

*Gwneud penderfyniadau ym maes ymarfer
nyrsio anabledd dysgu:
Arolwg Holiadur Nyrsio Cymru Gyfan.*

**Decision making in learning disability nursing
practice: Results from an All Wales Nursing
Survey.**

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- Background
- Aim of All Wales Survey
- Process
- Data collection
- Results
- Implications for Practice

Aim of PhD Study

To give a rich and detailed account of how learning disability nurses make decisions in practice from the perspective of nurses, service users and carers.

How do learning disability nurses make decisions?



As Barr (2007) states “the right to be involved in decisions that affect ones life are major underpinning values within learning disability nursing services” (p108).

Review of the literature

- Two reviews of intellectual disability nursing research
 - Northway et al, 2006
 - Griffiths et al, 2007
- Use of research in intellectual disability nursing
 - Parahoo et al, 2000

Exploring decision making in intellectual disability nursing practice: a qualitative study

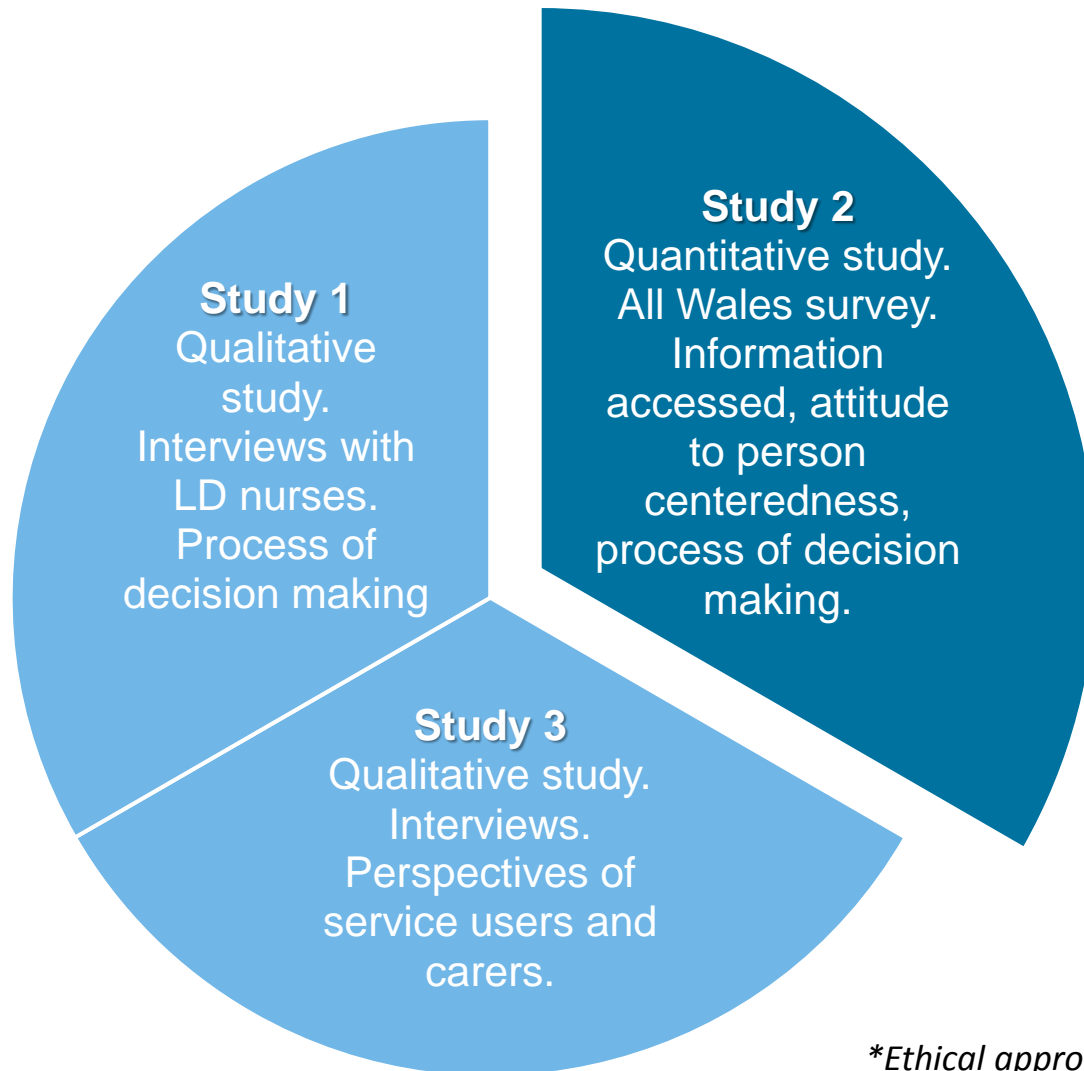
(Williams et al. 2010)

