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Website address:

<http://www2.warwick.ac.uk/fac/med/research/hscience/rcn>



RCN Research Institute Newsletter

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European Nursing Research Foundation

European Nursing Research Foundation

In December 2016 Kate was invited to a meeting of the European Nursing Research Foundation (ENRF). Other colleagues were from Norway, Spain, Poland and Belgium. The meeting was hosted by the Spanish General Council of Nursing in Madrid. The European Federation of Nurses Associations (EFN) had set up the ENRF and Kate was elected as one of its four Directors.

The ENRF aims to promote quality research and its mission is to a) pursue and enhance nursing research as an element of professional excellence to benefit the health of the population in the EU & Europe; b) to use nursing research to influence EU policies; c) to promote evidence-based decision-making.

This was the first face to face meeting of the Directors, and we discussed budgets, programmes of work and priorities.

The ENRF is now working on a Strategic and Operational Plan, which will be discussed by the EFN at their General Assembly at the end of March.

Contact: Kate Seers



From left clockwise Kate Seers (Board Member – UK), Karen Bjøro (Board Member – Norway) Paul De Raeve (ENRF Secretary General, Brussels), Fatima Pereira (Secretary Dorota Kilanska (Board Member – Poland), Máximo Gonzalez (ENRF President – Spain)

Carers' Experiences

Saletti-Cuesta, L; Tutton, E; Langstaff, D and Willett, K (2016) Understanding informal carers' experiences of caring for older people with a hip fracture: a systematic review of qualitative studies. *Disability and Rehabilitation*. <http://dx.doi.org/10.1080/09638288.2016.1262467>

This paper collates carers' experiences of looking after older people with hip fracture from 21 research studies. The findings suggest that carers provide a vast array of support driven by a concern for the other person and a wish to maintain a relationship with them. However the process of helping had a strong emotional impact as they struggled to juggle activities within their daily lives.

They learnt how to care through experience often feeling 'in the dark' as they did not feel they knew what was happening or how to find information.

The studies were largely from the USA and Canada with different care systems from the UK. However nurses are ideally placed to include carers within the umbrella of care, providing experiences, timely information and emotional support that facilitates their ability to care.

Contact: Liz Tutton

Compassionate Care

Exploring the meaning of compassionate care: publication of new papers

Members of the RCNRI completed a grounded theory study that explored how health professionals make sense of compassion in their work with people who have type 2 diabetes. Through this research we developed a model that describes the flow of compassionate care. It highlights potential barriers and enablers to this flow, which can result from an individual healthcare professional, interactions between patients and professionals or between members of staff, and wider organisational and institutional factors. See publications Tierney et al. (2017a) for a link to this paper.

We have published two additional papers from this study. One looks at the recurring debate among participants in the study about working with patients they defined as 'non-adherent' and the challenges of delivering compassionate care in such circumstances. See publications Tierney et al. (2017b) for a link to this paper. A framework known as the transactional model of emotions was useful when working on this paper. It focuses on how people appraise a situation based on a) its meaning to them (e.g. seeing it as a threat, challenge, opportunity), and b) what resources they feel they have available to cope/manage.

The third paper centres on what people said when asked specifically

about measuring compassionate care, Tierney et al. (2016). Data showed healthcare professionals believed that this was difficult because its meaning varied from person to person and from situation to situation. Concern was raised that attempts to measure compassionate care could fail to reflect its nuanced nature and the impact of external factors (e.g. targets, lack of resources) on its delivery. Furthermore, the study participants were concerned about any measure being used to critique nurses, which might then deplete staff morale. Stephanie will present findings from this study at the RCN International Nursing Research Conference at Oxford in April.

Contact: Stephanie Tierney

Social Care Institute for Excellence

People's experience in adult social care services: improving the experience of care for people using adult social care services

Sophie Staniszewska is acting as topic advisor to the NICE Collaborating Centre for Social Care (NCCSC) who have been asked by the Department of Health in England on behalf of NICE to develop a guideline on the

experience of people who use adult social care services.

This guideline will provide recommendations on the aspects of social care services that are important to the people who use them. It will also provide recommendations on how to improve adults' experiences of social care services. It will apply to all settings where care is delivered,

including people's own homes, residential care and community settings. This guideline will be used to develop the NICE quality standard for this topic. The consultation period is 22 August – 3 October 2017 and expected publication date is February 2018.

Contact: Sophie Staniszewska

New Video Clips

We have three new video clips on our University of Warwick webpage. In each we have provided a brief summary of an area of research and linked it to relevant research papers. They are useful to get a quick update on a topic area. The three areas are:

- The role of the supervisory ward sister



- Exploring the concept of hope in healthcare



- Establishing the value for patient engagement in health-related quality of life research



Future video clips will be on compassionate care, understanding the experience of illness and injury and public and patient involvement in care. The RCNRI website provides an overview of further research activities and journal articles.

