Royal College of Nursing

Research & Development Co-ordinating Centre

Website Evaluation Report

Professor Martin Johnson

Dr Carol Haigh

Salford Centre for Nursing, Midwifery
& Collaborative Research
## Contents

- Key messages from the study ................................................................. 1
- Background to the study ........................................................................ 2
- Project Aim ............................................................................................ 3
- Project Objectives .................................................................................. 3
- Sample & Methods .................................................................................. 4
- Ethics & Data Storage .............................................................................. 5
- Data Analysis .......................................................................................... 5
- Literature review ..................................................................................... 6

  | Table 1 Search Terms and databases | 6 |
  | Information technology and health care professionals | 7 |
  | Nurses’ Internet usage | 8 |
  | E-mail and Nurses | 9 |

## SURVEY RESULTS

- **General Question 1 – What is your profession?** .................................. 11
  - Table 2 - Question 1 Responses ......................................................... 11
  - General Question 2 – What is your occupation? .................................. 12
  - Table 3 - Occupation ........................................................................... 12
  - General Question 3 – Are you an RCN member? .................................. 12
    - Table 4 - RCN Membership .............................................................. 13
    - Figure 1 - Are you an RCN member? ................................................ 13
  - General Question 4 – What type of organisation do you work for? .... 14
    - Table 5 - Type of Organisation ....................................................... 14
    - Figure 2 – Type of organisation ...................................................... 15
  - General Question 5 – Are you a designated R&D lead? ...................... 15
    - Figure 3 - R & D Lead ..................................................................... 15
  - General Question 6 – How old are you? ............................................. 16
    - Figure 4 - Age distribution .............................................................. 16
  - General Question 7 – What is your gender? ...................................... 17
    - Figure 5 - Gender of respondents ................................................... 17
  - General Question 7 – What is your ethnic group? .............................. 17
    - Table 6 - Ethnic group of respondents .......................................... 17

## Web Site Question

- Web Site Question – How often do you access the RCN R&DCC Website? 18

## Web site questions

- Web site question – where do you access the web site? ....................... 19
- Web site questions – How did you find out about the RCN R&DCC website? 20
Website question – How would you rate yourself at finding information on the internet? ......................................................... 20

Figure 8 – Self rating on using the internet ...................................................... 21

E-mail question – Do you receive the weekly email update? ...................... 21

Table 8 – How many receive the weekly e-mail ........................................... 21

E-mail question – How did you join the weekly update? ............................. 22

E-mail question Do you find the weekly email useful? .............................. 22

Figure 10 – Do you find the weekly e-mail update useful? ......................... 23

E-mail question – Do you further disseminate the email within your organisation? 23

Table 9 – Dissemination of weekly e-mail update ..................................... 23

E-mail question – How do you find the length of the email? ....................... 24

E-mail question – How do you find the frequency of the weekly email? .... 24

Figure 12 – E-mail frequency .................................................................... 25

E-mail Question – Each month end we list diary dates for the coming month. Do you find this useful? ........................................ 25

Table 10 – Do you find the diary dates useful? ............................................ 25

Results - Correlations .................................................................................. 26

Correlation 1 ............................................................................................... 26

Table 11 - Correlation between perceived technological skill and age ....... 26

Correlation 2 ............................................................................................... 26

Table 12 – correlation between perceived technological skill..................... 26
& frequency of accessing website ............................................................... 26

Correlation 3 ............................................................................................... 27

Table 13 – correlation between type of organisation and dissemination practice ... 27

Correlation 4 ............................................................................................... 28

Table 14 – correlation between dissemination practice and R&D lead role 28

Correlation 5 ............................................................................................... 28

Table 15 Correlation between perceived usefulness of weekly update and dissemination practice ........................................ 28

OUTCOMES OF THE QUALITATIVE ANALYSIS ............................................ 29

COMMENDED ASPECTS ........................................................................... 29

Content ........................................................................................................ 29

Keeping up to date ...................................................................................... 29

Funding opportunities .................................................................................. 30

Conferences, events and jobs ..................................................................... 30

Quality and Utility ....................................................................................... 31

AREAS FOR POSSIBLE DEVELOPMENT .................................................. 32

Content ........................................................................................................ 32
Key messages from the study

- The RCN R&D co-ordinating centre provides an excellent service to a large number of nurses and others with an interest in research.
- Many of the features of the web and email service, and especially the approachability and responsiveness of the staff responsible are highly commended by users.
- A wide range of people uses the service, up to 25% of which are not RCN members. The centre could target its publicity at nursing students and practitioners to improve the web site use by future researchers.
- Apart from difficult links from the main RCN site, especially for non-members, the website is easily found and accessed from the email, or standard search engines such as ‘Google’.
- The centre may wish to review its website to reflect and enhance the other dimensions of usage such as by other disciplines, nurses working in a multi-disciplinary capacity, nurse specialists and overseas users.
- Many aspects of the service, such as funding opportunities, conferences and events, and hyperlinks to relevant sites may viewed as ‘standard resources’ and these should be identified and strengthened.
- The RCN R&DCC and the Research Society will need to consider whether migration of the service to RCN central provision should be undertaken in a way which preserves the ‘open’ access to services.
- The possibility of ‘interactive’ elements of the site, for discussion and training in aspects of research should be considered.
Background to the study

The Royal College of Nursing Research & Development Co-ordinating Centre (RCN R&DCC) was established in 1998 in order to engage the research community and influence research utilization in clinical practice. Research, consultancy and partnership working has underpinned all of the Centre’s developments (RCN R&DCC, 2005).

Centre Aims

The Co-ordinating Centre provides advice and information, research and consultancy services on anything and everything to do with research and development (R&D) in nursing. Staff at the Centre work in partnership with the RCN Research Society and other key stakeholders to promote excellence in care through R&D.

Stakeholders include:

• nurses working in all areas of clinical practice, research, education and management
• healthcare providers and higher education institutions
• funders of both research and/or development

A web site has now been active since 1998 to promote two-way communication flows, act as an information source and cascade research principles. However, the site has had no formal evaluation although anecdotal evidence has been generally positive.
The site and the regular email information service have evolved in that time. In order to continue to provide a first class service to users, it was important to conduct a more focused evaluation of the web site and the weekly email update.

In addition to this, there is also a plan to migrate the RCN R&DCC web site over to the RCN main web site as soon as the conditions are conducive. This will help to achieve a corporate feel to the site, and is consistent with work currently being undertaken with Field of Practice Zones (e.g. the RCN Mental Health Zone). Part of the purpose of this evaluation was to inform that process. Putting the website on the RCN server could also improve the number of people accessing the site, but will need to take account of rules of access.

