LIFE AFTER STROKE
NURSING RESEARCH PRIORITIES
THE RESULTS

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ON BEHALF OF THE SSNF & FUNDED BY CHSS
Study Aims

- Establish the Top 10 stroke nursing research priorities
- Increase research capability/capacity
- Increase nurse-led research
- Ensure research relevant to what nurses do
- Valued by stroke patients and carers
- Research focused on defined objectives
- Inform future research agenda for staff, researchers & funders
Stroke Nursing Research Priorities

- Built on previous priority setting project relating to life after stroke that used James Lind Alliance methodology (Pollock et al, 2012 & 2014)
- Aims to ensure meaningful patient involvement in research priority setting: 5 stages (used 1-3 stages previous project)

226 Unique unanswered research questions

4. Interim prioritisation:

5. Final priority setting
## Interim Prioritisation: Methods & Participants

### 4. Interim prioritisation: (n= 97)

**Questionnaire - SSNF conference, email, post**

<table>
<thead>
<tr>
<th>Position</th>
<th>n</th>
<th>Base</th>
<th>n</th>
<th>Years</th>
<th>n</th>
</tr>
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</tr>
<tr>
<td>SN</td>
<td>19</td>
<td>Acute</td>
<td>25</td>
<td>&lt;2</td>
<td>8</td>
</tr>
<tr>
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<td>1</td>
<td>Rehab</td>
<td>9</td>
<td>1-5</td>
<td>14</td>
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<td>SSN/SLN/consultant</td>
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<td>Mixed</td>
<td>12</td>
<td>6-10</td>
<td>15</td>
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<td>Community</td>
<td>18</td>
<td>10+</td>
<td>56</td>
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<tr>
<td>Research</td>
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<tr>
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<td>Not stated</td>
<td>1</td>
<td></td>
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<tr>
<td>Not Stated</td>
<td>3</td>
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</table>
Interim Prioritisation: Results

4. Interim prioritisation

- 190/226 questions in individuals top 10
- 23/226 questions included in $n \geq 10$ top 10
- 5/226 ranked in top 25 research questions

Total of 28 Shared Research Priorities
<table>
<thead>
<tr>
<th>Type</th>
<th>Research Question</th>
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</thead>
<tbody>
<tr>
<td>Care</td>
<td>What are the best ways to manage urinary and faecal incontinence?</td>
</tr>
<tr>
<td>Care</td>
<td>What are the best ways to manage post-stroke pain?</td>
</tr>
<tr>
<td>Rehab</td>
<td>What are best ways to manage and/or prevent fatigue?</td>
</tr>
<tr>
<td>Mood</td>
<td>What are the best ways to manage altered mood and emotion?</td>
</tr>
<tr>
<td>Cog</td>
<td>What memory problems after stroke can be improved?</td>
</tr>
<tr>
<td>Cog</td>
<td>What are the best ways to improve understanding (cognition)?</td>
</tr>
<tr>
<td>Acute/Co</td>
<td>What is the impact of thrombolysis on emotion, cognition and communication? Does thrombolysis have adverse effect on cognitive abilities?</td>
</tr>
<tr>
<td>Com</td>
<td>How can stroke survivors and families be helped to cope with speech problems?</td>
</tr>
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</table>
## Shared Top 28 Questions:
### 11 Related to Strategies/Interventions

<table>
<thead>
<tr>
<th>Type</th>
<th>Research Question</th>
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</thead>
<tbody>
<tr>
<td>Prev</td>
<td>Can screening programmes reduce the risk of subsequent stroke?</td>
</tr>
<tr>
<td>Prev</td>
<td>Is lifestyle advice useful at promoting lifestyle improvements and reducing the risk of stroke?</td>
</tr>
<tr>
<td>Acute</td>
<td>How often should GPs check drugs and BP?</td>
</tr>
<tr>
<td>Acute</td>
<td>Has the FAST campaign improved stroke management?</td>
</tr>
<tr>
<td>Rehab</td>
<td>Can goal setting approach help recovery after stroke?</td>
</tr>
<tr>
<td>Rehab</td>
<td>What is the optimal amount and intensity of therapy for patients with stroke?</td>
</tr>
<tr>
<td>LT</td>
<td>What are the best ways of helping people come to terms with the long term consequences of stroke? What is the best way of managing the long-term needs of stroke survivors</td>
</tr>
<tr>
<td>LT</td>
<td>What is the best way to promote self management and self help after stroke?</td>
</tr>
<tr>
<td>LT</td>
<td>What is the best way to help people deal constructively with uncertain prognosis?</td>
</tr>
<tr>
<td>LT</td>
<td>What is the best way to provide information after stroke?</td>
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</table>
### Shared Top 28 Questions: 8 Related to Carer/Care Setting/Role

<table>
<thead>
<tr>
<th>Type</th>
<th>Research Question</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carer</td>
<td>What is the best way of supporting family members of stroke survivors?</td>
</tr>
<tr>
<td>Setting</td>
<td>When is the best time to move someone from a major stroke unit to a smaller rehabilitation unit nearer to their home?</td>
</tr>
<tr>
<td>Setting</td>
<td>What are the key components of an effective stroke unit?</td>
</tr>
<tr>
<td>Rehab</td>
<td>Is a young stroke environment better than a geriatric/stroke rehab environment at improving recovery of young people after stroke?</td>
</tr>
<tr>
<td>Rehab</td>
<td>Are specialist stroke nurses better than non-specialist nurses at improving recovery after stroke</td>
</tr>
<tr>
<td>Rehab</td>
<td>Are stroke coordinators/liaison workers beneficial in the management of stroke?</td>
</tr>
<tr>
<td>Rehab</td>
<td>What are optimal staffing levels within stroke units?</td>
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<tr>
<td>Rehab</td>
<td>Does high morale within the stroke team service improve stroke recovery?</td>
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</table>
### Final Consensus Meeting:
**Participants (n= 27)**

