WELCOME TO VICTOR

A pack for co-ordinators wishing to use the VICTOR approach

VICTOR (making Visible the ImpaCT Of Research) is a tool which has been co-produced with NHS organisations to help identify and capture the impact of taking part in research within their organisation.

VICTOR takes into account existing literature and the areas in which impact is important in the NHS. It sets out six domains of potential impact, and this information is collected by a questionnaire method, or by using the questionnaires to guide conversations. VICTOR enables engagement with research participants, professionals, managers and researchers to identify impact that has happened where it matters to them.

VICTOR findings can be used to raise awareness of research impact in the NHS or across healthcare systems, and help plan for improved impact in future.

Follow our website (http://clahrc-yh.nihr.ac.uk/victorimpact) and twitter (#VICTORImpact) to find out how others have used VICTOR.

VICTOR pack contents:

- **How to use VICTOR.** This section is for Impact Case Study Co-ordinators (ICC) to guide them through the VICTOR process.
- **VICTOR Impact Questionnaire: Principal Investigator, Research Team, Research Manager and Industrial Partners**. This is the questionnaire to be used with most stakeholders. It can be self-completed or used as a structured interview/ guided conversation to collect information.
- **VICTOR Impact Questionnaire: Patient, Family and Carers**. This questionnaire is for research participants and their family. We find this is best used as a structured conversation.
- **Summary document**. This is a document used by the ICC to pull out the most relevant material collected during the VICTOR process, and to summarise this. This section also includes a populated example of a summary document.
- **Impact planning template**. This can be used by the ICC in partnership with the research team to plan further action where needed, in order to promote more impact. This is used only when a need for further planning is thought to be useful.

This documentation has been produced as part of the VICTOR study, funded and supported by NIHR CLAHRC Yorkshire and Humber and CRN Yorks and Humber. The VICTOR study is hosted by Sheffield Teaching Hospitals NHS FT © 2018

How to use VICTOR

1. **Select a project**.
   An individual (usually in the R&D department) identifies a project that has finished or is still underway within the NHS organisation. To start with it is best to try and identify a project that you think might be impactful or beneficial to your organisation. Consider whether you need to discuss your plans with the Sponsor; studies using NIHR standard agreements require publicity to be agreed by both parties.

2. **Identify a person who will be the Impact Case Study Coordinator (ICC) in your organisation.**

   This person will:
   a. identify people who will complete VICTOR
   b. plan the collection of information via the questionnaire, and summarise the information provided by the completed questionnaires
   c. make sure that the findings are shared with the right people, and the information uncovered by VICTOR goes to the right place
   d. the ICC may also help with further impact planning with the clinical and research teams

3. **The ICC identifies people who can complete elements of the VICTOR case study.**

   This can include any of the groups identified in the table below.
   Make sure if you collect information from patient/ carer research participants, you use an approach that is in accordance with governance procedures of the Trust and project ethical approval. It may only be possible to collect information with user and patient research participants for projects that are on-going during their regular contacts with the Trust. However, our experience is that it really is worthwhile to give participants a chance to share their experiences and provide impactful stories.

ICC Contacts			
Principal Investigator: The person in charge of running the study in the Trust.			
A research team member; A nurse, Allied Health Professional, member of the medical team or ward staff. These people recruit patients and introduce the study to the patient.		**Patient, Family and Carers**	
Research Manager: This person has an overview of the studies in the Trust, links to senior management in the Trust and links to wider research networks external to the Trust.		**Industry Partner: Not all studies have an industrial partner. However, if** there is an industrial partner; this might include firms linked to technology development, data linkage and drug development.	