**Project Aim**
To evaluate the RCN R&DCC website and weekly e-mail up-date.

**Project Objectives**
In general terms the project was designed to find out:

- Who is using the site?
- How did they find out about it?
- Why are they using the site?
- What information are they looking for?
- Do they find the information? If not, why not? Is the information not on the site, or can they not find it?
- What else would people like to see on the site?
- Is the site easy to navigate?
**Sample & Methods**

Following external peer review a questionnaire was developed by the Research and Development Co-ordinating Centre, web enabled by RCN member David Dawes, and placed upon the RCN R&DCC website (See Appendix 1). Since the inception of the RCN R&D Co-ordinating Centre, the details of link R&D nurse contact have been requested from every academic institution which offers a health-related (pre or post-registration) course, every NHS clinical institution in the UK, and various other R&D or relevant bodies (for example, Department of Health, NICE, Healthcare Commission, COREC etc). This exercise is repeated every 2 years, the most recent being Nov 2004 – Feb 2005. At present, the R&DCC have 100% coverage (n=138) of R&D leads in academic institutions and 81% coverage (n=1,061) in the NHS. Additionally, the update is sent to R&D leads in 46 R&D organisations, 261 contacts from outside the UK, and 2,340 individuals who have expressed an interest in receiving the weekly electronic bulletin. Numbers are not accurate because some contacts are actually distribution lists (so for example, 1 university has a distribution list for its entire research staff (over 100 people), but only shows up as 1 entry on the R&DCC database). Thus, the sample is drawn from a population of those individuals who are already aware of the website via the RCN R&DCC electronic bulletin but also from those who may have discovered the website by other means (for example, Internet search engines, or colleagues’ recommendations).

The questionnaire was designed to provide quantitative data via forced choice responses from drop down menus and some qualitative data via free text responses. Section one (General questions section. Questions 1-8) provided demographic and
professional data such as occupation, age and sex. Section two (Web site questions. Questions 9-15) focussed upon the RCN R&DCC website. The final section (E-mail questions. Questions 16-25) evaluated the weekly e-mail service. Each section consisted of both forced choice and free text questions.

**Ethics & Data Storage**

Responses were voluntary and returned by email. Consent was implied by questionnaire completion. Haigh and Jones (2005) note that this form of implied consent is appropriate in sample groups who are over 18 and when potential harm to respondents is low.

These electronic responses were anonymised for analysis. Electronic data were stored on password protected computers in accordance to Medical Research Council (MRC 2000) guidelines and were monitored and managed by the research team. Participant anonymity and confidentiality were ensured as all identifying data was removed from the overall data set that was used for analysis.

**Data Analysis**

The survey responses were coded and analysed using the Statistical Package for Social Sciences Version 12 (SPSS). Whilst the majority of this analysis was descriptive in nature, the information obtained from the literature review suggested possible correlations that required investigation.
Qualitative data was analysed via the NVivo™ analysis package. Responses were collated as Word™ documents and imported as rich text into NVivo™ where they were coded line by line. Subsequently, models reflecting overall question responses were developed from initial categories (nodes). See appendices 2 and 3 for examples.

**Literature review**

The primary focus of this study was to evaluate the access that people had and the uses they made of the RCN R&D Co-ordinating Centre (RCN R&DCC) Web Site. To contextualise the data obtained a literature review was carried out to obtain an insight into the technological behaviours and attitudes demonstrated by health care professionals. Table 1 shows the search terms and databases used.

<table>
<thead>
<tr>
<th>Database</th>
<th>Search terms</th>
</tr>
</thead>
<tbody>
<tr>
<td>Swetswise</td>
<td>Electronic Publishing/ or Information Resources/ or Information Services/ or</td>
</tr>
<tr>
<td>Blackwell Science</td>
<td>Remote Access to Information/ or Electronic Publications/ or World Wide</td>
</tr>
<tr>
<td>Science Direct</td>
<td>Web/ or Access to Information/ or Internet/ or Information Technology/ or</td>
</tr>
<tr>
<td>Ovid</td>
<td>ELECTRONIC INFORMATION.mp.</td>
</tr>
<tr>
<td>Cinahl</td>
<td>Electronic information Technology use</td>
</tr>
<tr>
<td>Medline</td>
<td>Technology Application</td>
</tr>
<tr>
<td>Google</td>
<td>Nurses’ internet use</td>
</tr>
<tr>
<td></td>
<td>e-mail</td>
</tr>
</tbody>
</table>

**Table 1 Search Terms and databases**
Citation tracking (obtaining references from existing papers) was used and provided additional information.

Inclusion criteria for the search were –

- Papers should be in the English language
- Papers should be downloadable in full text format
- Papers should generally be less than 10 years old
- Papers should be research based
- Papers should be from a reputable or university linked site (for Google internet search)

The search terms outlined produced large numbers of hits, typically >3000 for Ovid etc and >2,000,000 for internet searches. However the majority of these papers focused upon the use of Internet or electronic resources by patients (see for example, Barraff et al, 2003, Lenert et al. 2003). When search terms were narrowed down to specific e-mail communication such as is examined within this study considerably less papers were available (typically 10 from 1245 hits) and these again were more concerned with the use that patients made of this technology. However the focal point of this study is the use made, and opinion of, a specific e-mail communication and website by nurses. Exploration was made throughout the remaining literature to obtain insight into attitudes to technology within this professional group.

**Information technology and health care professionals**

Nurses have been involved with the application of technology to their clinical role for decades. The integration of technology into health care and the accompanying expression of technophobia amongst health professionals have been widely explored. Much of the work has focused upon the use of information systems in nursing with the work of Timmons and Miller (2002) being a good example. In many cases the
application of computer technology, in nursing in particular, has been limited to accessing laboratory reports and the generation of patient care plans (Turansky, 2000). Weil et al. (1990) calculated that “at least 10% and as many as 40% of the population experiences mild or severe discomfort with computer technology”. It is tempting to suggest that, since the Weil study is now over a decade old this is not currently the case, however the pace of technology and the expectation placed upon health professionals by a computer literate patient population may contribute to similar levels of computer phobia today. Equally, Timmons and Miller (2002) found that nurses’ view computer use as ‘administration’ rather than ‘hands on care’ regardless of the focus of activity.

Webster et al. (2003) noted that although older members of staff are more likely to have attended computer courses than their younger colleagues they may still be less equipped to deal with technology. They argue that any new technology that is introduced into health care practice should take different levels of competence into account. Furthermore, Webster and colleagues suggest that those nurses who do not have significant opportunities to apply technology in health care, such as long term night staff, may pose particular challenges. This resonates with the work of Sinclair (2001) who argued that individuals who trust technology are more disposed to its application and that level of trust is affected by perceived competence. However Kearns (2000) notes that as more nurses have access to computers both at work and at home competence and confidence can be argued to be stronger.

**Nurses’ Internet usage**

Crawford (2003) noted that nurses tended use to internet sources to obtain evidence for practice. This usage must, however, be viewed within the context of concerns
expressed in nurse education regarding the gap between research activity and clinical application (Camiah, 1997, Pallens & Timms, 2002). The importance of ‘trusted’ sites, typically defined as those requiring a password to access them was emphasised. Kearns’ contention regarding the access of health care professionals to computers was supported with 90% of Crawford’s sample accessing electronic information ‘off site’ i.e. from home.

The use of the internet to obtain information can be viewed by nurses as a legitimate part of their clinical role (Gosling et al, 2004). The role of electronic sources in providing research focused information was acknowledged by 45% of Gosling et al’s sample.

