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Nurses' Experiences of Participating in a Randomised Controlled Trial in the Community

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who cares...
we care

- Background
- Study objectives
- Study design and setting
- Focus groups
- Data collection and analysis
- Emerging themes
- Strategies to refine research process
- Key messages
- Issues related to usual practice





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- The Randomised Controlled Trial (RCT) is seen as the most powerful research methodology for minimising bias (Ross et al 1999)
- RCTs are rarely used in nursing research and even less frequently in the community setting
- Clear requirement for more nurse-led and designed trials (Duncan & Haigh 2007)
- Increase in demand for nursing services to assist people to live at home

Study Objectives

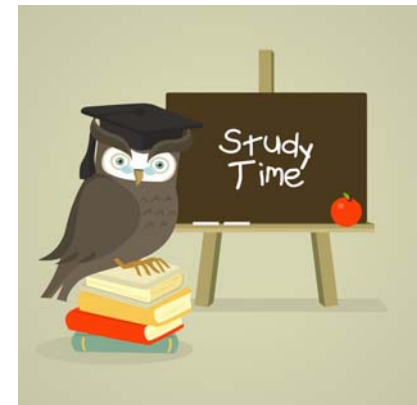


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- Explore and identify the challenges and opportunities that arose when two community nursing services implemented a RCT in the community
- Use the nurses' experiences to identify strategies to refine the two services existing research processes
- Share these experiences to assist other nurses to design and lead RCTs in the community setting



- The study used a descriptive approach to explore nurses' perceptions of what worked well and what could be improved
- Nurses involved in RCT were approached to attend a number of focus groups
- Their feedback to a series of semi-structured questions was collated and analysed

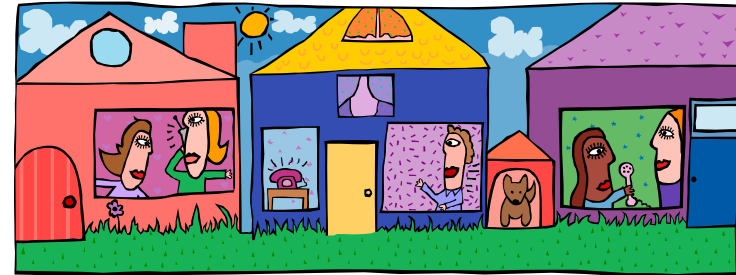


Study Setting



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Two Australian community nursing services:



- RCT compared the effectiveness of two anti-microbial dressings
- Early involvement by one clinical nurse from each service delivery centre
- Standardised methodology and tools

Invited key staff from:

- 9 service centres (Vic)
- 5 (WA) to participate

71% response rate

3 focus groups convened :

1 in Victoria (10 nurses) 2 in WA (7 Nurses)



Data Collection

- Focus groups taped and transcribed or
- Notes taken and supplemented by discussion facilitator

Data Analysis

- Two researchers independently categorised and conceptualised the principle issues emerging from the data
- Primary author merged results from her own and her colleagues analysis



Eight themes:

- Being part of a trial
- Expectations versus the RCT experience
- Benefits associated with implementing the trial
- Other nurses' responses to the trial
- Clients' responses to the trial experience
- Challenges
- Strategies to refine research process
- Further involvement in research



Strategies to Refine Research Process



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Issue	Strategy
GPs unaware of RCT	Increase GP buy-in
Slow and low client recruitment rate	Identifying more suitable recruits earlier
Low nurse availability for RCT	Set up nurse team more efficiently and ensure only tasks requiring nurse input are allocated
	Enlist organisational support
Keeping nurses/ stakeholders engaged	Constantly keeping the research front of mind and reminding nurses/stakeholders
Lack of appropriately skilled nurses	Improve nurses' skills and ensure they feel supported
Missing data	Involve clients to assist
	Familiarise nurses with documentation earlier in trial
	Employ a dedicated Project Officer

Key Messages



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- Early involvement is good as it promotes ownership
- Research needs to be relevant with good client outcomes to engage staff
- Benefit of being involved in something cutting edge
- Identify whose barrier it really is
- Technology needs to be user-friendly
- Promote staff benefits of participation
- Track research time separately



Issues related to usual practice:

- Lacking confidence with compression bandaging
- Not using bandages according to manufacturers specifications
- Being surprised at client's tolerance of compression bandaging
- Increased teamwork and support
- Serial wound photographs/tracings



How to share these experiences?



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- Methodology could be repeated in aged care/GP practice
- Journal articles
- Conference presentations
- Professional organisations
- YOU !!!



Acknowledgements



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- Angior Family Foundation
- Royal District Nursing Service, Victoria
- Silver Chain, Western Australia
- All clients and staff from both organisations that participated



Contact Details

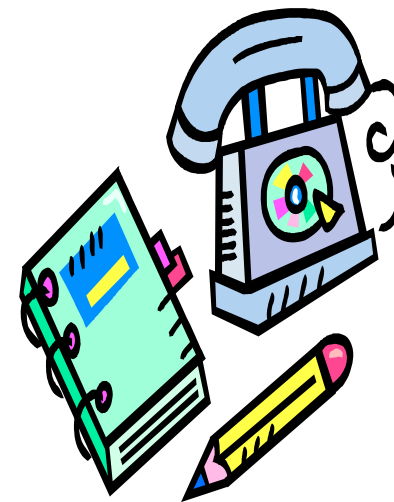


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Newall, N., Miller, C., Lewin, G., Kapp, S., Gliddon, T., Carville, K., & Santamaria, N. (2009). Nurses' Experiences of Participating in a Randomised Controlled Trial in the Community. *Wound Practice and Research*, 17(1), 24-34.

www.silverchain.org.au/research/research_publications

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