

KEELE CAT UPDATE

Critically Appraised Topics

2021

WELCOME

- Experiences of using CATS - University Hospitals Birmingham
- PPIE involvement in CAT groups
- BeeFree
- New traffic light design



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OUR EXPERIENCE OF USING CATS

At University Hospitals Birmingham

- By Liz Lees Deutsch

Following excellent training in the Keele University CAT methodology, I am delighted to share news about three groups established at Heartlands and Queen Elizabeth Hospitals.

The clinicians (Nurses, Advanced Clinical Practitioners, Pharmacist, Consultant, Educators and Physiotherapists) are working on answering the following clinical questions:

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- 1. Whether or not an enhanced level of nurse-led care would improve patient outcomes for those admitted to an acute medicine setting?***
 - 2. How can interruptions best be reduced for nurses conducting medication rounds to improve patient safety in acute medicine settings?***
 - 3. What are the triggers for patients experiencing delirium, following extubation, in the critical care setting?***
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Ongoing support for each member will continue until awareness and confidence in the process is achieved. Our CAT groups have enabled a truly collaborative approach, where the motivation of the group members supports the outcome. There is also peer learning and dissemination by word of mouth seems to happen very fast indeed! The aim is to handover mature groups to enable new ones to be established.



So far, each clinical question investigated takes 4-6 months, to produce the bottom line report of evidence. In these times of Covid-19, we have used digital technology to video link with the Librarian and CAT group members, minimizing the need for face-to-face contacts. A successful group relies upon clinicians who are prepared to actively participate in the selection / appraisal of relevant literature and a desire to find the clinical answer.

PARTICIPANT COMMENTS

'...Not having a research background I liked the structure of the CASP tool. It guided me through the process in a structured way'.

- Advanced Clinical Practitioner, acute medicine.

'This was my first CAT group and it was an excellent way of bringing like-minded people together to appraise evidence that will contribute to improved clinical outcomes and patient safety'

- Advanced Clinical Practitioner, acute medicine.

'I was worried that I wouldn't have experience to do this, but we have all done our bit, with support of the facilitator.....'

- Nurse, acute medicine.

We would like to thank Kay Stevenson and Tina Hadley-Barrows from Keele University, Impact Accelerator Unit for her excellent training enabling us to facilitate the growth of these groups at UHB. With thanks to acute medicine member: Anita Joshi, Patricia Thorpe, Sarah Newton, Anna Westley and Aaron Duggan

PATIENT AND PUBLIC INVOLVEMENT

- Interview with Mandy Parks and Patricia Callaghan, members of the LINK group (Lay Involvement in Knowledge Mobilisation) at Keele Impact Accelerator Unit



In 2019 Mandy and Patricia were asked as members of the LINK group to join the Allied Health Professionals CAT team. Kay Stevenson, Consultant Physiotherapist, Honorary Professor and CAT Lead and Laura Campbell, Impact Accelerator Unit Knowledge Broker and LINK Lead, joined the conversation.

MANDY: When I first joined the AHP CAT group at Keele, I was enthusiastic and wanted to learn, but to be honest **I didn't know what I was getting into**. At my first meeting, I didn't feel like I fitted in or had anything to contribute. I really didn't feel confident and when I spoke, I went redder and redder!! It's taken me quite a few meetings to see what we can give and how we can help. I think that now meetings are virtual, we can give a lot more.

Over time I have become more familiar with the structure of the meetings and as I attended more I felt I understood more. Sometimes it's a topic that personally interests you, but at the end of the day we're **really passionate** about the CAT group via the LINK, so it's all interesting!



PAT: I think I had more of an easy start than Mandy because my baptism of fire was 10 years ago when I joined the Keele ethics committee! LINK group was then my first introduction into Keele Primary Care. I had got a little bit of experience but it doesn't matter how silly or insignificant you think your question is, it matters and you need a lot of courage from a lay perspective to say "I don't understand". There are a lot of medical terms in the CAT group and this is the most challenging thing for me! At first I felt invisible as the group had been working together for years, and I think it's only recently that they have understood PPIE. Maybe because we are now group members. It's about **openness** and **clarity**.

