

Personal Academic Development **e-Portfolio**

By Alanna McCarthy

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This assignment will include identification of a variety of communication and counselling skills which will be applied to Carl Rogers' Humanistic theory. It will also include a reflection on the importance of communication and counselling skills when working in the healthcare sector. This essay will be based on critique from a video that involves two students within a simulated counselling session, this will be written from the counsellors point of view.

Firstly, the counsellor welcomed the client into the room with a confident and pleasant attitude. Showing confidence when working within a healthcare sector is important as it allows service users to trust the individuals that are caring for them. The counsellor then introduced herself, shook the client's hand and then asked the client what their name was. The counsellor then asked if the room they were in was satisfactory, this is important because if the room was too noisy or too hot or cold then the client may feel uncomfortable and it may have a negative effect on the session. The counsellor asked the client to take a seat in a place where they felt comfortable.

The counsellor then sat opposite the client with their legs and arms crossed while the client sat in the same way. The counsellor is showing negative body language, this could of been improved by the counsellor sitting with her arms and legs uncrossed which would show comfort, warmth and congruence. Also if the counsellor started the session with her legs and arms uncrossed then the client may have mirrored this. Body language can show feelings and emotions, for example if an individual's body language is defensive such as they have their arms crossed or want to sit with a table in front of them then this may mean that they are feeling nervous (Brazier,2009). Carl Rogers strongly believed that the counsellor must show warmth and understanding for the client's condition to improve. Carl Rogers also stated that congruence was a core condition and the most important characteristic of counselling, Rogers believed that the counselor should show the client their personality and be as genuine as possible (Rogers,1995). Body language within any healthcare setting is important as negative body language from staff members can make service users feel uncomfortable.

The counsellor then explained to the client what the counselling session would entail. The counsellor also informed the client that everything that is said is confidential and the only time that there would be a breach in confidentiality is if there were any concerns such as risk of harm or danger. This applies to working in a healthcare sector as it is important to always explain to service users what is about to happen and to talk them through any process, this show shows respect and dignity for the service user. Also confidentiality is essential when working in a healthcare sector as it is a policy that must be followed in every setting and the breach of confidentiality is taken very seriously (Mitchel and Bond 2008).

When the counsellor and client began to talk the counsellor uncrossed her arms and legs, this showed that there was no barrier between counsellor and client, this then

encouraged the client to communicate with the counsellor. The counsellor listened actively, this was shown by nodding and eye contact. The counsellor also showed empathy by paraphrasing and asking open ended questions, this then resulted in the client relaxing and becoming more confident. This was shown by the client uncrossing her arms and legs and communicating more which showed that she was beginning to feel comfortable and confident. The client also began to use hand gestures which also shows confidence and passion. Carl Rogers believes that empathy, which is one of his core conditions, is important when counselling as it shows that the counsellor understands how the client feels and the counsellor must inform the client that have identified and understood the way in which they are feeling, this allows the client to feel valued (Rogers,1951). Carl Rogers also stated that active listening is essential when providing someone with counselling and building a relationship between the counsellor and client (Jones,2009). Empathy is important when working with service users in any healthcare setting as it can encourage a relationship and can increase the likeliness of them communicating. Empathy has been proven to be an essential element of any relationship (Davis,1983).

Within the counselling session the counsellor did not give their opinion, they only asked questions and agreed with the answers that the client gave, this shows unconditional positive regard which Rogers stated was a core condition and had to be used when in the role of a counsellor as it encourages the client to talk more as they do not feel as if the counsellor is judging them. Unconditional positive regard is when the counsellor does not judge the client or give an opinion on their events, it is continually maintaining a positive attitude through the counselling session (Rogers,1961).

Towards the end of the session the client began to identify ways to resolve the problem which was discussed. This was a positive outcome as the client was able to identify the problem and ways of how to overcome this by themselves with no opinion from the counsellor. Carl Rogers believed that it is important for clients to make their own choices and be able to have the ability to understand themselves and overcome any problems that they may have (Rogers,2004). This would also be promoted in a healthcare sector as independence is encouraged to all service users daily.

