



Welcome

A warm welcome to the first issue of the Bournemouth University Clinical Research Unit (BUCRU) newsletter. We love research and are committed to the idea that the health of patients can be improved as a result of conducting high quality clinical studies. Our life blood is collaboration with health professionals in the NHS and with other academics. Whether you are new to research, highly experienced or at any point in between, we are always keen to hear from you. How can we help with your research? Well, please read on...

Professor Peter Thomas
Co-Director (Methodology)

How BUCRU can help

Bournemouth University Clinical Research Unit (BUCRU) is a model for supporting and conducting health related research in Dorset. It supports researchers in improving the quality, quantity and efficiency of research across the University and local National Health Service (NHS) Trusts.

It does this by:

- >> helping researchers from the University and from the NHS with developing high quality applications for external research funding (including small grants) – free of charge
- >> ongoing involvement in funded research projects
- >> a “pay-as-you-go” research consultation service for other projects
- >> developing its own research programme

**Linking University and
NHS researchers**

**Ethics, governance and
other regulatory issues**

Trial management

Patient and public involvement in research

**BUCRU can
help with...**

**Developing research questions
and study design**

**Quantitative and qualitative
research methods**

**Statistics, data management
and data analysis**

BUCRU supports Bournemouth University staff and researchers working locally in the NHS. There are no restrictions on topic area or professional background of the researcher. BUCRU is partly funded by the National Institute for Health Research (NIHR) and incorporates the Dorset office of the NIHR Research Design Service (www.rds-sw.nirhr.ac.uk).

Patient and Public Involvement

One of the main functions of BUCRU is to provide support and collaboration for researchers applying for research grants. Increasingly it is becoming essential for patients and/or members of the public to be involved in developing these bids. BUCRU has worked with many different research teams addressing different research questions with diverse patient groups. As well as getting the research design right, costing research projects, determining timescales, etc. it is essential we ask patients/service users/members of the public and related organisations about their views of the proposed research.

For any proposed project, there are usually a number of different groups which are well placed to offer advice, such as the people who use the services in question (and their families), local support groups, national charities, etc.

Individuals and relevant organisations can bring a wealth of ideas and often personal experience of the NHS which can add an essential dimension to the proposed research.

We work on projects with people who have a variety of health problems/experiences. For example we have been involved in research with:

- >> **people who have skin cancer on a project about skin self-examination**
- >> **pregnant women and the use of aromatherapy in labour**
- >> **people who have had a broken ankle to help determine what the most effective treatment is**
- >> **people with hip osteoarthritis to help improve hip function and avoid or delay hip surgery**

Patients and members of the public who volunteer to work with us can do so in a variety of ways. We can communicate on the phone, via email or invite them to small informal groups in which we discuss particular aspects of the project. Once their views and opinions have been collected, these are then fed back to the wider research team to inform the grant application process.

Our experience to date is that most people are flattered to be asked, and are keen to share their views. People who have used NHS services often want to help others. If they have been affected by a particular health problem for some time, they can have expert inside knowledge which can be invaluable to consider when planning research in the area. For example, our service users and their families have been able to advise us on:

Project materials e.g. the Participant Information Sheet (PIS).

This is the key document on which prospective research participants will base their decision on whether they might want to take part in a project. We need to know whether it conveys all the right information for people who are eligible to take part. Is it easy to understand? Is there anything important we have left out?

A recent service user consultation advised us that the PIS for one project was much too long and would put people off. We subsequently reduced it by several pages and further PPI suggested it was then more acceptable.

Setting for the research to be carried out.

Some of our projects are planned to take place in primary care (i.e. in GP surgeries), some in secondary care (i.e. in hospitals).

Some of our service users on one project advised us that the primary care setting would be unlikely to work due to the limited time of health professionals there and the logistics of communication with patients by phone: we therefore needed to re-consider the setting for the project.

Patient and Public Involvement

Is this the “right” research question?

