



Title: 'Qualitative research proposal: Examining the perceptions of care home staff towards research engagement.'

Key words: care home staff, care homes, research, engagement,

Abstract:

Background: Despite calls for action, staff working in care homes are typically underrepresented in research literature. Care homes are complex environments which make conducting research in such environments difficult. As a likely result, many care home staff are unfamiliar with research. This is concerning since research is necessary to advance practice and meet the needs of patients. A systematic search of the literature showed there is a paucity of evidence that explores how care home staff perceive research.

Method: This qualitative research proposal outlines how data can be collected from care home staff to generate new insights regarding how this workforce perceives research.

- I confirm that my work is original, that I have not published this article previously and it is not under consideration by another journal.
- I have consulted any co-authors and where I have used the work or words of others, I have secured the necessary permission for use.

Literature review

Research conducted in care homes is lacking (Katz, 2011), with the National Institute for Health Research (NIHR, 2017) stating that research in care homes is underdeveloped. Care homes may be underrepresented in the research literature owing to the complexities of conducting research in such environments (Brooks *et al.*, 2019). Davies and colleagues (2014) describe how care home staff often deal with multiple challenges that are perceived to be of higher importance than engaging with research. Challenges preventing care home staff from engaging in research include: time constraints; high staff turnover (Lam *et al.*, 2018); limited resources; policy (Van Ness *et al.*, 2012), low staffing levels and management issues (NIHR, 2021). Such barriers are likely to affect the recruitment and retention of care homes staff into research projects (Ersek *et al.*, 2016) which may result in care home staff being unfamiliar (Giné-Garriga *et al.*, 2020) and dubious of research (Goodman *et al.*, 2011).

The paucity of care home staff engaging in research has implications for clinical practice because research informs healthcare delivery (Collingridge Moore *et al.*, 2019). NIHR (2021) suggested that organisations that do not engage with research may not adequately address the health and social needs of individuals and populations. Conversely, organisations participating in research are more likely to see improvements in care (Hanney *et al.*, 2013). Consequently, the prime minister of the United Kingdom has called for more research to be conducted in care homes (Department of Health, 2015), whilst the Care Quality Commission (2017) recognises 'outstanding' facilities to be those that engage in research. The promotion of research within care homes is timely considering the aging population (Kingston *et al.*, 2018), which is expected to place a greater demand on care homes (Deschodt *et al.*, 2017). Care homes have an important role within the health and social care system (Robbins *et al.*, 2013), as highlighted by the Covid-19 pandemic (Marshall *et al.*, 2021). Therefore, it is imperative that barriers preventing care home staff from participating in research are better

understood and addressed so the benefits of evidenced-based care can be fully realised by care homes staff. At present a lack of evidence exists that investigates how care home staff perceive engagement with research, as demonstrated by a simple Pubmed search that returned five articles using the following search terms: ((care home staff[Title]) OR (nursing home staff[Title])) OR (residential staff[Title])) AND (thoughts[Title])) OR (feelings[Title])) OR (perceptions[Title])) AND (research engagement[Title])) OR (research participation[Title])) OR (research involvement[Title]).

Research question(s)

The primary outcome of this research is to add to the paucity of research surrounding how care home staff perceive research engagement and will answer the following question:

Question one:

- 'How do care home staff perceive and experience engagement within health research?'

Research design

Approach:

The research questions will be answered using a qualitative research design which describes and explores experiences and beliefs of individuals (Denney & Tewksbury, 2015). The research will adopt an ethnographic methodology which aims to describe the thoughts and practices of a population(s) under study (Hammersley, 1985), thus reflecting the aims of the research questions. Qualitative research can validate quantitative data (Miles & Huberman, 1994), and may be useful to contextualise or triangulate results from another study.

Sampling approach to answer research question one:

To answer the first research, question a non-probability, convenient sample of care homes will be invited to participate. The maximum sample size is approximately thirty-

one participants spanning across three care homes, although this figure is expected to be lower owing to difficulties in engaging care home staff in research.

Method of Data Collection

Data will be collected using a dictaphone that will capture respondents' answers, verbatim, to semi-structured interview questions (see appendix 1a and appendix 1b). A dictaphone will be used as qualitative data captured using audio recording equipment is considered 'rich' (Rutakumwa *et al.*, 2020), easier to analyse (Cychosz *et al.*, 2020) and does not influence research validity (Henry *et al.*, 2015).

Data analysis

Data collected will be transcribed verbatim and analysed according to Clarke & Braun's (2017) framework for thematic analysis, which places emphasis on 'what' is being said within qualitative data sets (Riessman, 2005). To facilitate data analysis, the software Nvivo shall be used. A second researcher affiliated will also analyse the data to ensure all relevant key themes are extracted from the data. Data saturation will be achieved when no new themes can be derived from the data.

Rigour and Quality

Rigour will be maintained throughout the research by ensuring each researcher collects data according to the interview guide (see appendix 2). The interview guide will also serve as a template to allow other researchers to replicate the research in their own settings. Lastly, secondary data analysis performed by the second researcher and Nvivo will ensure the primary researcher's predispositions are challenged and queried.

