

Developing a Strategy for a Research Active Hospice: Process and Progress

Christina Radcliffe¹
Alistair Hewison²
Deborah Talbot¹

1. Birmingham St Mary's Hospice
2. University of Birmingham

Introduction

It is important that hospices are involved in research in order to provide evidence based treatment and care, to test and improve complex interventions, and to understand the changing needs of the community they serve (Payne et al 2013). A framework has been developed which identifies the levels of research activity hospices can engage in (Figure 1) and provides guidance on how this can be achieved (Payne and Turner 2012). This was used to design and deliver a research strategy at Birmingham St Mary's Hospice.

Background/Context

Birmingham St Mary's Hospice recognised that an active programme of scholarship and research was necessary if its values were to be realised. Together with clear drivers for research in palliative care both nationally and locally, research was identified as a key priority for the hospice.

Strategy

A strategy was developed to drive forward research as a central part of business and to achieve the aim of becoming a level 3 research active hospice. This encompassed short, medium and long term actions to provide a plan of activity focussed on achieving these outcomes. Key performance indicators were agreed and progress in the areas identified for action is reported to the board. The figure below summarises some of the goals:



Key benefits

- Research is now a standing agenda item for board meetings indicating it is central to hospice business
- Increased interest and engagement amongst staff
- Ability to offer patients and carers involvement in research projects
- Positive feedback from patients and carers concerning involvement in research
- Focal point for advice and guidance on postgraduate studies and other research

Key achievements



Conclusion

There has been considerable progress in the nine months since the strategy was endorsed by the Hospice Board. It has been used to guide activity and a number of the short and medium term objectives have already been achieved. Work to date has established a firm foundation for the hospice to achieve its aspiration to become a level three research hospice by 2018.

References
Payne S., Preston N., Turner M and Rolls L. (2013) *Research in palliative care: can hospices afford not to be involved?* Help the Hospices, London.
Payne S. and Turner M. (2012) *Methods of building and improving research capacity in hospices.* *European Journal of Palliative Care* 19 (1), 34-37.