

Reports 2007

Ref no 2007/01

Title **STANDARDISED ASSESSMENT FOR PEOPLE WITH LONG TERM CONDITIONS – HOW DOES NURSING FIT?**

Author Carolyn WALLACE

This study standardised assessment frame works and the nursing context was completed in the 2007. The information given within this report is based upon the visits to Herefordshire (England), Dumfries & Galloway and the Borders (Scotland), the Trento Region of Italy and the researcher's own experience of working and participating within the Unified Assessment community in Wales.

Abstract The basic principles of these standardised assessments are the same and include person centred assessment, avoiding duplication where possible, maximising a person's potential for independence and effectively meeting the person's needs in a timely manner. Each standardised framework is in the process of modernisation which requires clear leadership, finance, training and education to achieve a modern system and process of assessment that will meet professional nursing needs in the 21st century.

Ref no 2007/2

Title **A STUDY OF THE ROLE OF THE NURSE PRACTITIONER WITH A SPECIAL FOCUS OF CONTINENCE.**

Author Julia TAYLOR

The aim of the study is to explore the role of the nurse practitioner in Urology with special focus on continence. The aim is to benchmark the current continence service of a large teaching hospital in United Kingdom with centres of excellence for continence care.

Abstract National measures whilst being introduced for cancer patients have not extended to the 'Cinderella service' of embarrassing issues such as continence. There is an opportunity to further understand the benefits of an integrated patient pathways thus leading to identification of areas under developed locally.

There will be an opportunity to explore the development of the nurse practitioner role with relation continence & other Urological knowledge and skills. The scholars' intention to reflect on the learnt experience, identify good practice and influence the development of continence services within their own organisation.

Ref no 2007/3

Title **CHALLENGING TRADITIONAL MODELS OF POST-ACUTE TRAUMATIC POST-ACUTE BRAIN INJURY REHABILITATION- AN EMERGING ROLE IN COGNITIVE REHABILITATION THERAPY FOR NURSE**

Author Andrew NORMAN and Sally DAVIS

Abstract This study looked at the contribution nurses make to brain injury rehabilitation in overseas centres, with particular reference to Cognitive Rehabilitation Therapy. This was then contrasted with the UK pilot study that was conducted prior to the main study. Overseas centres were selected based on their international reputation in the field of brain injury rehabilitation particularly with respect of nursing practice. The nurse's journey from traditional practice to their current enhanced and expanded roles was explored in an attempt to assist transition on UK nurses. The authors both have an interest in cognitive rehabilitation therapy as a model of rehabilitation and believe that nurses have a unique contribution to make this process, and therefore to the holistic rehabilitation of brain injured patients.

The aim of the study was therefore to observe practise, and collate and evaluate other clinical data in specialist brain injury rehabilitation centres with specific reference to cognitive rehabilitation therapy and the nursing role within this centres of excellence.

Ref no 2007/4

Title **DISPELLING THE MYTHS AND PROVIDING THE FACTS: A COLLABORATIVE APPROACH TO EDUCATION AND TRAINING FOR NURSES ON THE SUBJECT OF NEAR DEATH EXPERIENCE.**

Author Tracy A PROCTER

Abstract Near Death Experience has been reported by patients throughout history, yet in nursing there has been little academic acknowledgement, education or training. Centres in North Carolina and Virginia were visited to gain access to the plethora of research articles and allow the opportunity to meet with researchers/scholars/authors' and near death experiences, to gain a greater insight into this subject. Discussions with experienced educators in this field facilitated to collaborative approach to education and training on near death experience.

This report provides a review of the literature obtained from the UK and US on definitions, characteristics and types of experiences and the after effects. Nursing care has been categorised into pre, intra and post experience to facilitate education. Findings and recommendations for practice are included with explanations why nurses may choose to be sceptical regarding this subjective experience

Educational issues in the US are highlighted and were possible comparisons with the UK are made. Project to improve patient care are incorporated to develop education on near death experience in the UK.

