

A NURSING RESEARCH COMMITTEE WITHIN AN ACUTE CARE SETTING: ITS INCEPTION AND DEVELOPMENT

C. CÉLESTE JOHNSTON

Nursing Coordinator

JUDITH COLLINGE

Nursing Consultant

Montreal Children's Hospital

McGill University

RATIONALE FOR NURSING RESEARCH COMMITTEE

The Nursing Department of the Montreal Children's Hospital formed a Nursing Research Committee in the spring of 1979. There were five major reasons for this development.

First, there was felt to be a need for nursing research in acute care settings which has direct relevance for nursing practice. This did not discount the value of nursing research in other settings, or research by other disciplines, but rather recognized a specific vacuum. Nurses whose practice takes place in acute care settings may have unique problems for nursing research that arise from their daily experience, rather than from the literature, where their university-based colleagues may first identify an area for research. Johnson (1974), among others, has emphasized the distinctiveness of nursing research which has as its focus, living and coping with circumstances and environments to promote healthy adaptation, rather than the causative-curative medical model usually associated with research in acute care settings.

Second, nursing research in an acute care setting not only affects nursing practice but also enhances nursing's image as a profession among other professions. Professional activities by definition include systematic inquiry into practice (Schlotfeldt, 1977).

Third, more nurses were being hired who were educated at universities. A forum such as a nursing research committee was needed to foster their professional development through discussions of research for nursing issues.

Fourth, students in post-basic nursing programs in two universities were using our hospital for research without on-site personnel to coordinate and facilitate their studies.

Fifth, and perhaps most important, all levels of our nursing staff needed education about research and its implication for our profession. This included the need to evaluate our practice critically, to ask questions about our practice, and to test ideas in a systematic manner.

RELATIONSHIP TO RESEARCH INSTITUTE

The McGill University-Montreal Children's Hospital Research Institute began operation in 1974. Its main responsibility was the scientific review of all research proposals to take place in the hospital and/or involving its patient population. Approval from this institute had to be obtained before proposals could be submitted for mandatory ethical review by the Hospital Ethics Committee. There was no nurse representative on the Research Institute Scientific Review Board, but the Director of Nursing was a member of the Hospital Ethics Committee. The few nursing proposals that had been developed within the hospital were not submitted to the Research Institute. Projects undertaken by university nursing students were neither reviewed nor coordinated in any systematic fashion within the hospital. These students would contact a hospital staff member, not necessarily in the Nursing Department, who would act as liaison between the student and the hospital. This practice frequently led to problems, such as overuse of certain patient populations and facilities, and a lack of support from other hospital staff. It was clear, then, that the Nursing Department required a mechanism to provide professional scientific review for nursing research proposals and to interface with the Research Institute and the Hospital Ethics Committee for persons desiring to undertake research.

Certain developments in nursing at the Montreal Children's Hospital occurred three years after development of the Research Institute. The two authors had both been hired with research mandates: one as a nursing coordinator responsible for research within the nursing department, and the other as a research nurse in the department of Neonatology. With these mandates for research sanctioned by the hospital and encouraged by the Director of Nursing, the two nurses were able to respond to the situation by forming a Nursing Research Committee. Five persons volunteered for membership initially and monthly meetings began in the spring of 1979. The mandate was to review all nursing proposals to be carried out at the Montreal Children's Hospital before their mandatory submission to the Research Institute. Initial activities of the Committee centered on: 1) development of guidelines and formats for submitting nursing research proposals to the Committee; 2) development of closer contracts with institutions desirous of performing nursing research at the

Montreal Children's; 3) initiation of discussion with the Research Institute regarding the role of the Nursing Research Committee in reviewing and monitoring nursing research within the hospital; and 4) development of specific criteria for reviewing proposals.

In the first year, seven proposals were reviewed and approved by the Nursing Research Committee. Proposals that had non-experimental designs and did not involve patients (eg. a descriptive study of a nursing administration issue) were not submitted to the Research Institute; however, all others were submitted and received approval. The mechanism requiring approval by the Nursing Research Committee, the Research Institute, and the Ethics Committee remained a problem. The time between the initial submission and final approval could be as long as four months. As well, there was no nursing involvement in the Research Institute review process. Discussion with the Institute over the two years of committee operation has resulted in a more efficient and acceptable mechanism. In future, all nursing research proposals will be reviewed for scientific merit jointly by the Nursing Research Committee and a non-nursing member of the Scientific Review Committee of the Research Institute. Following approval by this group, proposals will be sent for ethical review. This change is considered a breakthrough in decreasing by more than half the time required for scientific and ethical approval. More significantly, this change indicates a degree of recognition by the Research Institute of the capability and appropriateness of the Nursing Research Committee to perform the scientific review of nursing research proposals. Discussion with the Research Institute has also led to consultation with the Nursing Department, concerning research-related duties of nurses working in areas where a non-nursing research project is proposed.

