

School of Nursing and Health Sciences

Key research in critical care: implications for nursing and nurses

Dr Janice Rattray Reader in Acute and Critical Care Nursing University of Dundee







POST INTENSIVE CARE SYNDROME





we are just the beginning



memory

orders disorientation mental health

hallucinations are clearing active to the second se

psychosis brain injury diagnosis agitatio





Who does it and how is it organised?





ANAESTHESIA, CRITICAL CARE AND PAIN MEDICINE





Home About critical care research Patient, carer and public information Key Contacts Resources Case Studies

Critical Care

The Critical Care Specialty is one of 30 Specialties which bring together communities of clinical practice to provide national networks of research expertise. Our membership made up of research-interested clinicians and practitioners at both national and local levels. Our job is to ensure that the Critical Care studies that are included in our national portfolio of research receive the right support to ensure they are delivered successfully in the NHS.





Time points in the patient journey?







In Intensive Care

CARING FOR THE CRITICALLY ILL PATIENT

The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

Age of Transfused Blood in Critically Ill Adults

Jacques Lacroix, M.D., Paul C. Hébert, M.D., Dean A. Fergusson, Ph.D., Alan Tinmouth, M.D., Deborah J. Cook, M.D., John C. Marshall, M.D., Lucy Clayton, M.Sc., Lauralyn McIntyre, M.D., Jeannie Callum, M.D.,
Alexis F. Turgeon, M.D., Morris A. Blajchman, M.D., Timothy S. Walsh, M.D., Simon J. Stanworth, F.R.C.P., Helen Campbell, D.Phil., Gilles Capellier, M.D., Pierre Tiberghien, M.D., Laurent Bardiaux, M.D., Leo van de Watering, M.D., Nardo I. van der Meer. M.D., Elham Sabri, M.Sc., and Dong Vo. B.Eng.

Effectiveness of Implementing a Wake Up and Breathe Program on Sedation and Delirium in the ICU

Babar A. Khan, MD, MS^{1,2,3}; William F. Fadel, MS⁴; Jason L. Tricker, MSN, ACNP⁵; W. Graham Carlos, MD, MSCR¹; Mark O. Farber, MD¹; Siu L. Hui, PhD^{2,3,4}; Noll L. Campbell, PharmD^{2,3,5,6}; E. Wesley Ely, MD,MPH^{7,8}; Malaz A. Boustani, MD, MPH^{1,2,3} A multicentre, randomised controlled trial comparing the clinical effectiveness and cost-effectiveness of early nutritional support via the parenteral versus the enteral route in critically ill patients (CALORIES)





ORIGINAL ARTICLE



Bronwen Connolly,^{1,2,3} Brenda O'Neill,⁴ Lisa Salisbury,^{5,6} Bronagh Blackwood,⁷ on behalf of the Enhanced Recovery After Critical Illness Programme Group

Prior to hospital discharge

Original Investigation

Increased Hospital-Based Physical Rehabilitation and Information Provision After Intensive Care Unit Discharge The RECOVER Randomized Clinical Trial

Timothy S. Walsh, MD; Lisa G. Salisbury, PhD; Judith L. Merriweather, PhD; Julia A. Boyd, PhD; David M. Griffith, MD; Guro Huby, PhD; Susanne Kean, PhD; Simon J. Mackenzie, MBChB; Ashma Krishan, MSc; Stephanie C. Lewis, PhD; Gordon D. Murray, PhD; John F. Forbes, PhD; Joan Stephanie C. Lewis, PhD; Joan St

Journal of Critical Care (2010) 25, 196-204



Journal of Critical Care

The effects of critical care outreach services before and after critical care: A matched-cohort analysis $\stackrel{\sim}{\sim}$

David A. Harrison PhD^{a,*}, Haiyan Gao PhD^{a,b}, Catherine A. Welch MSc^a, Kathryn M. Rowan DPhil^a

^aIntensive Care National Audit & Research Centre, Tavistock House, Tavistock Square, London WC1H 9HR, UK ^bCurrent affiliation: National Institute of Clinical Outcomes Research, University College London, Suite 501, Heart Hospital, Westmoreland Street, London W1G 8PH, UK

After hospital discharge



RESEARCH

The PRaCTICaL study of nurse led, intensive care follow-up programmes for improving long term outcomes from critical illness: a pragmatic randomised controlled trial