Ref no 2007/5

Title **IS CURRENT URODYNAMIC PRACTICE IN THE SOUTH WEST REGION EVIDENCE-BASED?**

Author Julie ELLIS-JONES

Aim: Recently, it has been stated that the current provision of training, and the assessment of competence, in many areas of urology, especially within clinical investigations is inadequate. The publication of this report has significant implications for urodynamic investigations, and their relationship with the core principles of evidence-based practice.

Abstract Guidelines for urodynamic practice have been available for the last five years, although their application to clinical practice has never been formally accessed. The published literature, which relates to the assessment of urodynamic practice, and the drive behind the current training initiatives, is extremely limited. The main aim of this study was to establish whether current urodynamic practice is evidence-based, and to identify factors, which can contribute to, or obstruct, its development.

Ref no 2007/6

Title **AN INTERNATIONAL STUDY EXAMINE HOW OTHER UNIVERSITIES ARE ADDRESSING THE CHALLENGE OF MEASURING COMPETENCIES IN RELATION TO PRACTICAL SKILLS DURING TRAINING. VISITING DENMARK, THE UNITED STATES AND CANADA.**

Author Katherine WILLIAMS

This study abroad consisted of visits to Denmark, United States and Canada to explore the role of universities in monitoring and teaching competencies in practice. It consisted of meetings and observations of staff and students in universities, with some clinical visits to gain an insight into the Danish and American practices.

Abstract This study was stimulated by a need to examine and reflect on my own changing role in nurse education. Having been involved in nurse education for the last twenty years, which has seen many changes, the new challenge has to be to reassure the public that nurses are competent to practice. Whilst it would appear that my own perception of clinical competence remains an everyday challenge in competing with many roles in academic life coupled with the demand of administering the curriculum. The study showed that American and Danish nurses had turned to other models to supervise students in practice.

The challenge was to examine our role as educators as we seem to be moving away from clinical settings and leaving the assessment of students to much pressured mentors.

Ref no 2007/7

Title **REMOTE AREA NURSES OF AUSTRALIA**

Author Gillian FAIRCLOUGH

Abstract This report discuss's findings of a study tour to remote and rural parts of Australia undertaken in 2007 by community nurse who is based in a remote and rural area of Scotland. The tour involved shadowing remote area nurses based in remote indigenous communities, remote and rural Nursing models were explored and the education and support strategies that are in place for nurses who are working in these Communities.

As the role of the community nurse of the UK is changing, it may emerge that similar models to these explored will be worked in rural parts of Scotland. Reflection is given on how this learning can help to support and sustain our own rural; workforce in Scotland that is scattered over many islands and a geographically difficult mainland whilst they are developing and extending their skills.

Ref no 2007/8

Title **TO REVIEW THE APPROACHES TAKEN TO PATIENT SAFETY AT UNIVERSITY TEACHING HOSPITALS IN DENMARK AND AMERICA AND TO UNDERSTAND HOW PATIENT SAFETY IMPACT ON PATIENTS CHOICE OF HOSPITAL**

Author Jackie BIRD

This study describes the experiential learning and subsequent development of a Patient Safety Strategy as a result of reviewing the approaches to patient safety at University teaching hospitals in Denmark and America and to understand how patient safety affects patients' choice of hospital.

Abstract The study aims to specifically look at two different approaches to patient safety where in Denmark the reporting of Adverse Events is a legal requirement and where in America it is part of the culture of the organisation, albeit in part recognised as good practice as part of hospital accreditation.

The study also aims to identify strategies employed in both Denmark and America for managing patient safety issues that had been identify as three of the top concerns at the Salford Royal NHS Foundation Trust, those of, healthcare associated infections, adverse incident reporting and recognition of the deteriorating patient.

Ref no 2007/9

Title **COSMOPOLITANS AND COLLABORATION-A REVIEW OF EMERGENCY CARE IN NEW YORK AND ITS POTENTIAL IMPACT ON UK EMERGENCY PROVISION**

Author Brian R. BOAG

Across the world there is a need for Emergency care, people will have medical emergencies, trauma will always occur and assistance is needed twenty-four hour a day.

