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Long-term Evaluation of Research Utilisation Consultation

Preliminary Report Northern Ireland



Contents

Background	2
Introduction to the Northern Ireland	
Consultation.....	2
Data Presentation.....	3
Overall Summary & Interpretation.....	6
Attendance List.....	7

Background

In 1994/5 the Foundation of Nursing Studies (FoNS) responded to the now widely recognised need for practitioners to base their practice on sound evidence of clinical effectiveness (Department of Health, 1996a) by organising nine workshops focused on the utilisation of research. The workshops involved 206 participants (Registered General Nurses, Registered Mental Nurses, Health Visitors and Midwives), spanning all clinical grades, from seven NHS trusts.

The primary evaluation of these workshops was reported in May 1996 in *'Reflection for Action'* (Foundation of Nursing Studies). The results were encouraging. The workshops had: strengthened practitioners' skills in critical appraisal; raised their awareness that research varied in its quality; and consolidated their prior knowledge, experience and confidence. However, fears were expressed that these effects 'wore off' with time, and that organisations needed to commit time and resources to enabling their staff to achieve research based practice. As a result of these concerns FoNS considered it necessary to undertake a long-term evaluation during 1997/98.

Two questions guided the second evaluation. What effect had the workshops and the association with FoNS had **in the long-term** on:-

- facilitating participants to critically evaluate research and apply it in practice?
- enhancing a research culture in the organisation?

The results of the second evaluation were presented in a consultation paper and this was distributed to senior nurses, practice

developers and nurse educators in Trusts and academic institutions across the UK. The first phase of the consultation invited recipients of the paper to respond to the findings in the light of their own experiences. They were also asked to comment on the impact clinical governance has had on getting research/evidence into practice and provide information on the kind of resources/support that have, and/or would, help get evidence into practice. The same people were also invited to attend one of four consultation events held in Northern Ireland, Scotland, England and Wales. The overall aims of the consultation were to validate the findings of the long-term evaluation of research utilisation and to explore specific needs in terms of supporting and sustaining the use of research in practice.

At the consultation events we were delighted to have the support of the Chief Nursing Officers to open the events in Northern Ireland, Wales and Scotland and a Deputy for the Chief Nursing Officer in England. Each day included presentations on the challenges of getting research into practice in each of the four countries. During the day participants were divided into small discussion groups and asked to focus on 4 areas:

1. Developing knowledge and skills to support research utilisation
2. Establishing organisational structures to support and sustain research utilisation
3. Creating and maintaining a culture for research utilisation
4. The role of the Foundation of Nursing Studies in supporting and sustaining research utilisation

Workshop discussion group guidelines were provided for areas 1-3 and participants were asked to record as much as possible of their individual thoughts, views and experiences from and about current practice in individual response sheets. Flip charts were also provided for recording information. Participants were given an individual questionnaire to complete during the day that focused on area 4. The individual and group notes, questionnaires and flip charts were all collected from each group and have formed a large part of the data collected from each of the four days. An

individual preliminary report has been prepared for each country and participants have the opportunity to comment on and verify the content of the report. These four reports contribute to an overall UK-wide publication.

Introduction to the Northern Ireland Consultation

Thirty-one people attended the consultation event for Northern Ireland, held at the Dunadry Hotel, County Antrim on 22nd June 2000. We were very pleased to welcome Miss Judith Hill, Chief Nursing Officer, Northern Ireland, to open the day. Miss Hill reminded participants of the earlier work of the Foundation in the field of research utilisation and the value this had for the province. She also highlighted some of the developments that had taken place in Northern Ireland to strengthen R&D within the nursing profession. Participants were encouraged to share their experiences of enhancing R&D within their own organisation as well as identifying needs for the future which would serve to inform both the work of the Foundation and the Department of Health's R&D strategy. We were also pleased to have two keynote presenters from Northern Ireland to set the scene for the workshop activities. Professor Martin Bradley, Chief Nurse, Western Health & Social Services Board, helped focus the morning's activities through a stimulating and informative presentation about the challenges for Northern Ireland in getting research used in practice. Professor Bradley shared the positive activities underway to promote R&D, and in particular the growth of positive links between Universities and Trusts. In the afternoon, Miss Deirdre O'Brien, Director of Nursing & Quality Assurance, Royal Group of Hospitals NHS Trust helped us focus on the particular challenge the demand for service delivery has on meeting an R&D agenda. She provided many examples of positive activities at practice level which are enabling nurses to participate in, understand and use research in practice within her Trust.

