

Like all sections of *The Psychologist*, 'Supporting research' depends on your contributions. E-mail the Society's Scientific Officer Lisa Morrison Coulthard on lismor@bps.org.uk with your tips, questions, work in progress – anything related to the research process, from collaboration to dissemination, that you think would be of interest to our wide audience.

Communication, organisation... and tea and biscuits

CATHERINE PAINTER *with her experience of conducting large-scale NHS research.*

CONDUCTING large-scale multicentre research within the NHS is a challenge. There are research governance procedures to follow, staff members to enthuse and practical problems to overcome, and that's before you consider data collection and data analysis. I have been working as a research assistant on a national project funded by the Department of Health – the City 128 Project – on outcomes in acute psychiatric wards. Perhaps some of what I have learnt so far will be interesting or useful to others.

Communication and organisation are, of course, key factors when collecting data over a long period from multiple locations (in this case 40+ wards in different counties); that and a reliable car! The support of managers is vital, as they exercise considerable influence over practice-level staff. Taking the time to visit managers in person to show them how the research is relevant and helpful to them can make all the difference. Additionally, making sure that all staff are taught how to use research instruments correctly can save on data cleaning at the inputting stage.

Regular contact is imperative, especially when you are reliant on busy NHS staff to remember to use the research instruments

routinely. A simple phone call between visits to check progress can help, or a letter thanking staff for their response so far.

Appointing a specific liaison person can be extremely useful. Even better, appoint

general, getting as many staff as possible as involved as possible is the best means of ensuring collaboration, and may also improve the likelihood of implementing findings.

To acknowledge contributions, encourage greater response and maintain a presence for the project – participating wards are given mugs and pens bearing the City 128 logo and regular tea, coffee and biscuits. And to encourage healthy competition, prizes will be awarded at the end of the project, to those wards collecting the most complete data sets.

But just as valuable for a good response rate as prizes and refreshments is ensuring that staff understand the background to the research, and the impact it could have upon their work. 'What's the point of it?' is a frequently asked question. Research instruments should relate well to the participants' profession (in this case nursing), increasing confidence in the relevance and utility of the research.

Where the completeness of the data set is paramount (as it is in most research), it is essential to be honest with staff, and explain any cut-off level, after which data may not be able to be used. This in itself can encourage an increased return, particularly when the current response level is only slightly below the cut-off point.

One aspect of recent NHS reform has been a greater emphasis on consumer involvement and empowerment. Consequently, research within the NHS will increasingly be expected to include the voices of service users if it is to satisfy ethics committees and funding bodies. Collecting data from service users can bring its own set of problems. In the City 128 Project, 10 service-user questionnaires are to be completed on each participating ward, as well as individual service-user interviews on randomly selected wards. Staff members are asked to help the researcher to approach randomly selected patients, but they make the final decision about who is well enough to participate. Staff can understandably be overprotective

two – this makes contact by phone and arranging visits around shift patterns much easier. And if they are of differing seniority, they will be able to use different tactics to encourage staff to support the research. In

New ESRC website

THE Economic and Social Research Council (ESRC) is to launch an online initiative for social science research – www.esrcsocietytoday.ac.uk will offer academics, students and researchers unrivalled, free access to high-quality social and economic research available, planned and in progress.

As well as bringing together all ESRC-funded research, the website will provide a gateway to other key online resources such as the UK Data Archive and the Office of National Statistics – and international coverage from services such

as Europa. It will include early findings, full-texts and original datasets and allow users to establish online discussion forums or track down researchers in their key subject fields. There will also be the facility to register for regular news bulletins and e-mail alerts.

The website is scheduled to go live for a test period in April 2005 before being publicly launched in summer 2005, replacing the current www.esrc.ac.uk and www.regard.ac.uk sites.

☐ Register for further information by e-mailing societytoday@esrc.ac.uk.

of their patients, so it is vital to reiterate that the project has full ethical approval for the service-user components, and to reassure that informed consent will be sought.

Other research issues may also need to be conveyed to staff. The concept of randomisation, for example, can be difficult to apply on a busy ward. Staff members might be keen for the researcher to see a convenience sample, or their personal selection of patients only; which could obviously lead to a biased response. Ensuring confidentiality may also take some effort, as staff members occasionally ask to sit in on questionnaires or interviews, either from interest, or concern for the patient or researcher. (The latter can normally be avoided by asking staff to exclude those patients who could not appropriately sit alone with the researcher.) This sitting-in can be a strong source of

bias, as clients may not feel entirely free to speak their minds.