This essay concludes that Carl Rogers believed that counsellors should show and use positive body language, active listening, paraphrasing and open ended questions in order for counselling to be effective. It also states that Rogers strongly believed that the three main core conditions played a large part in counselling sessions. It also concludes that all of these traits of communication and counselling are used in all health care sectors.

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How does management and leadership skills effect current issues within the NHS?

Alanna McCarthy

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Abstract-

This report will provide information to suggest that issues within the NHS such as stressed staff, low morale, low motivation and a decline within the standard of patient care is the result of ineffective and poor leadership and management skills. This report will then identify and discuss the relevant theorists and management skills.

Introduction-

This report will to discuss how stress within the NHS has affected staff members and how it has led to further problems such as sickness, shortage of staff, negatively impacting the standard of patient care and low morale within the workplace. The report will also identify how poor leadership and management skills have contributed to the stress of staff members within the NHS and how it can be improved and how it can be linked to the theorists John Adair, Henry Mintzberg and Henri Fayol.

Main body-

Research shows that professionals such as nurses and doctors who work for the NHS are extremely stressed because of their job role and the responsibilities which are included in their work (Wilson, 2019). Staff members who become stressed within work are less likely to work well within a team, are more likely to be off sick and there is likely to be a low morale within the workplace. This current issue within the NHS suggests that the management and leader skills are poor. (Stinson, 2010).

Research contained in an article containing the discussion are the NHS sacrificing or supporting their staff states that changes were put in place by management and leaders within the NHS which suggests that their skills were being ineffective and needing improving as staff members had high stress levels as a result of their job. The article also discloses that command and control cultures are ineffective and the leadership role should be shared within the team (West and Willis, 2015). According to Henry Mintzberg for a workplace to be able to work at its highest standard possible then all roles and responsibilities must be shared, by sharing roles and responsibilities amongst staff members it enables development of skills and less stress put on staff members. Mintzberg listed the ten relevant roles

then went on to section these roles into three categories which are interpersonal, informational and decisional (Mintzberg, 1989). Mintzberg states that to become an effective manager individuals must have experience within the role or experience such as training, this is because the traits of managers and leaders, which should be patience, caring, compassionate, friendly and motivated (Segil, 2002) are not able to be learnt by someone who does not fit under this category (Caramela, 2018). The management tool of assigning staff members to the role that suits them best would encourage organisation within the workplace which would then result in staff members feeling less stressed and able to focus on their role. They will also be driven to improve their skills which would result in high self esteem and high motivation which then has a positive impact on patient care.

Research based on stress and its impact on the workplace identifies that the amount of NHS staff that become absent because of work related stress has risen over the past two years. The report states that part of the stress is caused by lack of support and communication (NHS employers, 2019). The issue of a high rate of staff absence within the NHS indicates that the managers and leaders are not identifying that staff members need support and need to be communicated with. Managers and leaders could undergo training to learn and understand why it is important for them to communicate with their staff members and if they do not then the consequences can lead to other problems (Webb, 2011).

Research found on whether the NHS are supporting or sacrificing their staff shows that leaders and managers often fail to show compassion and praise to staff members which results in a sense of low self esteem and motivation which eventually results in patient care being negatively affected. Staff members who are not motivated or praised are more likely to be absent from work (West and Willis, 2015). For leaders and managers to improve their ability and skills to be able to motivate their team then they could do research on how to effectively praise, motivate and show compassion to their staff which would then result in a high morale among staff members and having a positive impact on the standard of patient care (Goleman, 2003). A basic way of learning how to motivate others is the basic model of motivation, which is shown within in diagram on page 7 in the appendices.