E-mail and Nurses

The use of e-mail as a primary method of communication was explored by Bunting et al. (1998) who reviewed the experiences of a number of cross-European researchers collaborating on a project. They suggest that e-mail provided an ‘unexpected bonus’ in that asynchronous communications allowed for greater thinking time and increased absorption of the material communicated.

The importance of training was highlighted by Hughes and Pakheiser’s (1999) study as a factor that positively affected nurses’ use of e-mail. Volume of mail was seen as negatively affecting e-mail usage as did lack of technical support. These concerns were mirrored by the findings of the Royal College of Nursing (2004) study into ‘Nurses and NHS IT developments’. This study found that 92% of respondents felt that 24 hour technical support was essential or very important. Training as an issue
was likewise emphasised by this study with 37% of respondents receiving training in the use of technology and only 6% of that training being more than half a day.

In conclusion, the literature suggests that nurses are not averse to using electronic sources of information to support and supplement practice. They are aware of the barriers that a lack of training and technical support can impose but are aware of e-mail and the internet as potential sources of professional up-dating.
SURVEY RESULTS

The results presented in this section are differentiated by analysis. The quantitative data are presented first, followed by the qualitative analysis of the free text items.

OUTCOMES OF THE QUANTITATIVE ANALYSIS

This section reports data that was obtained from the forced choice response questions. The minimum number of recipients of the electronic bulletin is 4000; however, a formal response rate is inappropriate as the total number of email recipients is unknown. Nonetheless a reasonable number of completed questionnaires was returned (N = 461). The first question asked respondents to identify their ‘profession’ in terms of parts of the nursing register.

_General Question 1 – What is your profession?_

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missing data</td>
<td>4</td>
<td>.9</td>
</tr>
<tr>
<td>nurse</td>
<td>375</td>
<td>81.3</td>
</tr>
<tr>
<td>midwife</td>
<td>12</td>
<td>2.6</td>
</tr>
<tr>
<td>health visitor</td>
<td>23</td>
<td>5.0</td>
</tr>
<tr>
<td>AHP</td>
<td>8</td>
<td>1.7</td>
</tr>
<tr>
<td>general manager</td>
<td>8</td>
<td>1.7</td>
</tr>
<tr>
<td>other</td>
<td>31</td>
<td>6.7</td>
</tr>
<tr>
<td>Total</td>
<td>461</td>
<td>100.0</td>
</tr>
</tbody>
</table>

_Table 2 - Question 1 Responses_

Table 2 shows that the majority of the responses were from nurses (81.3%, n = 375), 7.6% were from midwives or health visitors (n= 35). 8 responses were from Allied Health Professionals (1.7%)
**General Question 2 – What is your occupation?**

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missing data</td>
<td>12</td>
<td>2.6</td>
</tr>
<tr>
<td>academic researcher</td>
<td>69</td>
<td>15.0</td>
</tr>
<tr>
<td>clinical researcher</td>
<td>44</td>
<td>9.5</td>
</tr>
<tr>
<td>lecturer</td>
<td>51</td>
<td>11.1</td>
</tr>
<tr>
<td>nurse/midwife/HV in clinical practice</td>
<td>95</td>
<td>20.6</td>
</tr>
<tr>
<td>AHP in clinical practice</td>
<td>2</td>
<td>.4</td>
</tr>
<tr>
<td>librarian</td>
<td>2</td>
<td>.4</td>
</tr>
<tr>
<td>NHS R&amp;D manager</td>
<td>28</td>
<td>6.1</td>
</tr>
<tr>
<td>nurse executive director</td>
<td>16</td>
<td>3.5</td>
</tr>
<tr>
<td>policy advisor</td>
<td>7</td>
<td>1.5</td>
</tr>
<tr>
<td>student</td>
<td>6</td>
<td>1.3</td>
</tr>
<tr>
<td>other</td>
<td>129</td>
<td>28.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>461</strong></td>
<td><strong>100.0</strong></td>
</tr>
</tbody>
</table>

Table 3 - Occupation

A further question asked for detail of the ‘occupation’ or role played. As might be expected for a questionnaire circulated to people on the RCN R&DCC contacts list, Table 3 shows that the majority of responses, 41.2% (n = 192) are from active researchers, research managers or academics. 20.6% (n = 95) of respondent were in clinical practice. There was evidence that some student nurses access the site, however only 6 (1.3%) of respondents were students. The definition of student may include postgraduates rather than pre-registration students.

**General Question 3 – Are you an RCN member?**

Table 4 and figure 1 show that most of the people accessing the RCN R&DCC services are RCN members with 330 (71.6 % N = 461) respondents holding some form of RCN membership. It is clear that many nurses (n = 122, 26.5%) who access
the site are not RCN members and an important minority of midwives, health visitors and managers may not be members. Migration to the main RCN site under current rules with RCN number log-in may reduce this access. The R&DCC and the Research Society might wish to consider how open access to these people services should be.

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missing data</td>
<td>7</td>
<td>1.5</td>
</tr>
<tr>
<td>yes - full</td>
<td>321</td>
<td>69.6</td>
</tr>
<tr>
<td>member</td>
<td></td>
<td></td>
</tr>
<tr>
<td>yes - student</td>
<td>3</td>
<td>.7</td>
</tr>
<tr>
<td>member</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes associate</td>
<td>6</td>
<td>1.3</td>
</tr>
<tr>
<td>member</td>
<td></td>
<td></td>
</tr>
<tr>
<td>no</td>
<td>122</td>
<td>26.5</td>
</tr>
<tr>
<td>not sure</td>
<td>2</td>
<td>.4</td>
</tr>
<tr>
<td>Total</td>
<td>461</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Table 4 - RCN Membership

Figure 1 - Are you an RCN member?
**General Question 4 – What type of organisation do you work for?**

Table 5 and Figure 2 demonstrate that a majority of the respondents who use the RCN R&DCC resources (54%) were from the NHS, and those from UK academic institutions were just less than a third of users (29% n= 127). An international dimension was added with 3.3% of users (n = 15) being outside of the United Kingdom.

<table>
<thead>
<tr>
<th>Type of Organisation</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missing Data</td>
<td>12</td>
<td>2.6</td>
</tr>
<tr>
<td>NHS</td>
<td>249</td>
<td>54.0</td>
</tr>
<tr>
<td>UK academic</td>
<td>127</td>
<td>27.5</td>
</tr>
<tr>
<td>UK Government</td>
<td>6</td>
<td>1.3</td>
</tr>
<tr>
<td>UK independent sector</td>
<td>4</td>
<td>.9</td>
</tr>
<tr>
<td>UK Locality commissioning group</td>
<td>21</td>
<td>4.6</td>
</tr>
<tr>
<td>UK industry/charity</td>
<td>11</td>
<td>2.4</td>
</tr>
<tr>
<td>non-UK</td>
<td>15</td>
<td>3.3</td>
</tr>
<tr>
<td>other</td>
<td>16</td>
<td>3.5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>461</strong></td>
<td><strong>100.0</strong></td>
</tr>
</tbody>
</table>

*Table 5 - Type of Organisation*
What type of organisation do you work for?

