

Reports 2004

Ref no 2004/1

Title **Providing youth friendly psychosis intervention for young people in Newcastle upon Tyne**

Author Victoria-Jane BRIGGS, District Clinical Nurse Therapist, Newcastle District Adolescent Service

Abstract This project intends to understand the nature of implementing youth friendly psychosis interventions, particularly from the point of view of adolescent development. Canada has shown itself to be a leader in the area of youth intervention with Youth Net and the Centre of Excellence for Youth Engagement, and also diverse research into first episode psychosis.

Within the project, lines will be drawn between youth engagement and applying this to engage youth into a psychosis service, which proves to be a difficult area to engage young people.

Recommendations for my local service and a plan for sharing and disseminating this information will be made, highlighting what was learnt whilst participating in the scholarship.

Ref no 2004/2

Title **A study of the impact of Positive Parenting Programmes (Triple A Model) on referrals to CAMHS and how these programmes are integrated into child health services in Queensland, Australia, to maximise access, availability and recruitment to these programmes**

Author Susan FRASER, Nurse Therapist, The Nelson Hospital, Kingston

Abstract Many significant mental health, social and economical problems are linked to disturbances in family functioning and the breakdown of family relationships.

Parents receive little preparation beyond their own experiences of being parented with most learning 'on the job'. Many parents do not have access to extended family support networks for advice and many have other sources of stress, which may impact on parenting capacity.

In Queensland Australia, with the development of the Triple A Programme, the Australian Government with the University of Queensland, began implementing a *preventative* programme for parents as a multi-level, parenting and support strategy aimed to *prevent* severe behavioural, emotional and developmental problems in children by enhancing the knowledge, skills and confidence of parents. The emphasis is on providing parenting programmes at a universal level to reduce stigma associated with parenting classes and on prevention rather than cure

Ref no 2004/3

Title **Developing a practice based service responsive to patient needs**

Author Karen HILL, Lead Nurse, Practice Development, General Intensive Care Unit
Southampton University Hospitals Trust

Abstract A commonly used term within the healthcare service of the 21st century is that of 'Practice Development' Differing models, to develop and advance practice have been adopted within health care facilities in response to service demand and delivery. Such differing strategies have led to a degree of ambiguity, inconsistency and uncertainty in this complex role within British nursing.

In a modernised healthcare environment with an emphasis on continuous development, staff involved with developing practice need to operate within a framework that recognises the complexity of bringing about change successfully within large organisations.

This Travel Scholarship was driven by the need to explore models of Practice Development within the clinical speciality of critical care. Through learning and experience alternative healthcare organisational cultures quality improvements in practice development strategies could be made.

Ref no 2004/4

Title **Exploring the Design of a Regional Suicide Prevention Strategy**

Author Patrick Noel McGREEVY, Lecturer Practitioner, Downshire Hospital, Downpatrick

Abstract Suicide is a worldwide phenomenon accounting for one million deaths annually. In Northern Ireland one hundred and fifty deaths are reported on average every year. Northern Ireland does not have a coherent comprehensive and co-ordinated response to the suicide issue. The scholarship tour involved visiting centres in North America and Canada to learn about the policy and practice of suicide prevention that could help shape such a strategy.

Three main centres were visited to meet the aim and objectives of exploring and learning about the policy background and practice of suicide prevention. Washington, DC, USA, provided information and reflective experience on the whole population (Prevention) approach. Key individuals involved in the production and implementation of National Suicide Prevention Strategy were interviewed.

Prevention of suicide has often been considered the purview of health services generally and mental health services particularly. Suicide is, however, a societal issue that must become the concern of the entire society. Promoting the mental health of the population and improving mental health care services should become constituent parts of the overarching suicidal prevention effort.

Ref no 2004/5

Title **International Nurse Prescribing – How can this impact on the future of neonatal/paediatric specific Nurse Prescribing?**

Author Lynne PATERSON, Neonatal Nurse Consultant James Cook University Hospital, Middlesborough

Abstract The objectives within the study were two-fold. Firstly, to gauge what provision there was for ANNPs to prescribe within neonatal units in the United Kingdom, and within this highlight problematic areas. Secondly, to review international neonatal nurse prescribing practice within several countries where nurse prescribing has or is being implemented and attempt to apply good practices to the neonatal and paediatric population in the UK. The ultimate aim is that difficulties with our current neonatal nurse practices can be overcome by utilizing some proven international experiences.