Henri Fayol produced a theory which helps businesses manage staff in a productive effective way. Fayol included 14 principles within his theory but then went on to minimise these 14 principles to 5 basic guidelines for individuals to follow to become a productive leader. These 5 guidelines include; planning, organizing, commanding, coordinating and controlling (Krenn, 2017). The issue within this theory could be that for staff members to follow it a great quantity of change would have to happen. Change can have both negative and positive effects on organisations and people. An organisation can change for the better or worse. For example rules and regulations may change which means that the organisation have to follow these changes or the change may occur because of the current culture within the workplace and the target of the work within the organisation has changed (Cole,

2004). Culture within the workplace means that what the staff are doing may not be right but because they carry on doing it everyday and nobody has told them that what they is wrong, this then becomes the culture amongst staff members (Jeffreys, 2015). Culture can sometimes cause stress to a new member of staff this is a result of the new staff member confronting and questioning the culture among the staff if they believe that it is wrong. Culture can also have an effect on the target that staff members are working towards within the workplace, for example if their target is to earn over a certain amount of money and not to ensure that patients standard of care is at its best this is when leader and managers within the workplace must make it clear to staff what the targets are and why to ensure they are being met (Maister, 2003).

John Adair developed a model called the action centred leadership model. Adair's theory includes three overlapping circles which contain three elements of task needs, team needs and individual needs. Adair states that tasks have to be completed by a team of people and not individuals (Adair, 1983). Adair also expresses that leaders have a great impact on how motivated others are around them, if they are not being motivational then this will impact the rest of the staff members (Adair, 2007). If staff morale is low and staff members are stressed then they are less likely to work effectively as part of a team which can then negatively affect the standard of patient care and Adair's theory would be ineffective within this situation (Adair, 2002). Also if staff if there is a shortage in staff within the workplace then sometimes they will have to work independently, Adair's theory would also be ineffective within this situation.

Coggan (2017) states that as the NHS is a caring organisation it must care for its staff for them to be able to care for the service users. The article discussing that the NHS must do whatever it takes to improve the morale amongst staff member stated that NHS leaders are constantly under pressure, which then affects staff members as the leaders can not work effectively in supporting and motivating them. Coggan (2017) then identified that fifty nine percent of staff members worked unpaid overtime which was a result from a survey conducted in 2016. Coggan (2017) then discussed how improving the morale and situation between staff members was not just about money or the amount they are being paid, it had to be taken into account how they were being treated and the conditions within the workplace.

Included within an article based on the reasons why the NHS may in trouble was a statement discussing why the NHS is always under so much pressure and what adds to the stress of the current issues. Trigg, (2018) identifies that the amount of money that is spent on the NHS keeps growing over the years, shown in a table on page 7 in the appendices. This is a clear problem of the management of money to being effective. Another reason why the NHS may be under a large amount of pressure is because a&e are not meeting their targets. There is often not a balance between the number of patients leaving to the number of patients arriving which puts a great amount of stress on staff members and on the care that needs to

be provided. This evidence is shown in a table identifying the percentage of patients that were seen within 4 hours of being in a&e, this is presented in the appendices on page 7. Managers and leaders could attend training programmes on how to manage staff members and departments in an effective way (Blunt, 2015). Another reason for the NHS being under pressure and staff becoming stressed is an ageing population. As a result in the improvement of medication a large percentage of the population are living longer, it is estimated that the life expectancy has increased by 13 years from when the NHS first started, even though this is a massive achievement it does put a lot of pressure on the NHS. Included in a graph in the appendices on page 7 is identification of the % of the population that are 65 years old and over and how it has risen (Triggle, 2018). The only way of leaders and managers being able to improve this pressure is providing elderly patients with the support they need at home such as home carers and social workers (Rees, 2001).

Conclusion-

In conclusion this report has identified that it is commonly known that NHS staff have become stressed because of work related situations which then results in other issues within the workplace such as shortages of staff which decreases morale and declines the standard of patient care. It is also evident that poor leadership and management skills can have a negative impact on the way staff work within the NHS. Also if managers and leaders do not praise or communicate with their staff then motivation and culture can become an issue. The report has also discussed the theories of John Adair, Henry Mintzberg and Henri Fayol and how their strategies link with the issues within the NHS and management and leadership skills.

Recommendations-

- Involving all staff members within decision making.
- Increasing pay to give motivation.
- Set targets.
- Providing training programmes for managers and leaders to expand and improve their skills.
- Provide support and ensure that staff members know that support is there if they need it.
- Increased resources.
- Thank colleagues regularly and praise and share all compliments given (Finlayson, 2002).

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Extra care: viable for couples living with dementia?

