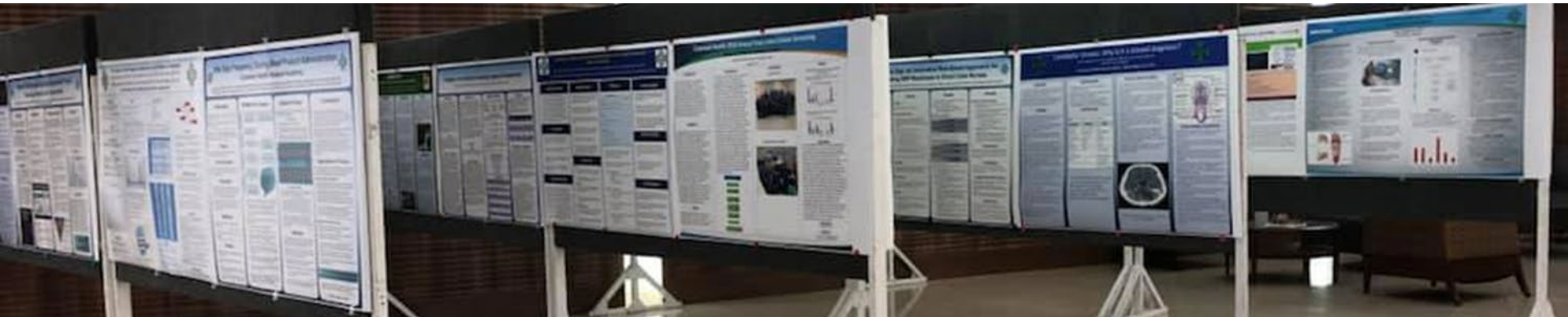


Academic and Acute Care Institutions Partner to Impact Nursing Practice through Increasing Translational Research Capacity

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Purpose

This descriptive study examined impact of partnership between academic nurse scientists, a research librarian, and hospital nurse leaders on capacity to translate, implement, and disseminate research findings.



Aim

Researchers aimed to improve nurse use of evidence-based practice (EBP), research science, and quality improvement (QI) concepts for application by direct care nurses in translating research into practice.

Problem Statement

Nurses may lack confidence and skills to utilize, translate, implement, and disseminate research, EBP, and QI findings to guide clinical decision-making and overcome recognized barriers during nursing shifts when clinical questions arise.

(Beal, 2012; Conner, 2014; Cullen et al., 2018; Hendricks & Cop, 2017; Renolen, Hjälmhult, Danbolt & Kirkevold, 2018; Titler, Hill, Matthews & Reed, 1999; Yoder et al., 2014)

Background

- “Research” may daunt nurses working in complex hospital settings, thus leading to avoidance of research, EBP, and QI project participation.
(Hill, Titler, & Mathews, ND; Hendricks & Cope, 2017; Yoder et al., 2014)
- To assist nurses in adopting research into practice at academic and nonprofit hospitals, nursing research scientists from private and state funded universities established “Research Academy” (RA).
- Developed curriculum by two academic nurse scientists was presented by nurse scientists and hospital leaders enrolled in Doctor of Nursing Practice programs during a 1.5 hour session monthly in 2014-2015.

Background

- Sessions focused on concepts essential to translate research into practice.
(Beal, 2012; Larkan, Uduma, Lawal, van Bavel & Lawal, 2016; Shirey et al., 2011; Warren, Montgomery & Friedmann, 2016)
- Participants identified a research, EBP, or QI project to complete during the 12-month program.
- Enrollees conducted literature searches based on clinical questions to discover answers.
- Synthesis of literature findings informed project development.
- RA curriculum design and facilitators guided projects from planning, implementation, evaluation, to dissemination.

First Cohort

- Fifteen nurses voluntarily enrolled included junior faculty (n=4) and clinical nurses (n=11).
- Three (27.3%) clinical nurses completed RA.
- Practice changes, increased interest in RA, and change in culture were observed.