Ref no 2004/6

Title **Time for Dignity – Are we effectively resourced to meet the health and social care needs of older people in custodial environments?**

Author Emma BRADLEY, Area Healthcare Co-ordinator/Regional Prison Nurse Advisor HM Prison Service

Abstract The health and social care services for prisoners in England and Wales has been designed around young fit adult males. The increasing prison population and changes in sentencing policy coupled with early ageing as a result of self-neglect is leading to a crisis in corrections when caring for older prisoners.

Through field studies of the health and social care needs of older prisoners in England and a comparative study of the jurisdictions of England, Texas and New Zealand, the author has sought to identify the needs of the older prisoner, the way in which this group is cared for and identify areas of good practice for future policy developments.

Ref no 2004/7

Title **Perceptions of Bangladeshis about drug use within the community**

Author Shams UDDIN, Mental Health Practitioner Crisis Resolution and Home Treatment Services, Leicester

Abstract This study explores the perceptions of the Bengali/Bangladeshi population in Leicester about drug use within the community.

A triangulated methodology was used for this research. A review of all available literature was carried out to establish if there was a drug problem among the Bangladeshis in the UK. A total of 400 questionnaires were distributed to the Bangladeshi community in Leicester via local Mosques and community resource centres/contact points. This study also benefited from participant observations

Ref no 2004/8

Title **An exploration of Clients' Perceptions and Views as to what Assisted and Hindered their Engagement with Local Assertive Outreach Services**

Author Melanie Christina McADAM, Researcher, Nottinghamshire Healthcare NHS Trust

Abstract Assertive Outreach teams are a central component of the National Service Framework for Mental Health (1999) as described in the Mental Health Policy Implementation Guide (2001). The aim of such services is to 'assertively' engage with service users experiencing severe mental health problems who for various reasons lose contact with traditional services and therefore require a more flexible approach. A limited number of studies have been undertaken that explore Service User views on how they have experienced engagement with Assertive Outreach services.

The study was undertaken with Service Users from four Assertive Outreach teams within Nottinghamshire Health Care NHS Trust. Adopting a qualitative approach to explore perceptions of what helped and hindered engagement. 11 semi structured, audio taped, interviews were undertaken. All interviews were fully transcribed and emerging themes were explored. Two quantitative measures designed to measure service user and staff perceptions of engagement with Assertive Outreach Services were used.

Ref no 2004/9

Title **Comparison of staff development planning models in prison healthcare between the UK and Western Australia**

Author Deborah PARKIN, Prison Health, Department of Health (England)

Abstract Society's perception about the function of prisons are changing, moving away from punishment to reform. Delivering healthcare within these environments presents many dilemmas, not least balancing the security and regime requirements against the desire to provide responsive, individually focussed healthcare and health choices. The impact of healthcare upon the overall maintenance of order and smooth operation of the establishment cannot be underestimated and offers a unique challenge to all those providing care and support within the prison environment.

The aim of this study was to compare the staff development models utilised in Western Australia with that of the UK. Whilst the two countries have different governance arrangements in the delivery of their healthcare within prisons, there are similarities in the organisational structures and the emphasis on the competency based workforce as the key to success. The fundamental aspects of both programmes being that the continuing professional development of the workforce should meet the professional needs of the individual together with their individual aspirations, but that these must be integrated with the needs of the service.

Ref no 2004/10

Title **'Crisis' in the Caribbean**

Author Diana DE, Senior Lecturer Adult Nursing University of Glamorgan

Abstract In the United Kingdom, sickle cell 'crisis' still remains the main reason for emergency admission for patients with sickle cell disorders and this also often means lengthy periods of time spent as a hospital in-patient for many sufferers. In Jamaica though, these same painful episodes seem to be managed successfully using a more day-centred care approach.

On having already visited and spoken to a number of UK centres regarding the sickle pain management in the UK, I set out to visit the work renowned Sickle Cell Centre, Tropical Medicine Research Unit at the University of the West Indies, Kingston, Jamaica, to witness day-case treatment in action. As I was also investigating how management of sickle cell services were implemented in the neighbouring island, visits to the Istituto de Hematologia and William Soler Hospital, Havana, Cuba, were also arranged.

