

Contact the WILL Team

Any queries please contact one of the team:

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# **WILL Trial**



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Welcome to the 5th edition of the WILL Trial Newsletter

We hope that you are enjoying the summer and your well deserved holidays!

## WILL recruits!

Congratulations to the Leeds Hospital WILL Team

(pictured on the right) that recruited our very first WILL participant who was randomised to expectant





Liverpool Women's Hospital were hot on their heels with the second and third recruits randomised to both planned early term delivery

and expectant care.

We have also had our first 2 WILL babies! Congratulations!

# **New sites open to WILL**

We now have 13 sites open to recruitment: Leeds Teaching Hospitals, St Thomas', West Middlesex, Birmingham Women's, Liverpool Women's Hospitals, Nottingham City Hospital, Queens Medical Centre, Bradford Royal Infirmary, Princess Anne Southampton, St Mary's Hospital Manchester, Croydon University Hospital, Leicester Royal Infirmary and St Mary's Poole.

The following sites are also close to opening: Norfolk & Norwich University Hospitals NHS Foundation Trust, Royal United Hospitals Bath NHS Foundation Trust, North West Anglia Foundation Trust, James Cook Hospital and York Hospital.

## Site initiation visits

We are currently in the process of arranging a date for the SIV at: Sunderland Hospital, and we are visiting Singleton Hospital for their SIV on the 8th August.

# **Medical trainees as PIs**



The NIHR Clinical Research Network is increasing opportunities for medical trainees in research by building capacity through an associate scheme for trainees to be accredited for taking part in clinical research. Trainees undertaking the Advanced Professional Module in Clinical Research will link with the NIHR local research lead to connect them with local research activity. If trainees are interested in taking on a co-PI role in their centre for WILL, then please get in touch either with your local site lead or with us directly, and we will facilitate. For more information follow the link below:

https://www.rcog.org.uk/en/careers-training/specialty-training-curriculum/apm/apm-in-











Julie Wade: WILL Research
Midwife completed the NIHR
Advanced Leadership Programme last year and as an
ALP alumni was recently invited to attend this years ALP
Celebration Day to share her
leadership journey since
completing the course.







Please keep providing feedback about what is going well and any comments that you have

Please don't hesitate to contact us if you need anything.



#### **WILL Trial Newsletter**

## Julie & leadership training

Here are some of Julie's reflections of learning from the Advanced Leadership Programme (ALP) and how some of the strategies that can apply to WILL and may help others:

- •Learn from others and teach others.
- •Change can come from anyone, not just from the top down.
- Take risks and push yourself out of your comfort zone. That is where growth happens. Whether it succeeds or fails, there is learning to be gained.

"The ALP has helped me to understand that sharing knowledge and collaboration are the keys to success. We want WILL to be a group achievement, so if any of you have ideas for the trial, we'd love to hear them and work together with you. Ideas are welcome from anyone at any level; even if they don't work out, we will all learn from them together."

•Take care of yourself. Eat well, exercise, sleep well, and rest your mind. It will put you in the best place to help others.

"This has been a key one for me recently as we have been travelling up and down the country visiting hospital sites delivering SIVs. Some journeys have been long and exhausting (especially when trains are delayed or cancelled!). The resilience tools from the ALP have come in handy!"

•Don't be afraid to show your human side – others will relate to you better which helps to build trust.

"I was reminded of this after a recent WILL SIV where there were a 'few issues', so the SIV didn't go as smoothly as planned. One of the research team (who is now ALP alumni herself – congratulations **Coralie Huson!**) reminded us that although it may not have run as planned, we displayed our human side and vulnerability to not being perfect, which actually had a positive effect on the team. Thanks to **North West Anglia NHS Foundation Trust** for making us feel so welcome despite everything being against us that day!"

#### WILL consent form: study number

Currently, the WILL consent form does not have a box to record the study number after consent has been received. Such a box will be added shortly, but in the meantime, please write the participant's study number on both pages of the ICF.

### WILL NHS.net email (gst-tr.willtrial@nhs.net)

If you send anything from your nhs.net email to the WILL trial nhs.net account, please let us know so we know to look out for it.

#### WILL teleconferences

We held our second WILL teleconference on the 23rd July. Thank you to the large number of collaborators who joined us! It was a great opportunity to discuss WILL. Thank you to Leeds and Liverpool for discussing their first recruits.

**Top Tip: Interpreters**—needed to help with the following stages:

- Discussing WILL: giving Introductory Pamphlet and PIS
- Receiving written informed consent
- Randomisation (in person or over the phone)
- Childbirth Experience Questionnaire (or the partner/family member can help)
- Six-week Postpartum Questionnaire (over the phone or in person with you)

We discussed whether the Introductory Pamphlet would be useful in other languages. Please let us know what you think.

Minutes from future teleconferences will be sent out soon after they are held. Next teleconference will be **28th August 2019 9-10am**. We will circulate an invitation with the dial-in details.

#### **FAQs**

Q. If a woman wishes to be delivered at a time different from that to which she was randomised, because of worry or more extreme anxiety or other mental health issues, would this be considered clinical need or preference?

A: If the clinical team were to regard the reason for induction as medical, then this would be considered clinical need. It is a matter of judgement as to when understandable worry becomes anxiety. If you are uncertain after reviewing the notes and ideally, speaking with the clinical team if needed, please do not hesitate to contact us. If in doubt, it is better to report as the woman's/clinician's preference because the Protocol Deviation Form will give us the information. All indications for timing of delivery will be reviewed.



Twitter: @WillTrial