Ethical considerations

It is unlikely that this piece of research will cause harm or distress to participants, however ethical approval will be sought from Falmouth University due to the nature of the workforce being interviewed. The main risks associated with the research will

concern the recording of potentially identifiable information. To mitigate this risk, participants will be assigned a computer-generated participant number to ensure confidentiality. Participants will also be provided with a patient information sheet (see appendix 3a and 3b) outlining the purpose of the research which will be explained again verbally prior to interview. Written and verbal consent (see appendix 4) will be gained after participants have read and understood the purpose of the research and prior to commencing the interview. Participants will be reminded that they can withdraw from the research at any point and that their information will be deleted in accordance with local and national policy. During the interview, researchers will practice reflexivity to ensure the emotional welfare of participants is addressed.

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Appendix 1a, interview questions to ask care home staff.

- 'How do care home staff perceive and experience engagement within health research?'

<u>Question one:</u>	Please tell me about any previous experiences of research projects in the care home setting?
<u>Question two:</u>	What do you think is the purpose of research within care homes?
<u>Question three:</u>	What do you think prevents care home staff engaging in research?
<u>Question four:</u>	What does research mean to you?
<u>Question five</u>	What do you think helps care home staff engage in research?
<u>Question six:</u>	Please tell me what successful research would look or feel like in the care home setting.
<u>Question seven:</u>	Please describe your professional role.

Appendix 2, interview guide

Step one

Introduce yourself and your role.

Step two

Explain the rationale for conducting the research by repeating the information below to the participant.

Interviewing care home staff:

“I plan on conducting a short interview that will last approximately ten minutes which will explore how care home staff perceive engaging in research projects. Each interview will be tape recorded with each interview being assigned a random computer generated number to protect confidentiality. All information will be stored and managed in accordance with local and national policy. Participants can withdraw their consent and data from the research at any time by quoting the random computer generated number that will be provided to them should they consent to partaking in the research. Would you be interested in taking part?” If the participant declines, do not continue. If the participant accepts, continue to step three.

Step three

Interviewing care home staff

Provide the participant with a patient participant sheet and prompt them to read it

Step four

Ask participants:

“Would you like to consent to taking part in the research?” If yes, continue to step five. If no, do not continue.

Step five

Interviewing care home staff:

Provide care home staff with a consent form to sign.

Step six

Using google, type in the search bar 'generate a random number', set the maximum number to 4500 and generate a random number for the participant.

Step seven

Provide the randomly generated number to the participant and document it the number on their consent form.

Step eight

Explain to the participant "I am now going to start the interview"

Step nine

Turn on the dictaphone and start recording.

Step ten

Interviewing care home staff:

Ask all questions to the participant in the exact order and phrasing as outlined in appendix 1a.

Step eleven

Once all questions have been asked, stop recording and turn the dictaphone off.

Step twelve

Say to the participant:

“Thank you for your time and participation”.

Appendix 3a, patient information sheet for care home staff [Version 1.0].

Study title:

‘Examining the perceptions of care home staff towards engaging in health research.’

Invitation and summary:

We invite you to partake in a piece of research that will contribute to the overarching ‘*Connected Healthcare Project*’. The research will describe how care home staff perceive and experience the process of engaging with research which will help to inform and add context to the wider project.

Explanation:

A lack of evidence conducted within care homes exists (Katz, 2011) with many barriers, including time, low staffing, management and policy being listed as issues hindering engagement. Research plays an important part in informing healthcare delivery (Collingridge Moore *et al.*, 2019) and is encouraged in care homes by the prime minister of the United Kingdom (Department of Health, 2015) and The Care Quality Commission (2017). At present, there is a lack of research that investigates how care home staff perceive engaging in health research, the aim of this research will be to generate new insights that will support the research literature.

What would taking part involve?

Taking part in ‘*The Connected Healthcare*’ project would involve answering questions during a short interview which will be recorded using a dictaphone after gaining consent to do so. Information collected throughout the project will be kept confidential according to local policy, although participants have the right to withdraw their participation from the project at any time; with any information destroyed in

accordance with local and national data protection practices. The observational nature of the research means that the potential risk of harm to participants is low.

Appendix 4, Participant Consent Form [Version 1.0]:

IRAS ID: To be confirmed.

Centre Number: To be confirmed.

Study Number: To be confirmed.

Participant Identification Number for this trial: [Example]

CONSENT FORM

Title of Project: *'Connected Healthcare Project: Examining the perceptions of care home staff towards research engagement.'*

Name of Researcher: Madi Stephens

Please initial box:

1. I confirm that I have read the information sheet dated 13th August 2021 (version 1.0) for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.

2. I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason, without my medical care or legal rights being affected.

3. I understand that relevant sections of my data collected during the study may be looked at by individuals from Falmouth University, where it is relevant to my taking part in this research. I give permission for these individuals to have access to my records.

4. I understand that the information collected about me will be used to support other research in the future and may be shared anonymously with other researchers.

5.

Name of Participant:

Date:

Signature:

Name of Person Taking Consent:

Date:

Signature: