



**Foundation of Nursing Studies**

**Review of Small Grants Programme**

**May 2006**

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## 1. Background

The Foundation of Nursing Studies (FoNS) is an independent charity that supports nurses<sup>1</sup> and midwives to develop and share new ways of working to improve patient care. One of FoNS' key aims is to work UK-wide and across all healthcare settings to advance practice by supporting individual practitioners and teams to focus on:

- The **evidence** needed to support development and change in practice including listening to the perspective of patients/service users
- How the **process** of change and/or implementation will be facilitated
- How changes and development in practice can be **sustained**
- Effective ways of **supporting** practitioners to develop new ways of working
- How improvements in healthcare will be **evaluated**

The small grants programme (SGP) is one of the ways in which FoNS attempts to achieve this aim. The SGP supports, for up to one year, local projects and initiatives, which propose to improve healthcare practice and patient care in any branch of nursing and midwifery and in any healthcare setting. The programme is different from other grants programmes in two ways. Firstly, FoNS recognises that simply giving money to individuals or teams may be ineffective and so each recipient of a small grant is offered support and facilitation throughout the duration of their initiative. Secondly, FoNS do not seek to support only the 'perfect' proposals and believes that it is important to nurture practitioners who may be less experienced in developing practice and harness their enthusiasm for improving patient care.

The SGP has been running since the mid 1990s. During this time, an average of 8-12 small grants of up to £1500 have been awarded each year. Since 2004, the Burdett Trust for Nursing committed to supporting this programme for three years.

As with all of FoNS activities, the small grants programme has been subject to regular internal reviews taking into account the:

- Type and quantity of inquiries and applications received
- Feedback from applicants and other practitioners
- Changes occurring in the NHS
- FoNS' own research activity leading to the publication of two position papers offering insight to the use of research in practice UK wide
- Growth in FoNS' expertise in supporting developments and improvements to healthcare practice through consultancy work, opportunities for ongoing development of facilitation skills and collaborative work exploring the theoretical underpinnings of practice development
- Growing body of knowledge identifying effective ways of developing practice to improve patient care

These reviews have resulted in a movement away from the small grant programme supporting projects and initiatives that are primarily focused towards professional development (i.e. the development of knowledge and skills alone where the focus is

<sup>1</sup> The terms 'nurse(s)' and 'nursing' are used generically in this review as and includes specialist community public health nurses/nursing.

primarily on the practitioner and learning and may or may not be associated with systematic changes in practice) such as conferences, workshops and the development of resources. Instead the emphasis has moved towards supporting practice development initiatives where the focus is on the patient and/or service user and improving practice.

## **2. Impetus for current review**

There were two key drivers for this wider review of the FoNS small grants programme.

1. 2005 was a more challenging year than usual for the small grants programme as overall a lower number of good quality applications or applications with potential were received. This was despite:

- a high volume of inquiries and applications (approximately 70) resulting from publicity in the nursing press and through other sources e.g. FoNS website, FoNS e-news and CNO bulletin
- the introduction of a 'Special Focus' which ran alongside the general programme during autumn 2005 to support the development of practice relating to fundamental aspects of care

In total, 5 grants were awarded in 2005, although 2 grants have also been awarded in early 2006 which were the result of application processes that started in October 2005.

FoNS' experience in 2005 should however be put into context. Other funders are having a similar experience. The main reason for this, according to practitioners, is that many trusts are under huge financial strain and as a result, opportunities to develop new initiatives are not receiving as much support and encouragement.

2. 2006 is the final year of the current support for the small grants programme from the Burdett Trust for Nursing and so it was therefore timely that a detailed review of the small grants programme be undertaken as FoNS intends to present a proposal to their trustees in September 2006 to request that this support be continued.

### **2.1 Aim of the review**

This review aims to:

- evaluate whether the small grants programme is relevant, accessible and responsive to the needs of practitioners

with the purpose of informing:

- the future and ongoing development of this approach to supporting the development of practice and improvement of patient care
- the development of a proposal to seek continued funding from the Burdett Trust for Nursing

## **3. Overview of review process**

Kate Sanders (Practice Development Facilitator) and Gill Stephens (Co-Chair of Trustees) met in January 2006 to discuss the small grants programme. Several key

issues were identified during this discussion. These included the need to know more about the following:

- accessibility i.e. how do people get information about the small grants programme?
- who the current customers are
- who the customers should be
- what the small grants are offering and what applicants want i.e. funding, facilitation or both?
- the application process

It was acknowledged that the review would benefit from further exploration of these issues by involving representatives from the main nursing groups. Consequently the review has included the following activities:

- An analysis of inquiries and applications received in 2005 to determine:
  - who FoNS' current customers are
  - the reasons why applications were successful/unsuccessful
- Telephone interviews with a sample of people from each of the key nursing groups
- A questionnaire to gain feedback about the small grants programme from recipients of small grants in 2004
- An appraisal of current channels of publicity and dissemination

Each of these activities will be discussed in detail below.

