Purpose:
The purpose of this cross sectional descriptive study was to identify, by survey, what education and research barriers exist for operating room and post anesthesia care nursing staff in the rural hospitals of the Mississippi River Delta.

Introduction:
• Nearly 20% of the nursing workforce practice in rural settings.
• One in five of the U.S. population live in rural areas.
• Rural hospitals do not have the financial capital to invest heavily into nursing continuing education or research. As a result, rural nursing staff do not receive the same continuing education and research opportunities that are available in larger urban hospitals.
• Barriers to continuing education and research for rural nursing staff must be identified, and a system to accommodate the barriers needs to be developed.

Methods:
• This study was a cross sectional descriptive study.
• Three rural hospitals in two states in the Mississippi River Delta were used in this study.
• A total of 31 operating room/post anesthesia care unit subjects volunteered. The subjects consisted of RNs, LPNs, and ORTs.
• A 23 question survey was adapted from two previous studies performed by Fitzgerald & Townsend (2012) and O’Lynn et al. (2009).
• Statistics included: A one-sample t-test, Cronbach’s alpha, Q-Q Plots, and Shapiro-Wilk.

Results:
• The top 3 barriers to continuing education were: Cost of continuing education; Time away from work; and Modality of training offered. [t(27) = 363.00, p = 0.00, CI = 95%].
• The top 3 barriers to use of research in practice were: Difficulty to influence change in the workplace; Lack of time to implement research; and Lack of support from colleagues. [t(28) = 70.53, p = 0.00, CI = 95%].
• Cronbach’s alpha reliability for internal consistency for the top two questions was 0.67.
• The Shapiro-Wilk for question 1 was 0.814 and for question 2 was 0.097 both suggesting normal distribution of data.

Conclusions:
This study demonstrated barriers to continuing education and research do exist in rural hospitals in the Mississippi River Delta. Suggested accommodations include an education collaboration with local universities and a rural hospital education system. Administrative and financial support by rural hospitals for education and research is needed.