KAY: When we first started the CAT groups in 2003, we didn't have the level of PPIE involvement that we do now, and so we didn't automatically include patients in all our work. Now we are used to working alongside patient as equal partners.

We are absolutely delighted that Mandy and Pat join us on the CAT group. They bring their **expertise**, their knowledge of their **networks** and they really try and shape how we get patients involved.

For PPIE, we need to think about engagement, payment and as a group how the messages from the CAT questions can be shared with patients in a way that is **understandable**.

At the minute, the CATs and the website are designed for clinicians – we need to give some more thought about that. I know that having Pat and Mandy involved will really stimulate our thinking though, and help us to take the next steps. We are all committed in making them feel as comfortable as possible and to be **equal partners** round the table.





LAURA: Having been to a few CAT meetings myself as a non-clinician, I felt apprehensive when Kay first asked me to ask LINK members if they would like to join.

However I knew that Mandy and Pat would **throw themselves into the deep end** and we would all learn together. They have been the perfect addition to the group, and it works because our knowledge and experiences are so different. Mandy and Pat bring something new and different to the CAT group and make us think!

Creating equal partnerships with PPIE members in implementation, knowledge mobilisation and research is an area of focus for me as a Knowledge Broker and in the future I will continue to support and try to improve the **communication** between the CAT and LINK groups. At the end of the day we all have the same goals - **making research understandable and accessible for both clinicians and patients.**

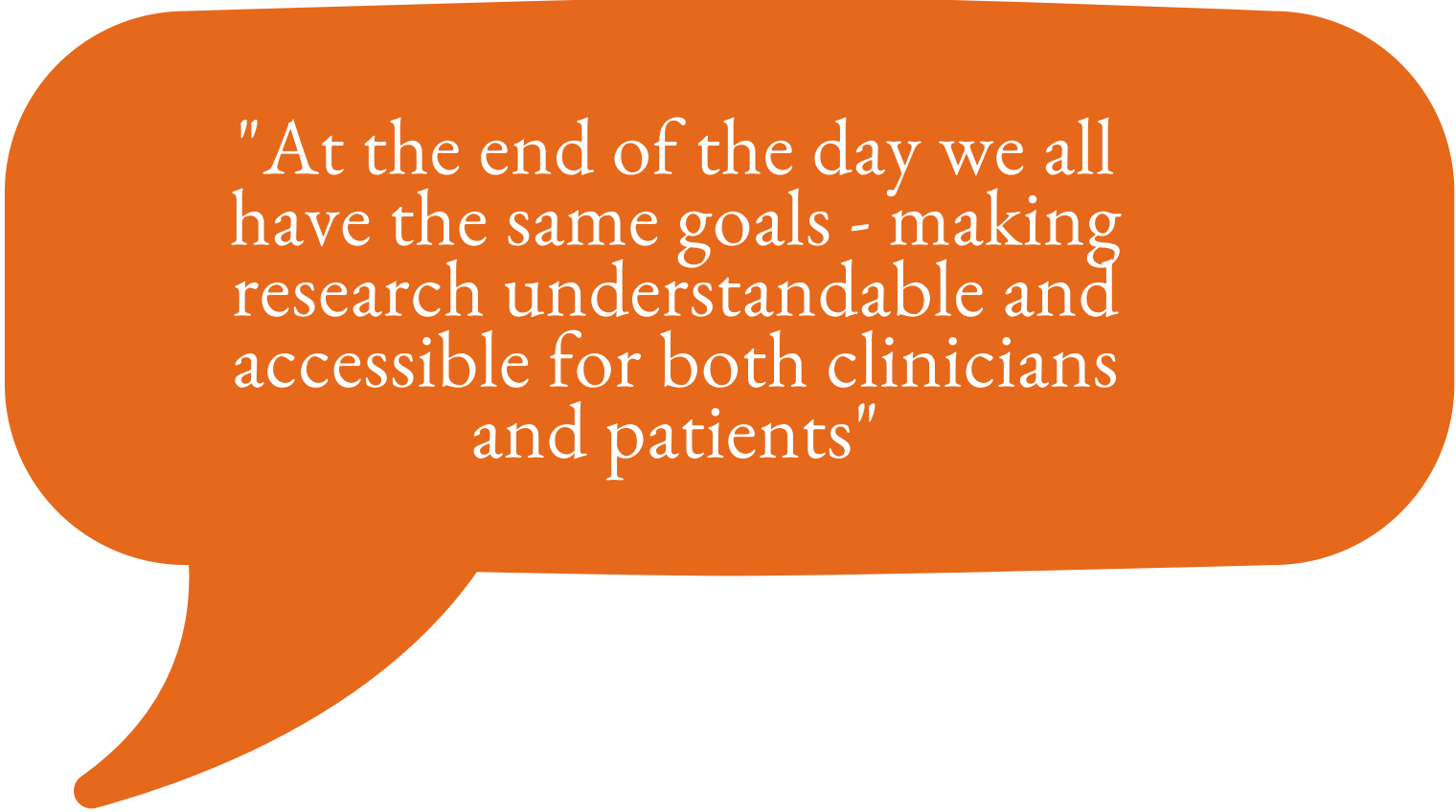
MANDY: Sometimes I have more knowledge than I realise! I used to be a paediatric nurse and that experience has really helped. Perhaps going forward we can take Clinical Bottom Lines back to the LINK for review – a **Patient Bottom Line** maybe! I would like to know what the bottom line is and read it from a PPIE point of view.