Alanna McCarthy

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Intro

There are many reasons why research is important within nursing. One of the reasons is for healthcare professionals to be able to maintain up to date personal knowledge on changing regulations and information from places such as the government and relevant legislations (NSU, 2017). This ensures best practice and a maintenance of high standards throughout the process of patient care. Another reason suggesting why research is important within nursing is that it avoids the same mistakes continuously happening (Grove, 2012).

Research process

The research paper in question was found by logging on to moodle, then opening the online library. The option 'database by subject' was then chosen followed by 'sport, health and outdoor education' then 'proquest central'. The key words used to find the research paper were 'living with dementia'. The search was then filtered by using full text only, scholarly journals, UK based research papers and papers published within the last 5 years (UWTSD Library, 2019).

Background

The background section of any research paper should include what chosen subject is being researched and why it is important. The background section commonly includes the present state of the issue being discussed (Young, 2019) Stated in the research paper was that the purpose of the chosen study was to find out whether individuals who were living with dementia and their care partners require extra care. Another reason the study stated their reason for carrying out the research was to identify and explore any perceived barriers that were known within these situations (Poyner et al, 2017).

Abstract

An abstract is a piece of writing which outlines the main points of the research paper, an abstract commonly contains the purpose of the study, the design of the study, any major findings found from the study and a conclusion. There are two commonly used types of abstracts which are informative and descriptive. An informative abstract is normally longer and contains more depth than a descriptive abstract. A descriptive abstract is generally more brief than an informative abstract and does not include the results or a conclusion of the research paper compared to a informative abstract that does include this information (USC, 2019). The abstract within the research paper was an informative abstract, his was evident as it contained sub headings which included the purpose, methodology, findings, research limitations, practical implications, social implications, originality, keywords and paper type. The abstract contained a lot of information about what the study would entail which included main points and was approximately 200/300 words (Poyner et al, 2017).

Literature review

A literature review is an analysis of the literature used to carry out the research paper (USC, 2019). For example reviewing whether the literature used is from reliable websites and books, also exploring how dated the literature used is as in some cases if literature is very dated then it may not still be correct or relevant (Bettany-Saltikov, 2012). The literature that was used within the research paper was reviewed by studying the references and noting whether a variety of resources were used such as books, journals, articles and websites. Secondly the dates of the references used were looked at to identify whether dated literature was used or recently published resources. The findings of the literature review of the research paper in question were that mostly books and journals were used. The most dated resource used was published in 2006 and the most recent reference used was dated in 2014 (Poyner et al, 2017).

Aim

An aim which can also be known as a purpose is a clear overall piece of writing of the purpose of why the research is being carried out and what it aims to achieve (Evans et al, 2011). The research paper that was studied did contain an aim which was to explore whether individuals who are living with dementia and their care partners require extra care. The aim was also to interview and use focus groups with individuals with dementia and their care partners to obtain the relevant information to help the research (Poyner et al, 2017).

Study design

Research papers can either be qualitative, quantitative or mixed methods. A qualitative research paper focuses on thoughts and feelings compared to a quantitative paper which focuses on statistic evidence and scientific research. A mixed methods research paper is fundamentally a research paper that contains both qualitative and quantitative aspects (Kitay et al, 1998). The research paper in question is qualitative this was evidential as it stated it within the text and it did not contain many statistics as it focused in depth on thoughts and feelings of individuals and their care partners living with dementia (Poyner et al, 2017).

Sample

A sample is a selection of people that are chosen to be included within the research to take part in the data collection such as interviews, questionnaires and surveys (Silverman, 2016). There are two main types of sampling which are probability sampling and non probability sampling. The difference between both types of sampling is that non probability sampling is a selection is not a random selection of people where as probability sampling is (Henry, 1990). Systematic sampling and simple randoming sampling are also part of probability sampling. Snowball sampling is another technique used to collect data, this is a non probability way of sampling and entails current participants telling their friends about the study then they tell their friends, so on (Fink, 2003). Simple random sampling is where every individual has the same probability chance of being chosen, this is usually done by giving the individuals numbers. The research within the study was based on individuals who were living with dementia and their care partners. The research paper in question identified and stated that purpose sampling was used which consisted of individuals memory loss and carers who have previously cared or currently cared with people with dementia (Poyner et al, 2017). A

purpose sample is when specific characteristics are needed from the population to be able to take part in the research (Ritchie et al, 2003).

