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## The interface between clinical research delivery and nurse led research in critical care

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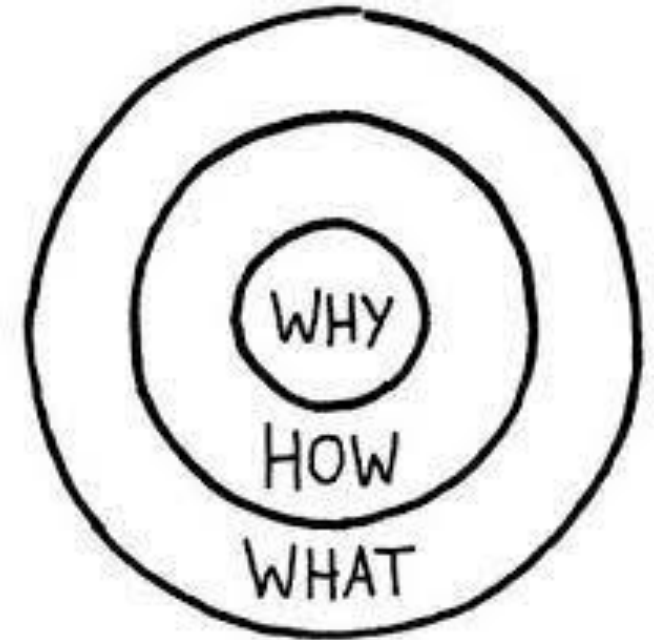


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# Introduction

- **What** is clinical research?
- **Why** do we need nurses leading clinical research?
- **How** can we facilitate, encourage and empower nurses to undertake research?



# What is clinical research?

- Research is designed and conducted to generate new generalisable or transferable knowledge
- Includes both quantitative and qualitative studies that aim to generate new hypotheses as well as studies that aim to test existing or new hypotheses
- Process of enquiry





The most  
dangerous phrase  
in the language is "we've  
always done it this way."



# Why do we need research in ICU?



# Nurse sensitive outcomes

- Patient outcomes that are *relevant* based on nurses' scope and domain of practice and that are *influenced* by nursing inputs and interventions <sup>1</sup>
- Patient outcomes that can be linked to the quality of nursing care <sup>2</sup>
- Differences between hospitals and countries?
- Nurse-sensitive outcomes will vary depending on clinical setting (ICU vs oncology)
- If we don't measure, we can't improve

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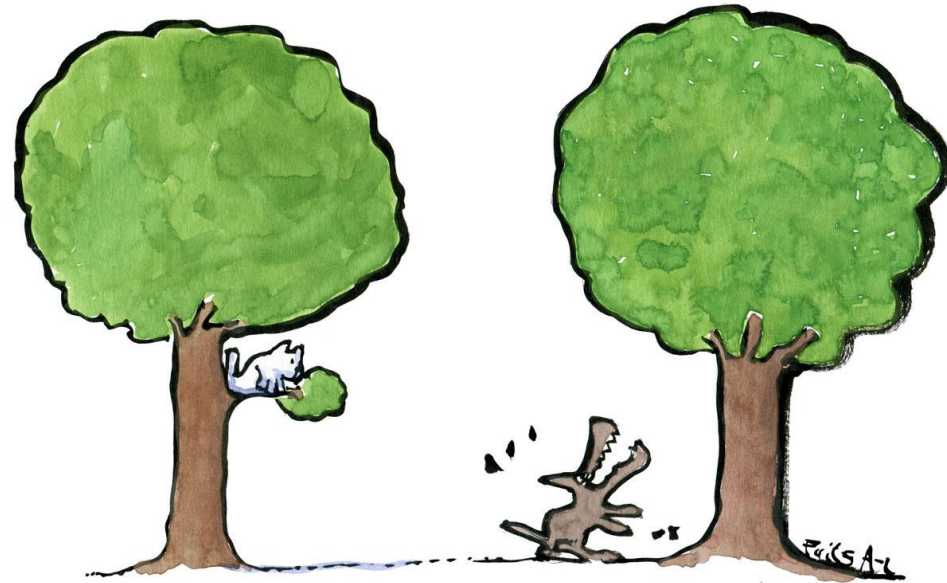
# Let's list some nurse sensitive outcomes



inspiration  
focus  
bold leader  
creative  
fast transpiration

# Nurse sensitive outcomes should guide nursing research priorities

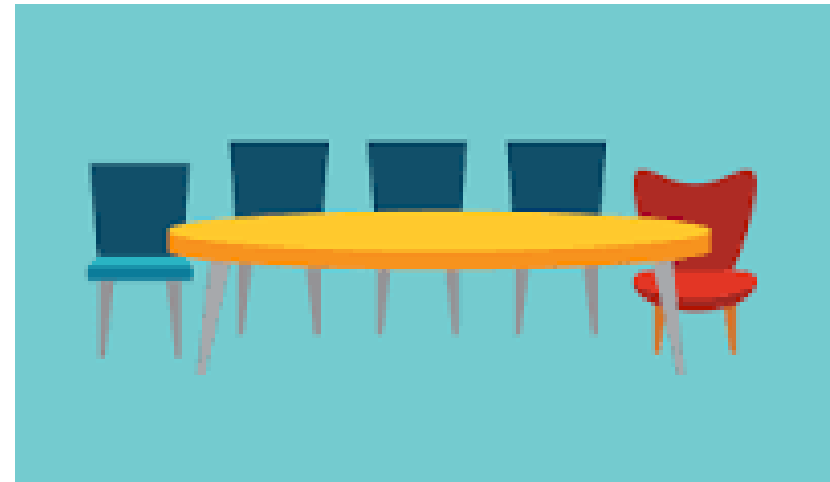
- Our research priorities should be guided by NSOs
- Important to ensure we are not “barking up the wrong tree”
- Clear set of outcome measures, operational definitions, benchmark, scope of practice
- Looking at things we do, and focusing on what we can change





# Nurses exploring nurse sensitive outcomes

- If nurses do not study the **things they do**, then either others will, or the evidence base for these aspects of our nursing care will be lacking<sup>1</sup>
- Nurses must be at the forefront of generating evidence and answering important research questions as they arise
- Nurses need to have a seat at the table

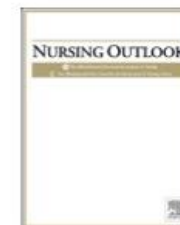




Contents lists available at [ScienceDirect](https://www.sciencedirect.com)

## Nursing Outlook

journal homepage: [www.nursingoutlook.org](http://www.nursingoutlook.org)



### Call to action: Blueprint for change in acute and critical care nursing



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Maureen A. Seckel, MSN, RN, FAAN<sup>c</sup>, Anne W. Alexandrov, PhD, RN, FAAN<sup>d</sup>,  
Lauren R. Sorce, PhD, RN, FAAN<sup>e</sup>, Laura Beth Kalvas, PhD, RN<sup>a</sup>,  
Vallire D. Hooper, PhD, RN, FAAN<sup>f</sup>, Michele C. Balas, PhD, RN, FAAN<sup>g</sup>,  
Kathleen M. Vollman, MSN, RN, FAAN<sup>h</sup>, Devin S. Carr, DNP, RN, ACNS-BC<sup>i</sup>,  
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Jane M. Carrington, PhD, RN, FAAN<sup>l</sup>, Sonya R. Hardin, PhD, RN, FAAN<sup>m</sup>,  
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# Capturing the true work of nurses

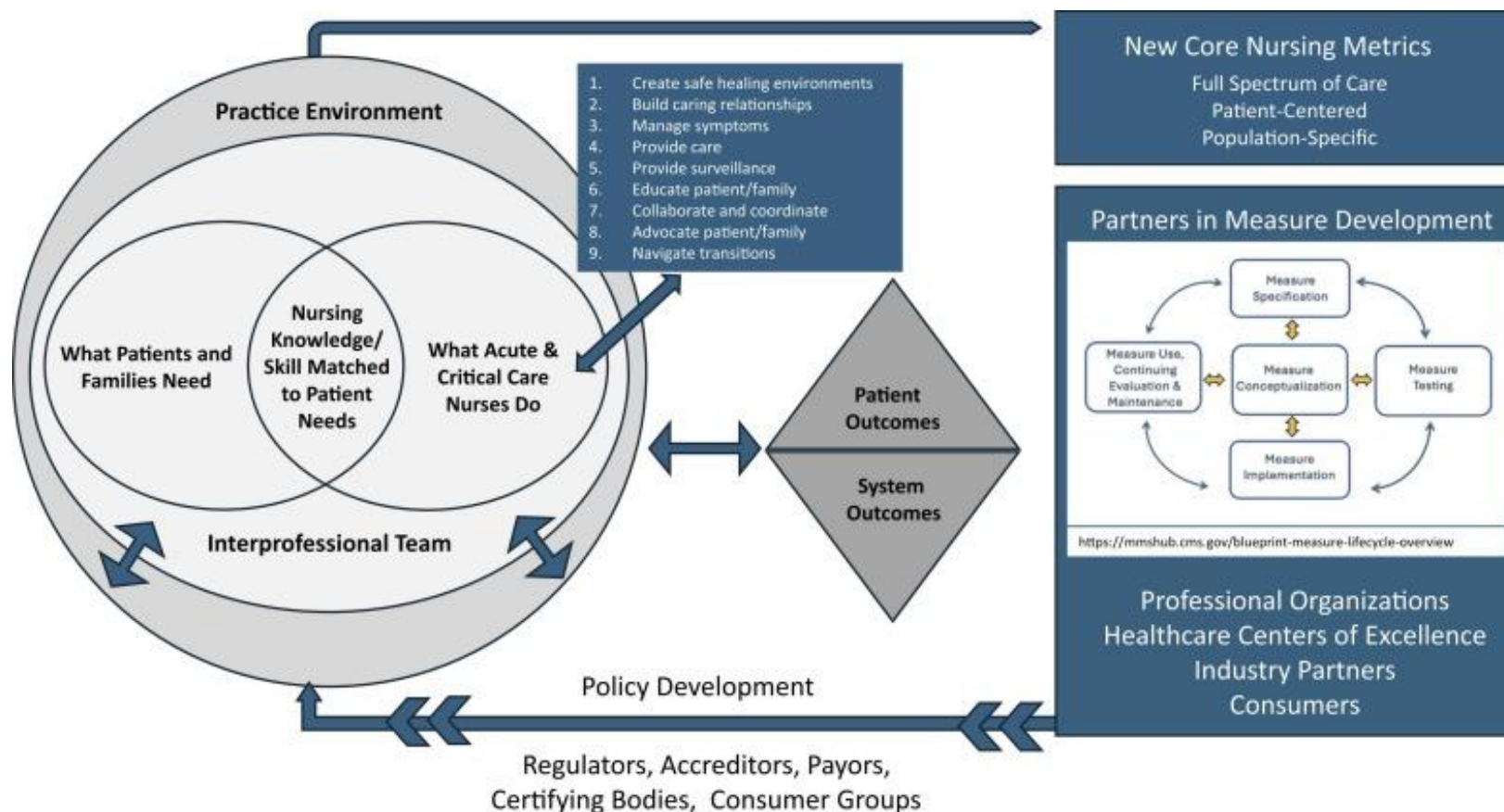
- Precision-based outcomes that call attention to the **presence**, not the absence, of nursing care
- 9 domains of practice and core elements of hospital environments that support nurses' capacity to provide optimal care
- Flipping the narrative

Curley, M. A. Q., Zalon, M. L., Seckel, M. A., Alexandrov, A. W., Sorce, L. R., Kalvas, L. B., Hooper, V. D., Balas, M. C., Vollman, K. M., Carr, D. S., Good, V. S., Latham, C. L., Carrington, J. M., Hardin, S. R., & Odom-Forren, J. (2024). Call to action: Blueprint for change in acute and critical care nursing. *Nursing Outlook*, 72(6). <https://doi.org/10.1016/j.outlook.2024.102271>



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# Capturing the true work of nurses: a framework



Curley, M. A. Q., Zalon, M. L., Seckel, M. A., Alexandrov, A. W., Sorce, L. R., Kalvas, L. B., Hooper, V. D., Balas, M. C., Vollman, K. M., Carr, D. S., Good, V. S., Latham, C. L., Carrington, J. M., Hardin, S. R., & Odom-Forren, J. (2024). Call to action: Blueprint for change in acute and critical care nursing. *Nursing Outlook*, 72(6). <https://doi.org/10.1016/j.outlook.2024.102271>





# FULBRIGHT

## Ireland-USA



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# De-implementation



GUEST EDITORIAL |  Free Access

## De-implementation of low value clinical practices is essential for critical care nurses

Lyvonne N. Tume RN, PhD , Leanne M. Aitken RN, PhD

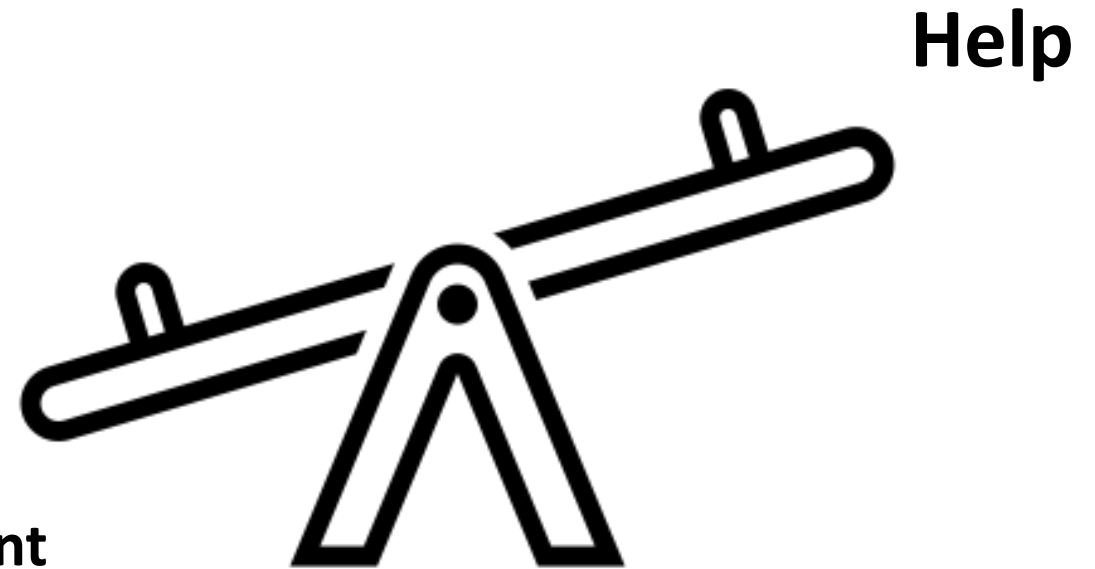
First published: 20 February 2024 | <https://doi.org/10.1111/nicc.13028> | Citations: 4

Please note that the views expressed in this critical commentary are those of the authors and may not necessarily reflect the opinion of the *Nursing in Critical Care* editorial board, the *British Association of Critical Care Nurses* or Wiley.

# We must ask ourselves...

1. Why am I doing this?
2. What is the evidence base?
3. Is it going to help?

Inefficient  
Ineffective  
Unsafe



# The Emergence of Nurse-Led Research

- **Research initiated, led, and managed by nurses**
- **Nurses lead in the design, conduct, and dissemination of findings**
- **Focus on patient-centered care, improving nursing practices, and health outcomes**
- **Common research areas: patient safety, symptom management, and health promotion**



# The impact of nurse led research

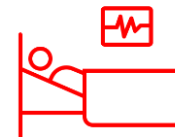
**Impact on healthcare  
practice  
and policy**



**Increased visibility and  
recognition of the  
nursing profession  
in research**



**Improved patient outcomes**



# Nurse led RCTs



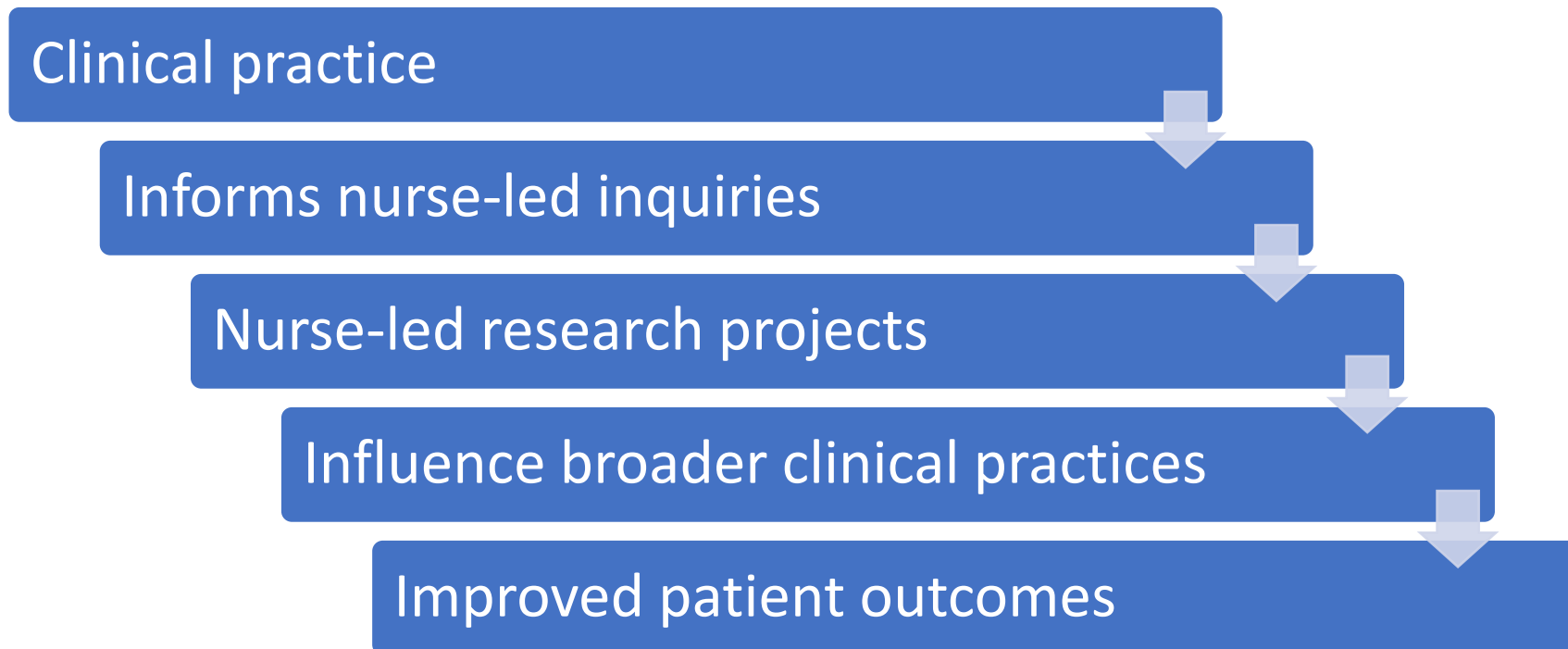
EDITORIAL |  Free Access

## Randomized controlled trials in critical care nursing: Essential to move practice forward

Lyvonne N. Tume , Natalie L. McEvoy, Sarah Vollam

First published: 12 May 2022 | <https://doi.org/10.1111/nicc.12773> | Citations: 2

# Interface Between Clinical Research Delivery and Nurse-Led Research



# Research journey

**Dream**



**vs**

**Reality**





# Challenges at the interface

- **Balancing research responsibilities with patient care duties**
- **Time constraints**
- **Navigating hierarchical structures in research/clinical environments**



# Clinical academic roles in nursing are key

- In Ireland, published in 2021 by Minister for Health
- 46 recommendations
- Need to integrate clinical, academic and research roles of nurses for the advancement of patient care
- Such integration will help advance innovation and enhance the rapid translation of evidence into practice within health services.



