

Developing Our Research and Innovation Strategy

Principal Investigator Questionnaire

February 2022

Contents

Introduction	p3
Aims and Objectives	p3
Sample	p3
Methodology	p3
Results	p4
Discussion	p6
Conclusion	p7
Recommendations	p7
Appendices	p9

Introduction

We are currently developing our Research and Innovation Strategy which will outline our priorities and intentions to maximise our potential to improve and deliver best value, seamless care working with our partners over the next five years. Our Principal Investigators (PIs) are pioneers for research and innovation activity within the trust, therefore, we asked our PIs to complete a questionnaire to understand our current position for carrying out research and innovation activities across the trust, and to identify areas for priority over the next 5 years. Please see “Developing our Research and Innovation Strategy Principal Investigator Questionnaire” (Appendix 1).

Aims and Objectives

A PI questionnaire was developed to enable PIs to provide feedback in regards to their perception and experience of research and innovation practices at Wirral University Teaching Hospital NHS Foundation Trust (WUTH). PIs were asked to consider the importance of research, carrying out research at WUTH, patient involvement in research, and barriers and enablers to carrying out research. The aim of the questionnaire was to gain a PI perspective in identifying ways in which we can enhance research and innovation within the trust.

Sample

There were a total of 17 respondents and the results were anonymous. The questionnaire was shared with all PIs within the trust.

Methodology

Below are the steps taken to gain PI feedback:

1. Our Research Manager and Strategy and Business Planning Manager adapted a questionnaire previously developed by Royal Free NHS Foundation Trust.
2. The PI questionnaire was reviewed and approved by the Research Department.
3. The Patient Experience Team then developed an electronic questionnaire using a system called Envoy.
4. The link to the electronic questionnaire was then shared directly via email to all PIs to access.
5. Posters advertising the questionnaire and a QR Code were put up around both Arrowe Park and Clatterbridge Hospital sites where PIs are located.
6. The questionnaire remained live for four weeks before closing.
7. Once the questionnaire closed the data was collected and collated. Please see “PI Questionnaire Results” (Appendix 2)
8. PI feedback was used to inform our Research and Innovation Strategy.

Results

Section A

A total of 17 PIs responded to section A of the questionnaire, and 15 answered Sections B and C. Details of the numbers of responses to each question can be seen in the raw data in Appendix 2.

When asked if they agreed that clinical research is currently a key priority for WUTH, 53% of PIs reported they were impartial; only 6% of respondents agreed and a further 12% strongly agreed, whilst 23% reported that they disagreed, and 6% strongly disagreed with this statement.

PIs were then asked if they thought that clinical research should be a key priority for WUTH, and all PIs were in favour of this, with 47% reporting they strongly agreed, and 53% agreeing.

When asked if they agreed that clinical research performance is of reputational importance to WUTH, 59% of PIs agreed, and a further 35% strongly agreed. No PIs disagreed, and the remaining 6% were impartial.

PIs were asked if they agreed that WUTH has the infrastructure to provide an environment conducive to carrying out research. 18% agreed and 18% strongly agreed; 40% of PIs disagreed and a further 18% strongly disagreed. 6% of PIs reported they were impartial to this question.

29% of PI reported they disagreed that they felt well supported to conduct clinical research at WUTH, and a further 12% strongly disagreed. 24% of PIs were impartial to this; whilst the remaining 35% agreed.

18% of PIs agreed, and a further 6% strongly agreed that they have been able to fulfil their research aspirations as a PI at WUTH. 47% of respondents were impartial to this, whereas 18% of PIs disagreed, and 11% strongly disagreed.

When considering whether patients should be involved in planning research, the majority of PIs were in favour. 35% of respondents strongly agreed and 53% agreed with this; the remaining 12% of PIs were impartial.

PI were asked if they agreed if it would be good for patients to have the opportunity to consent to be contacted in advance about future clinical research studies that they may be able to participate in. 41% of respondents strongly agreed, and 47% agreed that this would be good, the remaining 12% were impartial.