"Feel comfortable enough
not to feel comfortable"

PAT: I think we have learned as we have gone along. Now seems the time to **think about questions from a PPIE point of view**. I would like to see us putting questions forward to the members of the CAT groups, and for members of the CAT groups to ask PPIE members how their topics feel from a patient point of view – a two way flow of information.

I was asked what I thought of a new project and how it was written and I pointed out that I didn't understand it. I was told "if you don't understand it, then neither does anyone else" so that's good to know! I think **a short lay summary for each topic** would be appropriate and Mandy and I could look over it.

We need to think about patient involvement across all the CAT groups. We can only learn and develop!



"At the end of the day we all have the same goals - making research understandable and accessible for both clinicians and patients"

NEW RESOURCES

BEE FREE TO FEEL BETTER

Introducing Beefree, an information hive to support people in pain with their mental health.....

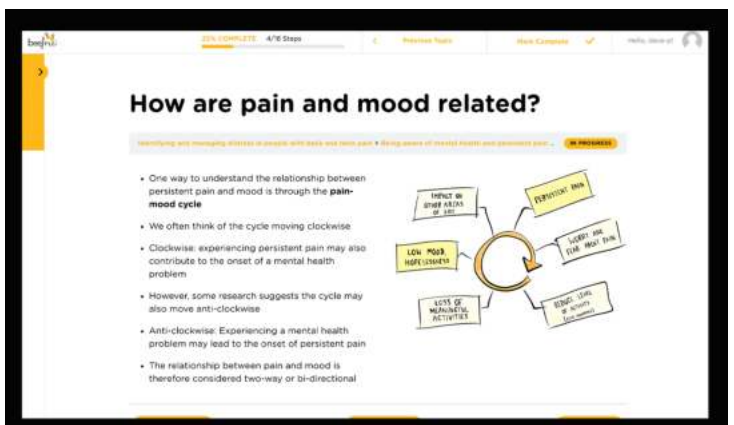
Animation



Website



Repository



Free training for everyone



www.beefree.org.uk



@BeeFreeHealth

NEW RESOURCES

NEW PAPERS

Stevenson K Sarigiovannis P Finney AG Cottrell E Lewis RC Edwards JJ Hadley Barrows T Thomson K Reay H Dziedzic KS Development, spread and impact of primary care and musculoskeletal communities of practice to assist rapid translation of evidence into practice *Musculoskeletal Care* 2021;1-6 <http://doi.org/10.1002/msc.1552>

Laura Swaithe, Zoe Paskins, Helen Duffy, Nicola Evans, Christian Mallen, Krysia Dziedzic, Andrew Finney
Experience of implementing and delivering group consultations in UK general practice: a qualitative study
British Journal of General Practice 2021; 71 (707): e413-e422. DOI: 10.3399/BJGP.2020.0856

NEW GRADING SYSTEM

You can now use these 'happy' 'not fussed' and 'sad' cat faces as a quick reference traffic light guide to the quality of evidence of your CATs



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