An Roinn Sláinte  
Department of Health

Report of the  
Expert Review Body  
on Nursing and Midwifery



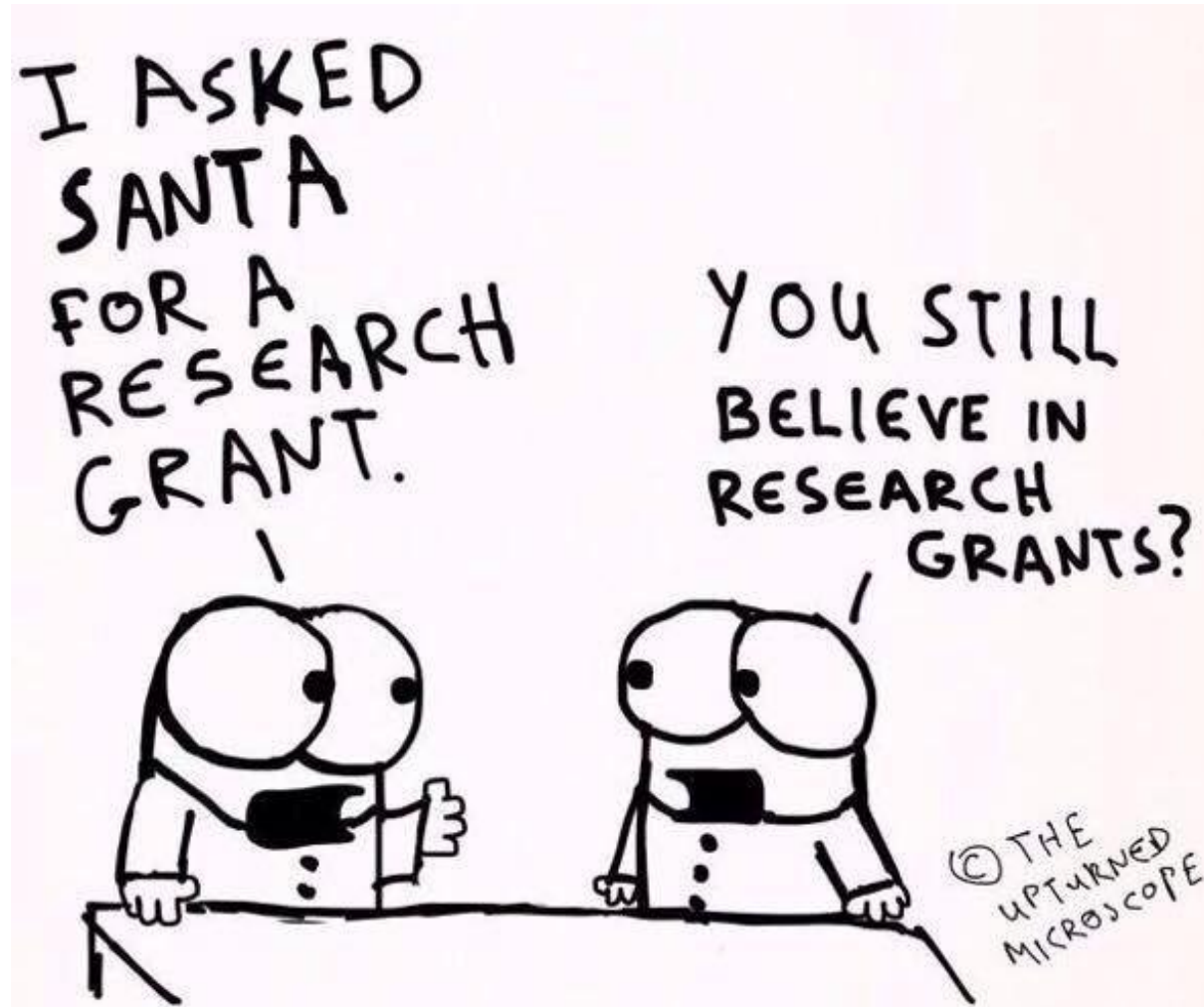
# Question

**How many of you work in an institution where there are clinical academic nurses?**

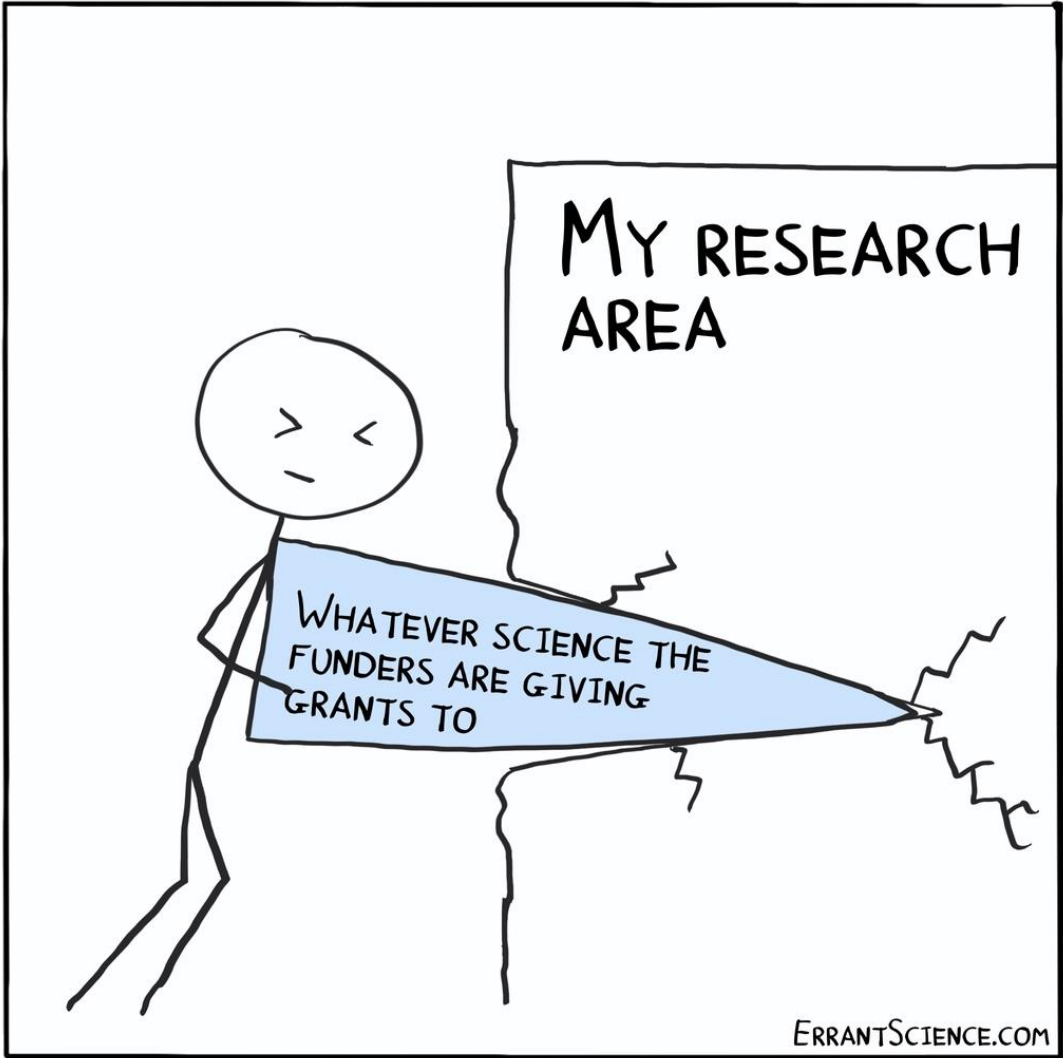
**Raise your hand if you are unsure if these roles exist at your institution**