#### **4. Analysis of inquiries and applications**

##### **4.1 Breakdown of applicants into key nursing groups**

Table 1 provides a breakdown of the successful and unsuccessful applicants in 2005 by nursing groups. This shows a wide spread of applications/inquiries across these groups with the largest numbers coming from ward managers and clinical nurse specialists.

It could be argued that a larger number of applications/inquiries should have been expected from practice development nurses and nurse consultants since developing practice to improve patient care is a significant part of their role. However, it is also acknowledged that there are considerably fewer numbers of these posts than those that would fit into the key groups of ward managers and clinical nurse specialists.

**Table 1. Breakdown of applicants in 2005 into key nursing groups**

<b>Total number of successful applicants</b> (This includes 2 applications carried over to January 2006)	<b>7</b>
Directors of Nursing	1
Nurse Consultant	1
Practice Development Nurses/Midwives	4
Community Nurses	1
<b>Total number of unsuccessful applicants/inquiries</b>	<b>60</b>
<b>Directors of Nursing</b>	<b>3</b>
Directors of Nursing	1
Head of Adult Nursing	1
Head of Midwifery	1
<b>Modern Matron</b>	<b>8</b>
Matron	3
Lead Nurse	3
Senior Nurse	2
<b>Clinical Nurse Specialists</b>	<b>14</b>
Clinical Nurse Specialists	12
Nurse Practitioners	2
<b>Nurse Consultants</b>	<b>4</b>
<b>Practice Development Nurses</b>	<b>3</b>
Clinical Development Facilitator	1
Practice Development Nurse	1
Head of Professional Nursing Development	1
<b>Ward Managers</b>	<b>22</b>
Ward Sisters	3
Health Visitors	6
Midwives	2
Ward Managers	1
Other*	10
*Co-ordinators, team leaders, practice nurses etc	
<b>Staff Nurses</b>	<b>4</b>
<b>Academic Staff</b>	<b>2</b>

Whilst it is difficult to draw specific conclusions from this breakdown, it is interesting to note that practice development nurses/midwives were the most successful applicants. Several suggestions as to why this may be can be offered. For example, they have more time than clinically based nurses to develop proposals and complete applications as it is an activity which is viewed as a legitimate part of their role; they know where to access support within their organisation to enable them to do this; their role has enabled them to develop a greater understanding of the processes involved in implementing changes in practice.

A geographical breakdown of successful applicants in 2005 shows that all the grants were awarded within England, but were spread across the country (Kent, Sunderland, Cornwall, Doncaster and Leicester).

#### **4.2 Analysis of applications and inquiries**

The applications and inquiries<sup>1</sup> were analysed using the PARIHS framework developed by Kitson et al (1998) and the definition of practice development by Garbett and McCormack (2002) to inform the process.

1 The inquiries included in this analysis are primarily those received by email and that provided a relatively detailed outline of what was being proposed. Practitioners whose inquiries are considered to have potential are offered support from FoNS to enable the further development of their proposal before completing a full application.

The PARIHS framework proposes that the successful implementation of evidence into practice is a function of three key factors; evidence, context and facilitation. The PARIHS framework was used to inform this process for the following reasons:

- it attempts to identify the factors that are important in the successful implementation of evidence into practice
- it is highly relevant as it attempts to represent the complexity of the process of change and implementing evidence into practice
- the purpose of the framework fits with the aims of the FoNS small grants programme
- the framework can be used as a practical tool by those involved in planning, implementing and evaluating the impact of changes in health care

Garbett and McCormack (2002:88) define practice development as:

‘...a continuous process of improvement towards increased effectiveness in patient centred care. This is brought about by helping healthcare teams to develop their knowledge and skills and to transform the culture and context of care. It is enabled and supported by facilitators committed to systematic, rigorous continuous process of emancipatory change that reflect the perspectives of service users.’

This definition both compliments and further develops the work by Kitson et al (1998) as it identifies the means by which effective patient-centred care can be achieved:

- by developing the knowledge and skills of staff
- by transforming the culture and context of care to one where:
  - quality is everyone’s business
  - change is seen as positive
  - everyone’s leadership potential is developed

- through skilled facilitation
- through systematic and rigorous processes of change that enable practitioners to critically reflect on current practice and be supported to develop and evaluate new ways of working.

These means can be used to identify aspects of proposals that would indicate some consideration has been given to the processes that will be used to achieve sustainable change.

#### 4.2.1 Successful applications

Analysis of the successful applications showed that these practitioners were proposing to develop innovative approaches to practice and were able to demonstrate that they had considered many of the following factors:

- how **evidence** from multiple sources had or would be used to inform the project. This included research, local and national policy documents, clinical experiences e.g. critical incidents, complaints, audit and patient experiences e.g. informal patient feedback, consultation with patient and carer groups, information from interviews and focus groups
- the **contextual** factors that could impact on the development. This included the active involvement of multi-disciplinary staff, patients and carers; potential barriers to change; the role of leaders in the workplace to champion change; the need for organisational support and the use of multiple approaches to evaluation
- the role of **facilitation** in supporting changes in practice in the workplace e.g. working alongside practitioners to identify development and training needs, enabling staff to critically reflect on their practice, involving staff in identifying areas of practice that need to change and finding ways of achieving these changes

They were not all perfect proposals, but the applicants had shown that they had an understanding of factors that may impact on processes of change and development thereby providing the potential for developing a more robust proposal to support the implementation of sustainable changes in practice.

