The Foundation of Nursing Studies
Developing Practice • Improving Care

Foundation of Nursing Studies Dissemination Series 2004 Vol.2. No.6.

Improving Research Utilisation for Community and Mental Health Nurses

Keywords:
Research utilisation, research implementation, barriers, research use

Duration of project:
January 1998 – April 2003
Report received for publication: January 2004

Project leaders:
Dr Michelle Briggs, Dr Graham Paley, Professor Keith Cash, Professor S Jose Closs

Contact details:
m.briggs@leeds.ac.uk

Summary of project

This project was designed to explore the process of encouraging research utilisation in a large Community and Mental Health Trust in Leeds. It was organised into three phases. A baseline survey of community and mental health nurses was carried out to establish an overview of the factors that inhibit and promote the use of research in the Trust. A publication series of research commentaries was designed to address some of the problems of finding and summarising relevant literature for clinical practice. An evaluation programme to determine the impact of the research commentaries was undertaken. The cost implications of such a process have also been identified.

Background

Over the past decade there has been an increasing emphasis on evidence-based practice. The NHS information strategy, the development of the NHS net and the National Electronic Library for Health all testify to the NHS commitment of bringing research evidence closer to clinical decision makers (Thompson et al, 2001). In addition, there is a growing number of nurses involved in the Cochrane Collaboration. This is an organisation involved in the development of systematic reviews of all available clinical trial data to answer questions of effectiveness. An increasing number of these reviews are on topics of direct relevance to nurses. Journal based initiatives are also available such as Evidence Based Nursing (Cullum et al., 1997) and Clinical Effectiveness in Nursing (Newell, 1997). Furthermore, guidance can be found in publications such as Clinical Evidence (BMJ Publication) and NICE guidelines (National Institute of Clinical Excellence), which are produced in paper and electronic formats.

However, despite the availability of these resources, there is evidence to suggest that research findings and systematic reviews do not reach many nurses and the closer staff are to providing direct patient care the less aware they are of such initiatives (Newman et al., 1998).

The reasons for this failure to access research have been the focus of much research and a number of barriers to research use have been identified. These include issues such as accessing a large volume of research information; critical appraisal and library skills of nurses; the academic presentation of research findings and methods of dissemination and implementation within organisations (Foundation of Nursing Studies, 1996; Walsh, 1997a; Walsh, 1997b; Closs et al., 2000; Marsh et al., 2001).

In contrast to the large number of studies exploring the perceived barriers to research use there are few formal evaluations of dissemination strategies in health care organisations and a lack of published data relating to what facilitates research use. This project was designed to explore the process of encouraging research utilisation in a large Community and Mental Health Trust in Leeds.

Aims of the project

The project aimed to:

- Identify nurses' perceptions of research use within the Trust
- Develop a model of research dissemination for the organisation
- Examine the impact of this model on nurses' perceptions of availability and accessibility of research
- Estimate the cost of the model

Process

The project was organised into three phases. Each of these phases will be outlined below.

Phase 1 – Exploration of research use in the Trust

Both qualitative and quantitative approaches were used to explore the issues related to using research in community nursing practice.

A qualitative exploration of research use in the Trust

A purposive sample of 14 community nurses were approached and agreed to take part in a semi-structured interview or focus group for which ethical approval was obtained. The data collection was conducted by the lead researcher but the direction for discussion was led by the participants. The interviews and focus group were taped and transcribed verbatim. The transcripts were then imported into QSR Nud.ist textual data analysis tool.

The qualitative stage of this survey provided a rich picture of the obstacles and facilitators to using research in this Trust

Rather than accessing research directly, research findings seemed to transfer into community practice through a network of opinion leaders such as managers, specialists and other colleagues. This finding is consistent with other work in this area (Luker and Kenrick, 1992; Thompson et al., 2001).

A postal survey of a random sample of nurses working in the Trust

The issues arising from the qualitative study were used to develop a questionnaire. This questionnaire and the Barriers Scale developed by Funk (1991) were sent to a stratified random sample of 450 qualified nurses.

The total number of completed questionnaires was 255 (56.7%). This is slightly higher than response rates for similar postal surveys, which range between 40%-52% (Funk et al., 1991; Parahoo, 2000; Bryar et al., 2003).

The results from the survey showed that respondents were not aware of primary sources of research information and had difficulty in interpreting primary information when it was available (i.e. statistics). They felt that there was not sufficient time or resources to devote to the process of using research findings. They had difficulty in seeing if or how research could be applied to their own area of practice.