Abstract In the United Kingdom, as a consequence of government initiative, the HNS Plan (2000) and Reforming Emergency Care (2003), there has been a need to redevelop the service to ensure that patients are seen and treated and discharge from the Emergency Department within four hours of attendance. This has placed an enormous strain on the service and nurses have had to bear the brunt of this change.

In New York there are many processes and practices which have developed over the past ten years to ensure efficiency and allow a smooth flow of patient care. This report highlights some of these initiatives and gives some ideas for trial in emergency care departments in the United Kingdom.

Ref no 2007/10

Title **A COMPARISON BETWEEN THE WELL ESTABLISHED YOUNG ONSET DEMENTIA SERVICE IN THE CITY OF MANCHESTER, UK AND NEWLY DEVELOPING SERVICES IN AUSTRALIA, WITH PARTICULAR REFERENCE TO SERVICES FOR CARERS.**

Author Andy PRICE

Abstract A diagnosis of dementia in someone of any age can result in many changes to the life of the person with the dementia and their family and friends. If the person with the dementia is a younger person i.e. under 65 years of age, then these changes to their life can be exacerbated. Indeed younger people with dementia and their families may experience 'specific and perhaps greater problems due to their stage of life'. (Alzheimer's Australia 2007).

This study compares the well-established Manchester Young Onset Dementia Service in the UK with developing services for younger people with dementia and their carers in three States in Australia visited by the author i.e. Victoria, South Australia and Western Australia.

Ref no 2007/11

Title **IS PROTOCOL DIRECTED, NURSE-LED WEANING FROM MECHANICAL VENTILATION MORE EFFECTIVE**

Author Sally PINDER

In the author's current workplace, ventilator weaning is a nurse-led process, yet a recent conference suggests that this is far from usual practice in all ICUs in the UK. According to previous studies, trials investigating the effectiveness of nurse-led protocols in comparison to physician-directed weaning found that they can be more effective at reducing mechanical ventilation duration.

Abstract However, most of these studies were performed outside the UK and there has been some conflict in the results. In view of the complications associated with prolonged mechanical ventilation, it is vital that this process is as efficient and effective as possible.

A systematic review was performed, resulting in 5 specific trials of moderate quality (levels II-III evidence) all answering the question posed. These trials were critiqued using a framework.

Ref no 2007/12

Title **AN EVALUATION OF SELECTED CLINICAL NURSE LEADERSHIP PROGRAMMES. (THE EXPERIENCE OF NURSES, NURSE MANAGERS AND MENTORS ON THE IMPACT ON PROFESSIONAL DEVELOPMENT AND PATIENT EXPERIENCE).**

Author Nicola RYLEY

This paper details the results of a study visit made to selected hospitals in South Australia, New South Wales and the USA to evaluate the impact of leadership development programmes on participants and on outcomes for patient care. Senior nursing staff, programme facilitators, nurse managers, and past and present participants in the leadership programme were interviewed to elicit perceptions and experiences of the programmes.

Abstract The results suggest that, whilst the various leadership development programmes had similarities in structure, content and delivery methods, there were significant differences in outcomes both for individual participants and the potential benefits for patient care.

The paper makes recommendations for the planning of leadership development programmes for all levels of clinical engagement, the provision of organisational support structures, and the refinement of role and person descriptions.

Ref no 2007/13

Title **CARING FOR THE ACTUAL UNWELL PATIENTS IN HOSPITAL**

Author Peter MURPHY

The purpose of the scholarship was for to investigate strategies and new models of working to provide early identification and treatment to acutely ill patients in Acute Hospital settings.

Abstract Learning outcomes included the importance of target setting; rapid response teams their functioning and activities; communication strategies, and simulation training, its adoption into performance management and its impact on individual's performance.

Ref no 2007/14

Title **AN EXPLORATORY STUDY INTO FACTORS ASSOCIATED WITH THE PRACTICE OF BREASTFEEDING, BED-SHARING AND CO-SLEEPING**

Author Esther CULPIN

This study seeks, in scope, to establish and analyze the factors associated with breastfeeding, bed-sharing and co-sleeping in a cohort of 16 mothers in Scotland who had had some experience of breastfeeding since 2003.