Figure 2 – Type of organisation

General Question 5 – Are you a designated R&D lead?

Figure 3 - R & D Lead
Figure 3 shows that the 134 individuals accessing the RCN R&DCC resources function as research and development leads in their institutions.

**General Question 6– How old are you?**

Figure 4 shows the age distribution of the respondents. It can be seen that the ages follow a standard Gaussian distribution. 45.8% of the respondents (n = 211) were within the 41-50 age range. 13 individuals (2.8%) were between 21 and 30 years old and 3 respondents (0.7%) were over 61 years old.

![Figure 4 - Age distribution](image)
**General Question 7– What is your gender?**

![Gender Distribution Graph]

The gender split for all respondents shown in figure is within 1.5 percentage points of the gender split demonstrated by professional registration in the UK (NMC, 2004).

**General Question 7– What is your ethnic group?**

<table>
<thead>
<tr>
<th>Ethnic Group</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missing data</td>
<td>11</td>
<td>2.4</td>
</tr>
<tr>
<td>white-British</td>
<td>376</td>
<td>81.6</td>
</tr>
<tr>
<td>white-Irish</td>
<td>24</td>
<td>5.2</td>
</tr>
<tr>
<td>white-other</td>
<td>31</td>
<td>6.7</td>
</tr>
<tr>
<td>mixed - white &amp; Caribbean</td>
<td>3</td>
<td>.7</td>
</tr>
<tr>
<td>mixed - white &amp; Asian</td>
<td>1</td>
<td>.2</td>
</tr>
<tr>
<td>mixed - other</td>
<td>3</td>
<td>.7</td>
</tr>
<tr>
<td>Asian - Indian</td>
<td>4</td>
<td>.9</td>
</tr>
<tr>
<td>Asian - other</td>
<td>1</td>
<td>.2</td>
</tr>
<tr>
<td>black - Caribbean</td>
<td>2</td>
<td>.4</td>
</tr>
<tr>
<td>Chinese</td>
<td>2</td>
<td>.4</td>
</tr>
<tr>
<td>other ethnicity</td>
<td>3</td>
<td>.7</td>
</tr>
<tr>
<td>Total</td>
<td>461</td>
<td>100.0</td>
</tr>
</tbody>
</table>

**Table 6 - Ethnic group of respondents**
The majority of respondents (81.6% n = 376) categorised themselves as ‘white-British’. 4.2% of the respondents were of an origin other than Caucasian. This is slightly lower than that of NHS where directly employed non-medical staff from ethnic minority groups make up 7% of the workforce (Health and Personal Social Services Statistics, 2002). Of 51 higher education lecturers who responded, three (6%) described themselves as non-white. Similarly according to national data, just over 6% of all academic staff are ‘not white’ (University of Sussex, 2005).

*Web Site Question – How often do you access the RCN R&DCC Website?*

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missing data</td>
<td>11</td>
</tr>
<tr>
<td>daily</td>
<td>2</td>
</tr>
<tr>
<td>weekly</td>
<td>128</td>
</tr>
<tr>
<td>monthly</td>
<td>90</td>
</tr>
<tr>
<td>every few months</td>
<td>32</td>
</tr>
<tr>
<td>as and when I need first time</td>
<td>138</td>
</tr>
<tr>
<td>never</td>
<td>41</td>
</tr>
<tr>
<td>Total</td>
<td>461</td>
</tr>
</tbody>
</table>

*Table 7 – How often respondents access the R&D website*

A significant number of respondents accessed the site (Table 7) on a weekly (27.8% n = 128) or a monthly basis (19.5% n = 90). The most popular method of accessing the site was on a basis of need, with 29.9% (n = 138) of respondents accessing the site as and when they needed it.
Web site question – where do you access the web site?

As figure 6 clearly shows a clear majority of respondent accessed the RCN R&DCC website from work (73.8% n = 340) with a further 14.8% (n = 68) accessing the site from home. 2 (0.4%) respondents accessed the site via a university library and 3 (0.7%) from an NHS library.
Web site questions – How did you find out about the RCN R&DCC website?

Figure 7 – How did you found out about the website

28.6% (n = 130) of respondents claimed to have found the RCN R&DCC website from a link on the RCN main website. 26.9% (n = 124) were recommend to the site from a colleague. 12 (2.6%) of the respondents said that they found the site following a letter from the R&DCC.

Website question – How would you rate yourself at finding information on the internet?

The majority of respondents (n = 272, 59%) classified themselves as ‘competent’ in terms of finding information on the internet with 55 respondents (11.9%) describing themselves as ‘expert’. 87 respondents (18.9%) considered themselves to be
advanced beginners. Only 4.6% (n = 21) of respondents thought they were novices in internet use.

Figure 8 – Self rating on using the internet (by number of total sample)

E-mail question – Do you receive the weekly email update?

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missing data</td>
<td>13</td>
<td>2.8</td>
</tr>
<tr>
<td>yes - directly</td>
<td>349</td>
<td>75.7</td>
</tr>
<tr>
<td>yes - forwarded to me</td>
<td>78</td>
<td>16.9</td>
</tr>
<tr>
<td>no - have heard of it</td>
<td>8</td>
<td>1.7</td>
</tr>
<tr>
<td>no - never heard of it</td>
<td>13</td>
<td>2.8</td>
</tr>
<tr>
<td>Total</td>
<td>461</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Table 8 – How many receive the weekly e-mail
Table 8 above shows that 92.6% (n = 427) of respondents received the weekly update e-mail either directly or via a colleague.

**E-mail question – How did you join the weekly update?**

![Bar chart showing the distribution of how respondents joined the weekly update]

Brooke

Figure 9 – How did you join the weekly update?

Although a considerable number of respondents joined the e-mail update list via the RCN website the most usual route for joining the mailing list was via recommendation from a colleague.

**E-mail question Do you find the weekly email useful?**

Figure 10 clearly shows how respondents perceive the weekly e-mail update with 399 respondents (86.6%) finding it useful. Only 1.5% of respondents (n = 7) did not find
the update useful and 6.1% (n = 28) were unsure. These data are important in contextualising the far greater proportion of the data which supported the usefulness of the service, whilst making some suggestions for change.

![Graph showing the number of respondents answering 'Do you find the weekly e-mail update useful?']

**Figure 10 – Number of respondents answering ‘Do you find the weekly e-mail update useful’?**

**E-mail question – Do you further disseminate the email within your organisation?**

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missing data</td>
<td>21</td>
<td>4.6</td>
</tr>
<tr>
<td>yes</td>
<td>243</td>
<td>52.7</td>
</tr>
<tr>
<td>no</td>
<td>190</td>
<td>41.2</td>
</tr>
<tr>
<td>not sure</td>
<td>7</td>
<td>1.5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>461</strong></td>
<td><strong>100.0</strong></td>
</tr>
</tbody>
</table>

**Table 9 – Dissemination of weekly e-mail update**
Over half of the respondents (52.7% n = 243) pass the weekly e-mail update on to colleagues, which is a major benefit of an electronic service. It was not possible to obtain an accurate assessment as to the number of people to whom the e-mail is forwarded, quantitative responses to this question varied from 2 people to over 120.