#### 4.2.2 Unsuccessful applications

In comparison, unsuccessful applications tended to fall into the following categories. These proposals:

- focused on education and training alone (professional development) with no consideration of:
  - ways of identifying the knowledge and skills that practitioners already have
  - ways of identifying gaps in knowledge and skills
  - how education and training would be tailored to the needs of practitioners
  - how practitioners would be supported in the workplace to use their new knowledge and skills to develop their practice and improve patient care
- involved the development and/or purchase of resources and /or equipment alone and showed little or no consideration as to the need for such resources, the involvement of stakeholders in the development of the resources and the provision of support in the workplace to facilitate the use and evaluate the impact of the resources on practice and patient care

- could be considered to be service developments rather than innovative practice developments i.e. the focus is on establishing a way of working that already exists in many areas and therefore would not be adding to the body of knowledge about how practice can be advanced/developed. It is acknowledged that this category of applications could potentially raise a challenge for FoNS as what may be seen as a service development in one area may perhaps be considered as innovative practice in another. It also raises questions about when should a development become the responsibility of a trust as FoNS has to work within the existing small grants budget

## **5. Telephone interviews**

A pragmatic approach to recruiting participants had to be adopted to ensure that FoNS were able to interview a wide range of people within existing resources. For this reason, an email was sent via the FoNS e-news (see appendix 1) asking for recipients who would be willing to participate in a short telephone interview to contact Kate Sanders to arrange a suitable date and time when the interview could take place. The e-news is currently sent to approximately 5500 practitioners UK and world wide.

This approach proved to be a very effective way of identifying willing participants. Within one week of sending the email request, in excess of 200 positive responses had been received. As far as was practically possible, this enabled interviews to be arranged which ensured a spread of participants from across all the nursing groups and all four countries of the UK. During the interview process it became apparent that the participants represented a mix of people who were known to FoNS i.e. they had received some funding or an award from FoNS or they had worked collaboratively with FoNS and people who had little or no previous contact with FoNS. Despite having signed themselves up to receive the FoNS e-news, some participants had very limited knowledge of FoNS and the small grants programme.

A total of 50 interviews were undertaken by Kate Sanders, Theresa Shaw and Ros Taylor over a two week period in March/April 2006. A breakdown of participants according to key nursing groups is provided in Table 2.

A telephone interview schedule was used to inform and guide the interview process (see appendix 2). With the agreement of the participants, hand written notes were made to record the main points from the interviews.

### **5.1 Analysis of telephone interviews**

Kate Sanders performed a thematic analysis of the notes from the telephone interviews. Initially the responses were analysed within the key nursing groups and common themes identified, before comparisons were made in and across the nursing groups. The key themes were then reviewed by Theresa Shaw and Ros Taylor for verification.

**Table 2. Breakdown of participants into key nursing groups**

<b>Total number of interviews</b>	<b>50</b>
Directors of Nursing	5
Lead Nurse/Senior Nurse/ Modern Matrons	6
Clinical Nurse Specialists	4
Nurse Consultants	2
Practice Development Nurses	5
Ward Managers	4
Staff Nurses/Midwives	2
Academics:	
Lecturers/Research Fellows	9
Professors of Nursing	5
Research Nurses	4
Others:	
Bereavement Care Manager	1
Non-executive Member of PCT	1
Management Consultant	1
Freelance Facilitator	1

### **5.1.1 Where do people receive information about the FoNS small grants programme from?**

Unsurprisingly, the majority of participants stated that they received information about the small grants programme via the FoNS e-news. However, a variety of other sources of information were also identified. These included:

- the FoNS website
- passed on by others members of their organisation, usually senior nurses or practitioners with a specific interest in research and development
- the RCN Co-ordinating Centre's electronic bulletin
- RD Info website
- Nursing press (although only small numbers of participants recalled seeing this information)

These are the responses that would have been anticipated as they cover the majority of avenues that FoNS currently uses for publicising the small grants programme. However, FoNS also sends press releases for entry in the CNO bulletin (England only) but no participants mentioned this as a source of information. It is also perhaps surprising that

only a few participants recalled seeing any information in the nursing press as details have been included in both the Nursing Times and the Nursing Standard on several occasions during the last year.

### **5.1.2 What did participants do with the information they received about the small grants programme?**

The majority of participants shared the information they received with others. Most tended to use targeted approaches and forwarded information to people who they thought it would be relevant to e.g. lead nurses, practice development nurses and clinical educators. Some used a more general approach and forwarded the information to large numbers of staff across organisations. Clinical nurse specialists and ward managers were the nursing groups least likely to share the information with anyone. This may be because they have less opportunity to do this than other nursing groups.