Abstract With regard to design, the mothers were chosen by the snowballing technique and information was gathered by means of semi-structured interviews.

Ref no 2007/15

Title **AN OBSERVATIONAL STUDY OF THE MANAGEMENT OF WOUND AND SKIN CARE IN PATIENTS WITH LEPROSY (HANSEN'S DISEASE) AND LYMPHATIC FILARIAIS (LF) IN BANGLADESH**

Author Amanda DANIEL

This report principally reflects the observations of the management of nerve impairment and plantar ulcers in patients with leprosy in Bangladesh. An insight and understanding of the spectrum of the disease and complications were also sought in relation to the prevention of disability (POD).

Abstract The scholar gained experience in a country where leprosy is endemic, to learn wound management skills and to determine the key aspects of local health education and promotion of self care. An insight was gained into cultural influences and their subsequent impact on health seeking behaviour.

Ref no 2007/16

Title **ORGANISATIONAL CULTURE AND IRS EFFECTS ON INFECTION AND CONTROL IN AN NHS FOUNDATION TRUST**

Author Donna SORTON

Previous literature has highlighted relationships between organisational culture, its strength of culture and high (or indeed, low) levels of performance due to the organisational culture. This dissertation sought to study the relationship between organisational culture and its effects on infection prevention and control performance within an NHS Foundation Trust.

Abstract A comparison between differing levels of staff-i.e. Executive Team, Middle Management within Medical and Surgical Divisions, and ward staff from high and low performing wards was to occur to ascertain if indeed, there was a correlation of perceptions of the organisations culture and performance, including staff attitudes towards infection prevention and control. Whilst response rates could be deemed low within each sample group, it was clearly established that each group had differing views and perception of the organisations culture which could impact on the performance of the organisation in relation with infection prevention and control, although it was established that the overall attitude towards infection prevention and control was positive from respondents.

With realignment of leadership, management and communication to a focused goal whereby all levels of staff are aware of the desired vision of the organisation, can lead to cultural strengthening and improved performance of the organisation.

Ref no 2007/17

Title **EXPLORING INTERNATIONAL DEVELOPMENTS IN PAEDIATRIC EMERGENCY CARE**

Author Paula BENNETT

Abstract A Florence Nightingale Foundation Travel Scholarship has enabled me to spend time in two internationally renowned Emergency Departments (EDs). Over the period of 2 months in spring 2008 I worked alongside clinical staff in the Emergency Departments at the Hospital for Sick Children (Sick Kids) Toronto, and the Royal Children's Hospital, Melbourne. Both departments have an extensive research portfolio and are leaders in developments within Paediatric Emergency Care worldwide.

I elected to visit Toronto and Melbourne over several other eminent Paediatric EDs in the US as healthcare practices in Canada and Australia would be more transferable into UK practice. Gaining experiences in Paediatric Emergency Care outside the NHS has allowed me to analyse clinical care, operational management and systems of care delivery that I would otherwise not have been able to experience.

Ref no 2007/18

Title **EVIDENCE BASED PRACTICE IN MEN'S HEALTH PROMOTION: SHARING LESSONS ACROSS THE ATLANTIC**

Author Steve ROBERTSON

Concern about men's lower life expectancy compared to women's, and how best to promote men's health, continues to be of interest in both media and academic circles. Within the UK, health professional literature has highlighted the state of men's health promotion for well over 15 years and the Men's Health Forum provides a focal point for sharing information about men's health research, policy and practice. Yet, despite Canada being a recognised world leader in health promotion, no similar professional literature or co-ordinating body for men's health promotion currently exists in Canada.

Abstract This Scholarship therefore aimed to exchange information and understanding relating to current and future research, policy and practice in men's health promotion between Canada and the UK. To facilitate this, three locations were included in the visit – Vancouver, Toronto and Halifax – as individuals were identified in these locations as being active in the men's health arena. It became clear that there is significant activity in men's health research, policy and practice in Canada and that this shares similarity with, but also has differences from the UK context.