4. **The ICC invites the VICTOR contact to complete the relevant elements of the VCTOR tool**. The ICC can either:
   a. interview the contact and use VICTOR as a structured interview schedule and record the answers on the word document or paper copy of the questionnaire
   b. asks the VICTOR contact to complete the word document in their own time and send back to them

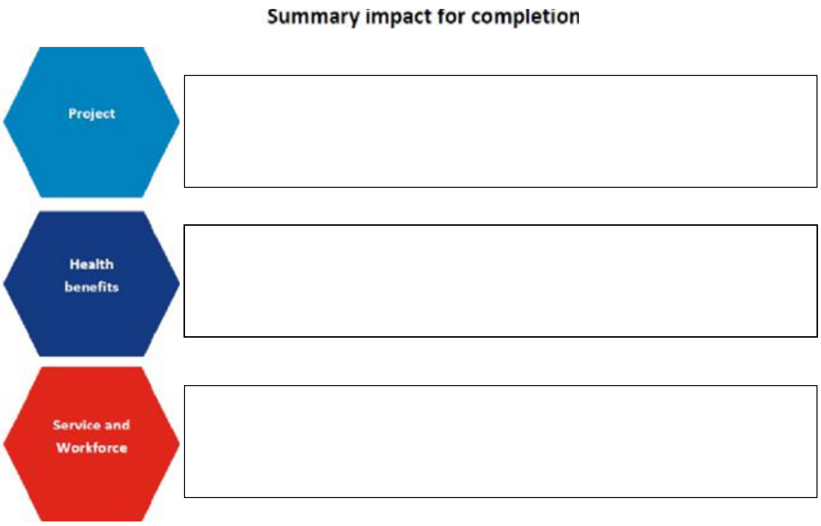
   The ICC is reminded to:
   e. please ask the VICTOR contact to provide as much detail as possible when giving YES responses to any of the questions. The prompts may help with shaping these detailed descriptions based on the contacts experience in the project. Evidence like tweets, pictures/ films and photos as well as a description can be useful provide evidence of impact
   f. for any 'NOT YET' responses, the ICC should discuss with the VICTOR contact to plan further impact and log this. This can then be used to see the impact planning form.

5. **Patient, family and carer engagement**.
   Research participants have their own questionnaire which was created with service user input. How you identify and plan to engage with research participants should be undertaken in accordance with your governance processes and follow up plans in the study. Some ways that people have engaged research participants includes: as part of regular follow up visits; Patient and Public Involvement steering group members who have agreed to be contacted in the future; during completion of Patient Research Experience Surveys (PRES) and via research service user groups.

6. **Engaging with Industry.**
   If the study has an industry partner the main questionnaire can be used in the same way as with colleagues within the Trust.

7. **The ICC collates the questionnaire responses**.
   These are then summarised into the summary document template, an example of part of this document is below.

   The summary document should be shared with the VICTOR contacts to ensure that they are happy with this summary before this is used more widely.



Summary impact for completion

Project	
Health benefits	
Service and Workforce	

8. **Use the findings to highlight the impact of doing research in your organisation**.
   This might include in Board presentations, evidence for QCQ submissions (research is now within the 'well led' framework), share with communications teams for internal and external sharing via social media promotion, press releases, websites etc. You could also discuss with study teams internally and externally to inform future research. Some of this evidence might be useful for researchers in that it can provide testimonials of benefit in the 'real world'. This may also be helpful for further research planning.

9. **Action planning about further impact**.
   Where the 'NOT YET' responses have been given by the VICTOR contact, the ICC can work with them to plan and maximise contact using the Impact Planning Template.

10. **Further collection.**
    Some teams plan to use the VICTOR tool more than once with the same project to uncover benefits of doing research over time during and after the project has finished.

VICTOR Impact Questionnaire:

Principal Investigator, Research Team, Research Manager and Industrial Partners

Your name:

Your role:

Date of Questionnaire completion:

Project title:

Organisation:

Thank you for agreeing to complete this questionnaire. We are collecting information about the impact of the research study in which you have been involved. We will be combining these answers with those of other people involved across the organisation. This will help to make visible the impact of doing research in our organisation, and to share this with others.

We hope to produce impact case studies about the research for use in our organisation, and will also produce information for presentations, the annual plan, our website and others.

Please read through all the questions before completing the form to help avoid duplication of answers. We are not expecting answers to every question but please ensure the most important aspects of the research impacts are included.