These problems can be compounded when the research is about patient care, as staff may well be nervous about negative comments; acute nurses in particular are often suspicious of research, as they have been widely criticised in the past. Nonetheless, one must remember that many healthcare professionals are not used to completing research, so a reminder to participants of the importance of confidentiality, randomisation, and any other issues in collecting accurate and fair data, will usually increase compliance.

Finally, it is often easy to feel like an unwanted guest in research situations that require the assistance of both busy healthcare professionals (perhaps unused to doing research) and service users, as you belong to neither group of participants. However, my experience suggests that as

long as you provide organisation and communication (and the occasional cuppa), success should be yours.

■ *Catherine Painter is based at Staffordshire University. E-mail: c.m.painter@staffs.ac.uk.*

In My Shoes needs trainers

THE developers of a computer package to help children and learning-disabled adults communicate need you.

Using images, sound, speech and video, *In My Shoes* encourages participants to share information on their experiences and emotions with different people in home, educational and other settings. The program has been designed so that a trained adult sits alongside the child or adult and guides them through a semi-structured process involving the interviewer, interviewee and computer. People who are unable to use the spoken word can still use the tools within the computer program to give an indication of their emotions.

Dr Rachel Calam, Senior Lecturer in Clinical Psychology at the University of Manchester, said: 'In My Shoes has been used by psychologists in health, education and forensic services, and it will be promoted within the DfES national assessment framework for children. It has proved an excellent means of building rapport, and provides a structure for the interviewer to maximise the opportunity for the interview to address sensitive areas and to facilitate sharing information. It also provides extensive and detailed session records.

'We are keen to identify psychologists who would be interested in being trained in using the approach with a view to developing skills as part-time trainers to develop a national network of users. The release of this package is likely to give rise to a number of research studies, and we see an integral role for psychologists in guiding the further development and understanding of the way that this novel approach works.'

□ *If you are interested in being trained, e-mail Rachel.Calam@manchester.ac.uk.*

FUNDING OPPORTUNITIES listed by deadline

30 June 2005

European Association of Experimental Social Psychology. Postdoctoral Seedcorn Research Grants. Contact: Sibylle Classen. E-mail: sibylle@eaesp.org; tel: 0049 2533 281 144; website: www.eaesp.org

1 July 2005

NERC. Standard Research Grants. Contact: Linda Chivers. Tel: 01793 411556; e-mail: lich@nerc.ac.uk

4 July 2005

BUFA Foundation. Health at Work Award, Research Award and Communication Award. Contact: Lee Saunders, Administrator. Tel: 020 7656 2591.

10 July 2005

Experimental Psychology Society. Undergraduate Project Prize. Contact: Gerry Altmann. E-mail: g.altmann@york.ac.uk

11 July 2005

Arthritis Research Campaign. Clinical Scientist Fellowships and Senior Research Fellowships. Contact: Head of Research and Education Funding. Tel: 01246 541115; e-mail: info@arc.org.uk

15 July 2005

Help the Aged. New Investigator Awards, Small Research Awards, Regular Research Grants and Innovative Grants. Tel: 020 7278 1114; e-mail: info@helptheaged.org.uk

25 July 2005

National Alliance Research Schizophrenia and

Depression. Young Investigator Award 2005. Tel: 001 516 829 5576; e-mail: info@narsad.org

30 July 2005

British Association of Sports and Exercise Sciences. International Conference Grants. Contact: Jane Bairstow. Tel: 0113 289 1020; e-mail: jbairstow@bases.org.uk

5 August 2005

Cancer Research UK. Population & Behavioural Sciences Project Grants. Contact: Dr Charlotte Moore, Research Manager. Tel: 020 7601 6096; e-mail: charlotte.moore@cancer.org.uk

Medical Research Council. Research Grants and Collaborative Grants. Tel: 020 7636 5422; website: www.mrc.ac.uk

15 August 2005

Arthritis Research Campaign. PhD studentships. Contact: Research and Education Department. Tel: 01246 541115.

31 August 2005

British Occupational Health Research Foundation. Research Award. Tel: 020 7317 5898; e-mail: admin@bohfrf.org.uk

open date schemes

See January issue.

A searchable database containing full details of the various national and international funding opportunities for psychologists can be found on the Society's website at tinyurl.com/4fmx4

If you are a grant-awarding body, please e-mail Lisa Morrison Coulthard (lismor@bps.org.uk) with details of your scheme for inclusion in this column.