# Funding



# Funding: finding the right grants



# Navigating the funding landscape

- **Career stage (early, mid, late)**
- **Discipline (nursing)**
- **Type of research (clinical, translational)**
- **Affiliation: university/hospital**
- **Location: country**

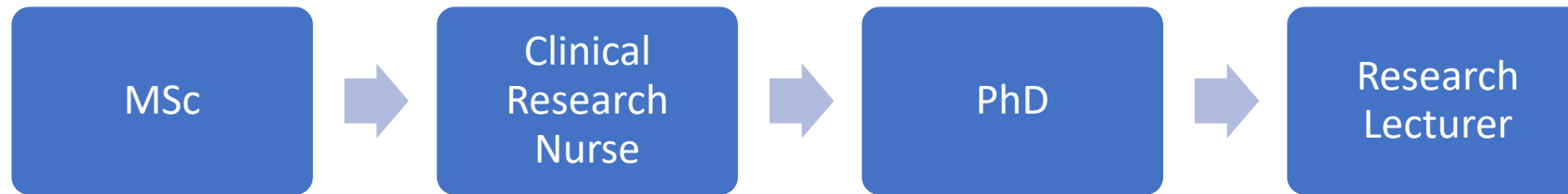




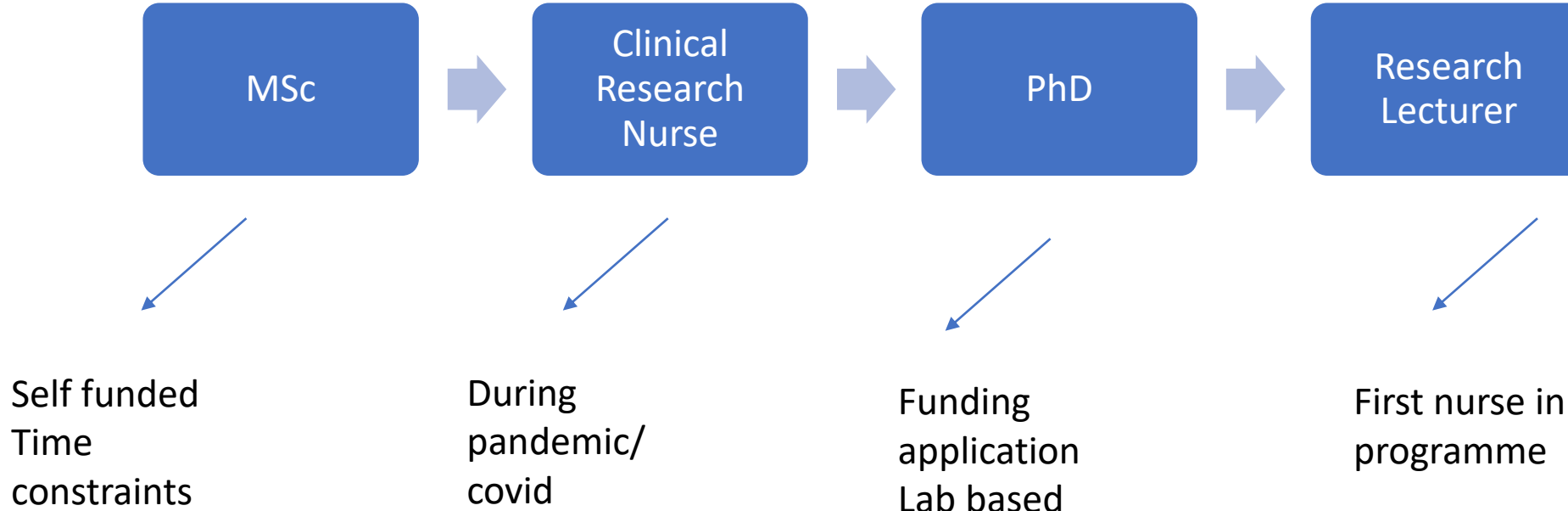
# Many different paths



# My research journey



# My research journey



# Tip of the iceberg





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## COLUMN

# A CV of failures

Keeping a visible record of your rejected applications can help others to deal with setbacks, says **Melanie Stefan**.