...gut instinct, you're length of time knowing the person, what you know about the persons condition and all the other things, you know, it all plays a major part (in decision making)

...there wasn't much decision making on my part really, other than to give her the opportunity to be in control of the situation.



Three studies in three years



**Ethical approval gained for all studies*

Measure 1: Nurses use of information to improve health outcomes

- Gathers data related to the sources of information used when making decisions.
- 21 items, 2 domains: research based information ($n=9$ items), non-research based information ($n=12$ items).
- Response scored on 3 point likert scale: 1=Never, 2=Sometimes, 3=Every time.
- Based on the findings of the authors first study (Williams et al. 2010).

Measure 2: Attitude towards person centred planning (PCP) scale

- Gathers data on respondents' attitude towards person centeredness.
- 18 items, response scored on 5 point likert scale: 1=Strongly disagree; 2=Disagree; 3=Not sure; 4=Agree; 5=Strongly agree.
- Adapted from Person Centred Planning in Kensington & Chelsea - The Views of Facilitators & Others Involved in Person Centred Planning (Robertson, Emerson et al. 2005).

Measure 3: Nursing decision making instrument

4 domains: collecting information, handling information, planning, implementing & evaluating.

56 items, ($n=28$ items relate to analytic decision making; $n=28$ items relate to intuitive decision making.

Response scored on a 5 point likert scale: 1=Never or almost never; 2=Rarely; 3=Neither rarely nor often; 4=Often; 5=Almost always or always.

Adapted from Lauri & Salanterä (2002) .

Process of translation

Decision making in learning disability nursing practice

All Wales Nursing Questionnaire

This questionnaire is designed to gather information and opinions on decision making and person centred planning and the evidence used within learning disability nursing practice. It is entirely anonymous.

There are no right or wrong answers. I am interested in your opinions and your own experience of using evidence and making decisions to improve the health outcomes for individuals with a learning disability.

I would be grateful if you would take the time to answer the following questions and return the questionnaire in the pre-paid envelope provided. If you wish to comment on any questions, please use the space provided at the end of the questionnaire.

Thank you for your support in completing this questionnaire. If you have any questions please contact: Ruth Wyn Williams, PhD Student

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Bangor University

Gwneud penderfyniadau ym maes ymarfer nyrso anabledd dysgu

Holiadur Nyrso Cymru Gyfan

Cynllunwyd yr holiadur hwn i gasglu gwybodaeth a safbwyntiau ynglŷn â gwneud penderfyniadau a chynllunio person ganolog a'r dystiolaeth a ddefnyddir ym maes ymarfer nyrso anabledd dysgu. Mae'n hollol ddienn.