B H Cuthbertson, chief of critical care medicine and professor of anaesthesia,¹J Rattray, senior lecturer,² M K Campbell, director and professor,³ M Gager, intensive care follow-up nurse,⁴ S Roughton, intensive care follow-up nurse,^{3,5} A Smith, intensive care follow-up nurse,² A Hull, consultant pyschiatrist,⁶ S Breeman, trial manager,³ J Norrie, professor of biomedical statistics,⁷ D Jenkinson, statistician,³ R Hernández, health psychologist,^{3,8} M Johnston, professor of health psychology,⁹ E Wilson, consultant in anaesthesia and intensive care ¹⁰ C Waldmann, consultant in anaesthesia and intensive care⁴ on behalf of the PRaCTICaL study group

Cognitive and Physical Rehabilitation of ICU Survivors: results of the RETURN randomized, controlled pilot investigation

James Jackson, PsyD, EW Ely, MD, MPH, MC Morey, PhD, VM Anderson, MA, CS Siebert, LB Denne, MSW, J Clune, MD, KR Archer, PhD, R Torres, MS, D Janz, MD, E Schiro, BA, J Jones, BA, A Shintani, PhD, B Levine, PhD, BT Pun, MSN, J Thompson, MA, NE Brummel, MD, and H Hoenig, MD

Abstract

Priorities for future intensive care research in the UK: results of a James Lind Alliance Priority Setting Partnership 3000

H Reay, N Arulkumaran, SJ Brett on behalf of the James Lind Alliance Intensive Care Research Priority Setting Partnership



- Identify patients who may benefit from IC early and admit at the right time.
- How can patients and families be best supported at home.
- Monitoring and managing patients with or at risk of delirium – short and long term.
- Prevent diagnose and treat HAI.
- When should physical rehab start and what should it consist of.
- Enhance patient comfort during ICU.
- Psychological support in ICU.

Quality of Life after Intensive Care

- International issues.
- Represented a move from mortality as the main outcome measure.
- Recognition of the potential ongoing problems for patients and families.
- Increasing number of publications.

QoL publications 1995-2014



Quality of Life Research

- Descriptive: what is it like for critical care survivors?
- Testing measures: mainly self-report questionnaires.
- Longitudinal: how does it change over time?
- Comparisons:
 - General population norms
 - Other patient groups

Quality of Life Research

- Subgroup assessment: ARDS patients, elderly.
- Prediction
- Testing interventions
- Widening concept to include psychosocial issues
- Quant v Qual

Where can you hear about it?



UK Critical Care Research Forum

UKCCRF: who we are... The UK Critical Care Research Forum (UKCCRF) was established in 2008 and is open to all who are interested in undertaking research in critical and emergency care in the UK. The main objective of the UKCCRF is to advance the field of critical care research and enhance patient outcome and care, translating knowledge into practice. The forum meets annually to: share and critically review new study proposals; to share updates on the progress of ongoing studies; and to discuss research methodolooies.

This is a two-day event organised by a different host each year with support from a committee of consultants, nurses, allied health care professionals and researchers in critical care and emergency medicine. UKCCRF 2016 Newcastle/Gateshead Dates: Thursday 23 - Friday 24 June 2016 Venue: The Sage Conference Centre, Gateshead Hosted by: Stephen Wright



Highlights for 2016

Useful links for UKCCRF 2016 Final Programme Download Registration form ePay facility UKCCRF 2016 advert Hotel list Location map Venue website Venue for dinner 23rd June

Sponsors of UKCCRF 2016 Faculty of Intensive Care Medicine Intensive Care Society Intensive Care National Audit & Research Centre United Kingdom Clinical Pharmacy Association

Sintensive care society

Sign in I L Create Account I 🗮 Cart Donate Q Search



















Nursing in Critical Care



ſ

JAN Informing Practice and Policy Worldwide through Research and Scholarship

Journal of Advanced Nursing

© John Wiley & Sons Ltd



Edited By: Editor-in-Chief: Roger Watson; Editors: Robyn Gallagher, Mark Hayter, Jane Noyes, Rita Pickler & Brenda Roe

Impact Factor: 1.917 ISI Journal Citation Reports © Ranking: 2015: 8/114 (Nursing (Social Science)); 10/116 (Nursing (Science)) Online ISSN: 1365-2648



Journal of Clinical Nursing

How can you get involved?

- Find out what research is happening in your unit.
- Study
 - Masters dissertations
 - PhD
 - Professional Doctorates
- Internships
- Clinical academic opportunities
 - CLAHRCs
 - 13 across England funding of £124M over 5 years
 - Internships, PhD studies, Fellowships

In conclusion

- Increase in research activity
- Range of topics
- Range of designs
- Opportunities to find out about research and be involved
- Ultimately can improve patient outcomes and patient experience.





School of Nursing and Health Sciences

Thank you for listening

j.z.rattray@dundee.ac.uk