Lessons learnt and recommendations for change are highlighted.

Ref no 2007/19

Title **THE EMOTIONAL IMPACT OF CHILD PROTECTION/SAFEGUARDING WORK UPON THE COMMUNITY HEALTH PRACTITIONER/HEALTH VISITOR**

Author Valerie MURRAY

Child protection work can have a profoundly emotional effect upon the practitioner. Successive child death inquiries and serious case reviews have made recommendations to support and strengthen the work of practitioners including the provision of child protection supervision.

Abstract Much of the recent research into models of practice and support of practitioners originates in the USA. My Travel Scholarship visit took me to New York City, Iowa City and State and New Orleans, Louisiana. Whilst in the USA I had the opportunity to meet with and visit with community nurses and their academic and multi-agency colleagues.

The aims of my scholarship to the USA were to study support mechanisms and identify which systems, for example supervision, case review staffing structure and organisational responses were of most proven benefit to staff and patients.

Ref no 2007/20

Title **WHAT DO TRUST STAFF REALLY THINK ABOUT CLINICAL POLICIES? A CASE STUDY OF POLICY DEVELOPMENT AND IMPLEMENTATION IN AN ACUTE NHS TRUST**

Author Elizabeth BERRY

The aim of the study was to find out what Trust staff really think about clinical policies. Its secondary aims were to explore the barriers and facilitators to policy development and facilitation; discover the different attitudes of different professional groups; and find out what could be done to improve policy processed in the Trust.

Abstract A case study approach was used with the Trust as the case. Qualitative methods were used to collect data, n the form of two focus groups and analysis of Trust documents. The sample consisted of six nurses, a doctor and two pharmacists. Further data was generated by electronic feedback from participants unable to attend the focus groups. Thematic analysis was undertaken using the NVio software

Ref no 2007/21

Title **POSTNATAL HOME VISITING: ARE MIDWIVES IN NORTHERN IRELAND MEETING WOMEN'S NEEDS?**

Author Jill STEWART-MOORE

The aim of this study was to explore whether professional home postnatal care in Northern Ireland and the Republic of Ireland (ROI) meets women's expectations and needs. This was the first study of Irish community postnatal services in a Border area. The study site was a hospital Trust located in Northern Ireland in a Border area that serves pregnant women from either side of the Border. In Northern Ireland midwives care for al women for a period not less than 10 days and longer if necessary. In the ROI a different model of care exists whereby the public health nurse visits less often initially but provides care for families with infants over a longer period up to and including the school years.

Abstract Semi-structured individual interviews were conducted with five lead Supervisors of Midwifery; the regional ROI Service Manager; 20 women resident in NI and 20 women resident in the ROI. Data was collected from four focus groups in NI community midwives. The research of analytical induction was employed to generate hypotheses from the data. A Rapid appraisal Exercise with service stakeholders was undertaken to assist in identification of further data sources and analysis.

Ref no 2007/22

Title **LESSONS FROM DOWN UNDER – EVIDENCE BASED SUPPORT FOR VULNERABLE YOUNG FAMILIES**

Author Yvonne HARDING

Abstract In 2006 the Welsh Assembly Government announced Flying Start, a new scheme targeted at supporting the most vulnerable 9% of young Welsh families with children under 4 years of age. It wanted to learn and improve on the previous Surestart projects which had families to deliver measurable or sustained improvements to this client group. One of the main criticisms of Surestart was that it lacked targeted, evidence based interventions or robust evaluation criteria. Every county in England and Wales developed their own unique Surestart service. These lacked standardisation and were difficult to benchmark.

The purpose of my study trip was to visit a selection of the programmes identified by the literature search and identify the key factors which could be used locally and nationally to support the Flying Start Programme

Ref no 2007/23

Title **DESCRIPTIVE EPIDEMIOLOGY (TRENDS AND DISTRIBUTION) OF CLOSTRIDIUM DIFFICILE IN EAST OF ENGLAND**

Author Agnes MURIITHI

Abstract The aim of the study was to investigate the epidemiology (distribution, trends and incidence) of C-diff in East of England in relation to person place and time. To explore the age and gender characteristics of C-diff; to investigate the geographical distribution of C-diff; to explore the time trends of C-diff reports.