As we are speaking to only a handful of people involved in the study, it is possible that what you say will be identifiable so please inform us if you wish for anything to be kept confidentia

Are you happy for your answers to be used in this way? (Please circle a response)

YES	NO

A.Health benefits, safety and quality improvements for research participants and carers during the study

Question	Yes/No/Not Yet	Please give examples/describe
1. Health benefit Have there been any health or quality of benefits to study participants, family or carers as a result of taking part in the study? ***Prompt****: quality of life impacts, access to different treatments; care delivered differently; quality of information provided; health literacy; providing the same quality of care for a reduced cost.*		
2. Experience During the study, were there any changes made to patient care that improved the experience of care for participants, carers or family as part of/as a result of being in the study? ***Prompt****: Information giving, carer support, carer interventions; health literacy.*		
3.Patient safety Are there any examples of improved governance and/or safety for patients taking part in the study? ***Prompt:*** *Improvements to quality of research in terms of scientific quality, standards of ethics and related management aspects – Set up, conduct, reporting and progression towards healthcare improvements*		
4. Social capital Are participants/carers better connected or part of any new networks as a result of taking part in the research? ***Prompt****: self-help groups, increased social networks or activities*		

B. Service & Workforce impacts

Question	Yes/No/Not Yet	Please give examples/describe
1. Service change Has anyone in the organisation started doing something or stopped doing something clinically as a result of the research? In addition to this; has this resulted in improved care of patients after the study has finished? ***Prompt****: quality of life impacts, access to different treatments; care delivered differently; quality of information provided; health literacy – leaflets and guidance.*		
2. Clinical or generic skills Does anyone have new **clinical skills** as a result of the research? This could include skills developed as a result of being involved in the study or skills that have been developed since the study finished because the benefit of having these skills was demonstrated by the research. ***Prompt****: any clinical training* *Please note research skills are also covered in the next section.*		

3. Workforce Has the workforce changed as a result of the research? For example have there been any changes to job roles or structures? ***Prompt****: This could be during the study or after the study*		
3. Collective action Has taking part in this research influenced your team to do anything different together? ***Prompt:*** *Collective changes to patient care, skills, confidence and/or quality improvements*		
4. Guidelines Is there a different use of, or further adherence to, clinical guidelines as a result of the study – either during the study or afterwards? ***Prompt****: these could be national guidelines, or those developed more locally as a result of the study.*		

C. Research Profile of the organisation and research capacity

Questions	Yes/No/Not Yet	Please give examples/describe
1. Research culture Has the study changed the culture and attitudes to research in the service or organisation? ***Prompt:*** *Are you measuring impact now; increased willingness to get involved in research; increase in confidence; Patient and Public Involvement*		
2. Research awareness Has staff awareness of research changed as a result of the organisation taking part in this study? ***Prompt****: Any examples of how this was achieved or is evident?*		
3. Research capacity Has anyone developed new **research skills**, knowledge and experience making them more likely to be involved in future research? ***Prompt:*** *New career choices, research roles, individual clinical and research links; collaborations on further grant applications*		

Questions	Yes/No/Not Yet	Please give examples/describe
4. Networks and collaborations Has the organisation joined or created any new research networks, partnerships, collaborations as a spin off from the research? These may be internal or external.		
5. Engagement Has the study attracted the interest of others who were not involved before the study? ***Prompt***: *Colleagues in your department, other departments, and/or other organisations?*		

D. Economic Impacts

Question	Yes/No/Not Yet	Please give examples/describe
1. Cost saving/cost effectiveness changes Has the adoption of research findings realised any cost savings or promoted cost effective service (i.e. same costs better quality of care)?		
2. Commercialisation Did the research develop products that generate income or create commercial innovations?		
3. Income Was the study commercially funded and sponsored? Did it generate any income for the organisation? Did it generate any grant income?		

