

Exploring the factors that predict long-term change in practice when multidisciplinary staff teams in inpatient mental health rehabilitation units undertake training aimed at increasing their engagement with recovery-based practice: a rapid realist review protocol

GEE, Melanie, BHANBHRO, Sadiq <<http://orcid.org/0000-0003-0771-8130>>, HELEN, Brian, COOK, Sarah and KILLASPY, Helen

Available from Sheffield Hallam University Research Archive (SHURA) at:

<https://shura.shu.ac.uk/35610/>

This document is the Published Version [VoR]

Citation:

GEE, Melanie, BHANBHRO, Sadiq, HELEN, Brian, COOK, Sarah and KILLASPY, Helen (2015). Exploring the factors that predict long-term change in practice when multidisciplinary staff teams in inpatient mental health rehabilitation units undertake training aimed at increasing their engagement with recovery-based practice: a rapid realist review protocol. PROSPERO. [Other]

Copyright and re-use policy

See <http://shura.shu.ac.uk/information.html>

Exploring the factors that predict long-term change in practice when multidisciplinary staff teams in inpatient mental health rehabilitation units undertake training aimed at increasing their engagement with recovery-based practice: a rapid realist review protocol

Melanie Gee, Sadiq Bhanbhro, Helen Brian, Sarah Cook, Helen Killaspy

Citation

Melanie Gee, Sadiq Bhanbhro, Helen Brian, Sarah Cook, Helen Killaspy. Exploring the factors that predict long-term change in practice when multidisciplinary staff teams in inpatient mental health rehabilitation units undertake training aimed at increasing their engagement with recovery-based practice: a rapid realist review protocol. PROSPERO 2024 Available from <https://www.crd.york.ac.uk/PROSPERO/view/CRD42015016138>

REVIEW TITLE AND BASIC DETAILS

Review title

Exploring the factors that predict long-term change in practice when multidisciplinary staff teams in inpatient mental health rehabilitation units undertake training aimed at increasing their engagement with recovery-based practice: a rapid realist review protocol

Review objectives

When multidisciplinary teams working in a mental health inpatient rehabilitative setting participate in a work-based training/change programme aimed at increasing their engagement with recovery-oriented practice, what factors (configurations of context and mechanism) enable, or inhibit, lasting change in practice?

Keywords

activities, inpatient, mental health rehabilitation, multidisciplinary team, rapid realist review, recovery, service users, staff training

SEARCHING AND SCREENING

Study design

Items of literature will be included based on relevance to theory development and testing/refinement. Therefore for theory development (phase I), there will be no limitations on study design: editorials and opinion pieces, books and reviews will be considered as well as quantitative, qualitative, and mixed-methods studies. Primary research (any study design) will be used as case studies for theory testing and refinement (phase II).

ELIGIBILITY CRITERIA

Condition or domain being studied

Staff training/change programmes/interventions.

Population

Included: multidisciplinary staff group in an inpatient mental health unit.

Excluded: single staff group

Intervention(s) or exposure(s)

A training programme, or a change programme that includes an element of staff training, aimed at increasing the staff's engagement with recovery-based practice.

Staff training:

Included: training for existing staff. This can be on-site training, in-situ coaching, or off-site training

Excluded: training for new staff only (i.e. induction), or pre-service training, or training for service users, or no training

Training for increased recovery-based practice:

Included: training for service user engagement in activities, arts therapies, healthy living, self-care, living skills, work, volunteering, hope, and training in therapeutic optimism, and psychosocial therapies and interventions (including behavioural therapy) where these are consistent with recovery principles, i.e. valuing service users as partners in a collaborative relationship with staff to identify and work towards personalised goals, and encompassing the values of hope, agency, opportunity and inclusion (Joint Commissioning Panel for Mental Health, 2013).

Excluded: training for purposes other than above (e.g. medication checking)

Joint Commissioning Panel for Mental Health 2013, Guidance for commissioners of rehabilitation services for people with complex mental health needs.

Comparator(s) or control(s)

Comparisons will be made between different, comparable, training/change programmes in order to gain some insight into how different contexts may trigger different mechanisms to influence the outcomes obtained.

Context

Inpatient mental health rehabilitation units, defined as units with 'hospital beds' that provide 24-hour nursing care (Joint Commissioning Panel for Mental Health 2013).

Included: low secure units, high dependency units, community units, and complex care units

Excluded: acute mental health units, day care units/day centres, and community rehabilitation services.

Joint Commissioning Panel for Mental Health 2013, Guidance for commissioners of rehabilitation services for people with complex mental health needs.

OUTCOMES TO BE ANALYSED

Main outcomes

The review aims to provide a programme theory that explains the factors (configurations of contexts and mechanisms) which enable, or inhibit, long-term change in practice when multidisciplinary teams working in a mental health inpatient rehabilitative setting participate in a work-based training/change programme aimed at increasing their engagement with recovery-oriented practice. 'Long-term change in practice' refers to an observable change - of staff attitudes, behaviours, and/or working practices - that continues beyond the immediate aftermath of the training programme. Recognising that many change programmes are long-term of themselves, for the purpose of the review an initial working definition of long-term is at least 6 months after the end of the programme if it is finite, or 12 months after its commencement if it is ongoing. (This definition may need to be modified if there is a lack of case study evidence meeting these criteria.)

Additional outcomes

Not applicable.

DATA COLLECTION PROCESS

Risk of bias (quality) assessment

As is appropriate for realist reviews, studies/papers will not be excluded on the basis of 'quality' checklists, as 'studies that are technically deficient in some overall sense may, if inspected closely, still provide trustworthy nugget of information to contribute to the overall synthesis' (Pawson 2006). Rather, in tandem with the data extraction for theory development and testing, there will be an appraisal of the contribution of any section of the data within relevant documents, based on the criteria of relevance (to theory building/testing) and rigour (whether the methods used to generate that piece of data is credible and trustworthy). This is in accordance with the RAMESES (Realist And Meta-narrative Evidence Syntheses: Evolving Standards) publication standards for realist reviews (Wong et al. 2013)

Pawson, R. 2006, "Digging for nuggets: How 'bad' research can yield 'good' evidence", International Journal of Social Research Methodology, vol. 9, no. 2, pp. 127-142.

Wong, G., Greenhalgh, T., Westhorp, G., Buckingham, J. & Pawson, R. 2013, "RAMESES publication standards: realist syntheses", BMC medicine, vol. 11, no. 1, pp. 21.

PLANNED DATA SYNTHESIS

Strategy for data synthesis

The final realist programme theory will be summarised using text and graphics to describe the programme theories (CMO configurations) that have emerged from phase I, and presenting the

case study evidence that supports those theories that have been tested in phase II. As far as is practicable, the results of the synthesis will be written up according to the RAMESES (Realist And Meta-narrative Evidence Syntheses: Evolving Standards) publication standards for realist reviews (Wong et al. 2013).

Wong, G., Greenhalgh, T., Westhorp, G., Buckingham, J. & Pawson, R. 2013, "RAMESES publication standards: realist syntheses", BMC medicine, vol. 11, no. 1, pp. 21.

Analysis of subgroups or subsets

None planned; however some subgroup/subset analysis may be required if this is meaningful for theory-testing.

REVIEW AFFILIATION, FUNDING AND PEER REVIEW

Review team members

- Mrs Melanie Gee, Centre for Health and Social Care Research, Sheffield Hallam University
- Mr Sadiq Bhanbhro, Centre for Health and Social Care Research, Sheffield Hallam University
- Ms Helen Brian, Centre for Health and Social Care Research, Sheffield Hallam University
- Dr Sarah Cook, Department of Health and Wellbeing, Sheffield Hallam University
- Professor Helen Killaspy, UCL Division of Psychiatry, University College London

Review affiliation

Centre for Health and Social Care Research, Faculty of Health & Wellbeing, Sheffield Hallam University

Funding source

NIHR Programme Grants for Applied Research funding scheme (ref RP-PG-0707-10093).