All C-diff reports of clinically significant positive laboratory test results performed on faecal specimens between January 2001 and May 2008, (42,838 C-diff reports) were extracted from the East of England regional epidemiology unit (Corsurv) database. Population data for East of England were extracted from the Eastern Region Public Health Observatories database and linked to C-diff data for analysis. Annual incidence was calculated using respective mid-year population data. Eight year cumulative incidence was calculated using 2008 population projections. Analysis (frequency, distribution and incidence estimations) was undertaken in MS Excel software

Ref no 2007/24

Title **INNOVATIONS IN LYMPHOEDEMA PRACTICE**

Author Annie TOPPING

Abstract A number of education programmes to develop key workers and those beginning to develop specialists' skills in the field of lymphology have been developed over the last five years, although they remain unevenly distributed across the UK. Advanced practice programmes to extend the skills of those working in the field had not kept apace. The increase in number of specialist posts in lymphodema has created a demand for postgraduate education in the speciality. MSc Lymphodema Practice was developed in 2005 and a module embedded in the programme explored innovative practice in the field of lymphology.

This travel scholarship provided an opportunity to forge links with pioneers of new and innovative approaches for measurement and management of lymphoedema. This resulted in enhanced opportunities for postgraduate students to acquire skills and understanding of novel treatments, set the foundation for further research exploring the association between exercise, wellbeing and lymphodema, and opened up opportunities for providing exercise classes for people experiencing the effects of cancer and other chronic debilitating conditions for such lymphodema

Ref no 2007/25

Title **A STUDY OF THE MANAGEMENT OF VIOLENT CRIME, VISITING AMERICAN TRAUMA CENTRES FOCUSING ON NURSE LED EDUCATION PREVENTATIVE INITIATIVES**

Author Johnny WELLS

Abstract The USA was chosen for a comparative trip to look at trauma, especially youth violent crime in response to the surge of knife crime in London in recent years. The author contacted Emergency Departments and Police Departments in the USA before deciding on visiting Los Angeles (LA). Through networking the trip expanded to include Portland where an award-winning programme was successfully being run in nurses presenting the reality of high risk behaviour, including trauma from knives and guns.

Ref no 2007/26

Title **A CRITICAL LITERATURE REVIEW OF THE CHARACTERISTICS OF AN EFFECTIVE THERAPEUTIC ALLIANCE IN COGNITIVE BEHAVIOURAL THERAPY BETWEEN A THERAPIST AND A CLIENT WITH A DIAGNOSIS OF BORDERLINE PERSONALITY DISORDER**

Author Annette DUFF

The aim of this study was to evaluate key theories, research and evidence in relation to what are considered the essential elements of an effective therapeutic alliance between a therapist and patient with a diagnosis of borderline personality disorder (BDP) in cognitive behavioural psychotherapy (CBP)

Abstract The method utilised within this piece of research was that of a critical literature review.

Finding of this study suggest that the majority of specifically focussed existing guidance for CBT is how to develop and maintain an effective therapeutic alliance when working with BPD clients exists in the form of clinical observations and opinion.

Ref no 2007/27

Title **PATIENT DIARIES IN INTENSIVE CARE**

Author Louise FAY

Traditionally intensive care treatment focused solely on curing physical illnesses. Patients are often discharged from the intensive care unit (ICU) with no psychological follow-up or counselling, psychological problems often went undiagnosed and patients were left to cope at home without support.

Abstract Research shows that Post Traumatic Stress Disorder (PTSD) can evolve from amnesia following periods of sedation following intensive care treatment. This can be extremely traumatic for the patient and their relatives, impairing recovery. The use of a patient diary whilst being sedated on ICU coupled with multi-disciplinary follow up clinics has proved to improve outcomes. Introducing diaries into ICU can provide comfort to patients and their families, especially when families are encouraged to participate in them. Diaries not only serve to fill the memory gap but also provide a caring intervention, which can promote holistic nursing.

