



UHL Research & Innovation: Education and Training Strategy for Nurses and Midwives











# UHL Research & Innovation: Education and Training Strategy for Nurses and Midwives

This strategy applies to all N&M staff working across UHL research infrastructure, including the NIHR Biomedical Research Centre, the NIHR Clinical Research Facility, and the NIHR Patient Recruitment Centre. This document is released in combination with the Therapy Research Strategy. The two strategies complement each other and are implemented as part of a joint multi-disciplinary education and training programme.

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## Thank you

This strategy is based on feedback received by the UHL research workforce during R&I wider consultations. A huge thank you goes to the R&I team for all contributions.

### **Abbreviations**

UHL: University Hospitals of Leicester CRN: Clinical Research Network

R&I: Research and Innovation

LBR: Learning Beyond Registration

N&M: Nurses and Midwives

EOI: Expression of Interest

HEI: Higher Education Institutions ICH: International Conference of Harmonization

LPT: Leicester Partnership Trust GCP: Good Clinical Practice

NIHR: National Institute of Health Research AfC: Agenda for Change

CPD: Continuous Professional Development

### Introduction

This document presents the UHL Research & Innovation: Education and Training Strategy for Nurses and Midwives. The document is live and will be periodically reviewed by R&I UHL Team.

The strategy emerged from a review of findings collected during R&I workforce consultations in April and July 2019. During the consultations, various themes were highlighted, including the need for a structured research strategy which will enhance the further development of research at UHL.

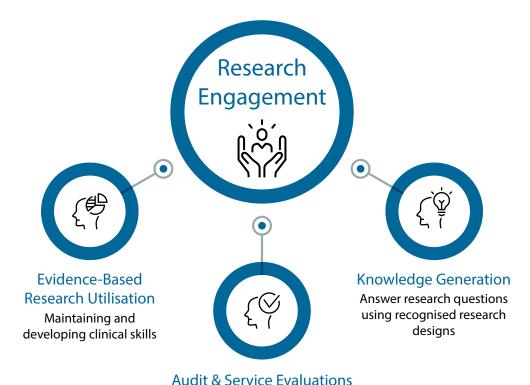
#### Aim

#### To do research

The main aim is based on the belief that in order to improve and maintain clinical excellence, N&M need to have the capacity and capability to lead, promote and undertake research.

Three types of research engagements exist:

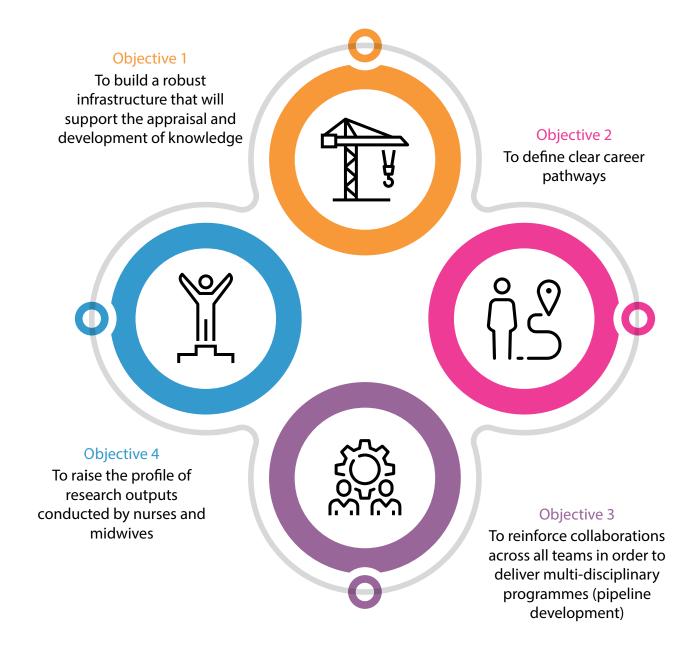




Becoming involved in assessment, review and practice change

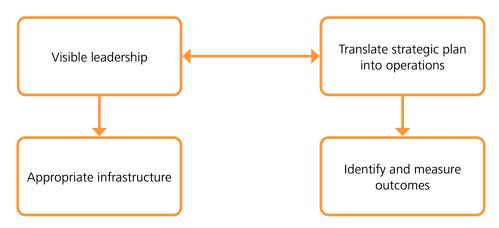
To comply with the aim of this strategy, clear objectives must be identified.