### **5.1.3 Had participants considered making an application?**

4 of the participants had applied for a small grant and 1 had supported a colleague to apply (2 others had been successful awards applicants). Of these 5 participants, 3 had been successful. 1 participant reported that her application was rejected because what she was proposing was primary research and therefore did not fit with the small grant criteria. The other rejected applicant was unsure as to why her application was rejected and would have liked feedback at the time as to why she was unsuccessful. (This feedback was provided at the end of the interview).

For most of these applicants, it was the first time that they had applied for funding to support a practice development. Most felt that the application form and process was clear. It seemed that most of these applications were funding driven.

Several other participants reported that they had considered making an application. A variety of reasons were given as to why they had not applied. These could be themed under the following headings:

- state of readiness, for example: timing not right, team not ready, lack of support from their organisation, too busy, see their role as supporting others rather than applying themselves
- expectation, for example: it felt too complicated, it seemed that a lot was expected for £1500
- money, for example: had been able to secure internal funding, wanted money for things that the small grants would not fund e.g. travel, staff posts, money too small to apply (this tended to be the response from research nurses)

### **5.1.4 Ideas for making programme more accessible**

A variety of ideas for making the FoNS small grants programme more accessible were offered. These included targeting the following organisations, groups and people:

#### Organisations

- Universities and education centres
- PCTs, especially those involved in the commissioning process
- RCN
- Strategic Health Authorities
- Charities who are currently not involved in R&D
- R&D departments

## Groups

- Council of Deans
- National Directors Group and Director of Nursing forums
- Trust research groups/forums
- Clinical specialist groups

## People

- Final year students
- Clinical/line managers
- Nurse consultants
- Nurses on advanced practice programmes

Other avenues for increasing publicity and practical suggestions were offered:

## Publicity

- Popular publications, nursing journals
- Stands at conferences
- CNO bulletins – in all 4 countries
- ICN website
- Links with other websites
- Link with Annual Nurses Day
- Link with other electronic networks

## Practical

- Clear headings on e-news that capture people's attention
- Develop a poster that can be downloaded and displayed in clinical areas
- Use people as advocates/ambassadors for FoNS

Many of these avenues are currently being used or have been used in the past, however, it may be worth revisiting all the above suggestions and considering how effectively they could be or are being used. Some gaps were also identified, e.g. CNO bulletins in Wales, Scotland and Northern Ireland.

### **5.1.5 Do healthcare practitioners need funds to help them develop practice?**

The vast majority of participants believed that healthcare practitioners needed funding to help them develop practice but that these funds need not be large amounts. However several stated that a lack of money could sometimes be used as an excuse not to do something that could be done but which may require practitioners to think and work in a different way.

Four main themes arose from these responses:

- Funding validates work - some believed that teams may need to spend time thinking about how things could be done differently and funding may help them to achieve this. It was felt that funding can help to validate work or to make those involved feel valued by themselves and their employers. Some stated that

external support and funding added kudos to projects and initiatives. It was also believed to attract the attention of the organisation and encourage others to become involved.

- Getting started - some stated that money to pump prime a project and to get ideas off the ground can be very beneficial and help with securing more funding from within or from other organisations.
- Provides time - most participants felt that practitioners needed funding to buy time out of practice. This would enable them to think about how things may be done differently, clarify purposes, and re-evaluate roles, for example. It was acknowledged that at present, much development work is done on good will.
- Enable learning - participants also felt that funding could be used to enable learning. This could be through networking, visiting sites of good practice and buying in expertise or courses to develop staff knowledge and skills. Some felt that help was needed with research and evaluation and this could be gained by making links with academic partners. Others recognised that administrative support would be helpful as would funding to support the production of reports and other resources.

#### **5.1.6 Would support and facilitation from FoNS be helpful?**

There was a general sense from participants that support and facilitation from FoNS would be helpful for people who are involved in development work, although some participants felt that it may not be necessary as local support should be available. This was especially true of participants working in larger organisations. However there was an acknowledgement that people working in smaller organisations, or outside of the NHS, in care homes, for example, may not have access to such support locally. Overall, it seemed as if a mix of local support and help from FoNS would be beneficial. FoNS could either help practitioners to access local support or fill in the gaps if no help was available.

Responses relating to the role of facilitation and support were themed under six headings:

- External expertise - many participants stated that external involvement in developments was invaluable. These participants suggested that such involvement offered an independent perspective, opportunities for critique and stimulation to take a wider view. It was also acknowledged that external support provided kudos and helped to validate the work.
- Getting started - several participants stated that support from FoNS with proposals would be of benefit to some practitioners to help them to kick start and develop ideas. Example proposals and applications were also identified as a possible source of help. Some people acknowledged that help with completing ethics forms and understanding research governance was needed. However, most participants seemed to suggest that if the application forms were fairly straight forward then practitioners should be able to complete them.
- Mentoring - it was also suggested by many that FoNS could offer a mentoring/coaching/critical friend role for project leaders. This would not necessarily need to be face-to-face as it was believed that telephone support could be effective. However, some stated that the availability of support from FoNS needed to be made more explicit and it should be presented in a way that

encouraged people to ask for help as it was suggested that some may find this difficult.

