

Engaging with non-research NHS care staff and managers: Newcastle bone and joint tissue collection, theatre engagement

Victoria Macrae, Clinical Trials Officer, Newcastle upon Tyne Hospitals NHS
Foundation Trust

What was the initiative?

Part of the ongoing research within the musculoskeletal department involves the collection of bone and joint tissue samples from patients undergoing hip or knee replacement surgery. The tissue samples donated are used in a number of research projects to research the causes of osteoarthritis and potential disease modifying treatments. Patients are recruited to studies on the day of surgery prior to them undergoing their procedure, recruiting approximately 500 patients each year. The engagement from the theatre personnel is vital in terms of acquiring the tissue samples which would normally be discarded as part of the operation. Good communication is also paramount, as the theatre department is busy (with an average of between 4 and 5 theatres running concurrently each day), and there have previously been cases of lost or mislabelled samples.

What was the outcome of the initiative?

For a smooth recruitment process, initial training sessions were set up with the theatre staff explaining the importance of the research being conducted. We provided information on the consent and sample tracking documentation to allow theatre staff to easily identify patients within busy theatre lists who had signed up to the study. We also set up a daily telephone call and email confirmation to update the theatre sister in charge of the patients who had consented to participate and their theatre number. This improved efficiency, as well as the quality of the samples received, whilst reducing the number of missed samples. Quality assurance was enhanced through the design of study specific work instructions and a sample tracking documentation system, as well as a simple work flowchart acting as an aide memoire for new staff.

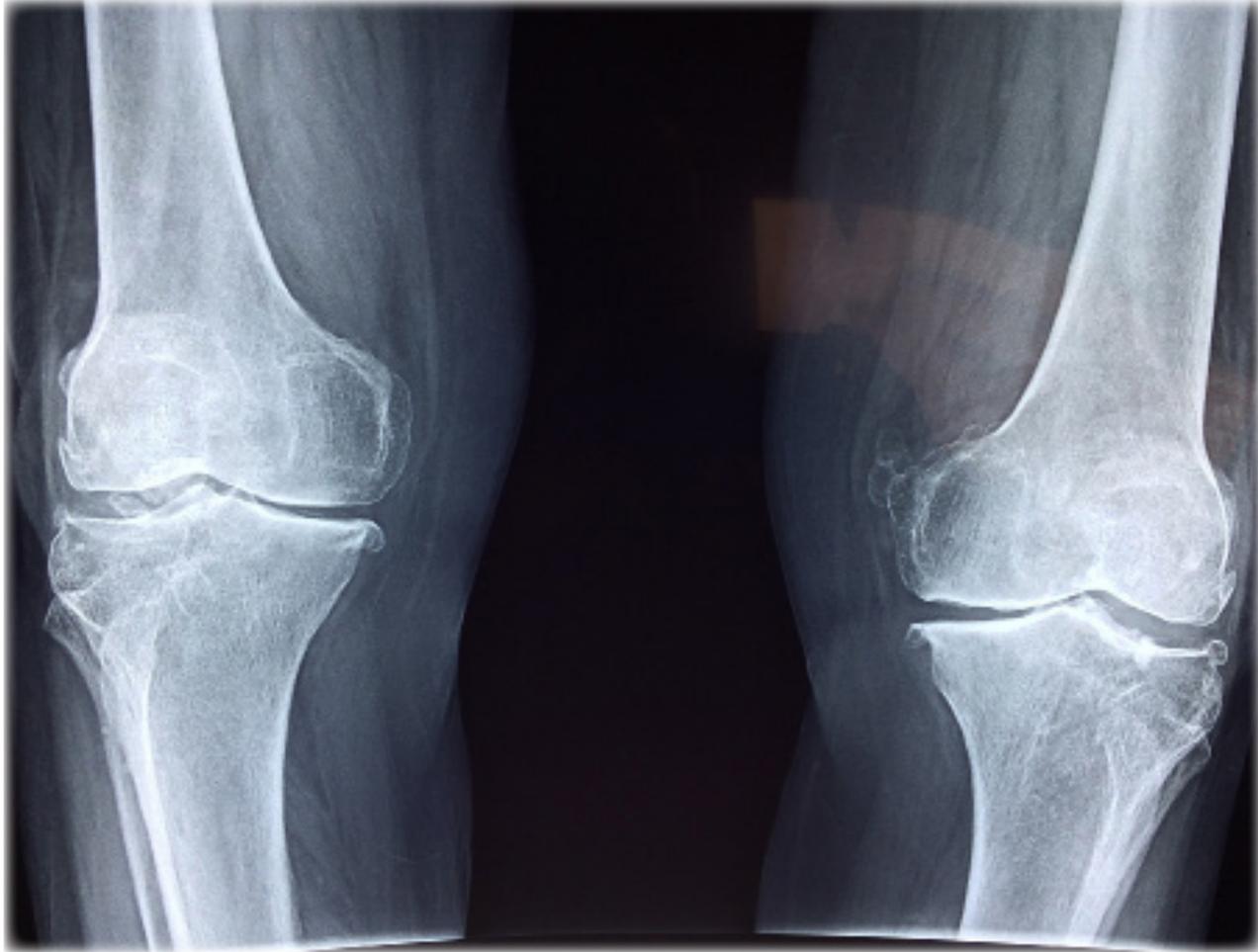
What worked well in this initiative?

We reviewed the research documentation processes in order to facilitate communication between the research personnel and theatre staff. It was essential to gain the buy-in of the theatre sister in order to formulate a plan that would integrate fully with routine theatre processes. We utilised a 'clinical audit week' to roll out the training to the maximum number of theatre staff possible, and introduced the university personnel who would be collecting the tissue samples.

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What were the challenges?

Ensuring communication processes were maintained particularly when the theatre sisters were not on duty, or when the department was exceptionally busy.



What improvement was required?

From time to time we need to reiterate the training due to changes in the theatre personnel, or when amendments to the project are introduced. The summary flowchart Standard Operating Procedure (SOP) and work instructions are readily available throughout the theatres.

Were any supporting resources required?

A number of theatre staff act as the key links to help facilitate the process, and the lead clinical trial associate for the project ensures that there are open communication lines and study updates.