Data collection

There are many different effective types of ways of collecting data for research such as questionnaires, surveys and interviews (Pearson, 2010). The three main different types of interviews are structured, which is an organised with set questions ready to be asked by the interviewer, semi structured which has been partly organised but leaves room for change within the questions and a unstructured interview which has no set questions and is generally more informal (Raworth et al, 2012). Focus groups are also used to collect data. A focus group is commonly known to be a discussion between 6-8 individuals which has been arranged on the chosen topic of the research this information gathered from the discussion is then used to generate qualitative data. (Morgan, 1997).

Data was collected within the research by conducting interviews with the relevant people. The research paper states that 17 people were involved within the interviews. Eight 1:1 interviews took place, one of the individuals who took part had early onset dementia, seven of the participants were care partners. Three paired interviews took place with person-caregiver dyads. One focus group that was interviewed consisted of care partners. Stated in the studied research paper was that all interviews were audio taped and verbatim transcribed, this is important as it allows evidence and accuracy for any information used from the interviews (Poyner et al, 2017).

Ethical considerations

It is essential for ethical approval to be considered when conducting a research paper as it ensures that all participants within the research are protected from any risk of harm and their data, right to withdraw, consent, wellbeing and confidentiality are also protected. Data can only be used within the research paper after ethical approval has been confirmed (Munhall, 2012). Within the ethics section of the studied research paper it states that full ethical approval was given by the relevant people and permission was given to carry out all interviews by the participants. All participants were given a choice of where they wanted the interviews to take place. Participants' names were anonymised by using 'P1' and 'P2' or 'care partner', by anonymising the individuals' names it allows the data to be shared without breaching confidentiality. The paper does not identify whether the party were given a right to withdraw if they wished. (Poyner et al, 2017).

Data analysis

The research paper states that all data that was gathered within the interviews was then transcribed verbatim and a thematic approach was applied. Thematic analysis is an extremely common method used within qualitative research, it is a method used for identifying, analyzing and identifying patterns within data. Within the analysis section of the research paper it states that Nivo, which is a management software tool, was used to data analysis. This software organised categories which were recognised by recurrence within the research paper (Bazely, 2013). The paper also states that all analysis was managed by the lead author and examined for accuracy by 'AI' (Poyner et al, 2017).

Results

A results section of a research paper commonly contains the findings of the study and the results and information that was maintained when the chosen methodology was applied. The results section of a research paper should not be biased and normally contain a logical structure as did the research paper in question (Alexandrov, 2004). The research paper that was studied presented its findings within the results section in a thematically way. The results were organised under clear headings which allowed the section to be easier to read. The headings included both negatives and positives that were found after carrying out the study, identifying the barriers that may occur. The results also included quotes from participants who took part in the interviews (Poyner et al, 2017).

Discussion

The discussion part of a research paper should include links to the findings identified after the research was carried out compared to what was already known. The discussion commonly includes understanding of how the researcher has successfully received the information that was needed (McMillan, 2007). Within the discussion section of the studied research paper it included positive and negative findings and information gathered after the research was carried out, such as how extra care would benefit individuals and their care partners but also what the barriers are to achieving this. The discussion also stated important information that has been given within the interviews and in the focus group, this information was then used to decide if there would be barriers when the changes are made (Poyner et al, 2017).

Conclusion

A conclusion of a research paper commonly identifies the main points that were identified while carrying out the study. The conclusion should support what was said throughout the study and should be similar to the introduction and should contain no new information (Evans et al, 2011). Within the conclusion in the research paper it states the overall results of the study which was shown within the results and why this was the final outcome (Poyner et al, 2017).

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USC Libraries (2019) *The literature review*. Available at: <http://libguides.usc.edu/writingguide/literaturereview> (Accessed: 25th March 2019)

This assignment will include a critique of a qualitative research paper based on patient reported outcome measures in child mental health and diabetes services. The essay will identify the negatives and positives of the study including justification.