Or is there something else that is more important? Can we dovetail the researchers’ agenda with that of the service users?

Are we asking too much of the research participants?

Is what we are asking them to do reasonable? E.g. questionnaires – have we got the number about right to answer the research question – or are there too many? Is the content right?

On some of our projects we have been advised that there have been too many questionnaires, and that not all the questions were appropriate.

PPI, like any research project, is a work in progress, and the two go hand in hand. From the spark of a research idea through to planning a grant application, getting funding, completing the research and dissemination of results, timely and robust PPI will help keep the project grounded in the real world and increase the likelihood of a research project that could make a difference to users of the NHS.

News

International Clinical Trials Day (ICTD)

International Clinical Trials Day (ICTD), celebrated on or around the 20th May each year, provides a focal point to raise awareness of the importance of research to health care, and highlights how partnerships between patients and healthcare practitioners are vital to high-quality, relevant research.

On International Clinical Trials Day 2014 the BU Clinical Research Unit (BUCRU) were lucky enough to be invited along to Poole Hospital’s event where we had the opportunity to chat to patients and staff keen to get involved with research.



International Clinical Trials Day at Poole Hospital NHS Foundation Trust

Successful Grant Application! Plaster & Boot Comparison for Ankle Fracture Surgery

Despite ankle fractures requiring surgery being so common, patients are managed in many different ways and there is debate over whether patients require prolonged periods immobilised in plaster or whether being able to actively move/use the ankle might be advantageous. £350k has recently been awarded to Poole Hospital (www.poole.nhs.uk) and collaborators (including BUCRU) by the National Institute for Health Research’s Research for Patient Benefit (www.nihr.ac.uk/funding/research-for-patient-benefit.htm) scheme to find out!

BUCRU is partly funded by the NIHR Research Design Service and this enables us to provide free support to researchers wishing to apply to national peer reviewed funders such as NIHR, Research Councils and national charities.

BUCRU were contacted in late Spring 2010 about the potential study and have therefore been involved in all aspects from the outset. Several members of the Clinical Research Unit are co-applicants and committed to the delivery of the trial. Support for the project was co-ordinated by Zoe Sheppard (staffprofiles.bournemouth.ac.uk/display/zsheppard) who helped facilitate the grant application bringing in statistical support, patient and public involvement advice, qualitative research expertise, health economic expertise, costing and research and development advice liaising with finance and research and development departments as well as the Peninsula Clinical Trials Unit (penctu.psmd.plymouth.ac.uk/penctu/). In addition to inputting into specific aspects according to their expertise, all co-applicants also extensively commented on the overall design and proposal, meaning a wide-ranging input.

Two previous drafts were submitted to a mock funding committee (www.rds-sw.nihr.ac.uk/project_review_committee.htm) run by the Research Design Service in the South-West. Six extensive written reviews were received from lay reviewers and methodologists as well feedback from the chair/panel members.

So if you would like support with a grant application for health research, please get in contact, by email at BUCRU@bournemouth.ac.uk, as early as possible – we look forward to working with you!

BU researchers nominated for national award



Professor Peter Thomas and Dr Sarah Thomas

BUCRU's Professor Peter Thomas and Dr Sarah Thomas led a team nominated for a prestigious MS Society Award.

They were one of three research teams to reach the finals of the MS Research of the Year Award for their FACETS research. Fatigue affects the majority of people with MS and differs markedly from the sort of tiredness experienced by the general population. It can stop those affected from working, socialising and leading a full life. FACETS (Fatigue: Applying Cognitive

behavioural and Energy effectiveness Techniques to lifeStyle) is a fatigue management programme for people with MS which incorporates 'energy effectiveness techniques' alongside cognitive behavioural strategies to teach helpful ways of thinking about fatigue.

They studied 164 people with MS and reported 40% of participants who received FACETS in addition to their routine care had a meaningful improvement in fatigue levels, compared with 19% who received routine care only.