Named contact

Mrs Gee. Centre for Health and Social Care Research
Sheffield Hallam University
32 Collegiate Crescent
Sheffield S10 2BP
m.d.gee@shu.ac.uk

TIMELINE OF THE REVIEW

Review timeline

Start date: 01 June 2014. End date: 31 March 2015

Date of first submission to PROSPERO

The record has not been submitted

Date of registration in PROSPERO

21 January 2015

CURRENT REVIEW STAGE

Publication of review results 1 change

The intention is to publish the review once completed. The review will be published in English

GEE, Melanie, BHANBHRO, Sadiq, COOK, Sarah and KILLASPY, Helen (2017). Rapid realist review of the evidence : achieving lasting change when mental health rehabilitation staff undertake recovery-oriented training. *Journal Of Advanced Nursing*. doi: 10.1111/jan.13232

<http://onlinelibrary.wiley.com/doi/10.1111/jan.13232/full>

Stage of the review at this submission ^{1 change}

Review stage	Started	Completed
Pilot work	✓	✓
Formal searching/study identification	✓	✓
Screening search results against inclusion criteria	✓	✓
Data extraction or receipt of IP	✓	✓
Risk of bias/quality assessment	✓	✓
Data synthesis	✓	✓

Review status

The review is completed.

ADDITIONAL INFORMATION

Additional information

The purpose of this review is to inform a realist evaluation of the Rehabilitation Effectiveness for Activities for Life (REAL) project (Killaspy et al. 2015). In this evaluation (to be reported) we are seeking to identify and understand the factors associated with better long-term uptake of a staff training/change intervention ("GetREAL"), and to investigate the association between uptake of the intervention and long term outcomes. The final product of this review will be the articulation of realist programme theories that provide plausible explanations (expressed as context-mechanism-outcome configurations) as to the contextual circumstances within which the staff training/change programme leads to lasting change, and the mechanisms which are operating to produce this desirable outcome. These theories will provide a framework for analysis of the data collected in relation to the GetREAL intervention. The findings of the review and evaluation will inform any specific adjustments to the GetREAL intervention for testing in a future trial. Killaspy, H., Marston, L., Green, N., Harrison, I., Lean, M., Cook, S., Mundy, T., Craig, T., Holloway, F., Leavey, G., Koeser, L., McCrone, P., Arbutnott, M., Omar, R.Z. & King, M. 2015, "Clinical effectiveness of a staff training intervention in mental health inpatient rehabilitation units designed to increase patients' engagement in activities (the Rehabilitation Effectiveness for Activities for Life [REAL] study): single-blind, cluster-randomised controlled trial", *The Lancet Psychiatry*, vol. 2, no. 1, pp. 38-48.

Collaborators

- **Professor Michael King**, UCL Division of Psychiatry, University College London
- **Ms Marieke Wrigley**, South London and Maudsley NHS Foundation Trust
- **Ms Louise Reynolds**, Camden and Islington NHS Foundation Trust
- **Ms Isobel Harrison**, UCL Division of Psychiatry, University College London
- **Ms Melanie Lean**, UCL Division of Psychiatry, University College London

PROSPERO version history

- Version 1.2 published on 27 Jan 2017
- Version 1.1 published on 20 Jan 2016
- Version 1.0 published on 21 Jan 2015

Review conflict of interest

None known

Country

England

Medical Subject Headings

Mental Disorders; Mental Health Services; Patient Care Team; Rehabilitation Centers; Residential Treatment

Details of any existing review of the same topic by the same authors

None

Revision note 1 change

The review has now been published

Disclaimer

The content of this record displays the information provided by the review team. PROSPERO does not peer review registration records or endorse their content.

PROSPERO accepts and posts the information provided in good faith; responsibility for record content rests with the review team. The owner of this record has affirmed that the information provided is truthful and that they understand that deliberate provision of inaccurate information may be construed as scientific misconduct.

PROSPERO does not accept any liability for the content provided in this record or for its use. Readers use the information provided in this record at their own risk.

Any enquiries about the record should be referred to the named review contact