The participants were divided into four small groups for the purpose of the focused

workshop discussion. Each group identified a facilitator and ad hoc external facilitation was provided where needed. A vast amount of data were collected from the groups, representing both individual viewpoints and group consensus. The data have been transcribed, reviewed and where possible key issues and themes identified. The reviewed data are presented in four sections under the workshop/questionnaire headings and an overall summary and interpretation provided.

Data Presentation

Workshop 1: Developing Knowledge and Skills to Support Research Utilisation

Activity 1.1 Participants were asked to comment on 'What triggers the use of research?'

The following represents the common individual responses to this question under four broad headings

Individual/personal factors

- Individual/personal motivation
- Learning from courses
- PREP
- Individual reading
- Critical incidents
- Clinical supervision
- Wanting to give best care
- Professional credibility
- Duty of care
- Accountability
- Enforced

Internal Organisational factors

- Clinical Governance and clinical effectiveness
- Health care agendas of Directorate Managers, Trust Boards, Government and the public
- Quality measurement, e.g. audit, benchmarking, incident reporting, investigation of complaints
- Easy access and exposure to research. For example, availability of journals and research reports.
- Having a research department and steering/interest groups increases the interest in and availability of information

- and encourages nurses to use it
- Practice Development roles
- Research Nurse roles
- Funding – internal and external funding, Trust award schemes
- Valuing of education by the organisation and the provision of internal education programmes
- Positive individual attitudes at a clinical level, e.g. willingness of staff to change practice and having a questioning approach to work
- Research active organisation
- Newly qualified staff who bring enthusiasm and new ideas

External Factors

- Professional bodies
- Public awareness
- Research Reports
- New developments

Educational Factors

- Trust/University links help promote a culture of research
- Opportunity for lecturer practitioner roles

Participants were then asked to share and discuss their individual responses and draw together the common and most important themes which trigger the use of research in practice.

The following themes seemed to be common in all four groups:

Research Culture

Overall it seemed to be felt that embracing research as an important activity, which is supported at all levels throughout an organisation, would help ensure research is used to change and develop practice. Two quotes that particularly exemplified this were:

“Research leads to other research ‘snow-balling’.”

“Research begets research just as funding begets funding.”

The kinds of activities which were said to help create a research culture included an active R&D department that is accessible and encourages local ownership of

research. Practice development was also seen as an important means of sharing good practice and encouraging a positive attitude to change. Within both of these, the establishment of nursing roles, such as research nurses and practice development nurses, were seen as valuable. Examples of these were the joint appointment posts between Trusts and Universities in Northern Ireland. It was felt that posts of this kind should be encouraged, although the potential for isolation was highlighted and the need for ongoing support recommended.

Access to information

All four groups strongly identified the need for easy access to evidence and research, particularly at ward level.

Clinical Governance and Risk Management

These two ‘organisational structures’ were seen as a means of ensuring that in the future research and evidence are features in all practice. For example:

- Clear service priorities identified
- Increased public awareness and pressure
- Safety/risk analysis
- Value for money and ensuring what we do is useful, i.e. awareness of outcomes and health gains, cost-effectiveness, efficiency, equality
- Increased awareness of accountability and a stronger focus on ‘duty of care’ through UKCC’s role in protection of the public
- Regular Audit
- Encouraging critical incident reporting

Funding

Funding issues arose in all the discussions. In this instance the need for funding focused around enabling nurses to be released for research related activities which would encourage them to make more effective use of research in practice.

Education

Educational opportunities can act as a catalyst to changing practice, and the development of new knowledge and skills was seen as an important way of encouraging the use of research in practice. Staff undertaking training as part of PREP, opportunities for clinical supervision and

having students in clinical areas were also seen as triggers to using research in practice.

Multi-disciplinary/joint working

Service developments that encourage multi-disciplinary and/or joint working encourage the use of research/evidence in practice. The greater emphasis on providing effectiveness is also seen as beneficial. Primary Care Commissioning Groups that bring together GPs and Primary Care Practices to reduce variations in practice and ensure the provision of best practice also place emphasis on the importance of using research and evidence.

Activity 1.2 What knowledge & skills do you/your colleagues need to support research utilisation?

Participants were asked to consider the kind of knowledge and skills needed to support research utilisation.

The responses from participants can be identified under four key headings:

Basic research skills

- Knowledge of the research process
- Understanding qualitative and quantitative research
- Knowledge of statistics
- Critical reading & appraisal skills
- Proposal and report writing skills
- Knowing how to frame questions

Skills in searching for information

- IT skills
- Library skills

Management of change

- Leadership
- Facilitation skills
- Assertiveness
- Negotiation
- Presentation
- Project management
- Time management
- Strategic vision
- Able to apply theory to practice
- Approaches to dissemination
- Awareness of barriers to research

Local knowledge

- Knowledge of clinical area/organisation
- Knowledge of community/area of work
- Knowledge of people who will be able to assist

Participants were also asked to consider who needs the knowledge and skills and how loss of knowledge and skills can be prevented.

