# My Research is Completed....Now What?

Cindy Ward, DNP, RN-BC, CMSRN, ACNS-BC





### **Disclosure**

 The speaker has no conflicts of interest to disclose.





# **Carilion Roanoke Memorial Hospital**

- 3 time Magnet<sup>®</sup> designated
- Flagship of Carilion Clinic
- Region's only Level 1 Trauma Center
- 703-bed academic medical center
- Serves nearly 1 million patients across VA, WV and NC





# **Objectives**

- Define methods and components of dissemination, including poster presentation, podium presentation and publishing
- Identify key elements in the publishing process



### **Research Dissemination**

"The targeted distribution of information and intervention materials to a specific public health or clinical practice audience. The intent is to spread knowledge and the associated evidence-based interventions<sup>1</sup>."





### **Research Dissemination**

### Methods of Dissemination

- Poster presentation
- Podium presentation
- Publishing
- Product launch<sup>2</sup>





### **Poster or Podium Presentation**

### How to submit

- Identify conference
- Call for poster abstracts



\$50 discount off main conference tuition. The discount is offered to the primary presenter only and cannot be combined with any other discount. All poster presenters will be responsible for their own travel

and all expenses related to their presentation.



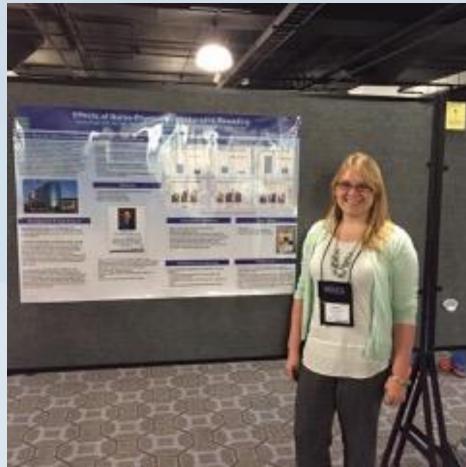
# **Writing the Abstract**

- Limited word count
- Accurate
- Concise
- Simple sentences
- Active voice
- Follow guidelines<sup>3</sup>



## **Poster Presentation**







### Insert Poster Title here



Your name here, degree, licensure, certification You institution's name here (if required by external organization)



Implications for Nursing

### Carillon Roanoke Memorial Hospital

One of the sequest hospitals in the Commonwealth of Virginia, Carllant Rosmola Mamonia Maspital (CRMM) is the region's only Level 1. Therms Certain serving as a regional resource and providing access to comprehensive training services serve 1983. CRMM features a 703-bed assignment medical certain including Carllant Children's, a full service. \$0.0-bed hospital within a hospital. The provides operating dimensive care for reconstal, pediatric and alterescent patients. CRMM is part of Carllan Clinic Riteralis Carripor. Divin service reserve on million patients provide services western Virginia and parts of Vivest Virginia and Aloctic Carolina.



### Background & Significance

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#### Methods

insert your lest here. Move the text and graphics boxes to fit your individual needs.

#### Results

Insert your text here

#### Conclusions

#### References

linest your references here



Logo

# Title of the Research Study PEOPLE WHO DID THE STUDY

UNIVERSITIES AND/OR HOSPITALS THEY ARE AFFILIATED WITH

Logo

#### Introduction

We hope you find this template useful! This one is set up to yield a  $84x36^\circ$  (7x3') horizontal poster when we print it at 200%.

We've put in the headings we usually see in these posters, you can copy and paste and change to your heart's content! We suggest you see black text against a light background so that it is easy to read. Background color can be changed in the design tab, hackground drop down menu.

The boxes around the test will automatically fit the test you type, and if you click on the test box, you can use the little handles that appear to strench or appears the test boxes to whatever size you want. If you need just a little more room for your type, change the linespecing to a multiple of 90 or even. 35 in bome bytagraph Vines spacing. The type in this poster's text boxes should be at least 12 point, and will become 24 point when we grint as 2005.

The dotted lines through the center of the piece will not point, they are for alignment. You can move them around by clicking and holding them, and a little box will tell you where they are on the page. Use them to get your pictures or text boxes slipped together.

You can add a guideline by holding the control key down as you move one. It can also help to turn on Snap to Guides by right clicking the background and going to Grid and Guides. That will make images and text boxes "imagnetically" map to the guidelines.

#### How to bring things in from Excel® and Word®

Excel-select the chart, then copy (cf=C), and pasts (cf=V) into PowerPoint®. The chart can then be stretched to fit or edited as required. <u>Hearth our</u> for scientific symbols used in imported chart, which PowerPoint will not ecopyize as a sund ofton and may point impropely fit is don't have the form installed, on our system. It is best to use the Symbol foot for scientific characters, we always have that installed.

