

## Pecha Kucha Abstracts – Winter Summit 2019, Birmingham, UK

<b>Title</b>	<b>Developing clinical academic research careers for nurses, midwives and allied health professionals: the UK experience</b>
<b>Authors &amp; Affiliation</b>	R Kane, School of Health and Social Care, University of Lincoln, Lincoln, UK
	I McGonagle, School of Health and Social Care, University of Lincoln, Lincoln, UK
	C Jackson, School of Health and Social Care, University of Lincoln, Lincoln, UK
<b>Contact</b>	<a href="mailto:rkane@lincoln.ac.uk">rkane@lincoln.ac.uk</a>
<b>Abstract</b>	<p>Background: Internationally the need for clinical academic careers for nurses, midwives and allied health professionals is becoming ever more apparent. Clinical academics maintain their clinical practice whilst also conducting research, placing them in a unique position to make connections between the two fields. Integrated academic training pathways have been active in UK since 2006; however, aspiring clinical academics still face a range of challenges in balancing the clinical and research aspects of their roles and there is a lack of evidence to demonstrate impact of training pathways.</p> <p>Methods: This research followed up 18 clinicians from Clinical Academic Training Programmes in the East Midlands, to investigate (via in-depth interview) the extent to which training has enabled the development of subsequent research activity in the clinical setting.</p> <p>Results: Key barriers and facilitators to sustaining implementation of research activity were identified and will be presented in detail.</p> <p>Conclusion: This research highlights the importance of clinical academic training programmes in developing an environment conducive to research in the clinical setting and the need for on-going work to support scholars their managers, to overcome practical and financial barriers to the development of clinical academics.</p>
<b>Acknowledgements</b>	Health Education England for funding the study. All those who gave their time to participate and gave consent for publication of findings.

<b>Title</b>	<b>Building bridges: a partnership model to support investment in building a clinical academic workforce</b>
<b>Authors &amp; Affiliation</b>	S Latter, School of Health Sciences, University of Southampton, Southampton, UK
	A Richardson, School of Health Sciences, University of Southampton, Southampton, UK
	M Fader, School of Health Sciences, University of Southampton, Southampton, UK
	S Williams, Solent NHS Trust, Southampton, UK
	L Roberts, School of Health Sciences, University of Southampton, Southampton, UK
<b>Contact</b>	<a href="mailto:sml@soton.ac.uk">sml@soton.ac.uk</a>
<b>Abstract</b>	<p>Despite the focus on developing clinical academic careers in the UK in recent years, there is very little literature on how healthcare providers and Higher Education Institutions build local collaborative partnerships to invest in, develop and sustain this workforce. We will describe a clinical academic partnership model, formed through a strategic relationship between the University of Southampton and partner NHS organisations. Our infrastructure includes a Clinical Academic Coordinator post to: spearhead discussion with service leads to influence funding commitment and to link research supervisors to practice-relevant research projects; and a Clinical Academic Strategy Group with NHS, HEI and clinical academic membership. Our partnership was developed with reference to key features: practice-relevant research aligned to NHS priorities; sustainable NHS-HEI collaborations; investment commitment; incremental approach to developing academic and clinical leadership; building critical mass (Westwood et al 2018). Key to success has been high level commitment and senior champions in NHS and HEI partner organisations; leadership by those able to appreciate partners' different perspectives, bridge diverse organisational cultures, share power and perform boundary-spanning functions (Latter et al 2009). Continuing challenges include aligning the differential drivers for NHS and HEIs, and ensuring sustainability of clinical academic posts in practice.</p>