- Evaluation - there was a general sense that help with evaluation was needed as it was acknowledged by many that healthcare practitioners are not very good at this and need to think about it from the outset.
- Publication - writing for publication was another area that participants suggested that FoNS could provide help with.
- Networking - many believed that FoNS could have a valuable role in enabling networking between practitioners who are doing similar work to support sharing and learning from others.

### 5.1.7 Other comments

When asked for any other comments, many participants offered positive feedback about the FoNS small grant programme. This included:

*“Very valuable”*  
*“Very useful”*  
*“Fantastic”*  
*“Excellent”*  
*“Really needed”*

Participants were able to identify benefits of the programme for individuals, nursing and organisations and acknowledged that FoNS fills a gap that no other organisation does. For example, some participants stated that a small amount of money can make a lot of difference as it provides a development opportunity for staff which is a great way to boost confidence and enables practitioners to develop their potential and to go on to bigger things. It was also acknowledged that funding from FoNS can attract more funding from others. Participants felt that many structures were in place to drive practice development but suggested that what people actually need is support. It was therefore recognised that facilitation from FoNS instead of money alone would help many people. Several participants commented that sharing information about the projects supported by the small grants programme highlighted good practice and saved people from re-inventing the wheel.

Many participants offered suggestions as to areas of the programme which could be further developed. Some were practical in nature, for example:

- developing:
  - a template for completing application forms
  - a checklist of things that applicants may need to think about
  - a database of supporters who could help with proposals etc.
  - a database of funding available for practitioners
- making email and/or telephone follow ups to encourage people who have made inquiries to continue with their application
- reviewing the format of the e-news as some participants felt that it was ‘dull’

Others comments and suggestions were more central to FoNS and the nature of the small grants programme itself. For example:

- The FoNS name can be confusing
- The title ‘small grants’ puts people off – small grants for what?

- The focus should be more on novices and practitioners at the bedside and therefore the grants need to be promoted as a unique resource for clinical practitioners that are relevant, accessible and user-friendly so that practising nurses do not think that they are just for academics and senior nurses

## **6. Feedback from grant recipients in 2004**

Recipients of the 8 small grants awarded in 2004 were included in this review as they have had a recent experience of the whole process of the small grants programme i.e. developing a proposal, making an application, implementing their project/initiative and writing a report and should therefore be able to offer pertinent feedback. A questionnaire was developed based on the telephone interview schedule and emailed to all 9 project leaders (1 project had 2 project leaders). 8 questionnaires were returned. The project leader who did not return the questionnaire is now working in Australia.

The recipients fell into the following key nursing groups (see table 3).

**Table 3. Breakdown of small grant recipients in 2004 into key nursing groups**

Nurse Consultants	2
Practice Development Nurses	3
Ward Manager	1
Academics: Lecturers	2
Other: Independent consultant/facilitator	1

A geographical breakdown of successful applicants in 2004 showed that the grants were awarded across the UK. A grant was given to a joint project across England, Wales and Northern Ireland; 2 grants were awarded in Scotland; 1 in Northern Ireland and 4 in England (Birmingham, Nottingham (2), and Coventry).

### **6.1 Where had they received information about the FoNS small grants programme from?**

Recipients had received information about the FoNS small grants programme from a variety of sources. These included:

- Circulated by Director of Nursing and Senior Nurse Manager
- From the FoNS website
- Links from other websites e.g. RCN, RDinfo
- Through nursing networks including the Developing Practice Network and the Transcultural Nursing and Healthcare Association

## **6.2 Ideas for making programme more accessible**

One recipient stated that the programme was already well advertised, however, she was familiar with the work of FoNS through an association with a nursing network.

Others offered the following suggestions:

- Disseminate previous projects through RCN bulletin or articles in nursing journals to raise the profile of the programme
- Use more online resources e.g. Nurse Net and the British Journal of Nursing online
- Run a workshop at a national conference focusing on the process of developing and implementing a project
- Produce hard copy flyers as some practitioners are dependent on senior nurses to disseminate the information downwards

## **6.3 What made recipients apply for a small grant from FoNS?**

The majority of recipients stated that they had applied for a small grant because they needed funding for their project. Some also commented on the timeliness of the funding, the appropriateness to what they were doing as opposed to research monies and the ease of the application process.

## **6.4 Ideas for improving the application pack**

3 of the recipients did not comment on this questions. Several of the others stated that they thought that the application form was “*fine*”, “*simple*” and “*straightforward*”. Two recipients suggested that an example of a successful application would be useful and another stated that you should be able to complete the form online.

