### RCN RESEARCH INSTITUTE

**DIRECTOR:** 

**Prof Kate Seers** 

# RCN Research Institute





JAN/FEB/MARCH 2012

### **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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## **FIRE STUDY**

### The FIRE Study: **Facilitating Implementation** of Research Evidence

The FIRE Study is an international, pragmatic, randomised controlled trial with an embedded process evaluation, and economic evaluation. The purpose of the study is to compare different approaches for supporting staff in nursing homes when implementing recommendations on urinary incontinence.

A total of 24 nursing homes are participating in four countries: England, Republic of Ireland, Sweden and the Netherlands.

Research Fellows are collecting quantitative and qualitative data at baseline, and 6, 12, 18, and 24 months post intervention, and they are currently working on the 18 month data collection period.

The Research Fellows are also working on the qualitative analysis drawing on the principles of realistic evaluation, and in January 2012 they spent

a week at Bangor University in North Wales working together on qualitative analysis across the four countries. The FIRE Study started in 2009 and will finish in June 2013.

For further information on the FIRE Study, please contact Carole Mockford carole.mockford@warwick.ac.uk or the Project Manager, Deirdre Kennedy

d.r.kennedy@warwick.ac.uk.



The work of the RCNRI aims

- ► 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** 

FIRE Study Research Fellows (from left to right):

Claire Hawkes (Centre for Health Related Research, Bangor University); Carole Mockford (RCN Research Institute, University of Warwick); Teatske Van der Zijpp (Fontys University, The Netherlands); Ankie Eldh (Karolinska Institute, Sweden) and Christel McMullan (Ulster University, Northern Ireland).

Website address:

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

# Orthopaedic and Trauma Nursing

Guest Editorial Tutton, L., Gray, B., Langstaff, D. Developing a research agenda in orthopaedic and trauma nursing. International Journal of Orthopaedic and Trauma nursing (2011) 15, 163 -164

This editorial highlights the gap between the ideal and reality of nursing within a complex and ever changing health environment. It focuses on the need to develop a really good evidence base in order to provide a high quality service to patients.

As a practice discipline we need to demonstrate real interest in generating knowledge for and from nursing practice. One way to do this is to link up with existing research structures. One example of this is the links between the Oxford Trauma Unit, The Kadoorie Centre for Critical Care Research and Education, Oxford and the RCN Research Institute, University of Warwick.

Through this connection several studies have taken place around the professional culture of care, hope and recovery. Further studies are underway exploring experiences of hip fracture and major trauma.

Nurses need to be active in participating in the development of research agendas, work collaboratively and ensure service users are involved at all stages of the research process.

**Contact: Liz Tutton** 

# Qualitative Research

Editorial Seers, K. Qualitative Data Analysis Evidence - Based Nursing January 2012,15(1), 2

This "Research Made Simple" article explores the importance of qualitative research in answering questions such as what an experience is like for a patient.

It highlights that there are many different types of qualitative research but there are a set of common processes in data analysis. Qualitative data can include what patients said or notes on what the researcher observed or what the documents said.

Sorting the data through coding small parts of the data, finding similarities and differences within the sentences or paragraphs, building up into categories and themes is a useful way forward.

Making sure there is a clear audit trail of your decisions and that your own role as researcher is reflected as part of the analysis is important.

Organisation is crucial and computer software can help with this process. There are many books that will help but talking to people who have expertise in the area can be really useful. The full article is available free at ebn.bmj.com

Editorial Seers, K. Toyne, F. What is qualitative health research? Evidence - Based Nursing January 2012, 15(1), 1

This editorial emphasizes the importance of being sure that a qualitative study is good before using it in practice.

There are many different ways of judging quality, but this editorial suggests following a pragmatic approach to quality assessment, and outlines Dixon-Woods et al's series of prompts to judge quality. For example, are

sampling, data collection and analysis clearly described and appropriate to the research questions?

So making sure the qualitative research you want to use in practice is robust is important, and this editorial suggests a useful starting place to inform that judgment.