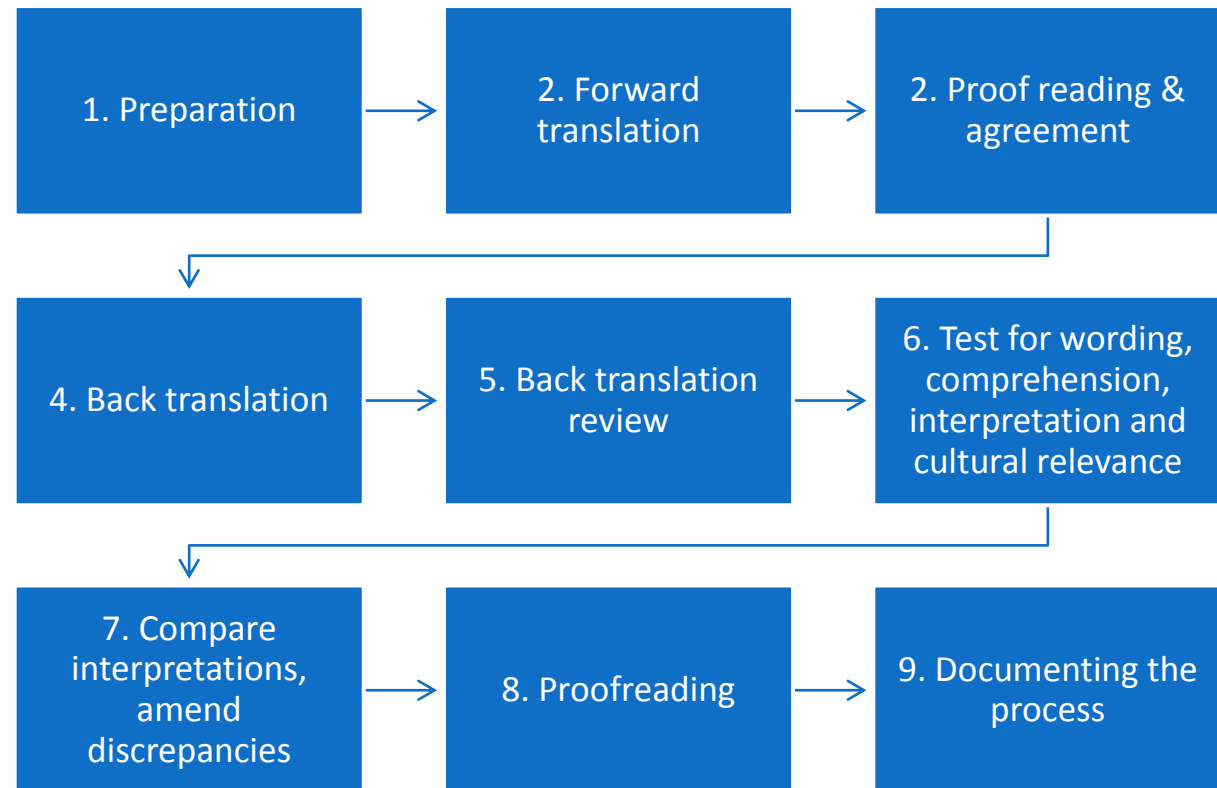
Nid oes atebion cywir nac anghywir; ryfwn eisiau cyflwynu eich safbwyntiau chi a'ch gwneud am eich profiadau o ddefnyddio dystiolaeth a gwneud penderfyniadau i wella canlyniadau iechyd pobl ag anabledd dysgu.

Byddwn yn ddaliochgar pe baech yn cymryd amser i ateb y cwestiynau canlynol ac yn dychwelyd yr holiadur yn yr amlen rhaddest a ddarparwyd. Os hoffech wneud sylw ar unrhyw un o'r cwestiynau, defnyddiwch y lle gwag a ddarparwyd ar ddiwedd yr holiadur.

Diolch am eich cefnogaeth wrth gwblhau'r holiadur. Os oes genych gwestiynau am yr holiadur cyflwynwch i:

Ruth Wyn Williams, Myfyrwr PhD,
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Adapted from *Translation and Cultural Adaptation - Principles of Good Practice* (Wild et al 2005).

Data Collection



Powys Local
Health Board
(n=13)

Betsi Cadwaladr University
Local Health Board (n=151)

Aneurin Bevan Health
Board (n=73)

Hywel Dda
Health
Board
(n=45)