Second Cohort

- Second cohort enrollment increased from 11 to 27.
- An increase interested participants from one hospital was demonstrated by enrollment increase from the first (n=4) to the third (n=19) cohort.



Fourth Cohort

- RA facilitators collaborated to strengthen the RA experiential learning for cohort four through curriculum redesign from individual projects to a group project based on published barriers to EBP projects of time, skill, and resources.
- Role-modeling and a team approach were pivotal considerations in curriculum modification.
- Notably, all RA cohort four direct care nurses represented night shift nurses.

Methods

- RA curriculum design and participant recruitment strategies were modified for the fourth cohort.
- Participants were selected based on interests expressed during collaboration with acute care educators and managers.
- The fourth cohort continued to meet monthly from 2017-2018 for 1.5 hour scheduled sessions, however 4 to 6 hour work sessions were added for facilitated group work.
- Each session included learning research concepts facilitated through participant engagement strategies.
- Participants were not required to attend work sessions, hence allowing contribution to project outcomes based on time and schedule availability.

Methods

- A research question was strategically developed by RA facilitators, including a research librarian, for the fourth cohort to answer as a group.
- The cohort consisted of three baccalaureate prepared direct care nurses and four masters prepared nurses with varied levels of comfort, exposure, and skill to concepts presented in RA.
- All but two nurses were certified nurses in an area of nursing specialty.
- Nurses represented neonatal, critical care, palliative medicine, neurology, wound, resource pool, and diabetic focused clinicians.

Methods

- The research question was selected to represent a topic common to clinicians across practice settings and patient populations.
- The clinical question's applicability to all areas of practice was intended to engage interest in finding an answer.
- A search methodology of Integrated Research Review (IRR) was selected due to rigor and structure. (Whittemore & Knafl, 2005)
- Evidence of literature was established through inter-rater reliability.
- No high level evidence was identified to answer the posed question, thus strategically challenging RA participants' identification of applicability to practice.

Methods

- Initial plans were for individual nurses to work with RA facilitators on different sections of an abstract.
- Participant feedback led to RA revision from a piece-meal approach to all nurses to meeting together for synthesis of findings, presentation development, writing an abstract, and local and national dissemination of findings.



Methods

- The Nursing Evidence-Based Practice Survey[©] was used to assess nursing perceptions and EBP culture in cohort four participants before and after twelve months of participation and project completion through dissemination.

(Titler, Hill, Matthews & Reed, 1999)

- The Evidence-Based Nursing Practice Self-Efficacy Scale[©] tool was used to measure RA cohort 4 participant self-reported confidence in EBP skills and measure impact of RA on EBP self-efficacy and EBP Skills.

(Tucker, Olson & Frusti, 2009)

Results

- RA participants in the fourth cohort developed skills through observation of role models applying research skill sets alongside them.
- The ability to establish inter-rater reliability was named by all participants as the “best” experience.
- Synthesis skills were developed through role-modeling use of a research grid and dividing key literature findings into significant categories.
- Practice changes based on evidence in reviewed literature were initiated through collaboration with key interdisciplinary stakeholders.

Results

- Confidence and emergence of EBP leaders emerged.
- All direct care nurses presented practice recommendations to their peers through proper administrative authorization channels for practice change approvals.



Discussion

- RA strengthened research capacity in nurses, to change culture, advance nursing practice, promote safety, and promote health and wellness.
- Nurses who completed RA have changed practice, state law, and raised interest in being change agents.
- Measurable outcomes were seen in completion of EBP, QI, and research projects.

Discussion

- A new approach led to observed and self-measured increased weighing of evidence, search, and synthesis skills.
- Every group of nurses possess different learning styles and baseline knowledge, therefore learning facilitators must remain responsive to the learning needs of each cohort as RA continues to empower nurses to translate evidence into practice.

Conclusion

- A new approach led to observed and self-measured increased weighing of evidence, search, and synthesis skills.
- Every group of nurses possess different learning styles and baseline knowledge, therefore learning facilitators must remain responsive to the learning needs of each cohort as RA continues to empower nurses to translate evidence into practice.

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