#### 5. Final priority setting

<table>
<thead>
<tr>
<th>Position</th>
<th>n(%)</th>
<th>Base</th>
<th>n(%)</th>
<th>Area</th>
<th>n(%)</th>
<th>Years</th>
<th>n(%)</th>
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</thead>
<tbody>
<tr>
<td>SN</td>
<td>5 (19)</td>
<td>Rehab</td>
<td>6 (22)</td>
<td>D&amp;G Fife</td>
<td>1 (3)</td>
<td>1-5</td>
<td>3 (11)</td>
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<tr>
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<td>2 (7)</td>
<td>Mixed</td>
<td>2 (7)</td>
<td>Forth V GG&amp;G</td>
<td>7 (26)</td>
<td>6-10</td>
<td>5 (19)</td>
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<td>SSN</td>
<td>8 (30)</td>
<td>Community</td>
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<td>Grampian Highlands</td>
<td>1 (3)</td>
<td>10+</td>
<td>16 (59)</td>
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<td>SLN</td>
<td>4 (15)</td>
<td>Research</td>
<td>3 (11)</td>
<td>Lanarkshire Lothian</td>
<td>2 (7)</td>
<td></td>
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</tr>
<tr>
<td>Research</td>
<td>3 (11)</td>
<td>Other</td>
<td>5 (19)</td>
<td>Shet/Ork Isl Tayside</td>
<td>6 (22)</td>
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<td>1 (3)</td>
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<td>Western Isl</td>
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</table>
Final Consensus Meeting: Methods

Rank order from each group summed to give a total score

n=27
reach agreement on top 10

n=9
28 questions ranked in order from high to low importance

n=9
n=9
n=27
Debate & Amendments

Wording of four top ten questions were amended:

• To focus the question
  ➢ (3 Qs: 2, 9, 10)

• Merging of three questions from shared 28 Qs into 1 top 10 question
  ➢ (Q: 6)

KEEP CALM AND DEBATE ON
# The Top 10 Research Priorities

1. What are the best ways to manage and/or prevent fatigue?

2. What are the best ways to improve cognition after stroke?

3. What are the best ways to manage urinary and faecal incontinence?

4. What are the best ways to manage altered mood and emotion after stroke?

5. What are the best ways to promote self-management and self-help after stroke?

6. What are the best ways of helping stroke survivors and their families come to terms with uncertainty of prognosis and the long-term consequences of stroke?

7. Can a goal setting approach help recovery after stroke?

8. What is the impact of thrombolysis on emotion, cognition and communication?

9. Is a “young stroke environment” better than other stroke rehabilitation environments at improving recovery of young people after stroke?

10. What is the optimal amount and intensity of therapy provided by nurses for patients with stroke?
Results

• Stroke-related impairment (5 Qs: 1-4 & 8)
  – fatigue, cognition, incontinence, mood, thrombolysis impact on cognition
• Rehabilitation/long-term consequences (4 Qs: 5-7 & 10)
  – self-management; long term consequences of stroke; goal setting; therapy
• Care setting (1 Q: 9)
  – young stroke v other stroke rehab environments
• Shared research priorities (3 Qs 1-2 & 6)
  – fatigue, improving cognition, and coming to terms with long-term consequences of stroke (Pollock et al, 2014)
• World Stroke Organisation Recommendations (2 Qs:1-2)
  – i.e. fatigue, improving cognition
# Strengths & Limitations

## Strengths
- Rigorous methodology
- Pragmatic & efficient
- Person-centered
- Representative
  - Position
  - Stroke Specialist
  - Health board
  - Years worked in stroke
- Impact (builds on previous project)

## Limitations
- Did not include new ideas/questions
- Interim priority setting
  - 97/431 (23%) SSNF members
  - Majority of responses from conference
  - May have led to some areas being under represented
- Questions broad
  - require refinement prior to research
Dissemination Plan

- Report sent to participants (May 2015)
- Full Papers in preparation for Academic/Practice Journals
- Conference presentations (abstracts)
- Lay summaries, Postcards, Social media, NHS bulletins
- Consult with Networks – MCNs, NACS, ESO, WSO
What Next?
e.g. What are the best ways to prevent and/or manage fatigue

• Question needs refinement to take forward

• Identify team/s (support from SSNF)

• Secure funding, ethics & time

• Review of literature/current research
  – Lack of evidence for interventions for fatigue post stroke
Conclusions

• Identified Top 10 stroke nursing research priorities

• Clear direction for the future of stroke nursing research

• Facilitates nurses to undertake research that is important to stroke survivors/carers

• Central to supporting optimal recovery and quality of life after stroke
References


THANK YOU FOR YOUR PARTICIPATION IN THIS RESEARCH

IF INTERESTED IN UNDERTAKING RESEARCH RELATED TO TOP 10 PLEASE CONTACT THE SSNF FOR FURTHER SUPPORT

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a.rowat@napier.ac.uk