<b>Title</b>	<b>Clinical Academic Careers in Nursing: The Best of Both Worlds?</b>
<b>Authors &amp; Affiliation</b>	E van Belle, Radboud university medical center, Radboud Institute for Health Sciences, IQ healthcare, Nijmegen, The Netherlands
	M van den Boogaard, Radboud university medical center, Department of Intensive Care Medicine, Nijmegen, The Netherlands
	J ter Sluysen, MBA, Radboud university medical center, Nijmegen, The Netherlands
	M Heinen, Radboud university medical center, Radboud Institute for Health Sciences, IQ healthcare, Nijmegen, The Netherlands
	H Vermeulen, Radboud university medical center, Radboud Institute for Health Sciences, IQ healthcare, Nijmegen, The Netherlands
<b>Contact</b>	<a href="mailto:elise.vanbelle@radboudumc.nl">elise.vanbelle@radboudumc.nl</a>
<b>Abstract</b>	<p>Healthcare is constantly changing, requiring nurses to be professional, innovative, and keen to integrate the newest evidence based knowledge in care. Scientifically educated nurses working in daily practice can play a unique and stimulating role in realizing this, but it is crucial that they have a formal position to do so. The Radboudumc has over 30 nurses who have a scientific education. However, they all have very different roles, are managed differently and a uniform job description is lacking. This is not only in our hospital the case, but a national problem. Changes in the hospitals' vision on nursing care and the governmental requirements for nursing staff skill-mix gave room for designing the position of the clinical scientific nurse, which will be implemented in 2019. This clinical scientific nurse will combine bedside nursing with developing and implementing innovations and scientific insights, to ultimately implement evidence based quality improvement. The position consists of five connected roles: academic nurse, nurse leader, innovator, researcher, and teacher. It creates a challenging job for ambitious nurses who do not fully want to leave the bedside, and creates a nursing workforce able to embrace the newest scientifically developed insights to improve essential care.</p>

<b>Title</b>	<b>Advanced Nurse Practitioners (ANP) in dementia: Outcomes of combining clinical practice and scientific results</b>
<b>Author &amp; Affiliation</b>	M Glarcher, Institute of Nursing Science and Practice, Paracelsus Medical University, Salzburg, Austria
<b>Contact</b>	<a href="mailto:manela.glarcher@pmu.ac.at">manela.glarcher@pmu.ac.at</a>
<b>Abstract</b>	<p>Background: Although evidence-based practice is becoming increasingly important, there is a need to optimize the use of scientific results in nursing practice to improve patient outcomes. In this context outcomes are a result of interventions based on clinical judgement, scientific knowledge, skills, and experience. ANP are professionals, who combine clinical practice and scientific results to facilitate the use of research findings for high-quality care. To evaluate the outcome of ANP in dementia care on both, nursing staff and hospital organization, we conducted a clinical study in eight Austrian hospitals.</p> <p>Methods: ANP interventions in the pilot wards included multi-professional training as well as the implementation of a nursing concept based on the IOWA model. In order to evaluate organizational outcomes semi-structured interviews with nurses (n=15) were conducted. The perceived competencies of ANP were assessed by a standardized survey (n=8).</p> <p>Results: Qualitative content analysis revealed eight subjects for both, professional staff and organizational outcomes. Perceived professional competencies of ANP included Guidance and Coaching, Counselling, Cooperation, Clinical and Professional Leadership, Evidence-Based Practice, and Ethical Decision-Making.</p> <p>Conclusions: These first results indicate that interventions which focus on the needs of health professionals, patients, and relatives improve the awareness of nursing professionals as well as organizational outcomes.</p>

<b>Title</b>	<b>Community health and public health nurses in health promotion</b>
<b>Authors &amp; Affiliation</b>	A Silva da Costa, Escola Superior de Enfermagem de Lisboa, ESEL, Lisboa, Portugal & Instituto de Saúde Ambiental, ISAMB, Faculdade de Medicina da Universidade de Lisboa
	A Henriques, Unidade de Investigação e Desenvolvimento em Enfermagem, Escola Superior de Enfermagem de Lisboa, ESEL, Lisboa, Portugal & Instituto de Saúde Ambiental, ISAMB, Faculdade de Medicina da Universidade de Lisboa
<b>Contact</b>	<a href="mailto:andreia.costa@esel.pt">andreia.costa@esel.pt</a>
<b>Abstract</b>	<p>Background: Portugal registers one of the most ambitious victories, the average life expectancy is one of the highest of Europe (81.3). However, healthy life years at age 65 are 7.7 years. When analysing the burden of disease, we identified that 88% are due to the main non-communicable diseases and share three risk factors: inadequate feeding, physical inactivity and smoking.</p> <p>The epidemiological profile described along with the pattern of healthcare use poses a challenge to health promotion and the sustainability of the health system. Community health and public health nurses can have a clinical and research role.</p> <p>Methods: Literature Review</p> <p>Results: There is a need to recognize nurses, especially community health and public health nurses, in their interventions focused on health promotion through their proximity to people, groups and communities, and the settings in which they live.</p> <p>Conclusions: It is important to highlight the importance of recognising the role of specialist nurses in community health and public health in coordinating programmes and projects, as well as analysing the role of the teacher and researcher guiding community intervention projects for the acquisition of specialised skills and of the proximity to the community that these projects provide over two semesters in clinical context.</p>