DEVELOPMENT OF COMMITTEE

At the end of the first year, the Nursing Research Committee had grown from five to ten members, and the mandate had been expanded to include the following functions:

- 1) Approve all proposals for nursing research to take place within the hospital or its agencies.
- 2) Act as resource persons for nurses wishing to conduct research.
- 3) Stimulate development of nursing research projects.
- 4) Encourage utilization of results of nursing research in the clinical area.

Priority for the second year of operation was placed on the stimulation of development of nursing research projects within the hospital, and on involvement of all levels of nursing staff in nursing research. Membership in the committee continued to increase and reached sixteen persons representing staff nurses from both in-patient areas, head nurses, clinical instructors, and coordinators. The committee began to meet weekly, owing to the interest of the members and increased activity of the committee. Because approximately half the committee members had no formal education in research, they requested a program of didactic teaching on basic research methodology and statistics. This program was presented in the latter part of the year by the authors of this article.

The Nursing Research Committee has presented itself and its work to the hospital nursing staff at Nursing Grand Rounds three times in two years. These presentations have accomplished three important objectives:

- 1) Acquainted the nurses with the membership and objectives of the Nursing Research Committee;
- 2) Increased the nurses' awareness of nursing research in progress in the hospital;
- 3) Demystified nursing research by presenting one project serially and thus enabling them to see a study develop from start to finish.

HIGH PARTICIPATION STUDY: IV THERAPY

During Nursing Grand Rounds, and in discussion with nurses in the different clinical areas, the Nursing Research Committee had been looking for a nursing question considered to be a problem by the nursing staff and having relevance to clinical nursing practice in various areas of the hospital. Frequent concerns regarding intravenous therapy were raised, especially in relation to the length of time intravenous needles remained in situ. The frequency with which IV's needed to be restarted was a major nursing problem, due to 1) the essential aspects of hydration and medication; 2) the lack of reserves in children to cope with periods when the IV was not functioning; and 3) the pain and stress associated with initiating IV therapy in children. Our staff nurses wished to know, therefore:

- 1) how long IV's actually remained in situ;
- 2) what factors influenced how long they stayed in (e.g. type and size of needle, age of child, type of solution);
- 3) why they come out (eg. interstitial, phlebitis, pulled out).

Because the problem has such immediate relevance to their cares and concerns, many nursing staff have been enthusiastic about participating in a study to find answers to their questions. As such, the development of research in this area has become one of the prime mechanisms by which the Nursing Research Committee has stimulated interest in research throughout the department. The levels of staff involved and their participation is presented below.

Number of Nurses	Group	Functions
16	Nursing Research Committee	<ul style="list-style-type: none"> — initiate questions — encourage discussion — formulate questions and methodology — analyse data — act as resource persons
2	Committee members (primary investigators)	<ul style="list-style-type: none"> — develop data gathering tools — coordinate data gathering on units
5*	Unit project coordinator	<ul style="list-style-type: none"> — collect data from charts on units — feedback to staff re data
	All staff nurses on units	<ul style="list-style-type: none"> — chart information needed on IV's

* These nurses were not all Committee members and could have been staff nurse, team leader, clinical instructor, or head nurse.

The above questions were operationalized and specific factors selected and coded to form the pilot proposal by the membership as a whole. The two primary investigators collected preliminary information in a pilot study designed to gather data that was currently available from the charts. As predicted, some relevant information was missing (eg. the gauge of the needle or who started the IV). A "re-educative" presentation at Nursing Grand Rounds was given and an in-service session given on each of the participating units. A brief follow-up study showed that relevant data were then being charted. Data collection began in June, 1981. The preliminary analyses indicate some interesting associations that are currently being developed as

further proposals. There are indications for changes based on the results, such as how long an IV should remain in place before the risk of phlebitis increases greatly. These results are going before the Infection Control nursing group to be considered as a basis for policy on IV's.

