groups of ward staff perceive the protocols and guidelines, the difficulties they have with implementing these into their practice and what happens if and when difficulties are experienced.

I used a qualitative case study using ethnographic methods in my field work, which took place over eight months in a UK hospital. I worked hard to gain trust and build rapport with the staff on the ward. I found this extremely hard work as there was a great deal of suspicion as to why I was looking at practice.

I have thoroughly enjoyed my research and am currently in the process of writing up my findings, supported by two wonderful supervisors. I am looking forward to using the knowledge, skills and experiences I have gained on my PhD journey back into the workplace.

The RCN Research Institute, within the School of Health and Social Studies, at the University of Warwick, provides a vibrant student research community. If you are interested in undertaking a PhD, part time or full time, please contact:

Prof Kate Seers.

Quality of Life

Pushing the Boundaries: Frontiers of Quality of Life Research

For four days at the end of October 2011, the snowy downtown of Denver, Colorado was host to the 18th International Society for Quality of Life Research (ISOQoL) Annual Conference (<http://www.isoqol.org/2011conference/>).

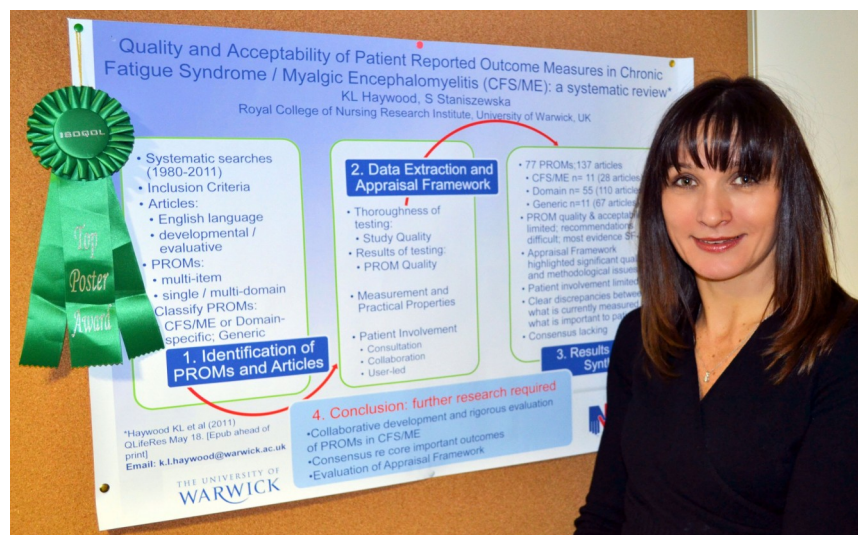
The conference provided an outstanding opportunity for networking with key researchers from around the world, and to develop new creative ideas fuelled by insights into scientific and technological innovations. Key themes included qualitative research, eHealth, health disparities, and personalized health care.

Dr Kirstie Haywood was awarded a 'Top Poster Award' for her poster

'Quality and Acceptability of Patient Reported Outcome Measures in Chronic Fatigue Syndrome / Myalgic Encephalomyelitis (CFS/ME), co-authored with Dr Sophie Staniszewska, and was nominated as co-chair of the ISOQoL Clinical Practice Special Interest Group,

which provides a forum to support researchers interested in the use of PROMs in routine practice settings (<http://www.isoqol.org/>).

Contact: Kirstie Haywood



Impact of PPI

Understanding the negative impact of patient and public involvement

Patient and public involvement (PPI) has become an important activity within health and social care planning, development and evaluation, with many health professionals, including nurses, attempting to embed PPI into many activities.

While PPI brings many benefits in developing appropriate and acceptable services, it can also have a range of negative impacts, which are more rarely identified and discussed. Drawing on the experiences and findings of a range of projects carried out at the National Centre for Involvement by staff, including those seconded from the RCN RI, we drew together some of the key negative impacts. Some of the PPI leads who completed our national survey

identified experiences that we described as the 'emotional labour' of PPI, the significant effort that accompanies attempts to embed new ways of thinking onto organisational structures and the negative consequences that can accompany this process.

In this chapter we argue that is only through the recognition of such impacts that action can be taken to mitigate their impacts and maximise the potential for positive impact, particularly for those individuals involved in PPI activities.

Staniszewska S, Mockford C, Gibson A, Herron-Marx S, Putz R (2012) Moving Forward: understanding the negative experiences and impacts of patient and public involvement in health service planning, development and evaluation.

In Barnes M & Cotterell P (Eds). Critical Perspectives on User Involvement. Policy Press, Bristol, pp129-141

Contact: Sophie Staniszewska



RCN Research Institute

**School of Health and Social Studies
University of Warwick
COVENTRY
CV4 7AL**

Website Address:

www2.warwick.ac.uk/fac/soc/shss/rcn

RCNRI Research Team Administrator:

Paul Kent

Phone: **024 761 50618**

Fax: **024 761 50643**

email: p.d.kent@warwick.ac.uk

RCNRI Staff Email Contacts:

j.brett@warwick.ac.uk

kathleen.gunn@warwick.ac.uk

k.l.haywood@warwick.ac.uk

d.r.kennedy@warwick.ac.uk

carole.mockford@warwick.ac.uk

c.e.new@warwick.ac.uk

kate.seers@warwick.ac.uk

sophie.staniszewska@warwick.ac.uk

liz.tutton@warwick.ac.uk