## **6.5 Ideas for improving the application process**

Most of the recipients reported that they were happy with the application process. The initial proposal from one recipient was rejected, however, she commented that she had felt supported by the feedback that she had received from FoNS and that this had enabled her to successfully redevelop her proposal. Two of the project leaders (from the same project) however felt that the application process should be shortened as it seemed to be lengthy and stated that they would have liked quicker feedback regarding the outcome of their application. They also did not receive the full amount of funding that they had requested and suggested that this should have been disclosed at the outset.

## **6.6 Receipt of support and facilitation from FoNS**

Recipients had received a variety of support from FoNS. This included help with developing a proposal; telephone and email support through the implementation phase of a project; site visits which provided the opportunity to clarify ideas, explore issues relating to outcomes and evaluation and to provide external support and validation of project achievements; guidance with and critique of project reports.

Most felt that the support had been timely and appropriate, however, the recipients from one project stated that they would have liked more support during the project and were disappointed with the amount of work they had to put in for the amount of money that they received.

## **7. Publicity and dissemination**

Several channels are currently used to publicise the small grants programme. These include:

- the FoNS website  
The website was redeveloped during 2004 and the new website went live in January 2005. The site is currently receiving approximately 1200 unique visitors per week. This figure has risen by 25% over the last 6 months.  
From 1<sup>st</sup> April 2005 – 31<sup>st</sup> March 2006 there were:
  - 8493 visits to the small grant funding page
  - 3498 small grant application packs downloaded
  - 14382 visits to individual small grant project pages
- the FoNS e-news  
This electronic newsletter is sent out at least 5 times a year to an e-mailing list of 5500 recipients UK and world wide.
- press releases  
Press releases about the small grants programme are sent out approximately 3-4 times per year. The purpose of these may be to raise general awareness of the availability of the small grants or be specifically related to one of the special focuses that we have run over the last 12 months. The current list of contacts includes the nursing press; statutory bodies, organisations e.g. Department of Health, RCN; funding databases e.g. RDinfo; network contacts.  
In general, recipients appear to act upon the information. Last year the small grants programme had at least 3 mentions in the mainstream nursing press i.e. Nursing Times and Nursing Standard; was disseminated via the CNO bulletin in England and through the RCN bulletin; was publicised through the RCN Co-ordinating Centre's electronic bulletin and was included in several funding databases.
- dissemination series  
The reports included in the dissemination series are currently sent to 1300 recipients UK wide. This includes all the nursing and healthcare libraries, and many Directors of Nursing. In addition, all the reports are available to download free of charge from the FoNS website in pdf format. Historically, these reports focused on projects that had received larger project funding; however, the intention is now to also include reports about some of the projects supported by the small grants programme. The next reports are due to be published in June 2006 and 5 of the 7 planned reports will be about projects funded by the small grants programme.

We know that the FoNS Dissemination Series is popular from feedback that we have received from recipients. In addition, we are able to identify the number of reports from the series that are downloaded from our website. From 1<sup>st</sup> April 2005 to 31<sup>st</sup> March 2006, 19161 Dissemination Series reports were downloaded from the FoNS website.

## **8. Discussion**

The aim of this review was to evaluate whether the small grants programme is relevant, accessible and responsive to the needs of practitioners with the purpose of informing the ongoing development of the programme and future funding bids.

### **8.1 Is the small grants programme relevant?**

Evidence from the review suggests that the small grants programme is both relevant and needed. FoNS is the only UK wide organisation working across all healthcare settings that provides funding and support to develop healthcare practice. Interview participants and recipients of grants acknowledge this unique and valuable role.

During 2004/2005, applications and inquiries were received from a broad spectrum of the key nursing groups, however, ward managers (or equivalent) and clinical nurse specialists were the most frequent applicants and practice development nurses and nurse consultants were the most successful.

Many of the interview participants held the view that the small grants programme should be focused towards clinically based nurses for the following reasons:

- receiving a small grant can be a developmental opportunity. This was supported anecdotally by interview participants who had received a grant or award from FoNS and some of the grant recipients in 2004
- senior nurses and academics have access to wider funding opportunities than those who are more clinically based

This evidence would suggest that the current focus of the small grants programme towards clinically based nurses is appropriate; however, FoNS may need to consider the ways in which it can enable more successful applications from ward managers, for example.

The relevance of the small grants programme is supported by a view held by most interview participants, that funding is needed to support developments in practice. In addition, it was acknowledged by many that small amounts of funding can make a difference. Many of the participants felt that practitioners particularly needed funding to gain time out of practice to enable them to explore new ways of working. It may be of help to practitioners if it is made explicit in the information and application pack that small grant funding can be used to achieve this.

The relevance of FoNS' work (including the small grants programme) to healthcare practice is also demonstrated by the increasing popularity of the website and the wealth of information that visitors to the site are accessing.

### **8.2 Is the small grants programme accessible?**

The accessibility of the small grants programme will be considered under three headings, information about the small grants programme, the application process and expectations.