E. Organisation's influence and reputation

Question	Yes/No/Not Yet	Please give examples/describe
1. Cohesion Has taking part in the research impacted on relationships between professions/departments/sectors?		
2. Reputation Has taking part in the study had an impact on the profile/reputation of your team or organisation?		
3. Recruitment and retention of staff As a result of the study has there been any impact on recruitment into roles and retention of staff		

F: Knowledge Generation and Knowledge exchange

Question	Yes/No/Not Yet	Please give examples/describe
1. Formal dissemination Have there been any dissemination events, presentations, conferences or publications about the study, within the organisation or externally?		
2. Knowledge sharing Are there any new ways of sharing knowledge within the organisation or between your organisation and others as a result of the research. (**Prompt:** new groups, networks, face to face/other media)		
3. Outputs Have any tools useful for practice been developed by the research that the organisation is now using?		

F. Anything Else

If you feel the research study impacted in ways not outlined in the previous questions, please outline your findings here.

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VICTOR Impact Questionnaire:

Patient, Family and Carer

Project title:

Organisation:

Thank you for agreeing to help. We would like to understand your experience of being involved in a research study. We are looking at the study to see what the impact has been in our organisation and people using our services, so that we can share this with other people and learn from it for this study and for research in the future.

We hope to produce impact case studies about our research, and will also produce information for presentations, the annual plan and our website.

Please read through all the questions before completing the form to help avoid duplication of answers.

Because we are speaking to only a handful of people involved in the study, it is possible that what you say will be identifiable so please let us know if you wish for anything to be kept confidential.

Are you happy for your answers to be used in this way? Please circle your answer.	
Yes	**No**
Signature:	**Date:**
Interviewer:	**Date:**
Study name:	

Question	Yes/No/Not Yet	Please describe/give examples.
1. Were there any changes to the care you received because you were taking part in the study? *Prompts: Quality of life impacts; access to different treatments, care delivered differently; quality of information provided; health literacy; providing the same quality of care for a reduced cost.*		
2. Have you learnt anything new from taking part in this study?		
3. After taking part in this study, would you be happy to take part in research in the future?		
4. Are you better connected to others as a result of being part of this study?		

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Summary impact for completion

Project

Health benefits

Service and Workforce

Research profile and Capacity

Economy

Influence

Knowledge

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Example of a completed summary document

Project

PoCC & SCIPs at Mid Yorks NHS Trust
667 patients were recruited into two studies in 16/7 and 17/18 studying point of care creatinine testing in radiology

Health benefits

- A screening questionnaire was used to monitor the risk of acute kidney injury. In some patients, acute kidney function changes place them at increased or decreased risk. This was closely observed and managed in the studies.
- The patients involved in designing the study gained significant level of information about contrast scans and risk.

Service and Workforce

- A screening questionnaire was introduced to CT the scanning service which has now been embedded into CT and MRI pathways enabling identification of risk factors for kidney dysfunction.
- Point of care devices from the study continue to be used to as a change to the clinical pathway.
- Research participation prepared the team for changes in RCR guidelines on contrast use, introduced after the study.

Research profile and capacity

- Locally initiated ‘grass roots’ research led by AHP researchers who have developed skills and confidence in leading research.
- Collaborations have continued with NIHR DEC, University of Leeds and Leeds Teaching Hospitals. There was engagement and funding from AHSN Y&H and support from the NHS BSA.
- Collaboration across radiology, phlebotomy and pathology – strengthened team working and provided opportunities to engage in research to new staff groups.

Economy

- Cost effectiveness model is being developed for when the pathway is redesigned in the next stage of research/implementation –there will be fewer interventions but some additional cost. Savings are expected.
- The study brought industry and grant funding into the Trust.

Influence

- Initiated NICE Medtech Innovation Briefing (MIB) –Trust as clinical experts.
- Retaining high quality clinical staff with secondment opportunity into a rare research radiographer role.
- At an organisational level there has been recognition that it is possible to develop locally led studies of high quality that can gain portfolio adoption.
- There have been strengthened relationships between radiology and pathology

Knowledge

- The development of performance data for point of care testing for creatinine.
- Presented at European Congress of Radiology, UK Radiological Congress, National Radiology Managers Conference and NHSI National Imaging Optimisation Delivery Board.
- Three peer reviewed publications

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Title of project:
Organisation:

Impact planning template

VICTOR tool question heading (domain) where NOT YET response given	What is your goal?	How will you get to your goal? By when?	Who can help you?

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