**Contact: Kate Seers** 



# Barbers' Company Clinical Nursing Scholarship 2011 Scholar: Joanne Neate

I am a third year doctorate student studying part time at the University of Southampton, whilst also working as a specialist nurse practitioner in the Breast Unit at Poole Hospital NHS Foundation Trust.

The Barbers' Company Clinical Nursing Scholarship has enabled me to continue my studies for the last 2 years, during which time I have made real progress on my research, which aims to determine the feasibility and effect of Nordic walking on treatment related joint pain in women with breast cancer. Aromatase inhibitors are an oral medication given to women with hormone sensitive breast cancer for 5 years, to reduce the risk of

their breast cancer coming back. Up to half of women on this treatment experience joint pain.

My study will compare a group of women undergoing regular Nordic Walking to those who are on the 'wait list', to see if there are differences in self report of pain, quality of life, self efficacy and depression.

The Barbers' Company Clinical Nursing Scholarship of up to £7,500 is awarded annually to enable nurses making a career in clinical nursing to undertake further education, research or clinical project.

For further details contact Paul Kent

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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.

# Transactional Approaches to Change

Transactional approaches to change and the human costs: the case of public health services in England. Pippa Gough, Independent Consultant.

Pippa Gough visited the RCNRI and in her seminar provided an insight into the current change in Public Health Services and the move into Local Government. A move that has created disruption amongst Public Health Staff and Local Authorities alike.

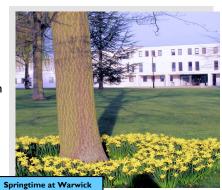
Pippa outlined her background in Health Visiting, Policy and Leadership at the RCN, Kings Fund, and Health Foundation. She highlighted the difficulty of integrating policy and leadership and the tensions and challenges that arise from putting policy into practice.

The move to place Public Health under the remit of Local Government has created a high level of tension due to the uncertainty of new roles and responsibilities and a concern regarding a clash of cultures and activities. Across London there are many different ways of working that have developed historically and often based on political allegiance. How public health activities are enacted and cross local authority boundaries will need to be developed through transformational leadership.

Disruptive creativity when everyday norms are changed can lead to better ways of doing

things. But people need high support as well as challenge otherwise change can lead to burn out. Transformational approaches such as opportunities to talk, gain support from each other and learn new skills are crucial. This engenders a feeling of co-creation where people feel they can influence future developments.

### **Contact: Kate Seers**



# Hope on a Stroke Unit

Tutton, L., Seers, K., Langstaff, D., Westwood, M. (2011) Staff and patient views of the concept of hope on a stroke unit: a qualitative study. Journal of Advanced Nursing doi:10.1111/j.1365-2648.2011.05899

This paper explores the meaning of hope for patients and staff on a stroke unit and used an ethnographic approach.

The participants identified the place of hope within suffering and loss; loss of the ability to move around freely on their own and undertake their normal daily lives. This was combined with an heightened awareness of their body and their lack of ability to function in the same way as they could before the stroke.

Patients' hope was part of their new way of being and became focussed on little things such as being able to open a bag of sugar. Their new lives were tainted by uncertainty and their future was likely to be very different from what they had previously imagined.

Despair was ever present and often patients felt, if they chose to, they could just let go of life itself. Staff identified the bleakness of their caseloads regarding hope for recovery. Both patients and staff struggled to find ways of working with emotions to find sources of hope and move away from despair.

Alongside despair was a strong determination to hope for recovery and often a drive to get back to normal despite uncertainty about future events. Having goals helped patients, and staff supported the patients' work in moving their bodies forward. Staff also focussed on keeping it real for patients and helped them to focus on what they could achieve now whilst working towards longer term hopes.

The study highlights the devastating nature and impact of having a stroke and its effect on how people experience hope in daily life. It raises awareness of the need for combining emotionally supportive strategies alongside physical therapies for both patients and staff. In addition innovative ways of working with people with high levels of despair are required.

**Contact: Liz Tutton** 



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