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# Nurses at the interface

- **Nurses exploring the things they do and evaluating the impact of nursing care**
- **Needed at patient, process and systems level**
- **Generate the evidence**
- **Bridge the evidence gap**
- **Challenge low value care practices (de-implementation)**
- **Integral to practice- not an added bonus!**



# How to get involved in research

- **Postgraduate education programmes**
- **Scholarships**
- **QI/service evaluation**
- **Peer review**
- **Network beyond your immediate networks**
- **Read research!**
- **Submit abstracts**
- **Attend conferences**

# Have confidence in your ideas

- **Funding**
- **Ideas for studies**
- **Practical suggestions- borrow from prior experiences**
- **Innovative solutions to clinical problems**



# Mentorship

- Mentors can be other nurses, but also from other health disciplines (medicine, HSCP)
- Outside your field of interest
- How to find a mentor can be a difficult first step
- Tip: SEND THE EMAIL!

# The need to identify research priorities

Received: 23 August 2022 | Revised: 1 February 2023 | Accepted: 14 February 2023

DOI: 10.1111/jnu.12884

PROFESSION AND SOCIETY

 JOURNAL OF NURSING  
SCHOLARSHIP

## Critical care nursing policy, practice, and research priorities: An international cross-sectional study

Ged Williams RN, Crit. Care Cert., LLM, MHA, FACN, FACHSM, FAAN<sup>1,2</sup>  |

Paul Fulbrook RN, PhD, MSc, Post. Grad. Dip. Educ., BSc (Hons)<sup>3,4,5</sup> |

Laura Alberto RN, BN, Esp. Ed., Master Ed., Dip. Com. Sc., PhD<sup>6</sup> |

Ruth Kleinpell RN, PhD, FAAN, FCCM<sup>7,8</sup>  | Mathilde Christensen RN, CCN, MSc<sup>9</sup> |

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# Research priorities: an Irish perspective



Oifig an Stiúrtóra Seirbhísí  
Altranais & Cnáimhseachais

Office of the Nursing &  
Midwifery Services Director

## The Research Priorities for Nursing and Midwifery

2023 - 2028

### RESEARCH PRIORITIES IDENTIFIED

Following a meeting with the nominal group who reviewed the categories and sub-categories from phase one of the scoping exercise, consensus was reached on the final research statements that will form the research priorities for nursing and midwifery 2023-2028 (see Table 3). In total there are 20 research statements under 10 research categories.

#### Workforce Planning

1. Recruitment and retention of nurses and midwives
2. Workload volume, skill mix and safe staffing
3. Health and wellbeing to support nurses and midwives in their role

#### Access to Services / Service User Involvement

4. The need to enable and empower meaningful and authentic service user engagement that includes minority and vulnerable groups to inform service design, development and evaluation
5. Barriers and enablers to implementing national nursing and midwifery policies/ strategies and empirical evidence that support service user involvement and access to care
6. How the development of nursing and midwifery roles can support access to care

#### Service Delivery

7. Looking at and learning from existing models of service delivery
8. Enhancing access and provision of services
9. Enabling the integration of acute services with community services
10. Barriers and enablers to effective communication between sectors

#### Role of Nurses and Midwives

11. Assessing the contribution and impact of nurses and midwives in an evolving healthcare system to deliver on population health needs
12. Understanding the support needs and impact of advanced and specialist nursing or midwifery roles, for effective care delivery

#### Clinical Practice and Expertise

13. Supporting the implementation and impact of high-quality person centred, evidence- based nursing or midwifery practice

#### Digital Health / Service Change and Transformation

14. Identifying and understanding the purposes, benefits and risks of data and information in nursing and midwifery care delivery
15. Impact of digital technology on service users outcomes and clinicians (nursing and midwifery) care delivery experience
16. The nursing and midwifery professions adapting to a digital future

#### Education and Development

17. Clinical and academic education – exploration of roles /who is involved and what they do, how they interact
18. From CPD to PhD - links to retention of nurses and midwives and patient outcomes
19. Education into the future: where is nursing and midwifery in inter-professional learning and simulation?

#### Governance and Leadership

20. Roles and support structures influencing nursing and midwifery in leadership and management



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# Future Directions and Recommendations

- **Mentorship- formal or informal**
- **Organizational support structures**
- **Collaboration- Interdisciplinary research is key**
- **Funding streams**
- **Be aware of research priorities**
- **Ultimately = more nurses leading clinical research**







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**Thank you- Questions?**

email: [nataliemcevoy@rcsi.ie](mailto:nataliemcevoy@rcsi.ie)

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