Who needs the knowledge and skills?

Three direct quotes from the discussion groups give good insight into the overall data collected in relation to this question:

- “All nurses need to perceive research as essential.”
- “All nurses need knowledge and skills to access and critically appraise research but it’s not appropriate or feasible for all nurses to do research. More emphasis needs to be placed on encouraging all nurses in practice to be capable of reading, accessing, appraising and using research in their practice. Keep researchers clinically based, not disappearing into academia once they achieve PhD level.”
- “All nurses – how to locate library, Internet, how to evaluate/appraise, communication ability; Research nurses – how to do research, all aspects, and Research co-ordinators – co-ordinate research group.”

How can loss of knowledge & skills be prevented?

- Link staff at ward level to lead research
- Networking and free sharing of information between Trusts and Universities and Research Nurses as individuals
- Joint appointments between Trusts and Universities
- Multi-disciplinary
- Research nurses at practice level
- IT skills and access to IT including the internet for everyone
- Increased access to education and skills development in the workplace
- Time
- More resources in place to facilitate implementation and use of research findings
- Supervision of staff, encouraging them and pushing them to do it
- PREP
- Personal accountability
- Not seeing research as the ‘luxury’ which can be dropped when other pressures come to bear

Workshop 2: Establishing Organisational Structures to Support and Sustain Research Utilisation

Activity 2.1 The consultation report identifies that practitioners quote a lack of organisational support to use research in practice

Bearing in mind the knowledge and skills identified in workshop one, identify the specific organisational support required to achieve the development of skills and sustain the use of research in practice. Also consider how this could be achieved, where it would fit into the overall organisational structure and who would/should take responsibility.

The following themes seemed to be common in all four groups.

- Appointment of a Director of Nursing Research
- Facilitator/Co-ordinator role which would act as a key driver, these should be strategic appointments and at a senior level. They could be joint appointments between Trusts and academic institutions, but commitment to the Trust’s development essential. Links with universities through joint appointments, joint research initiatives and applications for funding, secondments and studentships. Nurse Directors have a key role in workforce planning to make this happen
- Research should be seen as part of the quality agenda and therefore part of the nursing strategy. Research should be a common thread through from commissioners to patient. Directorates should lead a culture of involvement and ownership
- Dedicated time for nursing research that is appropriately resourced. For example, funding for replacement cost for staff in practice to undertake research.
- Opportunity for seeking research / evidence should be created as part of the working day
- Research priorities and targets identified through DHSS and funding given to support and generate activities to identify best practices
- Clinical governance seen as a key driver
- Research career pathways that offer appropriate terms and conditions

including adequate salary. Commissioners and academic institutions seen as key players in success implementation.

- Commitment to developing skills, one suggestion that basic research training should be mandatory
- Local/practice based support networks, for example, journal clubs, interest groups, research circles, link nurses. Led by nurse researchers with support from nurse director, which will also create an opportunity for two-way communication.

Workshop 3: Creating and Maintaining a Culture for Research Utilisation

Activity 3.1 What creates a culture that promotes the utilisation of research?

Participants were asked to describe a characteristic or element that creates the culture and where possible give an example from practice.

Valuing research Trust-wide by creating a philosophy/mind set that recognises the benefits of research seemed to be key. The following four broad suggestions were also identified:

1. Appointment of Research Leaders at high level...

- Good professional leadership from Nurse Director ensures nursing is valued from the top
- Identify research priorities from practice which Trust will concentrate on. This enables development of expertise in key area, co-ordinates common goals
- Many references to managers leading support and encouraging and creating opportunities for nurses to engage in research

2. All policy, procedures and guidelines changes are research based...

- Access to information to find research/evidence
- User involvement, patient at the centre
- Time out for research activities and access to computers
- Increased resources including funding and time

3. Recognition and reward (Internal and external) of good research based practice.

4. Developing/Implementing nursing research strategy for Trust...

- Focus on practice development
- Budget for research in business plan
- Training needs analysis. Education and training in research and research utilisation, change management
- Making everyone responsible, empowering, giving confidence and 'freedom to act' to nurses at the 'coal-face'. A simple example offered was encouraging nurses to bring research articles to the ward, and talking about research and changing practice.
- Reflective practice, clinical supervision, every nurse accountable for delivery of safe practice.
- Emphasis on removing the 'name and shame' culture
- Networking rotation of nurses working in Primary or Secondary Practice and Specialist Nurses at the interface. Rotation to work within differing specialities in acute hospitals where staff are helped achieve new competencies. This would facilitate professional support networks, widen the focus for individual nurses, and encourage multi-skilling.