#### **8.2.1 Information**

From the telephone interviews it was apparent that information about the small grants programme is received from many sources, however, it is also acknowledged that many channels may focus on more senior nurses and therefore clinically based nurses may be reliant upon this information being passed on. FoNS may need to develop stronger links with Director of Nursing forums and the CNO bulletins in all four countries to highlight the relevance of the small grant programme to clinically based nurses and

therefore encourage the wide dissemination of information about FoNS throughout organisations.

The Nursing Standard and the Nursing Times have the largest circulation figures and are generally known to be journals that target clinically based nurses. Whilst both these journals are supportive of FoNS and include information from our press releases, some interview participants made suggestions as to how the profile of this information could be increased. They suggested that FoNS approach the journals to negotiate an agreement for the inclusion of articles written by recipients of small grants. This could not only raise the profile of the small grants programme but also demonstrate the relevance of the programme to more clinically based nurses.

Some interview participants suggested that FoNS should have stands at conferences. During 2000-2002, FoNS had many stands at conferences UK wide. However, a decision was taken not to continue with this approach to increasing awareness as in general, it was costly in terms of both time and resources and there was little evidence to suggest that it was an effective way of raising nurses' awareness of FoNS and/or resulted in applications to the small grants programme. It is however, an approach that may need to be reconsidered periodically.

Approximately 3500 small grant application packs were downloaded from the FoNS website last year. This would appear to indicate that many practitioners are accessing information about the programme via the internet and with continued advances in technology, it is likely that the use of the internet will continue to increase. FoNS therefore needs to continue to explore effective ways of publicising the website and evaluating the accessibility of the information held on it from the perspective of practitioners/site visitors.

### **8.2.2 Application process**

Overall, feedback about the small grant application process and the application pack from interview participants and grant recipients was positive. Most thought that the application form was straightforward and that FoNS offered appropriate and timely support with the application process. However, there was a sense that the availability of facilitation from FoNS was not particularly explicit of the application pack and some people had not been clear about how funding could be spent.

Many people believed that facilitation and support from FoNS would be beneficial to help practitioners to develop proposals and to implement and evaluate practice development work. However, there was an acknowledgement that FoNs may not be able to offer this to everyone due to resource implications and that in general, practitioners should be able to access this kind of support locally. Generally, there was a sense that there should be a balance of support from both local sources and FoNS. For example, it was suggested that FoNS could fill in gaps in support or enable practitioners to identify the support that may be available to them locally.

Some practical suggestions were offered from improving/supporting the application process. These included:

- creating on line application forms
- developing a template for applications
- providing examples of successful applications/proposals

- creating a FAQs section or a checklist of things that applicants should consider

### **8.2.3 Expectations**

By considering the unsuccessful applications, in particular, it could be suggested that in some cases, there is a difference in expectations about what is required for a successful application between FoNS and some applicants. The stated aim of the small grants programme is to develop healthcare practice and improve patient care. It could be assumed that all applicants believe that they have met these criteria; however, many of the applications are rejected. Reasons for this may include:

- some applicants do not read the application criteria closely (FoNS has anecdotal evidence to suggest that this happens in some cases)
- others may be unsure as to whether their proposal meets the criteria but decide to take a chance on applying

However, there may still be applicants who do not clearly understand why their application was not accepted.

The need to base practice on research findings is not a new concept. However, recent years have seen increased impetus to ensure that care is evidence based and clinically effective. Strategies for improving health care at a national level e.g. NICE, clinical governance are a testimony to the emphasis being placed on this approach. Because of this enthusiasm, it may not be unreasonable to assume that healthcare practitioners will automatically use evidence based guidelines and audit, for example in their everyday practice. Such a belief would be based on the assumption that when research is available it is accessed and appraised by practitioners and applied into practice. However, what is being increasingly recognised is that these linear and logical approaches fail to capture the complexity of the change processes and in reality, practice lags behind current best practice.

This presents a challenge. Whilst there is a need to base practice on evidence, there is also a need to understand the factors that influence how research and evidence are implemented and develop strategies to work towards successful implementation.

Over the last decade, FoNS has developed considerable knowledge and experience in supporting developments and improvements to healthcare practice and acknowledges the complex nature of implementing change. Because of this, FoNS believes that it is important that proposals give some consideration to the processes that will be used to achieve sustainable change. This includes considering the evidence that supports the development, the context in which the change is to take place and the ways in which the change will be facilitated.

To assist with the application process and to make FoNS' expectations more explicit, FoNS should redevelop the information and application pack so that it clearly states that applicants need to consider the processes that they will use to achieve changes in practice rather than focusing on quick fix solutions. This does not mean that FoNS will only be looking for 'perfect proposals' as it should be made clear that FoNS would welcome the opportunity to work with people who have a good idea to help with the development of project proposals. Other resources that may also provide applicants with help are a Frequently Asked Questions section and examples of successful proposals/applications.