Ref no 2007/28

Title **NEWBORN SCREENING FOR CYSTIC FIBROSIS. THE IMPACT UPON THE FAMILY AND THE MULTI-DISCIPLINARY TEAM APPROACH**

Author Jacqui COWLARD

Abstract This report includes an overview of newborn screening practices both in the UK and overseas. The evidence and guidance that has been used to introduce newborn screening in cystic fibrosis is considered alongside individual centre practice and management. The key aim of the study was to increase knowledge and expertise around screening practice and the management of diagnosis from a psychological perspective. This in turn will enable service development and benefit patient and parent care, within the specialist centre programme management. Information was gained through visiting CF centres and CF teams and reviewing their experiences of newborn screening for FC, alongside discussions with parents of children with CF and other healthcare professionals including General Practitioners and Health Visitors in the community. Newborn Screening Programme Directors, Genetic counsellors and Screening Laboratory Managers. A focus group with CG Clinical Nurse Specialists was also held to assess the challenges screening places on the nursing role in practice.

Ref no 2007/29

Title **COMFORT CARE ONLY AT THE END OF LIFE**

Author Jane RIDLEY

Abstract The State of Hawaii has had a 'Comfort Care Only' law since 1995 which offers patients with a life limiting illness a recognised and accepted way of communicating their wishes regarding cardiopulmonary resuscitation and the end of life (Gifford 1995).

Much work has been achieved, both nationally and locally, to improve community palliative and end of life care, particularly with the adoption of the Gold Standard Framework (thomas 2001), Liverpool Care Pathway (Ellershaw 2003) and Preferred Priorities of Care documentation and snow with the NHS End of Life Strategy (2008) which acknowledges the importance of co-ordinated care.

Despite these initiatives, there remains an inconsistency in the approach to communicate 'Do Not Attempt Resuscitation' decisions, resulting in reactive practice which is both distressing for carers, family and health care professionals and does not provide dignity at the end of life

The aim of the study was to consider the use of the 'Comfort Care Only' Law in Hawaii and whether it provides an acceptable method of communicating this decision, thus honouring the right to a dignified death even in medical emergencies.

Ref no 2007/30

Title **THE COMMUNITY PALLIATIVE CARE NURSE SPECIALIST EXPERIENCES OF CLINICAL DECISION MAKING**

Author Anna FORDE

Abstract A qualitative approach which was descriptive and exploratory in design was used to investigate clinical nurse specialists (CNS) experiences of clinical decision making. The purposive sample consisted of 9 CNSs from one large Scottish health board. Data collection was undertaken using in-depth semi-structured interviews. Burnard's thematic analysis was used to analyse the interview transcripts.

Four themes that described the CNS experiences of clinical decision making were identified: 'Type of decision', 'Process of decision making', 'Facilitators and barriers', and 'Nursing roles in decision making'.

Ref no 2007/31

Title **PROMOTING POSITIVE AGEING: FALLS PREVENTING FOR OLDER PEOPLE IN THE COMMUNITY**

Author Emma STANMORE

This project involves visits to research and health centres in New Zealand, in particular Professor John Campbell and his research team in Otago, who have investigated the epidemiology of falls and fall prevention with descriptive and intervention trials of international interest over the past 20 years.

Abstract Unfortunately many falls prevention programmes are run in the community in the UK, regardless of any evidence of effectiveness, despite good evidence available on the specific type of intervention which work. Some trials have shown particular interventions to be ineffective in reducing falls and injuries, or even harmful. Professor Campbell's Otago Exercise Programme has been tested in five controlled trials and shown to reduce falls and injuries in older people living at home, particularly in those 80 or older. No other falls prevention programme has been tested in such a comprehensive way. The falls programmes in these studies were successfully implemented by physiotherapists and nurses.

It is my hypothesis that they could also be implemented by Rehabilitation Assistants in the UK which could have enormous benefits in reaching large numbers of older people by utilising support staff rather than therapists or nurses (who due to shortages have limited on their available time to work in preventative care).