Section B

PIs were then given a list of concepts and asked whether they agreed or disagreed that they were current barriers to conducting high quality research. Results are as follows:

1. Lack of research time – 47% of PIs strongly agree, 47% agree, the remaining 6% are impartial.
2. Lack of transparency over research finance – 33% Strongly agree, 33% agree, 20% were impartial, 7% Disagree, 7% strongly disagree.
3. Lack of research funding – 40% strongly agree, 33% agree, the remaining 27% were impartial.
4. Lack of research leadership – 13% strongly agree, 47% agree, 33% were impartial, and 7% disagree.
5. Complex governance processes – 13% strongly agree, 27% agree, 40% were impartial, 20% disagree.
6. Inadequate research infrastructure – 33% strongly agree, 27% agree, 27% were impartial, and 13% disagree.
7. Lack of dedicated clinical research facility – 27% strongly agree, 40% agree, 20% were impartial and 13% disagree.
8. Lack of support from clinical services/service support departments – 27% strongly agree, 33% agree, 27% were impartial, and 13% disagree.
9. Lack of incentive – 34% strongly agree, 40% agree, 13% were impartial, and 13% disagree

PIs were asked to leave any other comments on barriers; six free text responses were received, as follows:

- Support of Research Midwife/Research Nurse makes a huge difference to being able to PI on projects. Dedicated, flexible, research time would also make me more likely to undertake projects as I have not been able to get any research time in my job plan
- I believe the lack of funding and support that this brings is critical. eg research nurse support etc. also the lack of ancillary funding for statistical support etc is a real stumbling block with respect to generating in house studies and projects. Lack of awareness of which university resources and support are important also as they can be used to support research fellows and students to provide clinical research on the Wirral.
- Need more clinicians to be able to deliver research safely
- I am the PI for a neonatal research project and have valued the input of the paediatric research nurses greatly. However, I find that the paediatric research nurse cover is very stretched at times due to pressures on them to cover adult research as well and that has had an impact on our research requirements. There needs to be more staffing.
- Need better information flow re potential studies to clinical teams and named departmental research leads in every department (not just divisionally). Should be regionally as well as locally driven re studies
- senior management team less supportive of protected research time & research facilities for staff involved in research

Section C

PIs were then given a list of concepts and asked whether they agreed or disagreed that they were current enablers to conducting high quality research. Results are as follows:

1. Efficient research department set-up and close down support – 20% strongly agree, 47% agree, 13% were impartial, and 20% disagree.
2. Dedicated research nurse time (cross-speciality) – 27% strongly agree, 27% agree, 33% were impartial, and 13% disagree.
3. Dedicated research nurse time (within speciality) – 27% strongly agree, 32% agree, 7% were impartial, 27% disagree, and 7% strongly agree.

PIs were asked to leave any other comments on enablers; four free text responses were received, as follows:

- Research department have been supportive in looking at new projects and support as needed with set-up & closure
- the above is very lacking at Wirral
- would prefer more time for the research midwife with in the speciality full time may be consider more protected research time in job plans and not put a constrain on the no. of studies involved
- A visible research presence Evidence of what research has achieved Signposting what the research dept can help with

At the end of the questionnaire, PIs could leave any other free text comments, three were received as follows:

- If we want clinicians to undertake research it has to be possible to get this into job plans and provide the time and support. Under the new CEA structure it is no longer possible to assume people will do a lot of extra work for minimal chance of a small amount of extra income. This is particularly true now we are all exhausted with having worked through a pandemic for almost 2 years.
- as above
- Make research visible to medical/ nursing /AHP groups so that the care staff of the future can pull research along with them as they progress such that is embedded in the culture

Limitations

A limitation acknowledged is that due to a small sample size, the results may not be widely generalisable, or representative of all PIs working in the trust, therefore, continued PI engagement is recommended. Secondly, the feedback gained from this questionnaire is mostly quantitative, in order to gain a deeper understanding in to PI experiences, more qualitative feedback would be beneficial.

