TOP TEN RESEARCH PRIORITIES RELATING TO STROKE NURSING: A RIGOROUS APPROACH TO ESTABLISH A NATIONAL NURSE-LED RESEARCH AGENDA

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ON BEHALF OF THE SCOTTISH STROKE NURSES FORUM & FUNDED BY CHEST HEART AND STROKE SCOTLAND
Global Burden of Stroke

- 16.9 million first-ever strokes per year
- 5.9 million deaths per year
- 100% increase in stroke incidence and mortality in developing countries over last 40 years
- 33 million stroke survivors
- 16.5 million will have moderate-severe disability
- Combined cost to the wider economies of Australia, China, Europe, UK and USA exceed £90 billion per year

Stroke Nursing Research Priorities

- Research should be relevant to what we do as stroke nurses
- Nurse-led
- Valued by stroke patients and carers
- Research focused on defined research objectives
- Build nurse research capability and capacity
- Inform prioritisation and funding
Research Priorities Relating to Life after stroke

• UK organisation
• Aims to ensure meaningful patient involvement in research priority setting
• Built on previous priority setting project relating to life after stroke
• Evidence that top 10 research questions inform activities of research communities and funding

Stroke Research Priorities

1. Establish scope of Priority Setting Partnership
2. Gather treatment uncertainties
3. Check treatment uncertainties
4. Interim prioritisation
5. Final priority setting
1. Establish scope of Priority Setting Partnership

Partner organisations & steering group

Target participants - Scotland

“Life after stroke”
2. Gather treatment uncertainties

**Methods**
- Emailing & posting
- National stroke meetings
- Local stroke clubs
- Searching literature

**Results**
- 548 submitted uncertainties
- Submitted by: 15 stroke clubs, 22 individual stroke survivors. 4 professional meetings, 61 individual professionals.
3. Check treatment uncertainties

Methods

- Removal of non-treatment questions
- Merging & formatting
- Systematic searching for existing evidence
- All checked by health professional + stroke survivor

Results

226 unique unanswered treatment uncertainties
Stroke Nursing Research Priorities

1. Establish scope of PSP
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226 Unique unanswered research questions

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5. Final priority setting
4. Interim prioritisation

**Methods**
- Purposive sample
- Position; Stroke role; Health board; Years worked in stroke
- Questionnaire - SSNF conference, email, post

**Results**
- n=97
- 190/226 individuals top 10
- 23/226 n≥10 top 10
- 5/226 ranked in top 25

Total of 28 Shared Research Priorities
Shared Research Priorities (n=28)

- Stroke prevention (n=2)
- Cognition, mood or communication (n=6)
- Care (n=2)
- Acute (n=2)
- Rehabilitation (n=8)
- Long term care (n=4)
- Stroke care settings (n=3)
- Carer (n=1)
5. Final priority setting

28 questions ranked in order from high to low importance

Rank order from each group summed to give a total score

Discussion to agree top 10

reach agreement on top 10

n=27

n=9

n=9

n=9
Debate & Amendments to Top 10

Wording of four top ten questions were amended:

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

• Merge 3 questions from shared 28 Qs into 1 top 10 question (Q ranked: 6)
# The Top 10 Stroke Nursing 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?
## Stroke Related Impairments

Qs: 1-4, 8

<table>
<thead>
<tr>
<th>Q1.</th>
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10. What is the optimal amount and intensity of therapy provided by nurses for patients with stroke?
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2. What are the best ways to improve cognition 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?

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
  - 23% SSNF members
- Questions broad
  - require refinement prior to research
Summary

• Identified Top 10 stroke nursing research priorities
• Two questions are shared with World Stroke Organisation research priorities (qs: 2, 6)
• 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
What next: Multi-National Stroke Nursing Research Agenda

• Establish collaborative activities to address the top 10 stroke nursing research priorities nationally and internationally.
  – Inform SSNF Research Strategy 2017-22
  – Increase co-ordinated and focused multi-national stroke nursing research programmes
  – Secure National, European and International funding
  – Implementation/translation focused
  – Increase the impact of stroke nursing research activity
THANK YOU FOR YOUR INTEREST

IF YOU WOULD LIKE MORE INFORMATION RELATED TO TOP 10 PLEASE CONTACT THE SCOTTISH STROKE NURSE FORUM

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