Ref no 2004/11

Title **A comparison of the role of the Clinical Nurse specialist, Nurse Practitioner and Nurse Consultant in the UK, USA and Australia, and the impact upon the nursing services delivered to patients with colorectal disease**

Author Mhairi F SIMPSON, Lead Colorectal Nurse Specialist Lanarkshire Acute Hospitals NHS Trust

Abstract The aim of this travelling scholarship was to compare and contrast the roles and services provided by Clinical Nurse Specialist (CNS); Nurse Practitioners (NP); Nurse Consultant (NC), within colorectal care and their impact upon patient care. The role of the CNS and NP was first pioneered and developed in the USA and is the model upon which roles in the UK and Australia have been based upon. A literature review suggested that there was some standardisation in roles and education preparation, however it also revealed that some variation remains across all three continents.

The study has proven beneficial for benchmarking UK services, roles and educational preparation in comparison with services at one major facility in Minnesota and three main teaching hospitals in Sydney.

Ref no 2004/12

Title **How normality in the birthing process is promoted in the Netherlands, visiting Holland**

Author Carole PEMBERTON, Senior Midwife, North Wales NHS Trust

Abstract The subject of normality in the birthing process has received a great deal of publicity over the past few years. Wales has become a developing area in the area of normality following the development of the All Wales Normal Labour Pathway and the Mapping Antenatal Preparation for Birth by the Home Birth Reference Group. Five days were spent in the Netherlands working with midwives in their practice. This was an excellent opportunity to observe how the Dutch maternity system promotes normality and encourages home births.

Ref no 2004/13

Title **Learning in Nurse Practitioners (LiNP): Learning in the workplace – a study of Primary Health Care NPs in their first year of postgraduate employment**

Author Debra SHARU, Senior Lecturer, St Martin's College, Lancaster

Abstract The LiNP (Learning in Nurse Practitioners) investigation examined Primary Health Care (PHC) Nurse Practitioners' learning in the workplace during their first year of employment after completing a UK BSc or Masters Nurse Practitioner programme. The study was developed as an adjunct to a larger project that is currently being undertaken by the University of Sussex and University of Brighton, *Learning in Nursing, Engineering and Accounting (Project LiNEA)*. A series of interviews and observations were conducted over approximately 1 year. This involved two initial pilot studies, preliminary interviews of 14 Nurse Practitioners (NPs) and sequential further interviews and observational visits to the respective places of employment. Face to face and telephone interviews with managers and facilitators were also undertaken.

All observations and discussions were transcribed and analysed using a Nud*ist (N6) computer research package. Categories and themes based on Project LiNEA findings were adapted to form a financial theoretical framework. It is hoped that these outcomes will contribute to the miniscule body of knowledge about Primary Health Care Nurse Practitioner learning in the workplace as well as providing evidence to inform reviews of training courses and policies for post qualification learning support.

Ref no 2004/14

Title **An investigation into the amount of sleep Bone Marrow Transplant (BMT) patients are able to obtain in hospital and how this affects them**

Author Camilla WARD, Nurse Practitioner, Bone Marrow Transplant Unit Addenbrooke's NHS Trust

Abstract Sleep deprivation is a relatively new concept which has been identified in various different settings, especially amongst hospitalised patients in the Intensive Care Unite (ICU), but in comparison its existence among other hospitalised patients has received limited attention. This research study investigates the suggestions that Bone Marrow Transplant (BMT) patients may suffer from sleep deprivation during hospitalisation for their transplant. It uses a descriptive, self-report study design and the data collection methods of a sleep diary, short sleep questionnaire (SSQ) and an interview to examine the quantity and quality of sleep BMT patients obtain, how this affects them and the causes of any sleep disturbance that they experience. It also provided the opportunity to develop valid and reliable tools to collect data from this particular group of patients.

Ref no 2004/15

Title **An investigation into innovative management of intensive care services**

Author Melanie GAGER, Sister Intensive Care Unit, Royal Berkshire Hospital Sheila HILL, Sister, Intensive Care Unit, Royal Berkshire Hospital

Abstract This study explores the perceptions of the Bengali/Bangladeshi population in Leicester about drug use within the community. This study involved visits to Intensive Care Units (ICU) in Australia to investigate innovative practices in management of ICU services with a view to maintaining and improving quality patient care, staff retention and provision of effective and efficient clinical support

Ref no 2004/16

Title **Younger people with dementia facing the future: An exploration of support and information services for younger people with dementia and their carers and supporters**

Author Vivienne DAVIES-QUARRELL, Admiral Nursing Services, North Wales

Abstract In contemporary society dementia is socially, culturally and professionally constructed as an old person's disease. Although the definition of dementia has changed over time, its correlation with the ageing process has not. Yet as both clinical contact and the emerging literature base reveals (Cox and Keady 1999) people under the age of 65 years are also diagnosed with this condition. Recently in Wales, Macjeiweski (2003) has challenged service planners and practitioners to respond to this concern and adopt more creative and flexible approaches to meeting the needs of this specific population.

This study describes a range of established and developing services visited by the author in the Australian States of Queensland, South Australia and Victoria that provide information and support to people with dementia and their supporters and carers

Ref no 2004/17

Title **'The Tipping Point' – Developing Nursing's Influence and Policy and Politics**

Author Theresa FYFFE, Nursing Officer, The Scottish Executive Health Department

Abstract This report present outcomes of a study tour which explored how nursing is seeking to influence and shape health policy in the USA and the UK. The focus of this study was to learn from approaches in another country and to explore with key influencers in the UK strategies for a way forward within the context of our own historical and cultural framework.

Both the USA and the UK were visited between the January and mid-June 2005 and interviews were held with a range of UK and US nursing and policy leaders. While the study tour focuses on nursing, the lessons learnt are also applicable to midwives and other healthcare professionals

Ref no 2004/18

Title **Patients' experience of pain prior to and following an acute medical admission**

Author Owen BENNETT, Charge Nurse, Queen's Medical Centre, Nottingham

Abstract Reports from the Clinical Standards Advisory Group (CSAG), the Royal College of Anaesthetists and the Pain Society have helped demonstrate that patients in all hospitals specialities experience pain. Patients admitted to general medical wards are increasingly being considered at risk of experiencing significant pain. Little data are available regarding patients' experiences of pain prior to and following hospital admission to an acute medical admissions area.

The findings demonstrate that patients carry a significant pain burden, with unacceptable levels of pain (moderate to severe) reported by patients from the 4 hours prior to hospital admissions through to the time of patient interview. This suggests that the management of medical patients' pain is sub-optimal both in primary and secondary care.

A number of recommendations are suggested in order to address the problems identified through the research.

Ref no 2004/19

Title **A review of current structured education programmes offered to individuals with diabetes in Manchester and Newcastle-upon-Tyne**

Author David CHANEY, Lecturer in Nursing, University of Ulster at Magee

Abstract Diabetes Mellitus currently effects approximately 49,000 people in Northern Ireland with a further 25,000 undiagnosed (Diabetes UK 2005). With figures set to double by the year 2025, diabetes has the potential to overload even the most effective and efficient health care service. The following report offers a review of structured education programmes offered in Newcastle-upon-Tyne and Manchester.

Three Programmes are reviewed, namely The Expert Patient Programme, Dose Adjustment for Normal Eating, and Diabetes Education and Self Management for Ongoing and Newly Diagnosed. The report provides a review of current literature related to each programme supported by clinical and patient experiences. This is followed by an analysis of each programme. Lessons learned and recommendation for practice are highlighted with specific attention given to structured education, disease specific education, collaboration, timing of programmes, follow-up, resources and age.

Ref no 2004/20

Title **Culturally Sensitive Healthcare in the UK**

Author Dr June L LEISHMAN, Director of Academic Programmes, The University of Abertay

Abstract The landscape of health care and nursing practice in the UK in the 21st century has undergone radical changes in recent years in relation to the increasing cultural diversity of its population. With this diverse cultural population come substantial differences in health care needs across the different cultural groups. As such, the provision of a high quality, effective, needs led service becomes more complex. The overarching principles underpinning this study tour are the current Government's policies that state that the health service should be free from discrimination and available to all (DoH 1999a, 1999b, 2002). This, coupled with the need for contemporary health care providers to be aware of the implications of global health problems strengthens the case for action to be taken in appropriately preparing our health care professionals to meet these challenges (WHO 2003).

The purpose of this report is to share the findings of a travel scholarship tour, undertaken by the author, to explore how the USA (no stranger to cultural diversity) and Finland (a country with what might be perceived as similar demographics to Scotland have risen to the challenge of increasingly culturally diverse populations and the impact that this has for nursing and health care education and practice.

Ref no 2004/21

Title **An exploration on how distance and blended 'e' learning approaches to paediatric oncology nurse education could enable national and/or international education provision to be developed**

Author Helen LANGTON, Associate Dean, Faculty of Health and Life Sciences Coventry University

Abstract It is widely acknowledged that the pre-registration curriculum for nursing does not prepare nurses to care adequately for children and young people with cancer. Furthermore, it is also recognised that, once qualified there is a need to gain specialty expertise. The International Council of Nurses recommends that nurses undertake a professionally approved advanced education programme, which leads to a recognised qualification. However there is also recognition that nurses working with children and young people with cancer and a their families do not have equality of access to continuing professional development in order to achieve competence in practice.

This report outlines the results of a tour to Canada, Australia, New Zealand and Singapore to explore whether distance and blended 'e' learning approaches to paediatric oncology nurse education could enable national and/or international educational provision to be developed.

Ref no 2004/22

Title **An examination of the impact of supervised injecting rooms in Australia on patients and the wider community**

Author Jillian TIMMINS, Consultant Nurse, Substance Misuse North East Wales NHS Trust

Abstract In 2001 the first medically supervised injecting centre (MSIC) opened in Kings Cross, Sydney, Australia, by 2002 sixteen such centres were operating in European countries such as Germany, Switzerland, Spain and the Netherlands.

The purpose of this report is to share the findings of a Welsh Assembly Government funded travel scholarship, which was undertaken at the Medically Supervised Injecting Centre in Sydney, considering the impact on both individual clients and the wider community. Time was spent with the New South Wales Police Department. The Medically Supervised Injecting Centre, Kirketon Road Treatment Centre, and, the New South Wales Department of Health.

Ref no 2004/23

Title **An exploration of contemporary approaches to advanced nursing practice education in history taking and physical assessment.**

Author Dr Helen RUSHFORTH, Senior Lecturer, School of Nursing and Midwifery, University of Southampton

Abstract This report summarises the findings of a study tour undertaken in February to April 2005, which explored contemporary approaches to advanced nursing practice education in History Taking and Physical Assessment (HPTA). The study tour included visits to 16 different universities in England, Wales, Scotland Republic of Ireland, Canada and the United States. Nineteen classes/assessment sessions were attended, and meetings took place with 50 difference lecturers/members of faculty.

Ref no 2004/24

Title **Informed Consent in Clinical Trials – How informed am I?**

Author Jane LAFFERTY, Asthma Research Sister, Gartnaval General Hospital

Abstract The Informed Consent Process is continually being addressed and developed to determine what is 'relevant'. A sound knowledge of the relevant guidelines is required. As part of the research it was necessary to examine the current and historical data regarding consent in order to develop a better understanding of the current regulations. Two of the previous ethical principles, which shaped the current legislation, were the Nuremberg Code, and the Declaration of Helsinki.

The obtaining of informed consent was observed for a complicated clinical trial following which a written patient information sheet and consent form that adheres to good clinical practice was produced.

Ref no 2004/25

Title **Does educating patients about self-administration of medication improve knowledge and concordance**

Author Nicola CRUMMACK, Staff Nurse – Stoke Rehabilitation, Mount Vernon Hospital

Abstract The aim of this literature review is to evaluate if educating patients about self-administration of medication within the hospital setting increases knowledge and improves concordance.

After researching factors that affect patient compliance with medication it is evident that education is a factor that patients have no control over how much they receive, if any at all but nurses do.

From reviewing the literature it appears that self-administration of medication in hospitals was first researched in the 1980s and appears to be researched again at present.

Ref no 2004/26

Title **A USA/UK exploration of wandering: best practice in screening, assessment and nursing interventions**

Author Jan DEWING, Consultant Nurse, Milton Keynes PCT and General NHS Trust

Abstract This report sets out a discussion on wandering and best practice following a Florence Nightingale Foundation Travel Scholarship to visit the School of Nursing, Michigan University, USA in May 2004. It will provide a comparative and evaluative discussion on best practice in responding to wandering (in older people with dementia) particular around risk screening, assessment and nursing interventions.