It is important to review and critique others work as it allows researchers to be able to learn from what they could improve within their work and then improve their skills and apply this to other work in the future.

The title of the research paper in question is clearly stated at the top of the paper in bold writing which is a larger size in font. The title states exactly what the paper is about and that it is qualitative(Wolpert, M. et al 2014). It is important for research papers to have an effective title as it is commonly the first thing that a reader sees and reads and helps the reader decide whether they want to carry on reading the paper(Sims, R. R. 1995).

The research paper includes information about how patient reported outcome measures have sustained an impact. The study was carried out to identify the similarities and differences in the opinions and views of children, parents and clinicians focusing on PROMs(Wolpert, M. et al 2014).

The authors of the research paper are Miranda Wolpert, Katherine Curtis-Tyler and Julian Edbrooke-Childs. Research carried out has shown that all authors are doctors and have the relevant qualifications and experiences to carry out the study in an effective way(Wolpert, M. et al 2014). Miranda Wolpert is a clinical psychologist. Wolpert plays the main part in National Informatics Advisor for Children and Young People's Improving Access to Psychological Therapies. Katherine Curtis-Tyler is currently a senior in child health and Julian Edbrooke-childs is the deputy director at the Evidence Based Practice Unit (EBPU).

Included within the research paper was a descriptive abstract this was easily identified as it did not include any results, conclusions or recommendations which would be included within a informative abstract(Wolpert, M. et al 2014)

. Descriptive abstracts a commonly used within research papers this is because it provides a clear piece of information about the study excluding any judgements (USC, 2019).

The researchers did not review or use any other research studies in their work as they identified that they were unable to find any studies that were researching the same or a similar topic. The study include literature from articles, journals and websites, all of these resources have strengths and weaknesses. Also the variety of literature used within the study dated back to 1967(Wolpert, M. et al 2014), dated literature has the risk of being incorrect or irrelevant which could then negatively impact the research paper (Bettany-Saltikov, 2012). It was evidently that the research is needed as the authors identified that there was no study to find that was carried out on this specific topic. The results from the study will help to improve patient reported outcome measures which is a very important subject and improving this would benefit a number of individuals such as young people living with mental and physical conditions and their parents.

The aim of the research paper was easy to find as it was clearly written under the heading of 'aims of present research'. The aim was simple to read as it was a short piece of text including only main points of the reasons of the research and what topics were going to be explored(Wolpert, M. et al 2014). It is important for research papers to include aims as it shows the reader that the researcher has a clear purpose of why they feel the study needs to be carried out and what results they hope to conduct (Evans et al, 2011).

The research paper chosen to study was qualitative, this was evidential as it was included within the title and included traits of a qualitative piece of work(Wolpert, M. et al 2014), which are focusing and taking into account thoughts and feelings (Kitay et al, 1998). Qualitative research has many advantages and can benefit the study in different ways, for example qualitative research goes into more depth than other study designs which allows for more information to be brought forward about the chosen study. It also shows that the authors of the research paper have gathered explicit information to be able to write a thorough study(Dey, I. 2003).

The study population was made up of 6 young people and 4 clinicians from mental health services and 4 young people, 7 mothers and 3 clinicians from diabetes services(Wolpert, M. et al 2014). Qualitative research commonly uses small sample groups within their study, compared to quantitative research that uses larger sample groups. The size of a sample group can influence the research outcome in many ways (Sandelowski, M. 1995). Small and large sample groups have both negative and positive points, for example large sample groups run the risk of high expense for resources, it can also be difficult to find a large number of people to take part in the study. Research shows that the positives for large sample groups is that the statistics tend to be more accurate and equitable. Small sample groups can sometimes lead to the study becoming biased and the results not being precise. Small sample groups also have positives such as they are easier to conduct as it is less difficult to find a smaller number of the population to take part (Ritchie, J. et al 2013). The individuals who took part in the interviews volunteered through advertisements that were put in volunteering organisations. The sample groups were split into two, the first group included a total of 10 participants and the second group 14 participants(Wolpert, M. et al 2014).