# Objectives



# Objective 1: To build a robust infrastructure that will support the appraisal and development of knowledge

Visible leadership and appropriate infrastructure are needed. Lack of time and resources are often barriers to conducting research. Coming up with creative ways of obtaining time and resources that support staff "to perform research" is a priority.



#### How to achieve objective 1

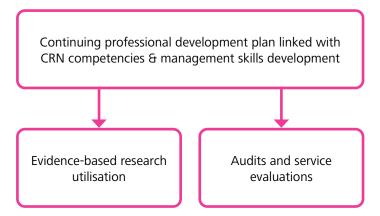


## Objective 2: To define clear career pathways

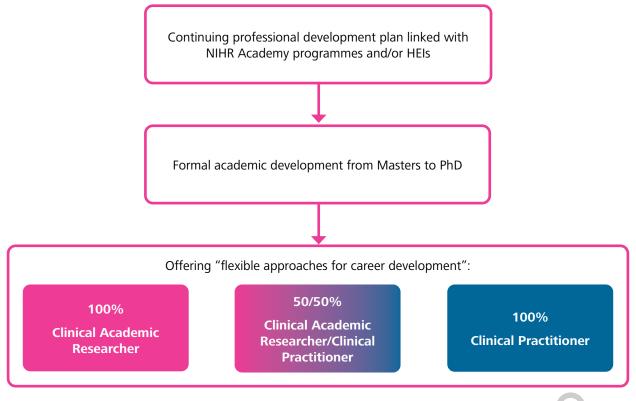
To identify, appraise and use evidence-based research as well as understanding research methods and methodologies, N&M need to have access to a clear educational structure that is tailored to the role.

Based on the 3 types of research engagement (evidence-based research utilisation, audit and service evaluations, and knowledge generation), bespoke career development plans can be identified and developed around 2 main pathways:

1. Clinical research N&M, who currently build knowledge and expertise in clinical practice roles and engage with practice development opportunities on a daily basis



2. Clinical research academics N&M, who are engaged with formal knowledge generation and answer research questions using recognised research designs



### How to achieve Objective 2:

Identify links between
CPD requirements and
Clinical Research Network
(CRN) competencies
and formalise career
development and
progression

Identify "research experts", mentors and "buddies", who will support the research educational team with the delivery of tailored research training

Identify Learning Beyond Registration (LBR) courses which will benefit the development of clinical and management skills



Access selected research modules offered by partnered HEIs



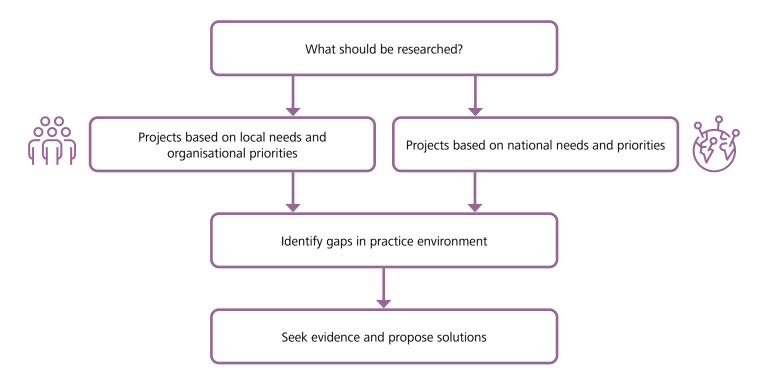






# Objective 3: To reinforce collaborations across all teams in order to deliver multi-disciplinary programmes (pipeline development)

Collaborations between health care groups can lead to multi-disciplinary programmes of research which will more likely attract interest and funding. In order to identify programmes of research which will be of common interest to N&M, the introduction of a "research questions hub" structure will identify local priorities.