Discussion

The importance of research

PI responses were mixed regarding whether or not they agreed that Research is currently a key priority for WUTH, however all PIs were in agreement that clinical research *should* be a key priority within the trust. Similarly, all apart from one of the PIs agreed that clinical research performance is of reputational importance at WUTH, the remaining PI was impartial to this.

Carrying out research

PI responses were somewhat mixed when asked if WUTH has the infrastructure which provides an environment conducive to carrying out high quality research, however 58% were in disagreement. None of the free text responses related to WUTH infrastructure.

More PIs disagreed than those who agreed to feeling well supported to conduct clinical research at WUTH, with one of the free text responses suggesting the need for research to be recognised in job plans, highlighting that research is viewed as additional work and the workforce are exhausted following the pandemic. Another comment suggested the need to make research more visible to staff to support embedding it into the culture.

The majority of PIs were impartial to the question relating to fulfilling their research aspirations as a PI at WUTH, however more disagreed with this, than those who agreed.

Patient involvement in research

The majority of PIs agreed that it would be good for patients to have the opportunity to consent to be contacted in advance about future clinical research studies that they may be able to participate in, the remaining two PIs were impartial. Similarly, all but 2 PIs reported that they strongly agreed that patients should be involved in planning research at WUTH.

Barriers to conducting high quality clinical research at WUTH

Out of all 9 suggestions, the one that received the most agreement from PIs (94%) as a current barrier, was lack of protected research time. Free text responses also supported this, as PIs reported not being able to get protected research time in their job plans, and reports that the senior management team are less supportive of protected research time.

Lack of research funding, and lack of support from clinical services/service support departments were the next most agreed barriers (74% of PIs agreed). Free text responses reported that lack of funding affects research nurse cover, highlighting that research nurse cover is valued, but is stretched at times due to clinical pressures. Concerns were also raised regarding lack of ancillary funding for statistical support. A total of 67% of PIs were in agreement that lack of transparency over research finance and lack of dedicated clinical research facilities were current barriers.

60% of PIs were in agreement that lack of research leadership, inadequate research infrastructure and lack of support from clinical services/service support departments were barriers. Free text comments also highlighted lack of awareness regarding university resources and support are available, and a lack of departmental research leads to support research projects.

The suggestion that received the least agreement from the PIs as a current carrier was complex governance processes with only 40% of PIs agree this, and no text responses mentioned this.

Enablers to conducting high quality clinical research at WUTH

A total of 67% of PIs were in agreement that efficient research department set-up and close-down support was a current enabler for conducting high quality research. 60% of PIs were in agreement that dedicated research nurse time (cross-speciality) was a current enabler for conducting research, free text comments were in favour of this. 54% of PIs were in agreement that dedicated research time (within speciality) was a current enabler. Free text comments showed that PIs would like more time for this within their speciality and is really well valued, though it was recognised this is stretched in some cases. Additional enablers suggested in the free text responses were the need to make research and the support available more visible, signposting to the research department, allowing research protected time in job plans, and embedding research in to the workplace culture.

Conclusion

Despite a relatively small sample size, there are some strong responses from the results of this questionnaire, such as clear agreement on some current barriers and enablers that will support in developing an understanding of our current position as we develop the research and innovation strategy. A number of suggestions were made for overcoming barriers, and further engagement would support a greater understanding of priorities for research and innovation for the workforce across the trust for the next 5 years.

Recommendations

- Due to the small sample size, further PI engagement should be carried out.
- The results of this questionnaire are mostly quantitative. Some interesting concepts came from the qualitative feedback in the free text response, and continued engagement with different PI groups across the delivery phase of the strategy would be beneficial.
- It can be taken from this questionnaire that focus should be given to increasing top-down support for research and considering ways to protect time for research.
- Considerable barriers to conducting high quality clinical research at WUTH currently relate to the infrastructure and governance structures, specifically relating to capacity and capability due to time restraints and clinical pressures.
- Consideration should be given to supporting PIs to feel that they can carry out research as part of their every-day role, rather than an additional task.

Appendix 1

Developing our Research and Innovation Strategy PI Questionnaire



Principle Two

Appendix 2

Research and Innovation Strategy PI Questionnaire Results



Principle Two