Word-select the text to be brought into PowerPoint, copy, then paste the text into a new or existing text block. This text is editable. You can change the size, color, etc. in home-Ford. Wenggest you not yout shadows on smallest esst. Stick with Arial and Times New Roman forts so your collaborators will have them.

Tables that come in funny can often be fixed by doing paste >special >enhanced metafile.

#### Photos

We need images to be 72 to 100 dpi in their <u>final size</u>, a rough rule of thumb that a 500 kb jpg (2 megapixel) image file can go up to 12x16" on your poster. Do insert>from file to import them.

Preview: To see your in poster in actual size, go to view-zoom-200%. It's important to walk through your poster viewing it at full size to be sure it's going to lock OK.

Feedbacks If you have comments about how this template worked for you, email to sales@megaprint.com. Wellisten! Call us at 800-590-7850 if we can help in anyway.

#### Methods

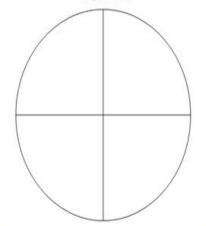


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### Results

#### Figure #2



#### Conclusions

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#### Bibliography

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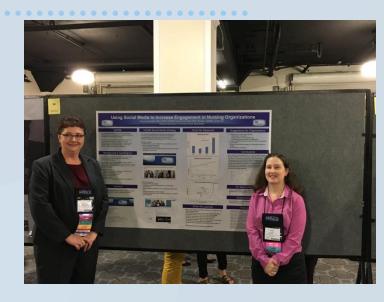
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### **Poster Presentation**

### What to include

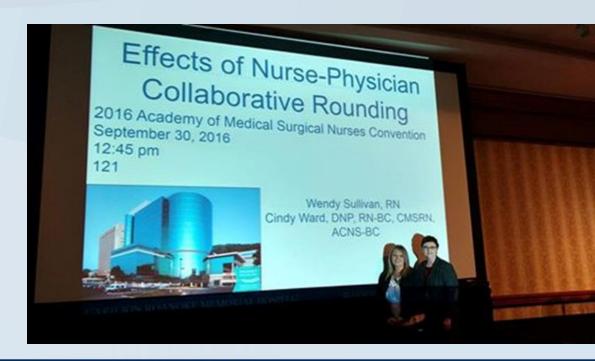
- Title
- Name and credentials
- Hospital information
- Background & Significance
- Methods
- Results
- Conclusions
- Implications for Nursing Practice
- References





### **Podium Presentation**

- Local
- Regional
- State
- National





### **Power Point Guidelines**

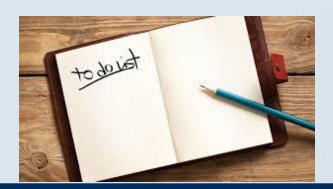
- Highlight key points
- Consistency in layout
- Focus on readability
- Avoid graphs that are difficult to read<sup>4</sup>





# **Power Point Guidelines (cont.)**

- Use bullet points
- Keep each bullet point brief
- Be careful of color combinations.
- Avoid bright colors on white or low contrast colors<sup>4</sup>





# **Publishing**

### Local or state publications







# **Publishing**

### Non-peer-reviewed publications







# **Open Access Journals**

- Online
- Published rapidly
- Free to read and reuse
- May cost the author
- Directory of Open Access

Journals (www.doaj.org) 5,6



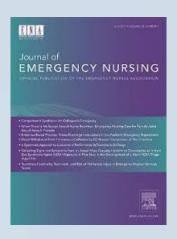


# **Publishing**

### Peer-reviewed publications











# **Types of Articles**

- Evidence synthesis (systematic review)
- Original research
- Clinical articles
- Discussion articles
- Short reports
- Case studies
- Opinion pieces<sup>7</sup>



# **Assessing a Journal**

- Do you or your colleagues know the journal?
- Who is the publisher?
- Peer review?
- Indexed in services that you use?
- Fees?
- Do you recognize the editorial board?<sup>5</sup>



# **Publishing Tips**

- Target the journal
- Follow publishing guidelines
- The process takes time!