Within the study the researchers have used interviews to gather the information they needed to provide evidence for the results and conclusion provided. These interviews were semi-structured which means that the interview will use a guide that has been developed prior to when the interviews take place. The authors did not justify why they decided to use semi-structured interviews(Wolpert, M. et al 2014), but they contain many advantages than disadvantages, for example some of the advantages are that they provide researchers with reliable fair data, allowing the researchers to plan ahead the questions they wish to ask in the interviews and they allow freedom of views(King, N. 2018). Some of the disadvantages are that some open ended questions may become difficult to analyse later in the research paper, also interviews are time consuming and costly (Fylan, F. 2005).

The research paper stated that all participants gave written consent prior to taking part within the study, participants were also told that they could leave the study at any time without a reason, the researcher emphasised this to the participants as they were volunteers(Wolpert, M. et al 2014). It is essential to follow all ethical considerations when carrying out research as it respects and protects the participants(Munhall, P.2012). The research paper also identifies that the study was approved by the School of Health Sciences

Research Ethics Committee and was conducted with the British Psychological Society Code of Human Research Ethics. When carrying out research it is essential that the participants rights are not violated in any way. Confidentiality was clearly followed within the study as the participants names were not given they were identified as numbers, for example young person 1(Wolpert, M. et al 2014).

The research paper states that all information that was gathered from the interviews was both audio recorded and transcribed verbatim, after this was done all data was explored and summarised by the use of thematic analysis. The comparison was identified within the pattern, similarities and differences in the study. All data analysis was conducted by the second author Kathryn Curtis-Tyler. Both primary and secondary themes were identified in the research paper. The researchers failed to identify whether or not they used any computer software to complete their analysis of the data collected(Wolpert, M. et al 2014).

The results within the research paper were presented in paragraphs under the heading 'results' which was in bold, this allowed the results to be easy to identify and easy to read as they were written clearly and organised skillfully. All participants that were listed in the abstract who were identified as taking part in the interviews were mentioned in the results and in the interview table provided. When mentioning the participants the researchers used themes such as clinician 1 or young person(Wolpert, M. et al 2014), this ensures confidentiality is followed and the rights of the participants are respected(Orb, A. et al 2001). The main results of the research suggest that there is a great need for well planned and resourced support for PROMs implementation which includes clinicians learning how to demonstrate and interpret PROMs.

The findings of the study are clearly written in a balanced way. They are divided into relevant sub headings which allows it easier to read and simpler to find the information you are focusing on or looking for. These sub headings include: practicalities, appeal and pace of clinical discussions. The research paper clearly answered the aim that was written in the beginning of the study which was to explore the views of young people, parents and clinicians in relation to PROMs. The answer to the study aim was simple to find and located under the heading 'brief discussion'. The research paper expressed that to the authors knowledge no study has been carried out to identify the similarities and differences in perspectives of patients and clinicians in settings that are linked to younger individuals who have long term mental and physical conditions. The authors did not use other studies to compare their research or findings, by doing this the study may have been stronger as comparing research papers that are studying the same topic as if two studies create the same results then the research becomes more reliable and accurate. The research paper identified a number of different limitations that were discussed in the making of the study. To begin with the first implication was that because of the small sample groups used to collect data it runs the risk of conclusions not being generalised beyond the sample used. Secondly, the participants who were involved in data collection were recruited through the research teams professional networks which could result in biased self-selection. Finally, the interviews that took place with young people with diabetes involved their mothers which could result in the young individuals not having freedom of expression(Wolpert, M. et al 2014). Limitations to research can negatively affect the standard of the study, for example if a study is biased then it may not be correct or relevant and may provide false information(Cooper, H. et al 2009).

Within the studied research paper there was no clear conclusion discussed, the authors wrote a brief discussion identifying what the initial aim of the study was and how the research recognised both negative and positive points within their results. The discussion also included identification of the development the results that they did (Wolpert, M. et al 2014), which is important when writing a research paper (McMillan, 2007). The research resulted in plans being made to improve the quality of PROMs. The study did not identify whether or not any further research would take place which suggests that the authors received all the information they needed to.

The research paper was clearly written with evident headings and subheadings which allowed the reader to be able to find the information they were looking for immediately. The study concentrated on main points and findings and did not contain irrelevant information (Wolpert, M. et al 2014).

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