The FACETS programme is now being delivered by healthcare professionals across the UK and could help thousands of people manage fatigue.

The awards ceremony was held in London on Monday 6th October, and hosted by radio presenter Scott Mills. Other awards presented on the day included MS Employer of the Year, MS Volunteer of the Year, MS Young Person of the Year and MS Carer of the Year.

Although narrowly missing out on the award, Sarah and Peter were extremely grateful to have their research recognised. On being nominated for the award they said, "Our research programme started 12 years ago so this has been a considerable journey. We feel privileged to have had the opportunity to conduct this research and it's been an extremely rewarding experience.

News

“Fatigue is a huge issue for people with MS and so we hope that recognition of our research will help to increase awareness of this very common MS symptom and will highlight the debilitating impact it has on people’s lives. It’s extremely important to expand and improve services and interventions available to people with MS as these can help people to negotiate the challenges of the condition and improve day-to-day quality of life.

“Our research has demonstrated that FACETS reduces people’s fatigue and increases quality of life and that these effects can last a long time. We greatly appreciate the backing of the MS Society and the support they have provided in rolling out the FACETS programme across the UK.”

It has been a busy year for Dr Sarah Thomas with presenting the FACETS work at several conferences including Physio 2014, MS Society’s MS Life, ICAP conference in Paris, and the Rehabilitation in MS Conference.

Events

Bournemouth University Clinical Research Unit (BUCRU) incorporates the Dorset office of the National Institute for Health Research (NIHR) Research Design Service South West (RDS SW). This means we can provide access to the following:

RDS SW Grant Applications Workshop

The grant applications workshop is directed at researchers who are considering applying to peer-reviewed funding competitions for applied health or social care research, and is intended to allow them to turn good applications into excellent ones. It is relevant to researchers applying to any of the major health research funders, but particularly the NIHR funding schemes. For more information please see www.rds-sw.nihr.ac.uk/gaw.htm.

RDS SW Residential Research Retreat

The Residential Research Retreat provides an opportunity for research teams to develop high quality health related research proposals suitable for submission to national peer-reviewed funding schemes. The aim of the Retreat is to provide the environment and support to promote rapid progress in developing proposals over a relatively short time period. For more information see www.rds-sw.nihr.ac.uk/rrr.htm.

RDS SW Project Review Committee

The RDS SW Project Review Committee provides an excellent opportunity for researchers to obtain a critical review of a proposed grant application before it is sent to a funding body. The Committee brings the benefit of seeing the proposal with “fresh eyes”, replicating as far as possible the way the real funding committee will consider the application. Committee members include senior research consultants who have considerable experience of obtaining research funding, resulting in comprehensive comments and advice.

Departures and Arrivals

The start of 2015 is going to be a period of fond farewells within BUCRU. Professor Paul Thompson is retiring - it has been a real pleasure to work with Paul over many years and his work in developing the links between local Doctors and Bournemouth University has been invaluable. We are delighted though that his role as Clinical Director within the BUCRU team will be filled by Professor Tamas Hickish, and look forward to working with him.



Professor P.
Thompson



Professor T. Hickish

Congratulations to Dr Zoe Sheppard on her new post as Senior Lecturer in Quantitative Research Methods within the University – she has made a tremendously important contribution to BUCRU since its inception, and we wish her every success in her new role. Updates to follow in future newsletters.

Zoe Sheppard: My 4,000 miles of learning!



Wow, well it certainly feels like it's been a busy year for me in the Clinical Research Unit! As a bit of context, my 'day job' includes supporting and reviewing grant applications in my Research Design Service (www.rds-sw.nihr.ac.uk/) capacity, working on grants that have been awarded, carrying out 'pay as you go' consultancy for the unit, and 'other' projects within the School which supports the unit's infrastructure e.g. teaching, PhD supervision and support.