This project seems to be the first in a possible series of studies of IV therapy. It has served to make the research process relevant to the bedside nurse and its findings may be utilized. Thus, an opportunity was afforded to follow a project from some initial questions to probable answers and utilization of these answers. The fact that these probable answers will continue to be evaluated through the research process further demonstrates the place of that process in an acute care setting.

FUTURE DIRECTIONS

The original needs which led to the formation of a Nursing Research Committee have been met:

- 1) Nursing research which was conducted by in-hospital nurses with direct implications for improving patient care was begun.
- 2) A forum for exchange of ideas for nursing research was developed.
- 3) Coordination of the research proposals of affiliating students was facilitated.
- 4) Education in the form of didactic sessions and Nursing Grand Rounds was instituted.

While we hope to continue in these same directions, the focus will be more on developing research within our own department. The IV study has encouraged small working groups to develop projects to such a state that funding can be sought. One group is forming to study the measurement of pain in children, and another to study maternal behaviour with handicapped infants.

Collaboration with other groups is another goal for the future. We have met with nurses outside our institution regarding replication or collaboration, but, as yet, no definitive project has evolved. Utilization of findings both from our own setting as well as from others, will also be important for the future.

Becoming known to other nursing groups and disciplines through sharing ideas is crucial to the nurturing of excellence in research. We have presented some of our work at national and international nursing meetings (Collinge, Johnston) and have published two articles (Johnston, 1980; Collinge, 1981). We hope to increase this momentum

which has begun in a setting where that precedent has not been set for nursing.

Looking back, we feel that a great deal has been accomplished in just over two years. Although much effort is required to break new ground, we have demonstrated that it is possible in this setting. There are rewards: post-basic students are asking to come to our agency for fieldwork, and to our meetings; staff nurses have inquired about the results of some of the studies; others are suggesting areas where research might be productive.

We hope to continue to build on this foundation until nursing research in some form is undertaken at all levels of nursing in our hospital. We would encourage any nursing staff considering the possibility of a venture into research to step bravely into this rewarding aspect of nursing.

REFERENCES

- Collinge, J.M. Demand versus scheduled feedings for premature infants. *Journal of Obstetrical and Gynecological Nursing* (accepted for publication, November, 1981).
- Johnson, D.E. Development of a theory: a requisite for nursing as a primary health profession. *Nursing Research*, 23:5, 372-377, 1974.
- Johnston, C.C. An evaluation of A-V preparation for major genito-urinary surgery in children. In Mackay, R.C. and Zilm, G. *Research for Practice: Proceedings of the National Nursing Research Conference*. Halifax, Dalhousie University, 1980, pp 192-200.
- Schlotfeldt, R.M. Nursing research: reflection of values. *Nursing Research*, 26:4-8, 1977

RÉSUMÉ

Un comité de recherches en soins infirmiers dans un milieu pour soins des maladies aiguës: sa formation et son progrès

Voici un aperçu de la formation d'un comité de recherches en soins infirmiers dans un milieu pour soins des maladies aiguës. Ce comité fut mis sur pied au printemps 1979 pour: 1) répondre aux besoins des infirmières oeuvrant dans un tel milieu quant à la recherche qui pourrait avoir un lien direct avec l'exercice de leur profession dans ce même milieu, 2) rehausser le statut professionnel des soins infirmiers dans ce milieu, 3) répondre aux besoins faisant suite à l'accroissement du personnel infirmier détenant un diplôme universitaire, 4) coordonner le travail des chercheurs en soins infirmiers oeuvrant hors du milieu, et 5) promouvoir la pertinence de la recherche en soins infirmiers auprès du personnel infirmier.

On donne ensuite un compte rendu des progrès du comité au cours des deux dernières années. On y décrit en détail un projet découlant des préoccupations des infirmières cliniques quant à la durée des procédés par voie intraveineuse. Tout le personnel infirmier a participé à ce projet et les résultats serviront probablement de base à des modifications dans les traitements par voie intraveineuse.

RESPONSES

JUDITH A. RITCHIE

Associate Professor

School of Nursing, Dalhousie University

Johnston and Collinge have described graphically their "success story" of the establishment of a nursing research committee in an acute care setting. The nursing research activities they describe are burgeoning and gaining momentum in nursing settings all across this nation. It is my belief that such activities are essential to the development of a firm research base in nursing. The article reinforces my view that nurses are ready for involvement in research and that those with research preparation have a responsibility to collaborate with staff nurses in developing projects that seek to answer problems faced in the everyday world of practice.