<http://www2.warwick.ac.uk/fac/med/research/hscience/rcnri/video>

Contact: Kate Seers

Publications

Tierney, S; Seers, K; Tutton, E and Reeve, J (2017a) Enabling the flow of compassionate care: a grounded theory study. *BMC Health Services Research* 17:174, DOI 10.1186/s12913-017-2120-8 <http://rdcu.be/pKz1>

Tierney, S; Seers, K; Reeve, J and **Tutton L** (2017b) Appraising the situation: a framework for understanding compassionate care. *Journal of Compassionate Health Care* 4:1. Doi:10.1186/s40639-016-y <http://jcompassionatehc.biomedcentral.com/articles>

Tierney, S; Seers, K; Reeve, J and **Tutton, L** (2016) Measuring compassionate care: views of healthcare staff. *Nursing Management* 23(8): 22-26.

Sujan, M; Howard-Franks, H; Swann, G; Soanes, K; Pope, C; Crouch, R; **Staniszewska, S**; Maxwell, E; Huang, H and Cooke, M (2017) Impact of advanced autonomous non-medical practitioners in emergency care: Protocol for a scoping study. *BMJ Open* 7(1), e014612.

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:

Professor Kate Seers.

Patient Engagement

Engaging with patients as partners in Patient-Reported Outcomes (PRO) research: what should we be doing to develop outcomes that inform nursing practice?

Supported by a grant from the Warwick University Patient Engagement Fund, Kirstie Haywood and Sophie Staniszewska hosted a one-day workshop which brought together a network of national and international participants to explore the opportunities and challenges for active patient collaboration in methodological research of relevance to the development and use of patient-reported outcome measures (PROMs).

PROMs are questionnaires, completed by patients, and designed to indicate how they feel, what they can and cannot do, and how they live their lives because of their health and associated healthcare. PROMs are now

extensively used in health research and routine practice settings nationally and internationally to capture the patient perspective and to contribute essential patient-derived information to decision-making processes.

PROMs are important to nurses as a way of evaluating the outcomes of care. However, there is increasing concern that PROMs may not capture the outcomes that really matter to patients – primarily because patients have not been involved collaboratively in PROM co-development. This means the data may not be so useful for nurses.

The group was carefully selected for their familiarity with PROMs and associated research. The workshop supported an insightful exploration of priority areas for PROM methodological development from the patient and public perspective. The group

agreed that there was an important role for the development of more active patient and public involvement in PROM development and evaluation – to ensure that measures were ‘relevant, right and robust’.

A key area was the concept of enhancing relevance and this will be developed as part of a joint bid co-produced with patients and nurses.

Contact: Kirstie Haywood and Sophie Staniszewska



Kirstie Haywood and Sophie Staniszewska

Self Compassion

In the National Health Service (NHS) there appears to be a culture of substantial change, with many nurses highlighting the impact of this on their own wellbeing. However there is a dearth of literature focusing on how nurses care for themselves as they try to provide compassionate care in a challenging job within a climate of constant change. The literature at present places a focus on compassion fatigue, burnout and vicarious traumatization, rather than self-care and self-compassion.

I have been a mental health nurse for the past 19 years and have witnessed this culture of change and the impact it has had and is having on nurses. I was lucky enough to gain a studentship in September 2014 with the RCNRI to allow me to complete a PhD in Nursing. I wanted to complete a study that focused on how we as nurses care for ourselves and how we experience self-

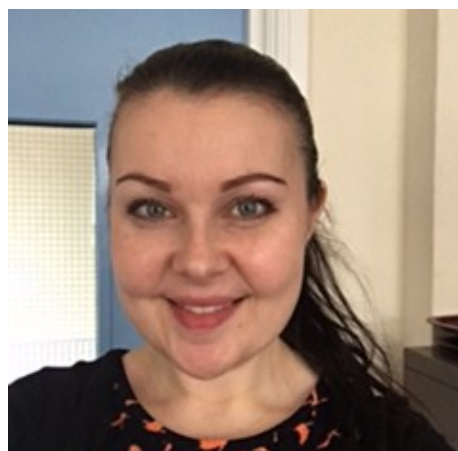
care and self-compassion and the potential impact this may have on our compassionate care giving.

I decided to use qualitative methodology in order to capture personal experience and explore the phenomena of interest. I interviewed 30 nurses across the nursing disciplines within two NHS trusts and am using constructivist grounded theory in order to identify core concepts emerging from and being constructed within the data.

The aim is to gain a better understanding of how self-care and self-compassion are experienced, and their relationship with compassionate care giving, with a view to formulation of further research and to impact nursing education and nursing guidelines. I currently sit on a self-care working group within the RCN to look at ways of promoting the need

for self-care within nursing. I complete a regular blog exploring some of these themes and work closely with the RCN in developing ideas and materials for the "Healthy Workplace, Healthy You" campaign.

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Hannah Andrews

RCN Research Institute

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