As well as several submitted grant applications, probably most noteworthy this year is that I led the BUCRU involvement and was co-applicant for the Ankle Recovery Trial which was successfully awarded £350k from the National Institute for Health Research' Research for Patient Benefit scheme (please see pages 3- 4). A couple of my publications out this year have been the result of 'pay as you go' work that I have carried out for the unit (please see page 7). Similarly, some grant work that I was involved with has also resulted in a publication out this last year (Ersser et al. 2013) with more on the horizon. Other work I have been involved with has included several midwifery studies. Indeed, with Vanora Hundley (staffprofiles.bournemouth.ac.uk/display/vhundley) and Edwin van Teijlingen (staffprofiles.bournemouth.ac.uk/display/evTeijlingen), I was awarded some internal Fusion Investment Funds for an important international conference and follow-up meeting around the Millennium Development Goals (news.bournemouth.ac.uk/2014/02/07/midwifery-conference-discusses-future-of-global-childbirth-healthcare/).

Probably, the most rewarding and enjoyable part of my role is providing support to all our fantastic clients and building research capacity.

Related to this, this year I represented research staff on the Research Concordat Steering Group as well as representing



the Research Design Service South West on the Continuing Professional Development Community and Training Day Task and Finish Group. For my own continuing professional development, I was pleased to achieve PRINCE2 Foundation and Practitioner project management qualifications.

Funders of research are increasingly stressing the importance of research impact, and indeed this is now an important component of the Research Excellence Framework for Universities. From February 2014,

I took on an additional responsibility around research impact within the School of Health and Social Care, conducting an initial scoping exercise and am now beginning to move this forward with colleagues. In order to skill myself up in the area of impact, I have been lucky enough to be able to attend a number of events. Probably most significant was a Health Impact Assessment course (www.liv.ac.uk/psychology-health-and-society/research/impact/training/) in Liverpool and the International School on Research Impact Assessment (www.theinternationalschoolonria.com) in Banff and one of the co-founders of the School, Jonathan Grant, presented at the recent Centre for Postgraduate Medical Research and Education symposium (research.bournemouth.ac.uk/engagement/copmre-eleventh-annual-symposium-2014/) which raised awareness of the challenges of impact and usefully provided some learnings for the future. This led to a discussion piece on the London School of Economics' infamous Impact Blog (blogs.lse.ac.uk/impactofsocialsciences/2014/12/15/the-impact-agenda-in-healthcare/).

Hopefully this provides a little taster of my role within BUCRU. I have learnt a lot and am now looking forward to yet another exciting opportunity within the Faculty building capacity in quantitative research methods!

