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#400WORDS: KNOWLEDGE + ACTION

Research in community nursing: the benefits and barriers

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Background

Implementing evidence-based knowledge is vital to ensure optimal patient outcomes (Johnston *et al.*, 2016). The National Wound Strategy (2023) identified inconsistencies in lower limb care and produced recommendations for better outcomes for patients and effective use of resources. I had the opportunity to be Principal Investigator for a commercial trial, evaluating dressings for chronic leg ulcers.

Method

Patients on a community nursing caseload were screened and approached about participation in the study. Once they consented to participate, fortnightly follow-up occurred where nursing staff completed a wound assessment, and the participant completed a quality-of-life questionnaire.

Results

All patients approached gave their consent to participate. They were keen to support the nurses in evaluating their leg ulcer care and felt empowered to be proactively involved. The screening process enabled review of the care and documentation for each patient. Overdue ankle brachial pressure index measurements were identified, and each patient had a care plan for dressing choice and wound assessment completed. Being involved in the research study gave the opportunity to improve quality of patient care and documentation.

Working closely with the research team on this study, facilitated greater understanding of each other's roles and future collaboration opportunities for implementing research into community nursing. The research team were able to offer support in screening participants, obtaining consent, data queries and other aspects of the research study process.

As Principal Investigator, I developed a greater understanding of issues that the research team encounter when undertaking research in clinical areas. For some clinicians, participation in research was not seen as a priority as they were “too busy” to be involved. They then became the gatekeepers for patients’ participation (or not) in the study. It was evident that patients wanted to be involved, but often that decision was made for them by the clinicians. The barriers of implementing research into practice were discussed by Johnston *et al.* (2016) who recognised the personal, professional, and organisational barriers encountered. Bodicoat *et al.* (2021) reviewed the literature on research inclusion and similarly found a lack of information about research trials as a barrier for participation.

Conclusion

Both staff and patients benefitted by participating in this research and the experience will positively encourage the team involvement in future research opportunities. Participation in research studies can be seen as a proactive way to encourage community nursing teams to understand the process, experience the positive response from patients and become more involved in evidence-informed healthcare.

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