



Approaching upset patients about participating in research

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Recruiting and engaging patients in research, is a skilled activity because patients have worries and fears about their illnesses. Researchers have set questions, but starting the conversation with patients and responding to worries, requires specific training.

The North West London Clinical Research Network (NWL CRN) heard that the SAGE & THYME conversational structure can help when talking to ill people who are distressed or worried. They arranged for University Hospital of South Manchester NHS Foundation Trust (UHSM) to run two SAGE & THYME foundation level workshops for around 60 members of staff.



'SAGE & THYME' is a mnemonic for health workers. It was developed to distil the research evidence on effective communication skills and provide a memorable structure for staff to use the evidence in their practice. The model is taught in a 3 hour workshop for 3 facilitators for up to 30 participants. The workshop contains a mixture of small group work, a presentation and rehearsals demonstrating conversations using the SAGE & THYME model, based on scenarios suggested by the participants.

At the two workshops participants included: clinical trial coordinators, clinical studies officers, research coordinators, research nurses/midwives and research assistants. 97% (n=56/58) of the post-workshop questionnaires were returned.

70% of participants rated their willingness to talk to people who are emotionally troubled between 8 and 10 (out of 10) after attending the workshop. **When asked how likely the training would be to influence their practice, 73% gave a rating of between 8 and 10 (out of 10) and 84% said would recommend the workshop to others.**

One participant said: ***“Very good framework for effective conversations with patients, and how to help and empower them even without a final solution.”***

Participants reported that as a result of the training they would:

- *“Enter into discussion with someone who is distressed, rather avoid it for fear of being out of my depth. Also knowing how to exit the discussion would help me feel that I wouldn't be 'stuck' when I'm busy/needed elsewhere.”*
- *“Be more aware of what I say and how to phrase my questions.”*
- *“Feel comfortable engaging with a patient's emotional problems whilst feeling confident that I can still complete the tasks required by my job role.”*

Dr Gill Hood, Workforce Development and Patient Public Initiatives for the NWL CRN said: ***“We had had numerous requests to provide training on informed consent and communicating with distressed patients. The requests came from all different types of clinical research staff and this course met the needs for all of them. I have confidence in recommending it to other research networks.”***

Mike Connolly, head trainer of SAGE & THYME at UHSM said: ***“At our own Trust, we have had a number of researchers attend the workshop. One clinical researcher working in breast cancer prevention who attended the workshop commented that ‘it's really important for research staff to attend these kinds of things ... I can see how in my team it's applicable’”.***

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