

# Engaging nursing homes (NH) in the PACE study: comparing recruitment in observational and intervention research designs.

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## Background

The majority of nursing homes in England are private businesses, located outside of the NHS. At present there is no minimum dataset for nursing homes, which makes it difficult to provide representative data for international comparison. Collecting data within nursing homes is challenging, and there is little guidance on engaging nursing homes in epidemiological and intervention studies. The ENRICH (Enabling Research in Care Homes) network aims to support research within care homes across England.

## Aims

The PACE study aims to describe and compare the effectiveness of health care systems within nursing homes in six EU countries in terms of patient and family outcomes (quality of dying, quality of life and quality of palliative care), cost effectiveness and staff knowledge, practices and attitudes.

This poster will present the methodological challenges of recruitment to two streams of the PACE research programme, PACE Study 1 and PACE Study 2, in England.

## Study 1 – Cross Sectional Study

**Method:** A retrospective cross sectional study across England to examine all resident deaths over three months in 50 nursing homes. Nursing homes were randomly sampled based on region, type (residential/nursing), size ( $\geq 30$ / $< 30$  beds) and funding (private/not for profit). Nursing homes were contacted initially by post and followed up by phone.

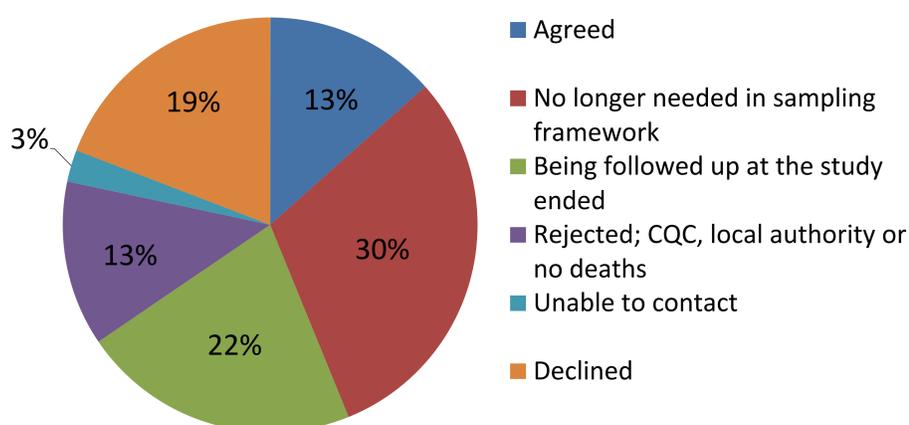
**Results:** 49 nursing homes were recruited, 74% fulfilled the requirements of the random sample. Only 30 of the 49 nursing homes recruited were approached through random sampling, compared to 19 initially approached through the ENRICH network. Death rates were lower than expected due to seasonal variation; 169 deceased residents were included to the study.

## Study 2 – Randomised Controlled Trial

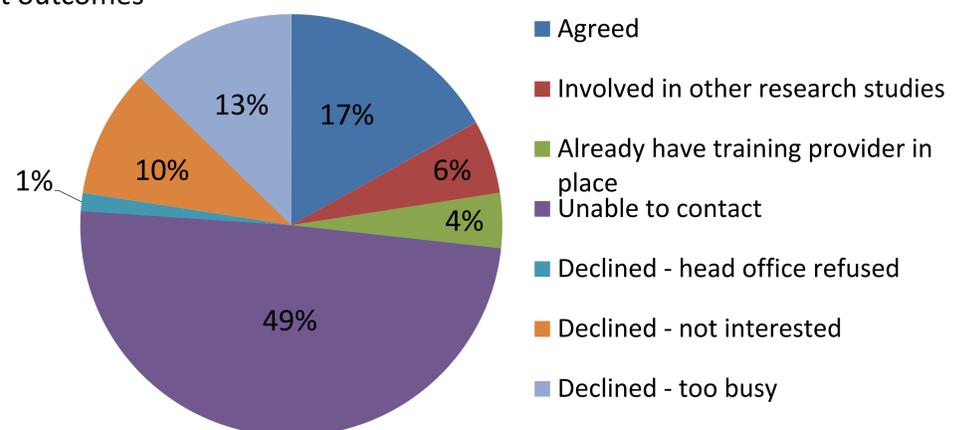
**Method:** A cluster RCT of 12 nursing homes in the North West of England. Nursing homes in the North West were randomly sampled and approached if they had over 30 beds, and had not already implemented a palliative care programme. Nursing homes were contacted by post and telephone.

**Results:** 12 nursing homes were recruited, however this took the research team three months longer than anticipated. Nursing home managers often expressed an interest in undertaking palliative care training, however were not able to devote staff time to a research study. Ensuring the support of the nursing homes head office was important, as was ensuring implementing the study was compatible with other research being undertaken in the nursing home.

Recruitment outcomes



Study 1



Study 2

## Conclusions

In both studies nursing home managers said that they did not have the time or resources to devote to research. There is a high staff turnover which made establishing points of contact difficult; nursing home managers were often either not contactable or too busy to discuss the study.

- The Care Quality Commission dataset is a useful tool in preparing sampling framework, however the data may not be fully accurate or up to date.
- Using national/regional nursing home networks, such as ENRICH, can aid recruitment and relationship development.
- Ensuring the support of the nursing homes head office can facilitate recruitment.
- It is important to provide accurate expectations of the time and resource commitment required from the nursing home.

## Contact details

This research project has received funding from the European Commission Seventh Framework Programme (FP7/2007-2013) under grant agreement number 603111-2. Contact Elley Sowerby, [e.sowerby@lancaster.ac.uk](mailto:e.sowerby@lancaster.ac.uk)  
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