

Falk Foundation/Guts UK Awards 2025

NURSE RECOGNITION AWARD FOR IMPROVEMENT IN PATIENT CARE WINNER: Ms Sarah Jordan

An Evaluation of IBD Child Patient/Carer Compliance in Providing Stool Samples for In Hospital Faecal Calprotectin (FC) Testing

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Ms Jordan is a Paediatric Clinical Research Sister at Birmingham Children's Hospital focusing on paediatric clinical research delivery. She is currently the lead on several inflammatory bowel disease (IBD) research projects and clinical trials across the department.

Ms Jordan explains:

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'Faecal calprotectin (FC) is a specific biomarker of intestinal inflammation and is a non-invasive method of diagnosis and monitoring disease control in inflammatory bowel disease. From working with patients with IBD, I have come to understand the importance of consistent monitoring of FC and, likewise, the impact on insight into patient disease activity when it is not carried out.

'Furthermore, inconsistent monitoring or absence of FC testing can result in the need for a colonoscopy, which in children would be carried out under general anaesthesia, resulting in them missing school as well as carers having to take time off work.

⁴FC testing requires a stool sample to be brought into hospital when the patient has an appointment. Literature has identified that adult IBD patient compliance with bringing stool samples to hospital has been as low as 35%, with reasons for non-compliance most commonly forgetfulness, followed by no perception of the tests value, constipation, refusal to handle stools and difficulty collecting the sample (Marechal et al 2017). Currently we estimate that in our children/young people IBD population, the compliance rate for bringing in stool samples for FC is around 50% with forgetfulness being the most common reason cited.

'The National Institute for Health and Care Excellence (NICE) has identified home FC testing kits as an appropriate alternative to hospital-based FC testing. Literature based on the adult IBD population has demonstrated that the provision of home FC testing kits has significantly increased patient compliance (70% with introduction of home testing kits vs 52% compliance with hospital-based testing (Ibrahim et al, 2021)). Currently, home FC testing kits are not available at our Trust.

'We have one of the largest patient cohort of children/young people with IBD in the UK. My project aims to involve our IBD patient population to assess compliance with sample presentation at hospital for FC testing. Additionally, through obtaining views from patients and their carers, we hope to identify barriers to this activity. Following this I plan to trial the use of home FC testing kits in our children/young adult patient population, monitoring patient compliance and improvement in their outcomes and obtaining patient/carers feedback.

'I hope that as a result of this investigation and by providing our children/ young people with an alternative to hospital FC testing, compliance for FC testing overall can be improved, along with a reduction of burden on carers and families. I also hope that by demonstrating the impact that nurses can have on research and on improving patient care, I can inspire other nurses and nursing students to become involved in research.'

Dr Rafeeq Muhammed. Consultant Gastroenterologist at Birmingham Children's Hospital comments:

'Sarah Jordan is our Clinical Research Sister leading IBD clinical trials in our department. She is very knowledgeable and passionate about the care of our patients with IBD and her dedication and desire to improve care for patients with IBD continuously through clinical trials has helped to improve the quality of life for several of our patients with IBD. Sarah also plans to further improve care through her own research projects.'

Ms Jordan states:

'I feel very honoured to have been recommended for this award and to have received it. Personally, it affirms that the ideas I have to help improve patient care are valid. It also feels very meaningful to have my efforts recognised for aiming to improve care for patients with IBD through clinical research delivery and through delivery of my proposed project.

'Professionally, this has inspired me to want to continue sharing ideas on how to improve patient care for patients with IBD and will give me the confidence to apply for awards and grant funding calls in the future.'



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