

Wounds Research for Patient Benefit: A 5-Year Programme of Research

Cullum et al. (2016)
<https://doi.org/10.3310/pgfar04130>

For which topic were research priorities identified?

pressure ulcer interventions

In which location was the research priority setting conducted?

Europe - United Kingdom

Why was it conducted at all?

The role of people with chronic, complex wounds in wounds research is usually limited to 'being objects of study and beneficiaries of research results'. Complementary to our research into which outcomes matter to patients, carers and clinicians, and our analysis of the nature and quality of completed wounds research, we embarked on a study to determine the patient, carer and clinician research priorities in pressure ulcer prevention and treatment.

What was the objective?

to bring patients, carers and health professionals together to identify and prioritize the top 10 uncertainties, or 'unanswered questions', about the effects of pressure ulcer interventions that they agree are most important

What was the outcome?

a ranking list of 12 research questions

How long did the research prioritization take?

January 2012 - March 2013

Which methods were used to identify research priorities?

JLA method

How were the priorities for research identified exactly?

Step 1: setting up PSP: potential partner organizations and individuals with an interest in pressure ulcers were identified. Step 2: collecting research questions: paper and online survey, 960 treatment uncertainties submitted. Step 3: data processing: data cleaning, check against existing literature, final list of 220 unique questions. Step 4: creating shortlist: longlist of indicative uncertainties reduced to produce a workable shortlist for prioritization: questions ranked and grouped in order of number of times submitted, similar questions combined, inclusion criteria for shortlist by steering group: all questions that had been submitted more frequently than once by any category, all questions appearing on more than one list, all questions originating from mixed meetings, all questions submitted by carers. Step 5: interim ranking: via survey, participants were asked to rate research questions. Step 6: integration of data: examining similarities and differences in responses from separate stakeholder groups and conducting home and bedside interviews with care home residents. Step 7: final prioritization: workshop: before workshop participants were asked to choose and rank their top 10 preferred uncertainties from the 30 most frequently submitted and highly ranked questions, during workshop: rankings and discussions, focusing on creating a group rank order of 15 uncertainties from the shortlisted cards using a diamond nine approach, final ranking of top 12 research questions

Which stakeholders took part?

Patients, carers, clinicians.

How were stakeholders recruited?

The link to the online survey was widely distributed through a press release, e-mails, Twitter, Facebook and partner organizations. The ranking survey was launched with a widely distributed press release. The website was amended with links to the online questionnaire and a Twitter and Facebook campaign was launched. A brief explanatory YouTube video was created and linked to the online survey.

Were stakeholders actively involved or did they just participate?

Stakeholders not only participated but were also actively involved in the research prioritization process: They were part of a steering group. The members were involved in the process and participated in the final evaluation.