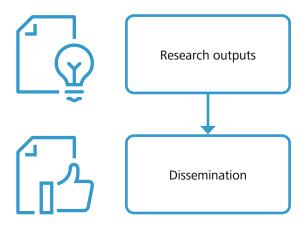
#### How to achieve Objective 3:



# Objective 4: To raise the profile of research conducted by nurses and midwives

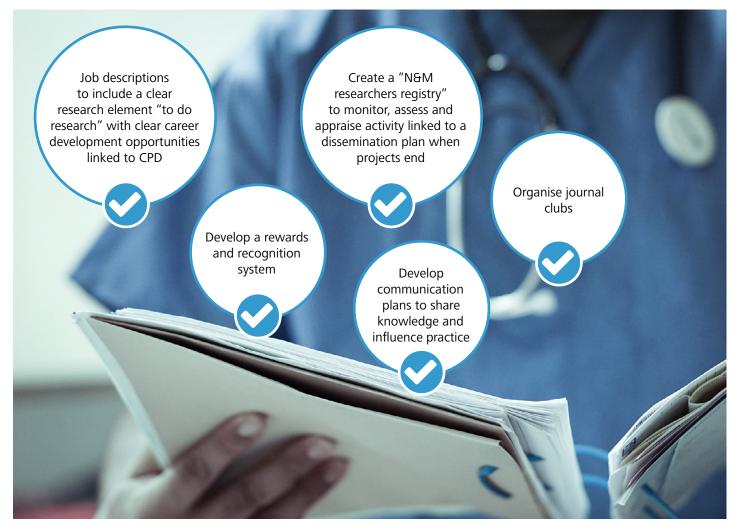
In order to raise the profile of research outputs conducted by N&M, a clear and structured career pathway for development is of paramount importance, as well as clarity on expected research activities to be undertaken by clinical nurses and midwives.

"A culture change is needed in which 'research', at whatever level it is practised, is recognised, valued and seen as an activity which gains rewards and sustains personal and professional development".





### How to achieve Objective 4:



## Performance Indicators

Performance against key performance Indicators (KPIs) will be reported to N&M Trust Board on a monthly basis.

The KPIs will be supported by a more detailed working plan that reflects the strategic goals.

KPIs 2021/22	Target
Number of partnerships formed (internal & external)	
£ per year re-aligned to educational support	
Number of projects initiated audit/service evaluation/formal research	
Number of research engagement activities, events, conferences	
% of study time secured for research development	
Number of staff registered on LBR research programmes	
Number of staff registered on Masters/PhD programmes	
Number of staff who have submitted EOI for academic/practice development	
Number of mentors/buddies and location breakdown	
Research Hub "research questions received"	
% of job descriptions including a clear "to do research" element	
Number of rewards given out	

## Action Plan 2021-2022

Theme	Objective	Actions	Target Date	Deliverable Outcomes	Responsibility for action – lead/ other key stakeholders
Research active & visible leaders (R&I and CMGs)	To build an infrastructure with research leadership that will support a research active environment within UHL	Identifying a clear research leadership organogram (R&I) to include UHL CMGs Heads of Nursing & Midwifery and UoL and DMU partners	By December 2022	<ul> <li>Include clear objectives related to R&amp;I in Head of Nursing JDs and PSs (CMGs)</li> <li>Evidence of regular and structured communications and links between Head of Nursing, Matrons, Head of Research and R&amp;I Management Team</li> <li>Appoint one/two Research Champions for each clinical area</li> </ul>	Head of Research (N&M)/Chief Nurse/Assistant Chief Nurses and Heads of Nursing (CMGs)
		<ul> <li>Identifying senior roles and responsibilities (identify R&amp;I element within the role)</li> </ul>	By December 2022		
		Establishing clear communication links between CMGs and R&I	By December 2022		
		Capturing data from all research active departments	0ngoing		
A confident and capable workforce	To define clinical and academic development pathways	Identify current training for clinical research nurses and midwives	By December 2021	<ul> <li>Create accessible and clear resources</li> <li>Create a visual (schema)</li> <li>UHL/DMU/UoL clear development opportunities</li> <li>Create a register of potential candidates and a register of UHL members who have completed an award</li> <li>Create clear links to successful stories and local achievements</li> </ul>	
		Identify current academic development opportunities	By December 2021		
		Develop additional clinical training for research nurses	By December 2022		
		Develop additional/alternative academic pathways	By December 2022		
		Increase the number of Master/Doctoral/ PhD applicants	By March 2022		
		Develop research-based training for clinical nurses (ward-based)	By December 2022		
		Job descriptions to include a clear "research element"	By March 2022		