Ref no 2007/32

Title **INTERNATIONAL COMPARISON OF SUPPORT FOR TEENAGE PARENTS TO IMPROVE HEALTH OUTCOMES IN NEW ZEALAND AND THE UK**

Author Tracey BALDOCK-APPS

Abstract This paper reports on a four-week study undertaken in New Zealand to compare service provision for teenage parents with the UK. These two countries have similar high teenage pregnancy rates (UNICEF 2001) but have diverse cultural populations. The aim of this study is to share professional practice into the ways of improving health outcomes and in reducing social exclusion for this high risk client group.

Ref no 2007/33

Title **AN INTERNATIONAL COMPARISON OF NURSE EDUCATION AND SERVICE DELIVERY IN RELATION TO DEMENTIA CARE IN SWEDEN**

Author Ann SCOTT

Abstract Dementia is of global concern therefore the aim of this study was to gain an understanding of how this is addressed from an international perspective. In addition to visiting the Department of Nursing at Umea University, Northern Sweden, visits to two care facilities were arranged. Semi-structured interviews involving lecturers, students, registered nurses and care staff provided insight into how the pre-registration nurse curriculum in Sweden prepares student nurses for their role as healthcare professional working in the field of dementia care as well as illuminating how dementia healthcare is prioritised and delivered.

Behaviours that challenge in dementia have been the topic of much research in Swede adding to the growing knowledge base into this phenomenon. However, at the coalface there does not appear to be dementia specific training for staff responsible for the day-to-day care provision. An exchange of best practice initiatives was constructive in identifying areas of mutual interest and for focusing on aspects that would benefit from working in collaboration.

Ref no 2007/34

Title **SHOULD THE WORLD HEALTH ORGANISATION WEANING GUIDELINES HAVE BEEN ADOPTED IN THE UK, WITHOUT LOCAL INTERPRETATION?**

Author Tony GILL

Abstract The World Health Organisation (WHO) changed their weaning recommendations after 2001, following the results from a systematic review. The UK adopted this guideline in 2003. This literature review has looked at the evidence to justify this decision being taken, looking at the growth outcomes as a key indicator of health. There is a wealth of data on weaning experience, and little on health and growth outcomes. A database search was completed and eleven key papers were selected.

Ref no 2007/35

Title **BRAIN COOLING FACT-FINDING AND INFORMATION SHARING STUDY VISITS**

Author Bridget HARRIS

Abstract My original aim was to investigate the brain cooling research being undertaken in Tokyo. This had to be changed as a multi-centre trial of systematic cooling was started in Japan and brain cooling interventions were put on hold to enable participation in this trial. I therefore visited Berlin, Vienna and the USA to participate in protocol development for a cooling trial and to investigate therapeutic cooling devices and prevention of shivering during cooling. In the event I also learned much that was useful for neuro-ICU practice in general and the whole experience prompted reflection on my role as a nurse researcher.

Ref no 2007/36

Title **A BENCHMARKING EXERCISE TO COMPARE AND CONTRAST PAIN MANAGEMENT PRACTICES, EDUCATION, RESEARCH AND AUDIT ACTIVITY IN TWO AUSTRALIAN CENTRES AGAINST PRACTICE AT THE UNIVERSITY HOSPITALS OF WALES AND LLANDOUGH**

Author Susan MOGFORD

The aim of this study was to determine how the Pain Management Service at the University Hospitals of Wales and Llandough performs against two centres in Australia. Both of the centres visited have clinicians and services with high international profiles and run intensive research and educational programmes to facilitate and determine best practice

In relation to some of the high impact areas of 'Designed for Life' (2005) – the strategic framework for the reform of Health and Social Care in Wales – practice was compared and contrasted under the following headings:

- Abstract
- Organisation of resources
 - Clinical services delivered
 - Education/training (of the team and undergraduate/postgraduate education delivered)
 - Risk management strategies employed
 - Patient involvement, information and satisfaction
 - Research/Audit activity

In order to gather specific, relevant information the use of these headings facilitated a structured and systematic approach.