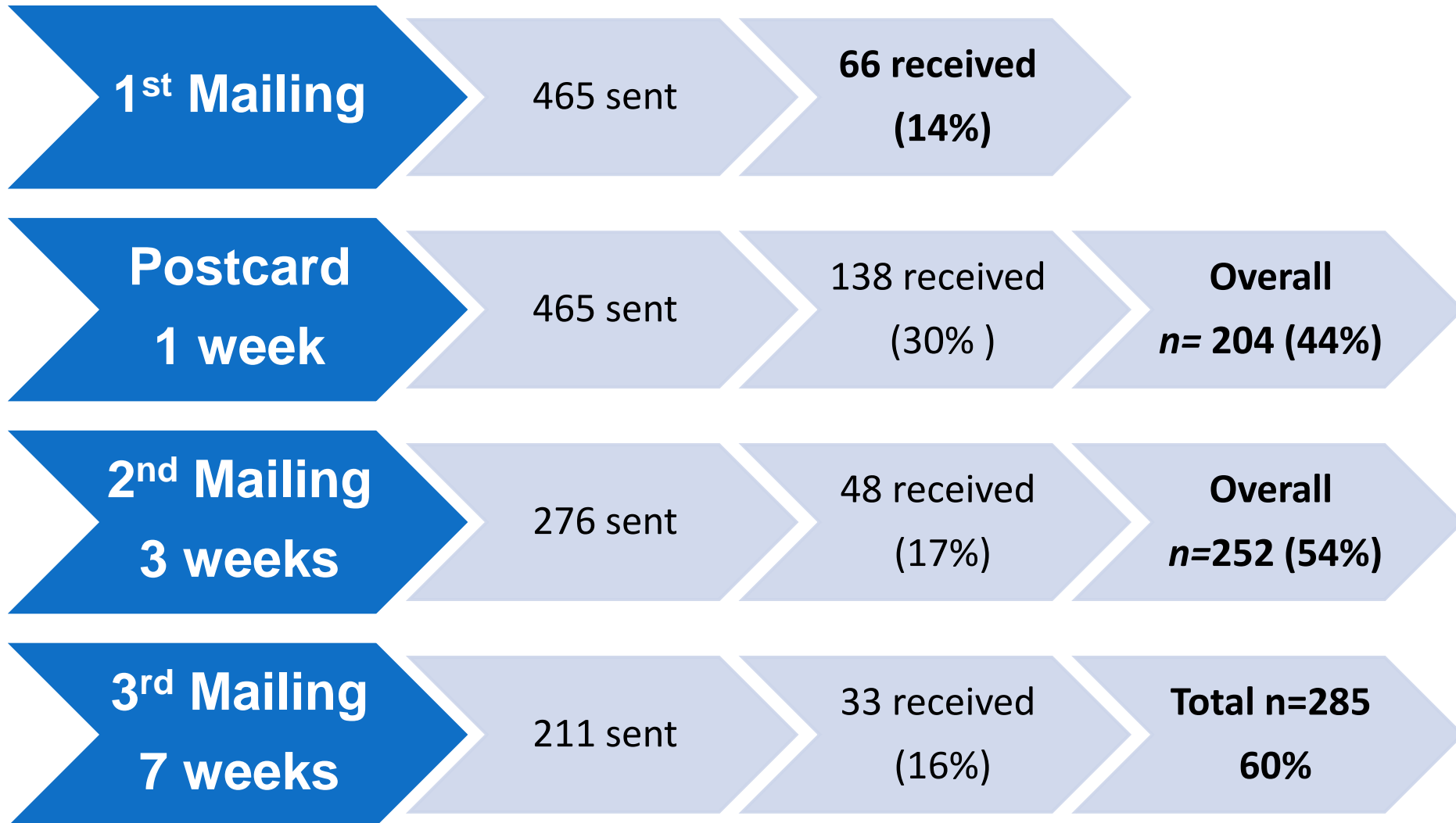
Abertawe Bro Morgannwg University
Health Board (n=183)