Theme	Objective	Actions	Target Date	Deliverable Outcomes	Responsibility for action – lead/ other key stakeholders
Strong partnerships	<ul> <li>To define the clear relationship between clinical care and research</li> <li>To support inter-disciplinary research work</li> <li>To support multi-disciplinary research work</li> <li>To support multi-agency research work</li> </ul>	Identify clinical care leaders/service managers and work on current priorities	By December 2022	<ul> <li>Collect data on collaborations between teams</li> <li>Showcase collaborations at regular events</li> <li>Showcase successful outcomes</li> <li>Gap analysis</li> <li>PREP outcome</li> </ul>	Head of Research (N&M), COO, CMGs Head of Nursing + External Collaborators
		Identify research-led teams and work on successful models	By December 2021		
		Develop a research workforce UHL tree and link partners	By December 2021		
		Identify, develop and share best practices in PPI/E/P	By December 2022		
Raise the profile of research output	<ul> <li>To promote the work undertaken by clinical academics and clinical researchers at local, national and international level</li> <li>To support dissemination strategies in partnership with stakeholders and internal/external collaborators</li> <li>To support multi-professional academic working practices</li> </ul>	Create a N&M researcher registry	By September 2021	<ul> <li>Pull together data on existing registers in collaboration with the wider Trust/R&amp;I/LPT and other partners</li> <li>Advertise research engagements on a monthly basis via comms/ward rounds/poster boards/handovers/team meetings/conferences</li> <li>Build on successful stories/partnerships and seek further funding via joint applications</li> </ul>	Head of Research (N&M), Head of Communications, COO, CMGs Head of Nursing + Internal/External Collaborators
		Develop strong links with Heads of Communication (Trust-wide, R&I and with regional partners)	By September 2021		
		Establish research journal clubs/coffee mornings	By March 2022		
		Liaise with regional/national/ international research forums	By December 2021		

## R&I Education and Training Strategy - Objectives:

- 1. R&I nurses & midwives understand R&I Education and Training Strategy objectives and apply these to their roles.
- 2. R&I nurses & midwives understand the overall aim and objectives of their individual research areas, and where relevant, apply this to their work.
- 3. R&I nurses and midwives are fully compliant with the mandatory training:
  - Corporate mandatory training
  - · R&I specific mandatory training
  - · R&I specialist research area training
  - · Study-specific training
- 4. R&I keep and maintain training and education information in a database (QPulse/individual area databases). A checklist of training is available on the Training Matrix (to be implemented). All nurses and midwives are expected to read the information and to complete the training as indicated on the Training Matrix for their particular research area. R&I nurses and midwives will keep an up-to-date record of their compliance with mandatory training on HELM (UHL) as well as in their electronic training folder via QPulse. If requested, the folder will be made available to MHRA inspectors.
- 5. R&I nurses and midwives are trained and competent in the clinical skills required to fulfil their roles, including using special equipment.
- 6. For key clinical research areas, there will be a nominated R&I nurse or midwife who will obtain additional knowledge and experience and will remain up-to-date with current practices by liaising with the wider UHL specialist teams. The nominated member of staff will act as a resource for the R&I clinical research team.
- 7. R&I nurses and midwives will fulfil the research skills as specified for their roles as per the Research Nurses Competency Framework (CRN)/UK CRF Competencies, and will have access to resources and mentor support to achieve this within 12 months from starting work in UHL R&I. UHL Development Frameworks will be used in combination with research specific competencies.
- 8. R&I nurses and midwives will develop skills to critically appraise research. (By March 2023, 50% or more of the workforce to have gained this skill.)
- 9. R&I is committed to support nurses and midwives at all stages of their career to become actively involved in all aspects of the research journey and participate in research training.
- 10. By March 2023, 25% or more of the workforce will have accredited undergraduate or postgraduate qualifications that include critical appraisal skills of research papers and knowledge of research design.
- 11. Research nurses and midwives in supervisory and line management roles will be provided with training opportunities to ensure the development of skills, knowledge and abilities to manage staff and to ensure a high-quality service for participants and researchers.