Questionnaire: The Role of the Foundation of Nursing Studies in Supporting and Sustaining Research Utilisation

Participants were asked to provide information on the kind of activities the Foundation should continue to support in order to fulfil its aim of getting research into practice. The findings from our long-term evaluation have identified workshops as a valuable means of developing skills for using research. We wanted to find out more about the value of workshops and also about other things that might be useful.

Overall, the Foundation was seen to have a positive role in raising awareness about the importance of research to practice as an integral part of everyday working, not just as an add on. The value of workshops and funding and facilitation of projects that specifically aim to implement and disseminate research was acknowledged and we were encouraged to continue this. Within the data, four key areas of activity were identified:

Education and training

- Basic research skills for all nurses to raise the level of understanding of research
- Research process
- Questioning attitude
- Reflective practice
- IT skills, including advanced knowledge of how to obtain knowledge – literature searches – open them up to a wealth of knowledge available on Internet.

The need for any education and development to be locally based came through strongly as did the need for equipment and resources. This would increase access and reduce costs.

Implementation and dissemination of research

- Conferences
- Publications
- Website
- Networks
- Funding, including scholarships and awards

Original research activity

Many comments centre around undertaking original research including:

- Focus on the areas where it is perceived to be more difficult to encourage R&D
- Career pathways for nurses interested in research
- Facilitators to support practitioners to undertake research
- Funding for research
- Research scholarships and fellowships
- Funding to free up practising nurses to undertake research in practice
- Promotion of a research culture from the Trust Board down with 'everyone striving for best practice through research'
- Creation of nursing research departments and nursing research posts

The Foundation was seen as having a role in making the above happen together with health departments (DHSS, R&D Office)

Overall Summary & Interpretation

In workshop one, participants were asked to focus on two areas, triggers for research use and the knowledge and skills required to support research use. On reflection, this was probably the most demanding of the three workshops. It certainly yielded the most data and provided many themes, which subsequently became common threads found throughout the data.

The individual responses to the question 'what triggers the use of research' were quite wide-ranging, although on closer examination they fall into the broad categories of 'Professional Development' and 'Accountability'. It is interesting to note that, whilst duty of care and wanting to give best care were mentioned, patient or clinical problems per se were not mentioned. It is difficult to draw a conclusion regarding this, but it may relate to the nature of roles of the participants which were mostly those not involved in regular direct clinical practice.

A further interesting single comment under individual/personal triggers was that of 'enforced' in relation to use of research. Some sense can be made of this viewpoint when looking at the internal organisational factors that trigger research. These also seem to divide into two groups. First were factors relating to organisational structures and policy, which have more of an 'enforcing' influence, such as clinical governance and health care agendas. In the group discussion, clinical governance and risk management were clearly identified by many participants as structures which would 'make sure' practice was research/evidence based. The second group appeared to refer to organisational factors which 'value' research, such as an active R&D department and nursing roles leading R&D. Support for these factors was seen to be strengthened further in the data from the group discussion.

The need for nurses to be free to engage in research and related activities was seen as important and funding a means of achieving this. The role of education in providing knowledge for changing practice and stimulating interest in research was highlighted, together with the challenges

offered through clinical supervision and the support of nurses in training. Finally, the new ways of working being encouraged within the province involving joint/multi-disciplinary initiatives, and particularly those in primary care, seemed to be encouraging professionals to seek and use evidence/research in practice.

When asked to consider the knowledge and skill requirements to support the use of research in practice, four key areas were identified. The need for basic research skills, including research process and critical appraisal was still viewed as important. The need for change management skills came across particularly strongly, and linked to this it was interesting to note from all groups the importance placed on local knowledge. Both these acknowledge the complexities of using research in practice. The final area mentioned by all the groups was information searching skills, including library and IT skills.

The knowledge and skills identified were, broadly speaking, seen as relevant to all. However, it was clearly felt that research activity was the domain of a smaller group of nurse researchers. A wide range of suggestions was made to help sustain knowledge and skills which mirrored the factors identified that 'trigger' the use of research in practice. For example, nurse researchers in practice, valuing of research by all, information sharing and access to education and skills development in practice.