### **8.3 Is the small grants programme responsive?**

For the programme to be responsive, it needs to react quickly and/or favourably. In all cases, applicants are responded to within the one month timescale that is stated on the application pack. In most cases, FoNS responds well within this timescale. All unsuccessful applicants are offered feedback about why their application was unsuccessful. This may include:

- why their proposal did not meet the criteria e.g. they were asking for funding for the purchase of equipment alone
- how their application could have been strengthened e.g. asking them to consider how the views of patients and carers could be used to inform the development
- what aspects of their project that FoNS may be interested in supporting e.g. cannot fund an audit of practice alone but may be interested in an aspect of the work that supported professionals to develop and use new skills in practice

Where possible, FoNS also provides suggestions as to other funding bodies that applicants may approach.

## **9. Conclusions**

A detailed review of the FoNS small grants programme has been undertaken to determine if it is an effective approach to supporting the development of practice to improve patient care. The findings indicate that the programme should definitely continue as it is providing unique and valuable support to nurses, midwives and health visitors UK wide. The findings also suggest that the current format of the programme is relevant, accessible and responsive to the needs of healthcare practitioners and teams. However, some areas of the programme that could be strengthened have been identified and these will be addressed in the recommendations.

## **10. Recommendations**

This review demonstrates that the FoNS small grants programme provides unique and valuable support to healthcare practitioners UK wide. To further strengthen the programme and increase its accessibility the following recommendations are made as a result:

- **Focus on clinical practitioners**  
The primary customers of the small grants programme should be clinically based practitioners. FoNS should therefore encourage applicants to develop academic links to support their projects rather than encouraging academics to be lead applicants
- **Increase accessibility**  
FoNS should explore channels for wider publicity that will reach clinically based practitioners including effective use of Director of Nursing forums, CNO bulletins across the four countries, articles in popular nursing press
- **Increase the profile of facilitation**  
There is an overriding notion that 'funding and support from FoNS is more than just about money', however, FoNS should explore how the availability of facilitation can:
  - be made more explicit to potential applicants

- be negotiated with applicants to meet their needs and within the resources available to FoNS
- outlined so that applicants will know what this may include e.g. supporting practitioners to access local support, filling in gaps when support not available
- Clarify the application process  
The information and application pack should be redeveloped so that:
  - it clearly states that FoNS can provide support to help applicants develop project proposals
  - it clearly states that applicants will need to consider the processes that they will use to achieve changes in practice
  - a template is available for applicants to complete
 Further resources should be developed to assist applicants e.g. a FAQs section and example proposals
- Review funding  
The current funding level of £1500 has been in place since the establishment of the SGP. As costs of resources and staff time will have risen over time, it seems appropriate that the level of funding be reviewed.

## **11. References**

Garbett, R and McCormack, B. (2002) A concept analysis of practice development. *Nursing Times Research*. Vol.7. No.2. pp 87-100.

Kitson, A. et al. (1998) Enabling the implementation of evidence-based practice: a conceptual framework. *Quality in Health Care*. Vol.7. No.3. pp 149-158.

## **12. Appendices**

### **Appendix 1. Copy of email sent to recipients of FoNS e-news**

Dear Colleagues

As part of a continuous process to evaluate our work, we would like to talk to a sample of around 50 people about the small grants programme. The groups that we are seeking comments from are:

- Directors of Nursing
- Modern Matrons
- Nurse Consultants
- Clinical Nurse Specialists
- Practice Development Nurses
- Nurses, Midwives and Health Visitors working in hospital and/or community settings
- Academic Nursing Staff

If you would be willing to participate in a telephone interview lasting approximately 20 minutes, please email [kate.sanders@fons.org](mailto:kate.sanders@fons.org) to arrange a suitable date and time when we can call you.

By participating you will be helping FoNS to ensure that our activities are relevant, accessible and responsive to the needs of practitioners.

Thank you for considering our request.

Kate Sanders

## Appendix 2. Small Grant Programme Telephone Interview Guide

At the start of the interview, please:

- Inform the participant that you would like to hand write notes during the interview
  - Ask the participant if they are happy for their name to be recorded against their responses in case we should wish to contact them at a later date to clarify any issues further
  - Confirm the participants job title and record against their responses
1. Where have you received information about the FoNS small grants programme from?
  2. When you have received information, what have you done with it?
  3. Have you ever considered making an application?
    - a. If not, are there any particular reasons why you have not applied?
    - b. If yes,
      - i. Was this the first time you had applied for any type of funding?
      - ii. What made you apply?
      - iii. How did you go about it?
      - iv. Do you have any ideas about how the application pack could be improved?
  4. Do you have any ideas about how the small grants programme could be made more accessible to practitioners?
  5. Do you think that healthcare practitioners need funds to help them develop practice?
    - a. If yes, for what kind of developments?
    - b. If no, please comment
  6. Would support and facilitation from FoNS be helpful to:
    - a. Develop project proposals?
    - b. Complete application forms?
    - c. Provide support in the workplace to help implement projects?
    - d. Develop evaluation strategies?
    - e. Other, please specify
  7. Are there any other comments that you would like to make about the FoNS small grants programme?