**Total population of
NHS LD nurses n=465**

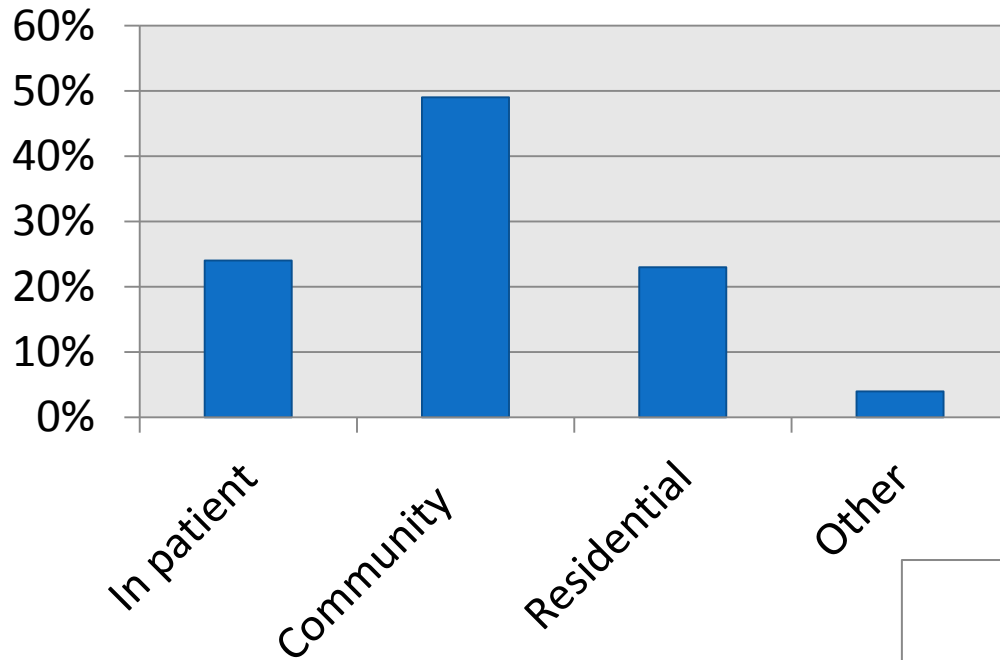
**Questionnaires
returned n=280**

60% response rate

Response rate to sending out questionnaires using Dillman's (1978) Total Design Method

