

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/med/research/hscience/rcn>



RCN Research Institute Newsletter

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Rapid Response Systems

Michele Platt, Nurse Consultant in Critical Care and PhD student, attended the Rapid Response Systems conference in Miami, Florida. Her research abstract was one of 40 selected for poster presentation at this international event.

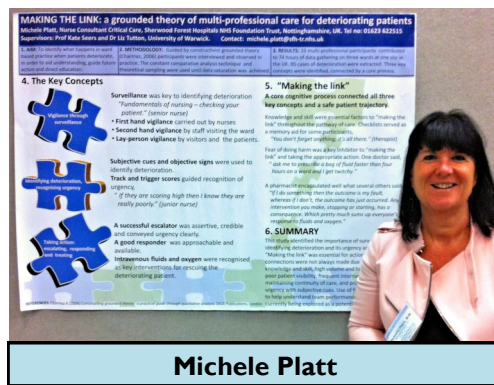
Michele's poster highlighted the work she has done towards her PhD studies, due for final submission later this year; supervisors Kate Seers and Liz Tutton. Her poster was the only qualitative study on display. Michele undertook a grounded theory approach to explore the communication process between members of the multi-professional team in medical and surgical ward areas during the care of acutely ill patients. This involved her interviewing or observing doctors, nurses, healthcare support workers, pharmacists and physiotherapist from medical and surgical wards and with the aim of finding out, 'what is happening here?'

The study's findings highlight the importance of vigilance through surveillance, identifying deterioration, recognizing urgency and responding with appropriate action. Key to successful patient rescue was the importance of healthcare workers being able to *make the link* and connect each component part in the process.

This was influenced by differing levels of knowledge and skill, but also by key factors such as knowing the patient, noticing changes in subjective signs and being able to articulate them to colleagues, patient visibility, frequent interruptions, staffing levels and competing priorities from increasing workloads.

Michele is now in the final stages of writing up her research and is exploring ways in which human factor ergonomics (understanding interaction between humans, equipment and their environment) might be used to counter-balance some of the problems her work has highlighted in order to optimise team performance.

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ERSC Seminar Series

Economic and Social Research Council Seminar Series

The first seminar in this series looking at the role of social science in nursing took place in Inverness in May. There was a really good discussion around how insights from human geography can help enhance understanding of people's lives to encourage greater empathy.

The second seminar is at Warwick on 15th July, and will be reported in a future newsletter.

For more details see :

<http://socialscienceandnursing.com>

Contact: Kate Seers

RCN Nursing Research Conference

RCN International Nursing Research Conference 2014.

A group from the RCNRI attended the research conference in Glasgow and enjoyed the majestic University of Glasgow buildings. Papers presented included a meta-ethnography of patients' experience of chronic non-malignant musculoskeletal pain by Kate Seers; and Gripp 2 by Jo Brett. Posters were also presented: Ankle Injury Management: patients' experience by

Liz Tutton; Developing a core outcome set for hip fracture trials: results of a consensus meeting and a systematic review of outcomes reported in cardiac arrest randomised controlled trials: the need for a core outcome set by Kirstie Haywood; and a systematic review of do-not-attempt-cardiopulmonary-resuscitation (DNACPR) orders: summarising the evidence around decision making and implementation by Carole Mockford.



Kirstie Haywood, Jo Brett, Carole Mockford, Liz Tutton, Kate Seers

Core Outcome Set

Developing a Core Outcome Set for Cardiac Arrest Clinical Trials (COSCA)

Laura Whitehead is a PhD student supervised by Dr Kirstie Haywood and Professor Gavin Perkins (Clinical Trials Unit, Warwick Medical School)

Trials across areas of health seek to compare the effectiveness of interventions, yet there is often difficulty in assessing the success of these interventions due to the great differences in the outcomes assessed. In order to solve the problems seen as a result of differences in outcome reporting between studies, some health areas have adopted the approach of developing and implementing core outcome sets. Core outcome sets are a small group of outcomes that are reported as a minimum in all trials of that health area to increase standardisation.

The heterogeneity in outcome reporting is a problem in the field of cardiac arrest research and this research aims to develop a core outcome set for research in this population. We have completed a review of the outcomes reported in cardiac arrest randomised controlled

trials which highlighted inconsistencies in the aspects of health assessed, poor reporting of the methods of assessment or outcomes assessed, and a wide range of assessment time points. Often the quality of reporting was poor with insufficient information provided to support reproduction of methods of assessment. Assessment was dominated by clinical and clinician-based assessment, with only one RCT including a patient-reported outcome measure. From other health areas we have learnt that outcomes that are the most important to patients may be different to those considered important by clinicians; however, we are uncertain about the outcomes that survivors of cardiac arrest consider to be most important.