Workshop two asked participants to begin to think more broadly about the organisational structures that support and sustain research. The need for positive leadership at a strategic level in Trusts came across very strongly. As well as the role of the nurse director being key, the need for a facilitator/co-ordinator role at a senior level was seen as essential. The need for dedicated time for research and research career pathways can be linked to this. Some of the aforementioned suggestions for skills maintenance seemed to be firmed up in this workshop, particularly with regard to commitment to skills development and activities to promote a culture of ownership and involvement in research. Strategies for creating that culture were identified in Workshop three. These included reiteration

of professional leadership, the development of a nursing research strategy that has a focus on practice development and empowers nurses at the so-called 'coal-face', and recognition and reward of good practice.

The last piece of data presented was that from the questionnaires about the role of FoNS in supporting and sustaining research. The work of FoNS to date had been valued, and continuation of activities that promote the dissemination and implementation of research in practice was encouraged. Two other broad areas of activity were identified. The Foundation continued to be seen to have a role in education and training, although IT skills were a new addition to the list of areas, and the need for education to be locally based was emphasised. There were many comments and references to the Foundation becoming involved in supporting original research, an area which currently falls outside its remit and which is likely to remain so for the foreseeable future. However, it was noted that some comments suggested the Foundation might have a role together with the Northern Ireland Health Department in promoting the need for nursing research.

In conclusion, this report presents a review of data collected from the one-day consultation in Northern Ireland. The data from this report together with that collected in Wales, England and Scotland provides great insights into 'where have we come from?' and 'where are we going to?' in terms of getting research and evidence used in practice.

*Theresa Shaw
Professional Development Officer
October 2000*

Attendance List

Name	Title	NHST/Company
Michaela Barr	Research Officer	NHSSB
Paddie Blaney	Nursing Officer	DHSS
Aoife Bradley	Research Nurse	Ulster Community & Hospital Trust
Martin Bradley	Chief Nurse	Western Health & Social Services Board
Fay Buglass	Director	Foundation of Nursing Studies
Anne Campbell	Assistant Site Director	North & West Belfast HSST
Joe Canavan	CPN Team Leader	North & West Belfast HSST
Jacqueline Clark	Primary Care Facilitator	Newry & Mourne HSST
Gerry Colgan		Mater Infirmorum Hospital HSST
Jennifer Costley	Practice Development Co-ordinator	Down Lisburn HSST
Carolyn Fitzsimmons	Research & Quality Co-ordinator	Royal Group of Hospitals & Dental Trust
Ida Foster	Director of Nursing & Primary Care	Ulster Community & Hospital Trust
Bridie Foy	Acting Director of Nursing & Quality	Craigavon & Bainbridge Community HSST
Michelle Glackin	Lecturer Practitioner	University of Ulster
Anita Glenn	Primary Care Manager	Down Lisburn HSST
Sean Graffin	Research Nurse	Belfast City Hospital NHST
Bernadette Gribben	Practice Development Nurse	Royal Group of Hospitals & Dental Trust
Jerome Harley	Lecturer Practitioner	Craigavon & Bainbridge Community HSST
Judith Hill	Chief Nursing Officer	DHSS
M. Hinds	Director of Nursing & Quality	Mater Infirmorum Hospital HSST
Molly Kane	Senior Nurse Advisor	NHSSB
Margaret Kelly	Assistant Chief Nurse	Western Health & Social Services Board
Caroline Lee	Quality Research Co-ordinator	Royal Group of Hospitals & Dental Trust
Maureen Magee	Primary Care Facilitator	Western Health & Social Services Board
David Marshall	Research Nurse	Ulster Community & Hospital Trust
Garrett Martin	Senior Nurse Practice Development	Craigavon & Bainbridge Community HSST
Anne McEldowney	Asst. Director of Nursing & Quality	Mater Infirmorum Hospital HSST
Brendan McGrath	Service Director	Sperrin Lakeland Health & Social Care Trust
Deirdre O'Brien	Director of Nursing & Quality Assurance	Royal Group of Hospitals & Dental Trust
Joan O'Hagan	Director of Nursing & Community Health	Newry & Mourne HSST
Sam Porter		Queen's University of Belfast
Annetta Quigley	Senior Nurse, Professional Development & Quality	
Theresa Shaw	Professional Development Officer	Foundation of Nursing Studies
Eammon Slevin	Senior Lecturer	University of Ulster
Sarah Smyth		United Hospitals Health NHST
Elizabeth Stallwood	Vice Chair	Foundation of Nursing Studies
Mary Watkins	Professional Adviser	Northern Ireland National Board for Nursing



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