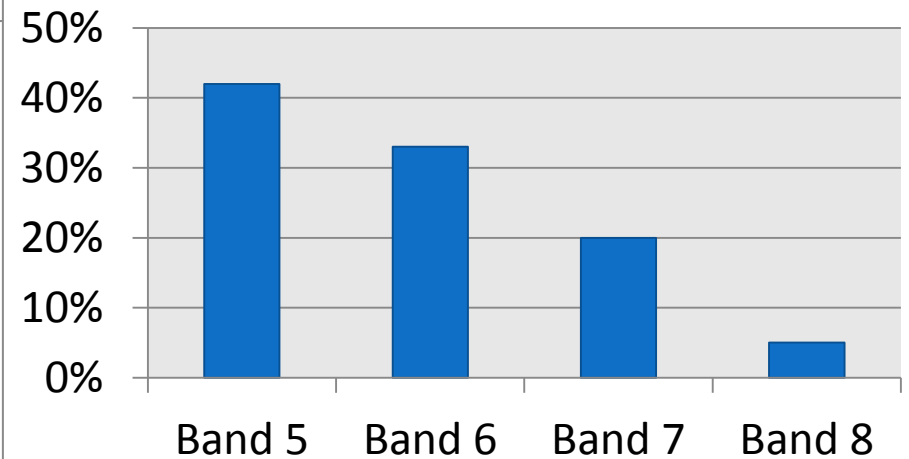


Location of work

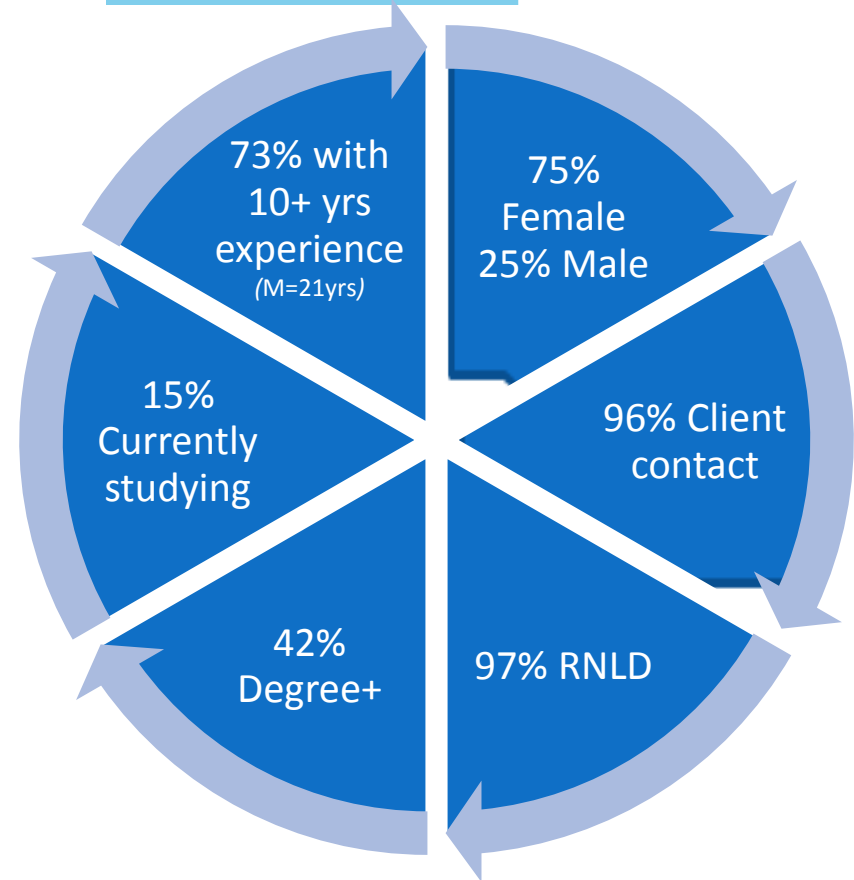
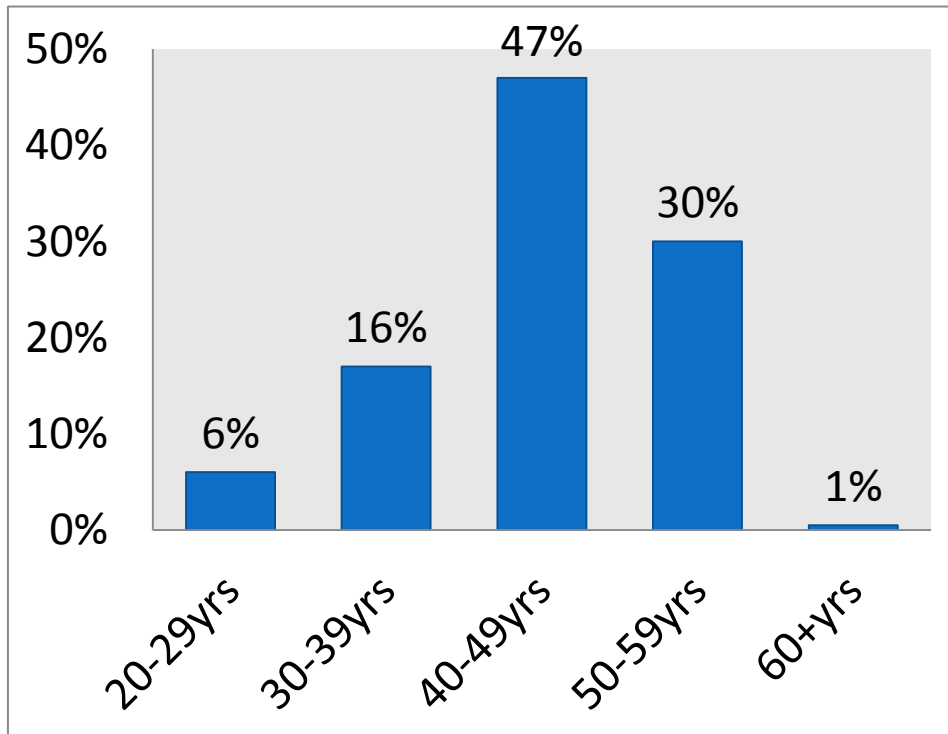


Who Responded?

Agenda for change



Who Responded?



1.
My experience as a nurse

2.
Clients' nursing documents

3.
Observing clients

4.
Talking with clients

8.
Doctors/psychiatrists/
GPs

7.
Experienced nursing
colleague

6.
Reflection on practice

5.
Talking with the
family

9.
Allied health
professionals

10.
Clinical supervision

**Sources of
information
used to make
decisions**

Information used to make decisions

Question	Every time	Sometimes	Never
My experience as a nurse	85%	15%	
Talk to the client	67%	32.5%	0.5%
Experienced nursing colleagues	62%	37%	
Research publications	8%	84%	8%
Internet	7%	86%	7%

Attitude towards person centeredness

Question	Strongly Agree	Agree	Not sure	Disagree	Strongly Disagree
I understand the meaning of being person centred	58%	42%			
Everyone has the right to choice in their lives	64%	30%	5%	0.5%	0.5%
Everyone can communicate	54%	38%	4%	3%	1%
It is important to focus on individuals	70%	29%	1%		
Being person centred is just another fad	0.5%	2%	11%	47%	39%

Gender

Females used more non-research based sources of information than males. This difference was significant.