**E-mail question – How do you find the length of the e-mail?**

![Figure 11 – Length of the e-mail](image)

**E-mail question – How do you find the frequency of the weekly email?**

Figure 12 shows that 74.4% of respondents (n = 343) found the weekly frequency of the e-mail update to be ‘about right’. 79 respondents (17.1%) thought it too frequent.
**E-mail Question – Each month end we list diary dates for the coming month. Do you find this useful?**

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missing data</td>
<td>41</td>
<td>8.9</td>
</tr>
<tr>
<td>yes</td>
<td>348</td>
<td>75.5</td>
</tr>
<tr>
<td>no</td>
<td>42</td>
<td>9.1</td>
</tr>
<tr>
<td>never noticed it</td>
<td>21</td>
<td>4.6</td>
</tr>
<tr>
<td>not sure</td>
<td>9</td>
<td>2.0</td>
</tr>
<tr>
<td>Total</td>
<td>461</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Table 10 – Do you find the diary dates useful?

75.5% (n = 348) of respondents found the diary dates useful with only 9.1% (n = 41) disagreeing. 21 respondents (4.6% of the sample) had never noticed the ‘diary dates’ feature.
Results - Correlations.

Kolomogorov-Smirnov tests showed that the data was normally distributed, thus it was appropriate to use parametric tests. Bivariate Pearson product-moment correlation was undertaken to evaluate and correlate the linear relationship between a number of different variables.

**Correlation 1**

<table>
<thead>
<tr>
<th></th>
<th>AGE</th>
<th>NETSKILL</th>
</tr>
</thead>
<tbody>
<tr>
<td>AGE</td>
<td>Pearson Correlation</td>
<td>.406</td>
</tr>
<tr>
<td></td>
<td>Sig. (2-tailed)</td>
<td>.01</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>461</td>
</tr>
<tr>
<td>NETSKILL</td>
<td>Pearson Correlation</td>
<td>.406</td>
</tr>
<tr>
<td></td>
<td>Sig. (2-tailed)</td>
<td>.01</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>461</td>
</tr>
</tbody>
</table>

Table 11 - Correlation between perceived technological skill and age

Table 11 shows that there is a medium, statistically significant (p = .01) positive correlation between the two variables (r = .406) with perceived level of technological skill being associated with age, implying that the older a person was, the more likely they were to see themselves as technologically competent

**Correlation 2**

<table>
<thead>
<tr>
<th></th>
<th>HOW OFTEN</th>
<th>NET SKILL</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOWOFTEN</td>
<td>Pearson Correlation</td>
<td>.261</td>
</tr>
<tr>
<td></td>
<td>Sig. (2-tailed)</td>
<td>.01</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>461</td>
</tr>
<tr>
<td>NETSKILL</td>
<td>Pearson Correlation</td>
<td>.261</td>
</tr>
<tr>
<td></td>
<td>Sig. (2-tailed)</td>
<td>.01</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>461</td>
</tr>
</tbody>
</table>

Table 12 – correlation between perceived technological skill & frequency of accessing website
Table 12 shows that there is a small, statistically significant (p = .01) positive correlation between the two variables (r = .261) with frequency of website access being associated with perceived level of technological skill, showing that those who see themselves as competent in the use of technology are open to accessing information via the website.

**Correlation 3**

<table>
<thead>
<tr>
<th></th>
<th>typoforg</th>
<th>dissemin</th>
</tr>
</thead>
<tbody>
<tr>
<td>typoforg</td>
<td>Pearson Correlation</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Sig. (2-tailed)</td>
<td>.01</td>
</tr>
<tr>
<td>N</td>
<td>461</td>
<td>461</td>
</tr>
<tr>
<td>dissemin</td>
<td>Pearson Correlation</td>
<td>.239)</td>
</tr>
<tr>
<td></td>
<td>Sig. (2-tailed)</td>
<td>.01</td>
</tr>
<tr>
<td>N</td>
<td>461</td>
<td>461</td>
</tr>
</tbody>
</table>

**Table 13 – correlation between type of organisation and dissemination practice**

Table 13 shows a small, statistically significant (p = .01) positive correlation between the two variables (r = .239) with type of employing organisation being associated with dissemination practices. This indicates that the type of institution in which individuals worked had an impact upon whether they were likely to forward the e-mail update to colleagues. Data suggests that dissemination is more likely in NHS Trusts than in universities with 60% (n=151) of the NHS sample forwarding the weekly e-mail compared to 40% (n=51) of the university sample.
**Correlation 4**

<table>
<thead>
<tr>
<th></th>
<th>dissemin</th>
<th>rdlead</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pearson Correlation</strong></td>
<td>dissemin</td>
<td>rdlead</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sig. (2-tailed)</td>
<td>.01</td>
<td>.01</td>
</tr>
<tr>
<td>N</td>
<td>461</td>
<td>461</td>
</tr>
</tbody>
</table>

**Table 14 – correlation between dissemination practice and R&D lead role**

Table 14 shows a medium, statistically significant (p = .01) positive correlation between the two variables (r = .372) with dissemination practices, such as forwarding the weekly e-mail up-date to colleagues or recommending the web site being associated with the role of R&D.

**Correlation 5**

<table>
<thead>
<tr>
<th></th>
<th>dissemin</th>
<th>useful</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pearson Correlation</strong></td>
<td>dissemin</td>
<td>useful</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sig. (2-tailed)</td>
<td>.01</td>
<td>.01</td>
</tr>
<tr>
<td>N</td>
<td>461</td>
<td>461</td>
</tr>
</tbody>
</table>

**Table 15 Correlation between perceived usefulness of weekly update and dissemination practice**

Table 15 shows a large, statistically significant (p = .01) positive correlation between the two variables (r = .754) with dissemination practices being associated with perceived usefulness of the weekly e-mail update.
OUTCOMES OF THE QUALITATIVE ANALYSIS

The qualitative data were mainly in the form of short responses to open questions. Although two sets of responses were possible, first to questions about the website and then to those about the email, it became clear that many respondents had conflated their views about each. Generally then, this section of the report discusses mainly the website service. Where there are specific differences about the weekly email these will be highlighted. It is important to stress here that the balance of responses was greatly in favour of the website and email information service being very good or excellent. However, a minority of respondents honestly conveyed irritations and suggestions for improvement which are reported here. These expressed opinions seemed to group into three broad areas of content, quality and utility.

COMMENDED ASPECTS

Content

*Keeping up to date*

The ability to keep up to date through the weekly email and website was a predominant response. A typical quote is:

“It's really good to know what education and research is happening and where”

Furthermore, respondents commonly felt that the site was a gateway to:

“(obtain) updated clinical information and a sense of (what) research (is) currently being undertaken”.
A small number of people felt that it was “difficult to find the time to read through it on a weekly basis”.