The ability to accomplish the goals described within a short time frame is a clear indicator that the nursing administrators of the Montreal Children's Hospital contributed far more than "lip-service" to the development of these research activities. Research, in that institution, must be regarded as having high priority and as being worthy of reward. The success of the committee, while dependent on the skills of the two researchers, also demonstrates the enthusiasm of other members of the nursing staff for research involvement. Such enthusiasm has been experienced by several of my colleagues in their involvement with research committees or departments in acute care settings.

My own involvement with an institutional research committee has been within the School of Nursing. The contrast between the degree of enthusiasm and the productivity displayed by the members of our committee and that described by Johnston and Collinge is marked. It may be that the Terms of Reference for the School of Nursing Committee and the fact that there is already considerable ongoing research in the school contribute to the very different dynamics of the committee.

It is my experience that staff nurses are intensely interested in the research process even in institutions where there is no formal responsibility for nursing research. As my colleagues and I conducted an observational study of young hospitalized children over a 14 month period, we encountered, for the most part, tremendous cooperation from nursing staff in selecting patients and times for play interviews.

The nurses frequently asked for progress reports and repeatedly expressed interest in having the results of the study presented to them. As a result of observing the children's responses to the play interviews, the staff on one unit have asked for an orientation on using such a technique with their own patients.

The advantages of having a formalized structure for nursing research seem multiple. In the situation with which I am most familiar, nursing proposals have been reviewed by a research committee composed of medical staff. Such proposals have low priority and the time for review can be very long. Further, I believe the lack of a nursing research committee or department within a service institution, communicates that research is not a viable legitimate nursing activity. It is viewed as the territory of university nursing faculty. Although frequently expressing interest in findings of individual projects and grumbling about finding better ways to do things, the staff have no in-house forum for debate of research questions and issues.

I have some questions as to whether our aim should be to have nursing research committees in acute care settings. The danger of the committee structure is that all nursing proposals will be reviewed by that committee. It might be preferable to have a multi-disciplinary research committee which reviews all research to be conducted in the setting. A nursing research department, on the other hand, could be relieved of the review process and devote itself to the development of forums, inter-agency research interest groups, educational activities, and clinical projects.

JEANNETTE PICK

Director of Nursing

NORMA THURSTON

Research Coordinator

Foothills Hospital

There are few nurses employed in practice settings primarily for research purposes. Collaboration and the exchange of ideas among them has been limited. It is therefore reassuring to discover that the observations and experiences of others are similar to one's own. Presently in Western Canada many departments of nursing in acute care settings have expanded their interests in research. Concomitantly

they are asking questions about the appropriate mechanisms to accommodate their interests. Our hospital's research concerns and the development of a Nursing Research Committee parallel those outlined by Johnston and Collinge: our nursing practice has become more research based, the number of requests to use our facilities for research has increased. As well, in light of ever increasing costs, we are investigating alternative ways of delivering health care in cooperation with other agencies. But perhaps most importantly, our research focus is growing because of questions originating with staff nurses and relating to their delivery of patient care. This questioning has been encouraged at the level of nursing administration and support for research has been demonstrated by the recent appointment of a nursing research coordinator.

Initially it has been necessary to formalize the unwritten protocol for submission of research projects affecting nursing, as well as to determine the research scope and role of nursing in cooperation with other departments. With the acceptance of one nursing proposal and initial discussions underway concerning three others related to clinical practice, nursing research has become more visible within the hospital. It is anticipated that the formation of a Nursing Research Committee will provide the formal structure for participation in and expression and development of research interests for nurses at all levels.

Terms of reference for the Committee will encompass three components: a research focus for scientific review, formulation and participation in research projects; an educational focus to promote understanding, communication and application of research findings; and an advisory/liaison component for recommendations, coordination and facilitation of projects. A main objective for the committee will be the continued stimulation and development of proposals within the nursing department.

Nursing research committees in practice settings are new and have arisen because of a need. As other similar committees come into existence their members will have a responsibility and a mandate to communicate findings and share experiences so that the practice of the nursing profession is grounded in scholarly inquiry.