Publications and Grants involving BUCRU

2013-14 Publications

- Bick DE, Sandall J, Furuta M, Wee MYK, Isaacs R, Smith GB, Beake S, and on behalf of the *Modified Obstetric Early Warning Systems (Mobs) Research Group*. A national cross sectional survey of heads of midwifery services of uptake, benefits and barriers to use of obstetric early warning systems (EWS) by midwives. *Midwifery* 2014.
- Castro Silva A, Sheppard ZA, Surgenor SL, Williams EJ, Thomas PW, Snook JA. Clinical risk factors for underlying gastrointestinal malignancy in iron deficiency anaemia: The IDIOM study. *Frontline Gastroenterology* 2014;0:1-6.
- Ersser SJ, Farasat H, Jackson K, Dennis H, Sheppard Z, More A. A service evaluation of the Eczema Education Programme: an analysis of child, parent and service impact outcomes. *British Journal of Dermatology* 2013;169(3):629-636.
- Isaacs RA, Wee MYK, Bick DE, Beake S, Sheppard ZA, Thomas S, et al. A national survey of obstetric early warning systems in the United Kingdom: five years on. *Anaesthesia* 2014;69:687-92.
- Ismail KMK, Kettle C, Macdonald SE, Tohill S, Thomas PW, Bick D. Perineal Assessment and Repair Longitudinal Study (PEARLS): a matched-pair cluster randomized trial. *BMC Medicine* 2013;11:209.
- Low S, Sheppard ZA, Tomkins S. Identifying factors associated with performance in a mock CSA: perceptions from trainees and trainers from one deanery. *Education for Primary Care* 2013;24(6):452-460.
- Mellor F, Thomas P, Breen A. Moving back: The radiation dose received from lumbar spine quantitative fluoroscopy compared to lumbar spine radiographs with suggestions for dose reduction. *Radiography* 2014.
- Newman B, McCarthy L, Thomas P, May P, Layzell M, Horn K. A comparison of pre-operative nerve stimulator-guided femoral nerve block and fascia iliaca compartment block in patients with a femoral neck fracture. *Anaesthesia* 2013.
- Sanmani L, Sheppard ZA, Chapman C. Factors associated with the anonymous reporting of lifetime domestic violence in a genitourinary medicine clinic: a patient self-reported questionnaire study. *International Journal of STD and AIDS* 2013;24(5):401-407.
- Sheppard Z, Hundley V, van Teijlingen E, Thompson P. Collaborative 'science of science' needed to ensure research and education make a difference to practice. The London School of Economics and Political Science. The Impact Blog. Available at: <http://blogs.lse.ac.uk/impactofsocialsciences/2014/12/15/the-impact-agenda-in-healthcare/>.
- Thomas S, Kersten P. Fatigue, FACETS and future directions for fatigue management. *International Journal of Therapy and Rehabilitation* 2014;21:57.

Publications and Grants involving BUCRU

Thomas S, Kersten P, Thomas PW. The Multiple Sclerosis-Fatigue Self-Efficacy (MS-FSE) scale: initial validation. *Clinical Rehabilitation* 2014.

Thomas S, Thomas P, Kersten P, Jones R, Green C, Nock A, et al. A pragmatic parallel arm multi-centre randomised controlled trial to assess the effectiveness of a group-based fatigue management programme (FACETS) for people with multiple sclerosis. *Journal of Neurology, Neurosurgery and Psychiatry* 2013.

Thomas P, Thomas S, Kersten P, Jones R, Slingsby V, Nock A, et al. One year follow-up of a pragmatic multi-centre randomised controlled trial of a group-based fatigue management programme (FACETS) for people with multiple sclerosis. *BMC Neurology* 2014;14:109.

Thomas S, Fazakarley L, Thomas P, Brenton S, Collyer S, Perring S, et al. Testing the feasibility and acceptability of using the Nintendo Wii in the home to increase activity levels, vitality and well-being in people with multiple sclerosis (Mii-vitaliSe): protocol for a pilot randomised controlled study. *BMJ Open* 2014;4(5):e005172.

van Teijlingen E, Hundley V, Matthews Z, Lewis G, Graham WJ, Campbell J, Ten Hoop-Bender P, Sheppard ZA, Hulton L. Millennium development goals: all good things must come to an end, so what next? *Midwifery* 2014;30(1):1-2.

Wee MYK, Tuckey JP, *Thomas PW*, Burnard S. A comparison of intramuscular diamorphine and intramuscular pethidine for labour analgesia: A 2-centre randomised controlled trial. *British Journal of Obstetrics and Gynaecology* 2013.

Grants won during 2013-14

NIHR South West Research Design Service (Co-applicant). NIHR £5,000,000 (2013)

A feasibility study of a randomised controlled trial of an Arts for Health group intervention to support self-confidence and psychological wellbeing following a stroke. (Co-applicant) NIHR RfPB £250,000 (2013)

Does early mobilisation after Ankle fracture surgery enhance Recovery? A randomised controlled Trial with qualitative component and health economic analysis (ART). (Co-applicant) NIHR RfPB £350,000 (2014)

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If you would like us to come to your event, we would be happy to provide more information on what we can offer your team.