**Funding opportunities**

A particularly well-liked feature of the service in terms of keeping up to date is its current information on funding opportunities. One respondent, who is the Deputy Chair of a Multi-professional Research Interest Group, said that she circulated the copy and flagged up research funding calls for proposals to colleagues.

**Conferences, events and jobs**

A great many responses were about the speedy dissemination of conferences, seminars and events:

“It is a good source of information for relevant conferences and I often find new information or sources of information which I wouldn't have got any other way.”

This was also true for employment opportunities and scholarships. Some practitioners clearly read these even when they were at the point of aspiration rather than application:

“It's often about people who are looking for researchers for jobs that are way above me - I just love the practical side of nursing but am really interested in the research and development side and like to keep up to date with the latest info.”
Quality and Utility

Generally people felt that the service was, to quote one of many respondents with similar views:

“an excellent resource for informing large groups of staff about research resource, innovations, developments and events”.

Many respondents liked all the features of the service, refusing to single out areas for criticism. For example, a popular view was that the website is clear and easy to use:

(It is) “easy to navigate, useful information and links, easy to read and to identify areas for dissemination.”

The site was felt to be “well organised” and a “comprehensive database” which is “well signposted and (with) links to appropriate other sites that are up to date and relevant to my needs”.

Linkages to other sites were also a particularly well-liked feature. A brief selection of specific points made include:

- Links for researchers, a directory of forums for support
- Links to other relevant sites
- Links to Regional Research Society Groups
- Links to Research Society Committee members
- Links to research that has taken place on the subjects for further research.
• **Links to some of replies sent by RCN on behalf of members to requests for comments by organisations, committees and DoH**

Respondents generally felt that links worked well and were mostly kept up-to-date. One user felt that "it would take me ages to collate this information myself" and that one of the salient qualities of the website was its rapidity of access and comprehensiveness. For example, some felt that much of the information on the site would not otherwise be easily available, and yet the accessibility of this site was excellent. In the words of one respondent, again relating the website and the email "it comes to me, I don’t have to go looking for it!". It seems clear from the analysis that an even more ‘interactive’ site would be welcomed.

**AREAS FOR POSSIBLE DEVELOPMENT**

**Content**

Readers should remember that over 80 respondents made a point of saying that there was nothing to dislike about the site. Given that the site is managed and resourced by the RCN, a small number of people commented that they did not like the website’s focus on ‘nursing research’, in one case the respondent arguing that it is "Very orientated towards nursing." Some people suggested that the content was “not relevant to their practice”, but more constructively some respondents felt that training and courses are split into regions, which makes it less easy to find courses by date (although in fact a complete listing is also available). On this theme, some respondents identified that some regions had very little information (which is due to their being less activity in that region):
“Regional and research society pages do not appear to be updated on a regular basis. The website is a little insular, and does not provide links or information about multi-disciplinary research (including links to other research societies).”

This respondent makes relevant suggestions which may bear upon the R&DCC and the Research Society’s increasing need to work in an inter-professional and multi-disciplinary way to achieve important aims like the recent Position Paper on Research Governance arising out of collaboration between the RCN, the RCM and the CPHVA http://www.man.ac.uk/rcn/rs/RCMRCNCPPHVFeb05.htm

A ‘search engine’ was one suggestion, which we take to mean within the site to find specific topics, which was alongside a couple of comments that a ‘more interactive’ website might be useful:

“More interactive forums to share info and experiences / ask for help”

This view was shared by a respondent who would clearly have liked a discussion forum on-line. This is an interesting comment in light of the fact that the R&DCC currently has a number of discussion zones (Primary Care, PhD network, Child Health, Promoting Excellence, Agenda for Change) but was not elaborated upon by the respondent. Another suggested that the number of links could be expanded, giving specific examples of links (mostly related to drug trial management) – MRHA www.mhra.gov.uk, EUDRA www.eudravigilance.org, COREC www.corec.org.uk, ABPI www.abpi.org.uk and others.
Whilst the site currently carries some bibliographic material, a small number of respondents wanted “actual publications” or perhaps more realistically, references to recent papers of importance. Two respondents suggested that the site: “Highlight the publication of important news nursing research findings” and “Highlight topical research reports just published” but gave no specific examples. “Research priorities” were mentioned by one respondent, whilst three responses focused on there being an improved listing of employment opportunities.

**Specialisms**

This issue was paid some attention by a range of people from specialist branches of the profession who felt their needs could be better met with more content about their interest area. Such areas of specialist practice or research identified by respondents as warranting more information included:

- Sexual health
- Mental health
- Forensic mental health
- Accident and emergency
- CAM practitioners
- Public health

**Professional Development**

A further category which arose from the data being clearly important to a number of respondents was professional development. The website lists basic guidance from
each of a number of journals, but a request for “advice on how to write for publication” was clearly asking for more detail on this. Three respondents asked specifically for “on-line training” on things like statistics. How to access grants was listed, together with a wish for a more “clinical trials focus” and a specific request for research-based guidelines and resources on consenting, ethical issues etc. These points link with the earlier wish for a more interactive site which might possible have similarities with the RCN ‘Learning Zone’. On the other hand these packages are available elsewhere.

Quality and utility

Some people felt that accessing site was more difficult or complex than they would like, or “lacked colour”. One person suggested that the design was ‘unattractive’ and another that its “instructions could have a friendlier tone”, but without making specific recommendations about how these might be improved:

“Its not snazzy enough - needs modernising. Things are not easy to find on RCN websites in general.”

A pertinent comment clearly from a practitioner suggested that:

“It all seems a bit academic and not for us 'ground workers'. “

Another view was that some use of jargon was off-putting:
“Any use of shortforms or jargon so that you feel you are entering a site where everyone knows more than you do to begin with - can be off putting.”

Although the hyperlinks had been much commended by a majority, some people were still having trouble suggesting that “very occasionally the links to other sites don't work”, notable among these being that the “links from RCN web site to R&DCC don't always work and are difficult to find”. Another person echoed this feeling:

“Couldn't find it through the RCN web-site. Had to use my knowledge of R&D to access it via Manchester University”.

Sometimes links to RCN entities were a problem for the non-members, of which there were quite a large number (26.5 %, n = 122 of respondents), who reported using the site. If the sample is reasonably representative of the 4000 people circulated, then it can be estimated that up to 1200 non-members use the site. At a recent attempt (March 05) even as members, it took several clicks and knowledge of the RCN to find a way to the R&DCC website. Presumably this route is not available to non-members, although a ‘Google’ with the keywords “RCN Research” brings the url up first of 365,000 hits, so the site is accessible through well known gateways.

QUALITATIVE ANALYSIS: CONCLUSION

It is clear that by far the majority of respondents found the website and the email information service that supports it very useful indeed. It is relevant to need, It saves people time, is comprehensive, generally easy to use and to forward to others, and
responsive. It is largely kept up to date except in so far as aspects such as regional sites) are in the hands of others.

In terms of utility, quality and content, few people have anything detrimental to say, whilst a small number do make sensible suggestions, such as greater involvement of multi-disciplinary aspects that might be considered.
DISCUSSION

Accessibility and utility
Although the RCN R&D Co-ordinating centre is clearly seen as a useful resource by individuals who are actively involved in research, the use of the site by clinicians and students is an area for development.