To ensure the core outcome set incorporates the outcomes that matter to all stakeholders, including clinicians, researchers, patients and their partners, the survivors of cardiac arrest and their partners will first be invited to participate in interviews to gain a better understanding their lived experience. Consensus methods will then be used to identify the most important outcomes to a variety of stakeholders from an international community. I have completed my

upgrade from MPhil to PhD and have ethics clearance for this study. I am currently recruiting for my patient interviews. I have found my PhD so far a challenging yet exciting experience working a field of research that is relatively new to me.

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Kirstie Haywood



Laura Whitehead

Publications

Haywood KL, Whitehead L, Perkins GD. The psychosocial outcomes of cardiac arrest: Relevant and robust patient-centred assessment is essential. *Resuscitation*. 2014 Apr 4. pii: S0300-9572(14)00449-3. doi: 10.1016/j.resuscitation.2014.03.305. [Epub ahead of print] No abstract available.

Haywood KL, Collin SM, Crawley E. Assessing severity of illness and outcomes of treatment in children with Chronic Fatigue Syndrome/ Myalgic Encephalomyelitis (CFS/ME): a systematic review of patient-reported outcome measures (PROMs). *Child Care Health Dev*. 2014 Mar 24. doi: 10.1111/cch.12135. [Epub ahead of print]

Holden MA, **Haywood KL**, Potia TA, Gee M, McLean S. Recommendations for exercise adherence measures in musculoskeletal settings: a systematic review and consensus meeting (protocol). *Syst Rev*. 2014 Feb 10;3:10. doi: 10.1186/2046-4053-3-10.

The RCN Research Institute, within the Division of Health Sciences, Warwick Medical School 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.

Outcome Measure for Children

Roxanne Potgieter is a PhD student at Bristol University and Kirstie Haywood is part of the supervisory team. The study aims to develop an Outcome Measure for Children with Chronic Fatigue Syndrome.

Paediatric Chronic Fatigue Syndrome (CFS)/ Myalgic Encephalopathy (ME) is relatively common and disabling. However, little is known about the impact of CFS/ME and related treatment on children. There is a growing interest in the use of questionnaires, or patient-reported outcome measures (PROMs), to assess how patients function and feel in relation to their health and associated healthcare. PROMs can also be a useful means to help patients communicate the impact of their illness with health professionals. Yet, there is limited evidence of the quality and acceptability of PROMs for children with CFS/ME. Previous qualitative research with children with CFS/ME and their parents suggested that

PROMs were not relevant to children with CFS/ME and failed to include important areas affected such as social interaction. Children and their parents want PROMs that capture a range of physical symptoms other than fatigue.

This is a mixed methods PhD that seeks to involve children collaboratively to ensure that the outcomes that children care about are included in a new outcome measure. The primary aim of this research is to develop and evaluate a CFS/ME child-specific PROM. The PROM will be suitable for monitoring health outcomes in routine clinical settings and in research. The first stage involves qualitative studies with health professionals, children with CFS/ME and their parents, to understand patient experiences and health outcomes which are regarded as most important.

Interviews and focus groups with health professionals have now been undertaken and data analysis will begin. The next phase of the

programme involves focus groups and interviews with children with CFS/ME and their parents.

Roxanne is co-supervised by Dr Esther Crawley (Bristol), Dr Kirstie Haywood (RCNRI) and Alison Heawood (Bristol).

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Kirstie Haywood



Roxanne Potgieter

British Pain Society

The British Pain Society Annual Scientific Meeting

The British Pain Society held its Annual Scientific Meeting in Manchester in April. This is a multidisciplinary Society, and the range of perspectives and opportunities to network are an important part of the meeting. There were a good range of plenary sessions, including postoperative pain, gain control mechanisms of pain sensitivity; facial pain, psychology and back pain, genetics of pain, new drug developments for neuropathic pain and Complex Regional Pain Syndrome. There was an interesting selection of posters to discuss with presenters. Kate Seers is on the Scientific Committee for this meeting, and was busy judging presentations by students/trainees. Kate has taken over as Chair of The British Pain Society's Scientific Programme Committee for the next three years.

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Manchester Central Convention Complex



'Bluebells' Spring 2014 - University of Warwick



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