<b>Title</b>	<b>Trends in European Academy of Nursing Science (EANS) doctoral research projects 2018: taking up the challenge of intervention research?</b>
<b>Authors &amp; Affiliation</b>	CM Dupin, Geneva School of Health Sciences, HES-SO University of Applied Sciences and Arts Western Switzerland, Geneva, Switzerland
	G Borglin, Faculty of Health and Society, Department of Care Science, Malmö University, Malmö, Sweden
	R Möhler, Department of Health Services Research and Nursing Science, School of Public Health, Bielefeld University, Bielefeld, Germany
	M. Horne, School of Healthcare, Faculty of Medicine and Health, University of Leeds, Baines Wing, Leeds, United Kingdom
	DA Richards, University of Exeter, St Luke's Campus, Heavitree Road, Exeter, United Kingdom
<b>Contact</b>	<a href="mailto:cecile.dupin@hesge.ch">cecile.dupin@hesge.ch</a>
<b>Abstract</b>	<p>Background: Caring in complex health care contexts requires research education (1) to develop evidence for positive impact on patients' outcomes. Reviews of nursing research highlight an improvement in intervention research (2). European nursing doctoral trends might prefigure the next generation of European research.</p> <p>Methods: A descriptive analysis of 35 nursing doctoral research projects from the EANS summer school in 2018.</p> <p>Results: Nineteen of the 35 student projects were primary research and 16 mixed primary and secondary. Fourteen studies were experimental: 4 RCTs, 1 experiment without randomization, 9 experiments without control. Twenty-one projects were observational: 5 qualitative, 14 mixed/multi-methods, 2 quantitative. Twenty-seven projects were from outpatient and secondary care hospital settings.</p> <p>Conclusions: Just one third of projects were experimental, and two thirds observational. The number of RCTs is negligible, with 25% uncontrolled experimental studies. Further development of intervention methods at PhD level in nursing is required.</p> <p>1. Norman I. Nursing must be a graduate profession (Well, he would say that, wouldn't he!). <i>Int J Nurs Stud</i> 2014;51(4):523-5.</p> <p>2. Richards DA, Hanssen TA, Borglin G. The Second Triennial Systematic Literature Review of European Nursing Research: Impact on Patient Outcomes and Implications for Evidence-Based Practice. <i>Worldviews Evid Based Nurs</i> 2018;15(5):333-43</p>

<b>Title</b>	<b>Resilience and Determination: Nursing insights into clinical academic careers and roles in the East Midlands.</b>
<b>Authors &amp; Affiliation</b>	L Bramley, East Midlands Clinical Academic Practitioner Network, UK
	D Trusson, East Midlands Clinical Academic Practitioner Network, UK
	E Rowley, East Midlands Clinical Academic Practitioner Network, UK
<b>Contact</b>	<a href="mailto:Louise.Bramley@nuh.nhs.uk">Louise.Bramley@nuh.nhs.uk</a>
<b>Abstract</b>	<p>Background: Nurses who are engaged in research have the capacity to deliver high-quality care and improve patient’s outcomes. However, despite recent investment in clinical academic training for nurses, challenges exist at local level for role implementation and substantive contracts that combine front-line nursing practice and research.</p> <p>Methods: A multi-professional survey and qualitative interviews were conducted with those aspiring to, or working in clinical academic roles across the East Midlands in 2017/18. Data were analysed using descriptive statistics and thematic analysis.</p> <p>Results: Nineteen nurses completed the survey and five nurses were interviewed. Resilience and determination are employed to secure funding and overcome barriers when combining academic study with clinical roles. Even though financial sacrifices were sometimes necessary, nurses were driven to explore interventions that will ultimately benefit patients, carers, colleagues and the NHS more widely. Convincing managers and colleagues of the value of research by sharing research findings was seen as essential, alongside encouraging and supporting other nurses to pursue clinical academic careers.</p> <p>Conclusion: Despite the challenges, nurses across the East Midlands are working in clinical academic roles and undertaking research whilst working on the frontline. Maintaining a clinical presence is essential to negotiating contracts and encouraging future clinical academics.</p>