It was interesting that just 134 respondents function as R&D leads for their organisation. It is encouraging that fully 56% of the respondents are employed by the NHS and may go some way towards dispelling the myth that only academics are research focused or have the ease of internet access necessary.

The website was accessed regularly with 29.9 per cent of individuals only accessing when they felt they had a need to. This may imply that there are elements on the site which could be regarded as ‘standard’ resources of information that users access for reference. To some extent these elements, such as jobs, events and funding opportunities may be identifiable from the qualitative responses. However this should be acknowledged whenever website review is undertaken. In contrast to the work of Crawford (2003) 73% of respondents accessed the site at work suggesting that the site is seen as a legitimate resource within the clinical and academic area.

The link to the site from the main RCN website accounted for a reasonable number of regular users, however it interesting to note that almost the same number of users came to the site via the recommendation of a colleague. Only a small number of respondents visited the site in direct response to a letter from the R&D centre.
Collegial recommendation also accounted for the majority of individuals who received the weekly e-mail up-date

Although there was no capacity within the questionnaire to evaluate the internet/e-mail training received by the respondents, it was clear that, as a group, the web-site and e-mail users considered themselves competent in the use of information technology. There was a medium, but statistically significant, correlation demonstrated between age and perceived technological skill ($r = .406 \ p=.01$) which supports the findings of Webster (2003) who suggested that older members of staff are more likely to have sought information technology training than younger colleagues. Unsurprisingly there was a small, statistically significant ($p = .01$) positive correlation between frequency of website access and perceived level of technological skill ($r = .261$). This mirrors the findings of Sinclair (2001) who argued that there was a link between perceived confidence in use and application of technology.

The RCN R&DCC e-mail was seen as useful by the majority of respondents which supports the findings of Bunting et al (1998), who highlighted the importance of e-mail as a communication strategy and information source. It was not within the scope of the questionnaire to assess volume of e-mail amongst respondents although one can speculate that these individuals would receive significant amounts of electronic communications throughout their working day. Nonetheless the e-mail was perceived as helpful. This may be accounted for by the finding that both the length and the timing of the e-mail update were suggested by respondents to be ‘about right’. The value of the weekly e-mail was such that over half of the respondents passed it on to other colleagues. This was supported by correlation 5 which indicated that there was
a large, statistically significant ($r = .754 \ p = .01$) positive correlation between dissemination practices and perceived usefulness of the weekly e-mail update. This is further illustrated by correlation 4 which showed that there was a medium, statistically significant ($p = .01$) positive correlation between the two variables ($r = .372$) with dissemination practices being associated with the role of R&D lead. This would imply that R&D leads have a part to play in the dissemination of the weekly e-mail and in the promulgation of the website resources. This would suggest that the current strategy of targeting information about the website and the e-mail at this specific group is effective.

**Content**

Users of the website and email say that it keeps them up to date, saves them time and is largely relevant to their needs. Respondents emphasised the importance to them of its major features such funding opportunities. The weekly nature of the email update renders these timely as deadlines are so often short and the website is seen as quite comprehensive in this respect. Other commended features include the advertisement of conferences and other professional development events and scholarships. The employment opportunities are welcome but a small numbers of respondents felt these could be expanded.

Some respondents expressed a view that the site is too uni-disciplinary. Given that it is resourced by the RCN as a service to members this may seem a little unfair, but should be seen in the context of an increasingly important multi-disciplinary clinical and research agenda and the use of the service by other professionals and quite a large number of non-members. The Regional sites, though welcomed by some, were felt to
be insufficiently updated. This, of course, depends upon information coming in from the regional memberships groups. In the same vein, some respondents with a specialist nursing background felt that more could be done to reflect their needs. Some specialist research-related sites are ‘hosted’ by the R&DCC site, such as ‘Research in Child Health’ partly because the R&DCC site provides ‘open access’. However, to meet all needs will need a wider discussion of strategy, perhaps in keeping with the evolution of the RCN overall membership structure.

A number of respondents suggested that the site could develop by incorporating an interactive element, perhaps with discussion fora or interactive training packages or as an explicit development of the RCN ‘Learning Zone’. Others felt that the email and website could include reference to relevant resources, notably recent publications and more detailed guidance than that already provided, for example on writing for publication.

The possible migration of the R&DCC site to the RCN main website may create an opportunity for these points to be considered, but it will be important to retain the best features whilst giving thought to some new ones such as training packages.

Areas which might clarified by further study

A number of issues highlighted during this analysis provide fruitful areas of investigation for inclusion in future work.

The open access of the website, in particular, meant that it was very difficult to contextualise the response rate of the study. There are approximately 4,000 individuals registered as recipients of the weekly e-mail up-date. 461 individuals
responded to this study, which may be interpreted as a response rate of 11.5%. However the open access nature of the website means that some respondents may not have been regular recipients of the e-mail.

There was a suggestion that some elements of the website could be regarded as ‘standard’ resources which respondents accessed on an as-and-when basis. Further study should be carried out to identify which elements of the site are viewed in this manner and to outline strategies to emphasise them.

Issues such as student access should be investigated to analyse why so few students appeared to access the website or the weekly e-mail. Furthermore, the ‘student’ response option should be acknowledged as not providing sufficient information about the individuals who chose to describe themselves thus. There was no scope with the current study to differentiate between students who accessed the site as pre-registration nursing students, individuals on post-registration professional development programmes or full-time PhD students.

It may be interesting, in any future studies, to evaluate how much information communication technology (ICT) training individuals may have received. There was clear evidence that the respondents perceived themselves as ‘competent’ in the use of the internet and electronic communication strategies such as e-mail. Only a small percentage of respondents stated their technological skills as ‘novice’ (4.2% n=21). Nonetheless there is a significant body of literature which suggests that positive attitudes towards ICT impacts upon individual technological use and this may be a
factor in non-respondent behaviour, with only competent Internet users responding to
the questionnaire.

Further illumination could be obtained regarding perceptions of usefulness of the
weekly e-mail update if the daily or weekly amount of e-mail received by respondents
was evaluated. This would provide insight into how important the weekly update is to
the users.

There was an amount of ‘missing data’ from some respondents. Although there was
no scope within the questionnaire to evaluate why some questions were left
unanswered superficial analysis of these missing data does not suggest that questions
were not answered because respondents were uncomfortable with them, such as may
be the case with some demographic data such as age, for example. It is possible that
respondents may not be aware that response to an on line questionnaire may be altered
if the text box is not exited prior to using the scroll button to navigate the e-document.
This can be addressed in subsequent on-line questionnaire by attaching a pop-up text
box warning respondents that they have not answered a question.