## Applicable to ALL R&I nurses and midwives

The UHL Education, Training and Study Leave Policy applies to all staff.

### Training & education relevant to R&I nurses and midwives

- 1. Mandatory Training
  - Each member of staff will take responsibility to attend and implement the training specified in the R&I Training Matrix/ local research area induction. Individual members of staff have the responsibility to book and attend the required training. A record of training will be maintained on HELM (UHL) as well as the individual research area database/QPulse.
- 2. Being prepared to deal with emergency scenarios:
  - all nurses and midwives are compliant with BSL.
  - all nurses and midwives B5, B6 and B7 working on Phase I/II to obtain and maintain annual ILS training.
- 3. Nurses and midwives new to working in clinical research (UKCRF Network) Induction Framework for Clinical Research Staff:
  - The responsibility lies with the mentor of the new member of staff. The mentor will have the responsibility to go through the document with the learner, determining the level the learner is required to work to, and identifying "themes" and "key components" which are relevant to the individual's job description. The learner should work through themes and key components within 6 months from appointment.

- 4. Research Nurses and Midwives Competencies Framework (CRN)
  - Staff will complete competencies according to their AfC Band and ideally within 6 months from appointment. Learning will be achieved through face-to-face or group mentoring, local inductions and teaching sessions, individual's proactive attitude to learning through everyday situations, documentation and literature.

#### Differentiation according to AfC nursing and midwifery banding

#### Band 5

Band 5 nurses and midwives working on R&I research areas WILL NOT be newly qualified or in a preceptorship period. Staff should have already achieved competency in single-handed drug administration and IV medication administration prior to working in R&I research areas.

R&I specific competencies:

- Translating ICH GCP requirements into everyday practice e.g. completing CRFs, data entry, sample processing
- Sample handling competencies
- Venepuncture and cannulation
- · Study-specific training
- Research area-specific training requirements e.g. equipment training
- QPulse training (relevant to role)
- Shift coordinating (6 months from appointment)
- · Aiming to become a mentor

#### Band 6

Band 6 nurses will achieve all listed under Band 5 plus the following:

- · Competent to set up and provide ongoing facilitation for specific and assigned studies
- · SOP writing skills
- Awareness of off duty responsibilities, including e-roster management
- Appraisal training (when assigned as a team leader)
- · Act as a mentor
- · Join the leadership development programme
- · Recruitment and selection training

#### Band 7

Band 7 nurses and midwives will achieve all listed under Band 5 and 6 plus the following:

• Will follow the Band 7 (12 months) development plan (in review and development)

#### **Monitoring Progress:**

The Head of Research (N&M) will oversee the implementation of this strategy, in collaboration with the individual research areas. Research managers will provide a quarterly report to the Head of Research (N&M) outlining staff training and development plans. Information will include:

- Inductions
- · Training attended
- Current training/development opportunity undertaken
- Future training/development plan

We will create an electronic database for all R&I clinical staff (in QPulse/or other database) where staff will be able to upload their own training as soon as this is undertaken.



