This research is funded by the European Commission’s Framework Programme Seven (FP7) for four years from January 2009. It involves collaborators from the UK, Sweden, The Netherlands, Ireland, Canada and Australia.

The research aims to explore and evaluate facilitation as a process for promoting the uptake of research evidence on continence promotion in clinical practice. The study design is a randomised controlled trial, with quantitative and qualitative process components. Expert external facilitators are working with internal facilitators to provide two different facilitation interventions when implementing continence guidelines in nursing homes.

The start of 2010 marked the end of the FIRE Project's first year. 2009 was a very busy and exciting year. The activities included recruiting the Research Fellows (Carole Mockford at Warwick, Claire Hawkes in Bangor, Paul Slater in Ulster, Ankie Eldh in Sweden, and Theo Niessen and Teatske van der Zijpp in the Netherlands), and the Project Manager, Deirdre Kennedy. The Advisory Committee and the Project Board met for the first time in September 2009.

The Committee comprises academic, research, and lay project members. They gave the team invaluable information and guidance, both at the meeting and later through individual consultation. Regular teleconferences between the Collaborators, the Research Fellows and across-team groups are well established.

Now the preparation work for the project is nearing completion with the data collection and the May workshops in the Netherlands currently taking place. Good progress has been made in all Work Packages (WP) although the ethics application in England took longer than expected. Recruitment of nursing home sites is almost complete. The website was launched in March 2010 and ethical approval for England obtained in April 2010.

As the FIRE researchers are spread worldwide, developing effective communication systems has been vital. Various mechanisms are being used, including the FIRE website (http://www.parihs.org/pages/firestudy.html). The site provides document repositories, information and discussion boards for the Project Team, Advisory Committee and the Internal Facilitators. It also gives the project a public image. The team also use Skype, teleconferencing and other tools to streamline email traffic. With the first Interim Report due during the Summer and data collection and analysis ongoing, this is a very busy period for the project.

Contact: Deirdre Kennedy

The work of the RCN RI 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
‘Using RCT’s to evaluate the effectiveness of complex interventions is challenging’.

**RCN Research Conference**

The RCN 2010 International Nursing Research Conference was held in May at the Sage Gateshead. The RCNRI was represented by a group of researchers from Warwick. Three papers were given on a variety of topics. Evaluating the effectiveness of implementation strategies using randomised controlled trials was presented by Kate Seers. This was part of a symposia on implementing evidence into practice using different approaches. Kate’s paper provided a real insight into the challenges of using RCT’s to test the effectiveness of complex interventions.

Carole Mockford gave a paper exploring the impact of patient and public involvement on NHS healthcare services. She identified through a systematic review that the evidence for the impact of PPI is weak. Further work around definitions of PPI and stronger evidence of its impact on services is required.

Challenges of using participation observation were examined by Liz Tutton. Three areas were identified for discussion, ethics, emotions and evidence. Practical and theoretical aspects were raised drawing on studies using a range of styles of participation.

**Contact Liz Tutton**

Participants were assessed by an observer who was blinded to the treatment group directly before the treatment (baseline), after the treatment and then 1, 2, 3, and 4 hours afterwards.

Assessments were made using a visual analogue scale and the McGill Pain Questionnaire. In addition, a verbal rating of pain relief was made and anxiety using the Speilberger short form Strait-Trait Anxiety Inventory.

The results suggest that participants who had the massage intervention had significantly less pain and anxiety immediately after the treatment and at one hour afterwards.

This suggests that massage is an effective short term intervention for people with chronic pain that they describe as moderate to severe. Massage is a practical skill that nurses could learn and implement as part of everyday practice. Time would be required and this would need to be considered in light of the short term benefits (1 hour) of the pain relief. Professional training is necessary and consideration of other guidance such as that produced by the RCN (2003) Complementary therapies in nursing, midwifery and health visiting practice.

**Contact: Kate Seers**


This paper explores the use of massage to manage chronic pain. The intervention was one 15 minute session of manual massage provided by a nurse. Participants randomised to the control group received a 15 minute visit to talk about their pain. Included in the study were adults who had moderate or severe pain who attended a pain relief unit.

"Massage is an effective short term intervention for people with chronic pain".
Mary McGrath works as a Lecturer at the School of Nursing, Midwifery and Health Systems, University College Dublin and is undertaking a part time PhD with the RCNRI. For many years Mary worked in Critical Care and is interested in how nurses in critical care learn to provide high quality care. Her master’s study explored the experience of expert nurses and for her PhD she is now focused on novice nurses.

The literature suggests there are challenges to caring in a technological environment. So the aim of the study is to explore the lived experience of novice critical care nurses caring in a technological environment.

Mary has completed a literature review around caring, technology and Heideggerian Phenomenology. She is now in the process of data collection interviewing a range of novice critical care nurses in Ireland. Preliminary analysis of early interviews suggest that novice nurses struggle to cope with learning to use technology and focus all their energy on mastering these skills. This temporarily takes their focus away from direct patient contact but gradually they learn to integrate their skills. Alongside the fear and stress of learning new skills the participants enjoy the multidisciplinary teamwork and respect that they feel is created by highly technical care.

Support from experienced staff is crucial in this period and essential to facilitate their learning and ensure good quality care is provided. Different types of facilitation and ways of gaining support are identified.

Contact: Liz Tutton

The Awards Panel

The Barbers’ Company Clinical Nursing Scholarship was set up to enable nurses making a career in clinical nursing to undertake further education, research or a clinical project. The Scholarship of up to £7,500 is offered for the fees or subsistence of a nurse normally undertaking a taught programme relevant to nursing or research in an academic department in the UK. The Scholarship is administered by the RCNRI on behalf of The Worshipful Company of Barbers, one of the City of London’s ancient livery companies.

The 2010 Award attracted 62 applications and on the 20th May the short-listed applicants were invited to London to be interviewed by the Awards Panel (see photo).

Four scholarships were awarded; the successful awards covered subjects as diverse as Post Graduate courses on Dementia Care, and Ethics in Cancer and Palliative Care; a Doctorate in Clinical Practice and a MSc in Systemic Psychotherapy.

The Scholarship is available every year and the closing date for applications is the 28th February.

Contact: Paul Kent

Quotation from Mary’s preliminary analysis

“..you only have to say the word and you do get a little bit of help. It is tapering off, I obviously needed a lot more help in the first 6 months”.

Contact: Prof Kate Seers
Recent Publication


A recently published paper (Mockford et al. 2009) describes the development of a 34-item Motor Neuron Disease Carer Questionnaire (MNDCQ). This questionnaire was developed to measure the extent to which dimensions of caring affect the health of carers of people with Motor Neuron Disease (MND). MND affects around 5000 people every year in the UK and is a progressive neurodegenerative disease.

Close relatives and friends often become full time carers taking on a role which is increasingly demanding and can include highly specialist care, for example with artificial ventilation, in the course of the disease. Existing research (see Mockford et al. 2006 for a review of the literature) has provided evidence that the physical and mental health of carers of people with MND is substantially below that of the normal population, their quality of life is reported to be below that of the patient, (and they can report a high level of subjective burden).

The MNDCQ has been developed from focus groups and interviews held with carers. Testing of the MNDCQ indicates that as the carers’ score increases, i.e. suggesting a higher level of burden, carers are more likely to report poor health. The MNDCQ may be useful for identifying declining health problems due to caring for the provision of timely service support where necessary, or to assess the effectiveness of interventions on carers’ health such as the introduction of an artificial feeding tube, and when this would be most effective.

References:

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Photos by Paul Kent and Liz Tutton