To summarise, this small study has provided useful and usable feedback about the
R&D CC services. The ability of the RCN and its constituent parts to develop its
services to members will certainly be integrally linked with the evolution of the
internet and the greatly expanded access to it. We feel that in order to tailor services
appropriately at a time of great change, the RCN may with to undertake further
investigation of the needs of members and how it might meet them.
Currently the R&DCC provides an excellent service from a modest resource base. In the context of clinical governance and evidence based demands from organisations, health care consumers and nurses themselves the demand for this type of service is likely to expand. The current service is well placed to form a template for an even more interactive and creative site which could meet the needs of nurses worldwide in important respects, promoting the aims and purposes of the RCN as a whole.
References:

Bunting, SM  Russell, CK Gregory, DM (1998) Use of electronic mail (e-mail) for concept synthesis in an international collaborative. *Qualitative Health Research* 8(1): 128-135


Kearns, L (2000) *Nurses and Technology*  
[http://www.pdacotex.com/nurses_technology.htm](http://www.pdacotex.com/nurses_technology.htm) (Accessed 23/01/05)

Medical Research Council (2000) *Good research practice*  
[http://www.mrc.ac.uk/pdf-good_research_practice.pdf](http://www.mrc.ac.uk/pdf-good_research_practice.pdf) (Accessed 14/03/05)


APPENDIX 1: HARD COPY OF WEB BASED QUESTIONNAIRE
RCN R&D Co-ordinating Centre (RCN R&DCC) Web Site Evaluation

Rationale

The RCN R&DCC web site has now been up and running for 5 years, with no formal evaluation. Anecdotal evidence has been generally positive, and has resulted in the web site changing, but the basic structure remains the same. To continue to provide a first class service to our customers, it is now important to conduct a more focused evaluation of the web site and the weekly email update.

In order to help us improve our service, we want to find out about who is using the service, what they think about it and how we could improve it. Your feedback will be really valuable - so thank you for taking the time to complete this questionnaire. Please note that all the information you provide will be treated in strict confidence. Any personal details you provide will not be passed on to third parties and we will ensure that you cannot be personally identified in any reports that we produce.

Thank you.

RCN R&D Co-ordinating Centre (RCN R&DCC) Web Site & Weekly Email Questionnaire

Please note that Questions 1-8 are general questions, Questions 9-15 refer to the web site, and Questions 16-25 refer to the weekly email update. Question 26 asks for your email address: this will allow us to contact you to follow up any comments you may have raised.

General questions

1. What is your profession? (drop down menu)
   - Nurse
   - Midwife
   - Health Visitor
   - Allied Health Professional
   - Doctor
   - General Manager
   - Other (please specify)

2. Occupation? (drop down menu)
   - Academic Researcher
   - Clinical Researcher
   - Lecturer
   - Nurse/Midwife/Health Visitor in clinical practice
   - Allied Health Professional in clinical practice
   - Librarian
   - NHS R&D Manager
   - Nurse Executive Director
   - Policy Adviser
3. Are you an RCN member? (drop down menu)
   Yes - full member
   Yes - student member
   Yes - associate member
   No
   Not Sure

4. What type of organisation do you work in? (drop down menu)
   UK NHS
   UK academic
   UK Government
   UK independent sector
   UK locality commissioning group (e.g. PCT, LHB, LHCC, LHSCG)
   UK industry/charity sector
   non-UK
   None
   Other (please specify)

5. Are you a designated lead for R&D in your organisation? (drop down menu)
   Yes
   No
   Not Sure

6. Age (drop down menu)
   <25
   25-34
   35-44
   45-54
   55-64
   65 and over

7. Gender (drop down menu)
   Female
   Male
   Other

8. What is your ethnic group? Choose ONE section from A to E, then tick the appropriate box to indicate your cultural background. [This has come from the CRE website http://www.cre.gov.uk/gdpract/em_cat_ew.html which shows how it is laid out]
   A. White
      British
      Irish
      Any other White background, please write in
   B. Mixed
      White and Black Caribbean
      White and Black African
White and Asian
Any other Mixed background, please write in
C. Asian or Asian British
Indian
Pakistani
Bangladeshi
Any other Asian background, please write in
D. Black or Black British
Caribbean
African
Any other Black background, please write in
E. Chinese or other ethnic group
Chinese
Any other, please write in

Web site Questions

9. How often do you access the RCN R&DCC web site? (drop down menu)
   Daily
   Weekly
   Monthly
   Every few months
   As and when I need
   First time
   Never

10. From where do you primarily access the RCN R&DCC web site? (Please only tick one option) (drop down menu)
    Home
    Work
    Public library
    NHS library
    University library
    Internet Cafe
    Other (please specify)

11. How did you first find out about the RCN R&DCC website? (Please only tick one option) (drop down menu)
    RCN website
    Colleague
    Mailing list
    RCN R&DCC Flier
    Conference
    Letter from RCN R&D Co-ordinating Centre
    Other (please specify)

12. What features of RCN R&D Co-ordinating Centre website do you like?
    Free text:
13. What features of RCN R&D Co-ordinating Centre website do you not like?  
*Free text:*

14. What other features or services would you like the RCN R&D Co-ordinating Centre web site to provide?  
*Free text:*

15. How would you rate yourself in terms of finding information on the Internet?  
Novice  
Advanced beginner  
Competent  
Expert  
*Please note that this question refers to the using the Internet in general, and not to any specific web sites*

**Weekly email**

16. Do you receive the weekly email update? *(drop down menu)*  
Yes - directly  
Yes - forwarded to me  
No – but I have heard of it  
No – I have never heard of it

17. How did you join the weekly update? *(drop down menu)*  
Form on website  
Invitation from RCN R&DCC  
Recommendation from colleague  
Other (please specify)

18. Do you find the weekly email useful? *(drop down menu)*  
Yes  
No  
Not sure  
Please tell us why

19. Do you further disseminate the email within your organisation? *(drop down menu)*  
Yes  
No  
Not sure  
If yes, to approximately how many people? (free text box)

20. How do you find the length of the email? *(drop down menu)*  
Too long  
About right  
Too short  
Don’t know

21. How do you find the frequency of the weekly email? *(drop down menu)*  
Too frequent
About right
Not frequent enough
Don’t know

22. Each month end, we list diary dates for the coming month. Do you find this feature useful? (drop down menu)
   Yes
   No
   Never noticed it
   Don’t know

23. What features of the weekly email service do you like?
   Free text:

24. What features of the weekly email service do you not like?
   Free text:

25. Any other comments?
   Free text:

Contact details

26. Your email address (if you are willing to be contacted for any follow-up questions?
   Free text:
APPENDICES 2 AND 3:
EXAMPLE NVIVO MODELS
RCN R&DCC Website evaluation Report

APPENDIX 2 N Vivo Model of Like and Disliked Website Features
What other features would you like the website to provide?

Web interface:
- Up to date activities
- Perhaps more colour on pages

Search Engine:
- Could be widened out for other health

CONFERENCES AND EVENTS:
- More interactive capability
- Could have friendlier tone

Content:
- Good hyperlinks
- Direct link to R&D National Data
- News nursing research findings/research published

Specialisms:
- More mental health
- Sexual health research
- A&E
- Specialist areas
- More on forensic mental health

Professional Development:
- Training
- Clinical trials focus
- More grey literature
- More mental health

APPENDIX 3
NVivo Model of Desired Service Features