Phase 2 – Developing the research commentary series

It was clear from the information compiled during phase 1 that there was a need for a mechanism to pull together relevant research papers on broad clinical themes into one publication. Such a publication would be at its most useful if it was published in paper and electronic formats and developed locally using clinical nurse specialists and managers as advisors to enhance the clinical credibility. It was felt that a direct link to a library would encourage library use and raise the profile of the library services. The publication needed to provide the practitioner with the available research in an area and be explicit in terms of the literature searched and the decisions made about relevant literature. It should outline the breadth of available research in the clinical area but leave the decision about clinical action to the practitioner, as opposed to protocols and guidelines which direct clinical action but do not always provide an explicit research base (McCaughan et al., 2002). To guide the practitioner there would be a short commentary, which would explain any complex academic or statistical aspects of the paper and discuss the implications for practice. Clinical experts and researchers working in the area of the clinical theme would write the research commentaries. The publications were not intended to be systematic reviews where the aim is to identify all trials to answer a specific clinical question; however, where systematic reviews exist they would be highlighted. The aim was to highlight and summarise papers to raise awareness and improve access to research on the clinical theme.

During phase 2, four publications in the Research Commentary Series were produced and relevant copies were distributed to nurses within the Trust. (See Box 1).

Box 1. The four publications in the Research Commentary Series

Issue 1 Venous Leg Ulceration in the Community (1999)

Issue 2 Risk Assessment in Mental Health (2001)
Part 1 Risk of Violence in People with Mental Health Problems
Part 2 Risk of Suicide in People with Mental Health Problems

Issue 3 Multiple Sclerosis and Urinary Incontinence (2002)

The choice of subject area was informed by the responses from phase 1 and the availability of clinical experts in the designated themes. The production of each publication was co-coordinated by a team called a review panel. The membership of this panel reflected the subject area.

Phase 3 – Evaluating the impact of the research commentary series

After the dissemination of the venous leg ulcer commentaries (1999) and the mental health risk commentaries (2001), a staff survey was carried out to judge the impact of the commentaries from a practitioner's perspective. The aim of the survey was to evaluate nurses' reports of:

- The effectiveness of the dissemination (in terms of how many people had received and read the publication)
- Whether the publication had informed their practice and altered the way the used research
- Whether the series should be continued, and if so, what subject areas were a priority

A stratified random sample of staff (50 community staff and 100 mental health staff) was invited to take part in a telephone interview. A randomly generated set of work telephone numbers was provided from the workforce-planning department. A research nurse conducted all 150 telephone interviews. Staff were asked whether they had received a personal copy of the relevant commentaries (leg ulcer commentary for the community nurses and the risk assessment commentaries for the mental health nurses). If they had not received a copy personally (for example, if they were not employed by the Trust at the time that the copies were distributed) they were asked if they had been given a copy. For those who had read a copy of the commentaries they were asked if it had informed their practice and if they could offer any specific examples. Respondents were then asked if they felt this was a useful series to continue. If they thought the series should be continued they were given the opportunity to suggest future topics. Finally the nurses were asked if using the commentaries had changed the way they used research in their practice.

The concept of the research commentaries series evaluated well. Most nurses (85%) stated that this was a useful service to continue. However, only 50% of those surveyed had actually read the publication. The reason for not reading the publication was not always lack of interest. Half of the respondents who had not read the publications were unaware of their existence because they were away or not in post when the launch days occurred.

However, the fact that one in two staff surveyed were aware of the existence of these documents and had read them is encouraging. This compares favourably with the survey findings about the Effective Health Bulletins where nearly 75% of staff were unaware if their existence despite being widely disseminated by the Trust.

For those who read the publication, it had a positive impact for half of the nurses in terms of increasing knowledge, confirming evidence based practice and changing the way they used research. Since this was a random sample of trust nurses it could be generalised to the total nursing workforce. The commentaries were sent 1,500 nurses; this means that we could expect that half would be read (750) and for half of this group the commentaries would have a positive impact on their practice or perception of research as a result (375).

The cost of providing the research commentary series

The cost involved in this process should not be underestimated. The first publication cost just under £8,000 to produce. If the cost is viewed in terms of the number of people who potentially benefit, it equates to about £20.00 per nurse (£7,211/375). This is probably less expensive than individual nurses or groups all trying to pull together the same literature to inform their practice.

