

Enhanced research reporting method to improve patient care

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Patients could benefit from improved care and outcomes thanks to new research guidance developed as part of a University of Stirling-led study.

Experts have advanced an approach that enables the effective collation and analysis of qualitative studies – such as information garnered from patient interviews and [focus groups](#).

The study has led to the creation of the first-ever tailored reporting guidance for the methodology, known as meta-ethnography. It will give researchers and healthcare bosses greater confidence in the findings of qualitative studies and, ultimately, aid the improvement of patient care and services.

Dr. Emma France, of the Faculty of Health Sciences and Sport and the Nursing, Midwifery and Allied Health Professions Research Unit, led the study, published in four journals.

"To create high-quality, patient-focused [health services](#), we need to consider why and how they work – and people's experiences of using them," Dr. France said.

"Information about people's experiences of health services and care should play a major role in improving NHS services, but individual studies of this kind are often seen as anecdotal, so rarely influence decision making.

"Pulling together evidence from many existing qualitative studies, including those using patient interviews or focus groups, can shed light on important factors, such as why patients or health professionals behave in a certain way, or what it's like to experience an illness."

The study is funded by the National Institute for Health Research (NIHR) and involves a number of partners, including the Universities of Bangor, Cardiff, Edinburgh and Napier.

Meta-ethnography – developed by sociologists George W Noblit and R

Dwight Hare in 1988 – involves systematically comparing conceptual data from primary qualitative studies to identify and develop new overarching concepts, theories and models. It enables researchers to combine the findings of qualitative studies, rather than concentrating on the individual cases.

The quality of the reporting of meta-ethnographies is often poor – meaning patient groups and NHS managers often lack trust in the findings and, ultimately, do not use them to improve their decisions, services and patient care. However, Dr. France's team – working closely with Professor Noblit, of the University of North Carolina – have, for the first time, provided bespoke guidance on this approach to improve reporting of data collection and analysis.

Before putting together the guidance, the team reviewed existing literature, consulted academic experts, carried out consensus studies within the research community and with members of the public, and interviewed professionals working in non-academic settings.

The new guidance has 19 specific reporting criteria, supported by detailed explanatory notes. It includes recommendations on all aspects of meta-ethnography conduct and reporting, from selecting studies to analysing data.

The guidance will be free to use and is aimed predominantly at researchers, journal editors, and academics who review research articles to guide how meta-ethnographies should be reported. It will also be used by researchers and students looking to understand how to conduct a meta-ethnography.

"We have developed guidance to assist researchers in carrying out quality meta-ethnographies and reporting them to a high standard, meaning this rich information can be used to create better decision-

making and improve outcomes for [patients](#)," Dr. France explained.

"The [guidance](#) will help to provide new insights and conclusions regarding specific health topics, for example, people's experiences of being treated for a certain type of illness.

"Ultimately, improving the way researchers report meta-ethnographies, will help to ensure that the best use is made of research evidence for the benefit of people who use [health](#) and social care services."

The study, Improving reporting of Meta-Ethnography: The eMERGe Reporting Guidance, is published in the *Journal of Advanced Nursing*, *BMC Medical Research Methodology*, *Review of Education* and *Psychoncology*.

More information: Emma F. France et al. Improving reporting of meta-ethnography: The eMERGe reporting guidance, *Journal of Advanced Nursing* (2019). [DOI: 10.1111/jan.13809](https://doi.org/10.1111/jan.13809)

Find out more about the eMERGe project at emergeproject.org/

Provided by University of Stirling

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