Females used more research based sources of information than males. This difference was not significant.

Location of Work

In-patient/residential nurses used more non-research based sources of information than community based nurses. This difference was significant.

Community based nurses scored lower on the intuitive items than in-patient/residential nurses. This difference was significant.

Person centeredness

No significant relationship between the sources of information used, model of decision making and person centeredness.

Client Contact

Nurses with no client contact used more research based sources of information than nurses with client contact. This difference was not significant.

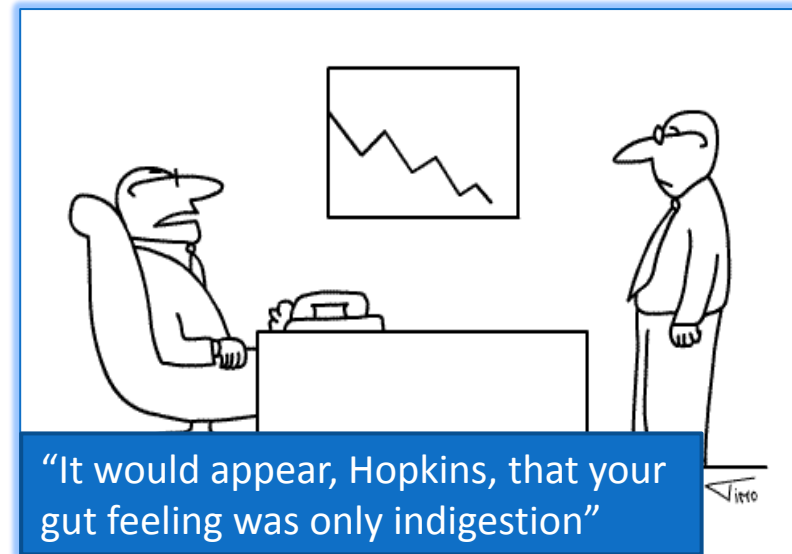
Nurses with no client contact used more sources of information to make decisions than nurses with client contact. This difference was significant.

Academic Qualification

Non-graduate nurses used more non-research based sources of information than graduate nurses. This difference was not significant.