The cost will vary based on the skill of the person searching the literature and the experience of the health care professional who is collating and critiquing the evidence. The cost may increase if staff that have little or no experience and training in literature searching attempt to pull together the available research in an area. Those who are not expert in the clinical field may lack the necessary knowledge to write the commentaries and set them in the correct context.

Conclusion

This project has designed a research commentary publication to address some of the barriers to research utilisation identified by community nurses. The strength of the commentaries lies within the partnership between those skilled in literature searching and those with clinical specialist skills. Evaluation of these publications suggests that many community and mental health nurses found this approach had a positive impact on the accessibility and relevance of literature and that they were able to use this information to inform their clinical practice.

References

Bryar, R.M. et al. (2003) The Yorkshire BARRIERS project: diagnostic analysis of barriers to research utilisation. *International Journal of Nursing Studies.* Vol. 40. pp 73-84.

Closs, S.J. et al. (2000) Barriers to research implementation in two Yorkshire hospitals. *Clinical Effectiveness in Nursing.* Vol. 4. pp 3-10.

Cullum, N., DiCenso, A. and Ciliska, D. (1997) Evidence-Based Nursing: an introduction. *Evidence-Based Nursing pilot issue iv-v.* RCN Publishing Group/ BMJ Publishing Group.

Foundation of Nursing Studies (1996) *Reflection for Action.* London: Foundation of Nursing Studies.

Funk, S.G. et al. (1991) BARRIERS: The barriers to research utilisation scale. *Applied Nursing Research.* Vol. 4. No. 1. pp 39-45.

Luker, K.A. and Kenrick, M. (1992) An exploratory study of the sources of influence on the clinical decisions of community nurses. *Journal of Advanced Nursing.* Vol. 15. No. 5. pp 614-620.

Marsh, G.W., Nolan, M. and Hopkins, S. (2001) Testing the revised barriers to research utilisation scale for use in the UK. *Clinical Effectiveness in Nursing.* Vol. 5. pp 66-72.

McCaughan, D. et al. (2002) Acute care nurses' perceptions of barriers to using research information in clinical decision-making. *Journal of Advanced Nursing.* Vol. 39. No. 1. pp 46-60.

Newell, R. (1997) Towards clinical effectiveness in nursing. *Clinical Effectiveness in Nursing.* Vol. 1. No. 1. pp 1-2.

Newman, M., Papadopoulos, I. and Sigsworth, J. (1998) Barriers to evidence based practice. *Clinical Effectiveness in Nursing.* Vol. 2. No. 1. pp 11-20.

Parahoo, K. and McCaughan, E.M. (2000) Research utilisation among medical and surgical nurses: a comparison of their self reports and perceptions of barriers and facilitators. *Journal of Nursing Management.* Vol. 9. No. 1. pp 21-30.

Thompson, C. et al. (2001) The accessibility of research-based knowledge for nurses in United Kingdom acute care settings. *Journal of Advanced Nursing.* Vol. 36. No. 1. pp 11-22.

Walsh, M. (1997a) How nurses perceive barriers to research implementation. *Nursing Standard.* No. 11. No. 29. pp 34-39.

Walsh, M. (1997b) Perceptions of barriers to implementing research. *Nursing Standard.* Vol. 11. No. 19. pp 34-37.

Further Reading

The full report of this project is available to download from the FoNS website in PDF format (www.fons.org/projects/resutil.htm)

Issue 3 is available to download from the FoNS website in PDF format (www.fons.org/projects/resutil.htm)

Acknowledgements

To the Foundation of Nursing Studies for supporting the implementation and dissemination of this project including a grant of £20,775 which contributed to the production of the research commentary series and the evaluation of this work.

To the Freemasons' Grand Charity for supporting the dissemination of this project.

How to reference this report

Briggs, M., Paley, G., Cash, K. and Closs S. J. (2004) Improving Research Utilisation for Community and Mental Health Nurses. In Shaw, T. and Sanders, K. (Eds) *Foundation of Nursing Studies Dissemination Series.* Vol.2. No.6.

The Foundation of Nursing Studies Dissemination Series

ISSN 1478-4106
Editors: Theresa Shaw and Kate Sanders
32 Buckingham Palace Road
London SW1W 0RE
Tel: 020 7233 5750
Fax: 020 7233 5759
www.fons.org
Reg. Charity No 1071117