<b>Title</b>	<b>How do cultural values and beliefs influence the understanding and adherence to HF self-care?</b>
<b>Authors &amp; Affiliation</b>	B Alassoud, University of Glasgow, Glasgow, UK
	K Hogg, Glasgow Royal Infirmary, Glasgow, UK
	B Johnston, University of Glasgow, Glasgow, UK
<b>Contact</b>	<a href="mailto:B.alassoud.1@research.gla.ac.uk">B.alassoud.1@research.gla.ac.uk</a>
<b>Abstract</b>	<p>Background: Although the evidence-based deep-rooted impact of cultural values and beliefs on individual health and illnesses, there is a dearth of evidence, highlighting the impact of these values on heart failure self-care. This review is synthesising evidence on the relationship between culture and HF self-care understanding through mapping out HF self-care to Riegel et al in 2016.</p> <p>Method: Seven electronic databases were searched for English articles published from inception until February 2018 using abroad MESH terms and keywords.</p> <p>Results: Thirteen articles met our eligibility criteria. None of which has addressed the impact of culture on HF self-care but collectively constitute the concept of understanding, performance and adherence. Our self-care findings offer a unique insight into how culture, particularly eastern shapes patients' understanding of HF and how central it is to HF management.</p> <p>Conclusion: Culturally influenced beliefs should not be underestimated particularly among those living in low socioeconomic levels. Our review implies that the cultural impact deserves more attention in nursing education and practice. Acquiring such cultural insights could be critical for nurses to understand some of the core cultural differences, which would help in providing culturally competent and to develop complex interventions to overcome any roadblocks triggered by cultural misconceptions.</p>

<b>Title</b>	<b>Nursing Development Unit - a concept from an academic world view point</b>
<b>Authors &amp; Affiliation</b>	I Gnass, Paracelsus Medical University, Institute of Nursing Science and Practice, Salzburg, Austria
	M Glarcher, Paracelsus Medical University, Institute of Nursing Science and Practice, Salzburg, Austria
	N Nestler, Paracelsus Medical University, Institute of Nursing Science and Practice, Salzburg, Austria
<b>Contact</b>	<a href="mailto:i.gnass@online.de">i.gnass@online.de</a>
<b>Abstract</b>	<p>The implementation of evidence-based nursing (EBN) by means of knowledge, skill and attitudes is a slow process at best. Health care organisations use different approaches, usually single intervention achievements, and rarely consider its impact on the entire organisation.</p> <p>The academic concept Nursing Development Unit at the Paracelsus Medical University (PMU-NDU) started to successfully assess the impact of EBN strategies on the entire organisation. The concept is focussing on four main components: nursing definitions, person-centred care, implementation science and nursing science.</p> <p>The PMU-NDU is currently accompanying the implementation of Advanced Practice Nurses specialised in caring for people with dementia and their relatives. With regards to the scientific achievement on nursing development in health care organisations, a cooperative approach would facilitate the discussion on fundamental insights in change management and implementation of innovation.</p> <p>The new and emerging academic concept PMU-NDU needs different transfer opportunities to meet the unique expectations of the health care organisation to ultimately initiate maximum improvement.</p> <p>Looking to combine academic and applied nursing, the presentation will encourage a discussion about the PMU-NDU concept.</p>