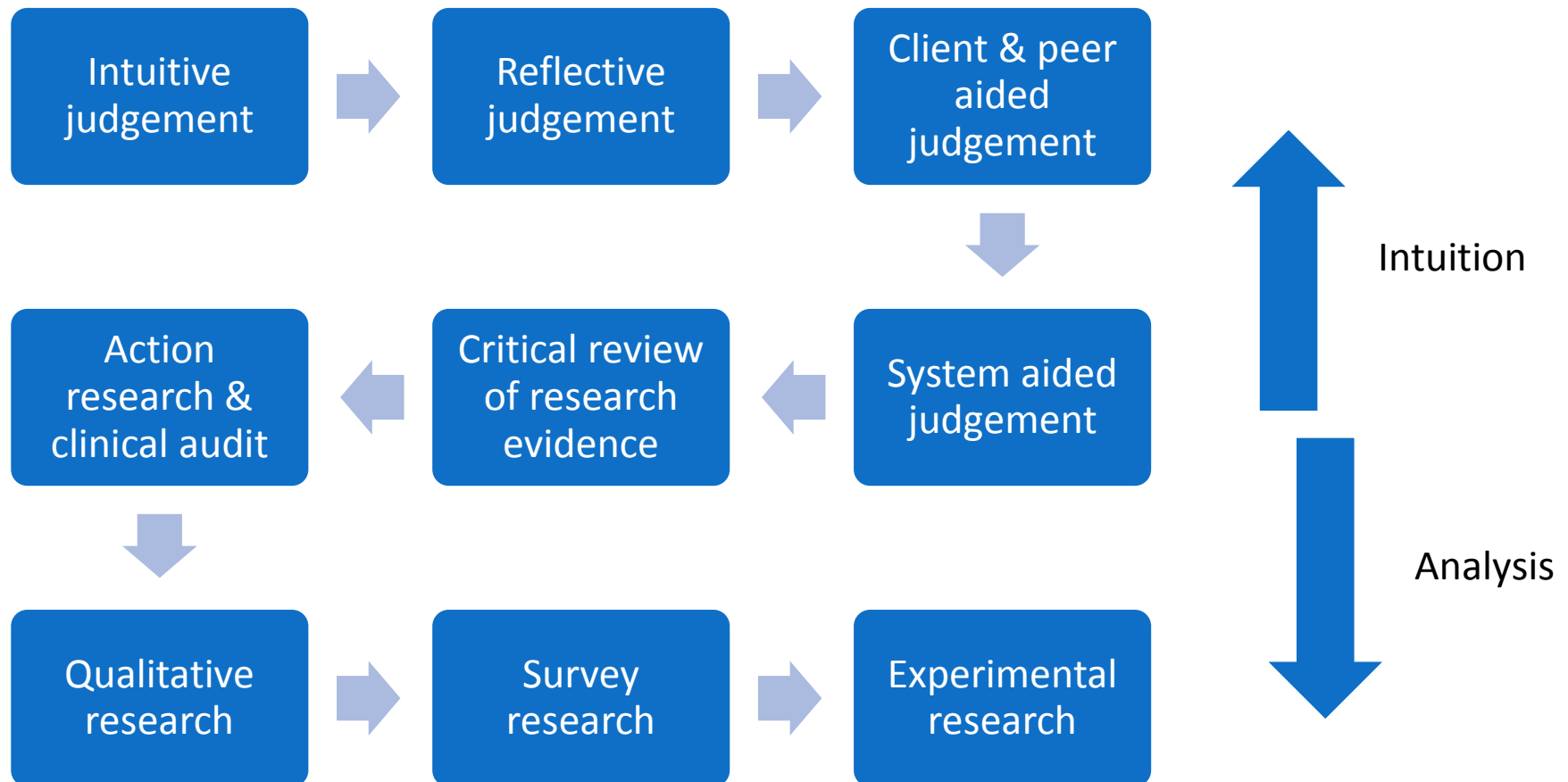
Graduate nurses scored higher on the analytic items than non graduate nurses. This difference was not significant.

How do learning disability nurses make decisions?



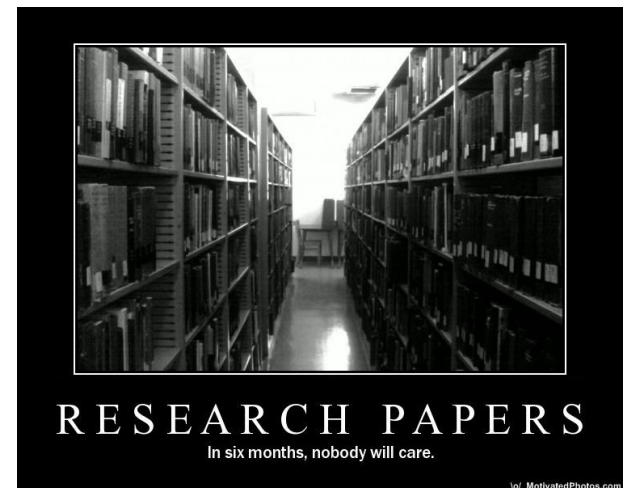
Standing's revised cognitive continuum of clinical judgement and decision-making in nursing – nine modes of practice.

(Standing 2008)



Implications for practice

- Workforce planning - many nurses will retire.
- Female male ratio.
- Continuing professional development.
- Reflective practice.
- Research - relevant, interesting & accessible
- Are decisions person centred?
- Why are in-patient/residential nurses more intuitive in their decision making?
- Do community nurses have better access to researched based evidence?



“In a contact sport such as ice hockey or rugby, the interaction between a number of different elements determines the nature of the game, the spirit in which it is played, and the ultimate outcome – win or lose. The same could be said of getting evidence into practice: it is the interaction of various ingredients that determines the success of the outcome” (Rycroft-Malone 2005, p. 1)



Thank you



Diolch

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