### **Ethical Issues**

- Authorship
- Avoid redundant publications
- Avoid duplicate submissions<sup>7</sup>





### **Peer Review Process**

- Write and submit manuscript
- Manuscript sent to reviewers
- Reviewers return manuscript to editor
- Editor reviews and returns manuscript to author
- Revise and resubmit
- Article is published<sup>6</sup>



# **Avoiding Rejection**

- Match manuscript to scope of the journal
- Provide complete data
- Rigorous analysis
- Use correct methodology
- Draw appropriate conclusions<sup>6</sup>





#### Continuous Quality Improvement

### **Effects of Nurse-Physician** Collaborative Rounding

Nadine Riegel Sheila Delp Cynthia W. Ward cal project unit perceived frequent miscommunication or lack of communication among providers, patients, and nurses regarding the plan of care. These communication difficulties created a need for murses to telephone providers for clarification of orders or instructions, causing interruptions in workflow and taking time away from patient care. Inadequate communication between nurses and providers concerning the patient's plan of care can coninflute to a negative patient perception of communication and teamwork that may be reflected in a hos-

urses on the medical-surgi-

Project Site and Reason for Change

pital's Hospital Consumer Assess-

ment of Healthcare Providers and

Representatives from the identified units were members of the project team. This project was developed to improve communication among patients, providers, and mutses. HCAHPS scores for nurse communication, physician communication, and overall teamwork on the participating units were below the benchmark (see Figures 1, 2, & 1). HCAHPS scores for nurse communication and physician communication affect hospital reimbursement through the Hospital Valuefined Purchasing program. Valuetured purchasing is an incentive program from the Centers for Medicare to Medicaid Services (2015) to reward hospitals based on the qual-By of the care provided to Medicare putients, including patients' experience of care.

This project demonstrated collaborative rounding can increase patient perception of communication with physician and nurse, and decrease the number of telephone calls needed to clarify patient care. This project also supported use of a simple, inexpensive door sign to promote positive change in communication among healthcare professionals.

Patients on the hospital's medical-surgical unit are seen by a number of specialty providers. Nurses often had to page providers several times before calls would be returned. The time spent making telephone calls affected nurses' time to address patient needs. Nurses also received conflicting information from patient and provider regarding the plan of care. Many times providers rounded on patients without the assigned nurse being aware. Because that murse did not hear what the provider discussed with the patient, he or she was unable to answer questions after the provider left; this created the need for telephone calls to the provider for clarification of orders and plans. Patients expressed frustration because the nurse could not answer their questions. Nurses' believed many patient questions and telephone calls to providers could be eliminated if collaborative rounding occurred.

#### Program

#### Phase I (Pilot)

Inspired by Flicek (2012), door signs were placed on each patient's room with the assigned nurses' photograph and telephone number. The sign provided a prompt for the provider to call the nurse upon arrival to the room for collaborative rounding. Two nurses participated in the pilot. Data regarding number of calls to providers were collected informally by one nune using Postit® notes, and a draft tally sheet was developed by the other nurse. Nurse participants reported reduced calls and decreased interruptions to their workflow. They also reported increased communication with pro-

#### Phase 2 (Expansion)

Following a successful pilot, the peoject expanded to three additional medical-surgical units. The quali-

Nadine Riegel, BSN, RN, is Registered Nurse, Western Maryland Health Systems. Cumberland, MD

Shells Delp, MSN, RN, AGCNS-BC, FNGNA, was Generatory Direct Nume Spensers. Cardon Rosenous Memorial Hospital, Rosenous, VA, at the time this article was written.

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# **Predatory Publishing**

- Rapid publishing without rigorous peer review<sup>8</sup>
- Not indexed or searchable<sup>8</sup>
- Use deceptive methods to exploit open access publishing for their own profit<sup>8,9</sup>





### Anesthesia | Research | Pain Management

Journal of Anesthetic Research and Pain Medicine (JARPM) [editor.jarpm@zygoinc.com]

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Dear Dr. Cynthia W Ward,

I am writing to you on behalf of the <u>Journal of Anesthetic Research and Pain Medicine (JARPM</u>), as you have come to my attention as a highly dedicated expert in the field of Anesthesiology and Pain management. Recognizing your creative genius in this field, I invite you to share your unique insights with the world through our open access platform.

We welcome submissions across varied disciplines of anesthesiology and pain management. We are accepting Research, Case Reports, Critical Reviews, Letters to the Editor, Conference Proceedings, and Surveys for this issue. If you would like your research to be promoted alongside a few selected expert colleagues' in our next edition, please submit your manuscript to <a href="mailto:editor.jarpm@zygoscient.org">editor.jarpm@zygoscient.org</a> and For electronic mode of submission: <a href="mailto:http://zygoscient.org/submit-manuscript/">http://zygoscient.org/submit-manuscript/</a> by 31st May.

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### Journal of Nursing Science: Submit Manuscripts and Register as Members

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# **Avoiding Predatory Publishers**

- Learn how to recognize
- Perform due diligence
- Be suspicious of claims
- Check reputable online databases
- Check editor's credentials<sup>10</sup>





### **Contact Information**

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