EXPLORING THE NEW SPECIALTY OF CLINICAL RESEARCH NURSING

This is a summary: the full paper can be accessed at nursingtimes.net

AUTHOR Charlotte Gordon, BSc, Adv Dip, RN, is senior research nurse, Clinical Research Facility, Royal Victoria Infirmary, Newcastle upon Tyne.

ABSTRACT Gordon, C. (2008) Exploring the new specialty of clinical research nursing. Nursing Times; 104: 29, 34–35. This article reviews clinical research nursing -- where it has developed from and its future direction. It outlines definitions of different research roles, the development of the clinical research nurse specialism and recommendations to take the research agenda forward.

THE CLINICAL RESEARCH NURSE
Clinical research nurses help to develop new drugs, treatment regimens or care pathways for patients, through academic or industry studies. The RNC has adopted the generic title of ‘the clinical research nurse’ (CRN) for nurses involved in clinical therapeutic trials.

The UK Clinical Research Collaboration has defined the role as: ‘a nurse employed principally to undertake research within the clinical environment’ (UKCRC, 2007).

The skills of the CRN ensure that day-to-day activity is varied and includes multiple tasks. Unpublished pilot data from the Newcastle Clinical Research Facility, which examined nursing activity during one week, found that nurses spent 31% of their time on clinical activities with patients (study visits, treatment administration, venepuncture and cannulation). They also spent 31% of their time processing study-related paperwork.

This emerging specialty has its own language, rules and working conditions. These nurses are bringing traditional nursing skills into a new and exciting environment, helping to bring cohesion between nursing, science and medicine. The skills and daily activities of the role demonstrate the development of the CRN career.

Stephens-Lloyd (2004) described the role as similar in several ways to that of a clinical nurse specialist. This view is reflected by Chester et al (2007), who argued that clinical research nursing has now developed into its own ‘nursing specialty’. Through their specialist knowledge of research methodologies, nurses are shifting the ‘knowledge balance’, often providing support and education to medical colleagues.

However, clinical nursing colleagues often do not understand the nature of the research role. The CRN is perceived by nursing peers as having a role defined by paperwork and protocols divorced from hands-on clinical care. These issues often lead to feelings of isolation, lack of motivation, role conflict and poor research line management.

Roberts et al (2006) supported this view in their qualitative study of the best and worst aspects of the ICU research coordinator role. A number of positive and negative themes were extrapolated from questionnaires from ICU research nurses, including:

- Autonomy versus isolation;
- Receiving respect versus lack of recognition;
- Multidisciplinary research team versus antagonism from nursing colleagues.

THE ROAD TO SPECIALISM
The Department of Health outlined a strategy for nursing research and development (DH, 2000). This document highlighted that current arrangements ‘failed to maximise the nursing contribution to research and development’. A number of strategies were outlined, relevant to the role of the CRN, which helped to set this career on the path towards specialism:

- There was no clear picture of the numbers of nurses with research skills and qualifications and no reliable estimates about what the level should be – understanding the current status of research nursing was a priority;
- Those with a research career in mind needed additional training;
- Better training and improved career paths to nurture future nurse researchers were found to be vital;
- New and innovative career paths were to be piloted to build research capacity.

In January 2006 the DH produced a strategy, Best Research for Best Health (DH, 2006), which set out goals for research and development over five years including:

- Establishing the NHS as an internationally recognised centre of research excellence;
- Attracting, developing and retaining the best research professionals to conduct people-based research.

The strategy proposed providing support to the academic training paths of all healthcare professionals involved.
in research, by developing researchers’ skills and implementing career pathways in partnership with other key stakeholders. The National Institute for Health Research (NIHR) was established in April 2006 to carry forward the vision, mission and goals outlined in the DH (2006) document. The recently published progress report (NIHR, 2008) outlines steps made over the last two years. CRNs are integral to the success of the research restructure in the NHS, highlighted in the recent report addressing the development of the best research professionals (UKCRC, 2007).

The UKCRC (2007) placed training and defined career pathways for CRNs high on the agenda. It identified barriers faced by nurses who want to pursue a research career. It made recommendations on three key areas: facilitating careers, such as developing mentoring systems; education and training, including funding for training posts; and better information, such as NHS career advisers to be made aware of the full range of career opportunities.

This report could affect all nurses working in the UK, whether newly qualified or experienced clinical nurses, researchers or educators. It demonstrates the importance the DH attaches to the nursing role within the research arena.

**EMERGING CRN SETTINGS**

It is clear that many CRNs practise within the realms of their previous specialist areas. Increasingly, dedicated research environments are being created, in line with government recommendations, with the capacity to allow CRNs exposure to a variety of studies and the opportunity to perfect research skills in a ‘research-pure’ environment, that is, no other clinical role is required but that of conducting research studies.

Clinical research facilities are a unique network of UK centres for experimental medicine. Their aim is to speed up the translation of scientific advances into benefits for patients. The network provides an opportunity for research nurses to work as part of a supportive team, on a variety of clinical trials. It is intended to provide training and education, as well as an acknowledged career pathway for nurses.

The demand for CRNs is likely to increase with the advent of the UK Clinical Research Network. The UKCRN is working to develop and strengthen NHS infrastructures to support clinical research. This is being achieved through clinical research networks, which coordinate and support research in a wide range of specific clinical areas. A comprehensive clinical research network supports research in all areas of disease and clinical need.

A critical role in a network is that of a research nurse. Increasing the capacity of nurses in networks will provide the ‘engine room’ for the new research infrastructure. Networks give CRNs an opportunity to work as part of a recognised research team, with support, education, training and job security, with a commitment of five years’ funding.

**DISCUSSION**

Local and national recommendations have served to highlight the key role that CRNs play in the NHS. However, as Stephens-Lloyd (2004) suggested, the CRN role requires further study. Unless we are able to identify and rectify the difficulties facing these nurses we are unlikely to be able to expand nursing clinical research activity in the way the profession needs.

More research is needed examining the specialist role and daily activities of the CRN, once all national and local recommendations are in place. Focus should be placed on those nurses whose specialist skill is not based in a specific disease or clinical area but whose abilities lie in conducting research in a general sense according to clinical trial protocols.

It is also necessary to highlight the importance and rewards of the CRN career pathway at grassroots, pre-registration level in order to develop a new generation of research-aware nurses. Despite the more academic nature of nurse training, nurses remain poorly versed in research techniques (Stephens-Lloyd, 2004). Nursing students can have differing educational experiences, with relatively little knowledge of research by the time they qualify (UKCRC, 2007). Integrating student placements into clinical research facilities and research networks, working with an experienced team, will increase research awareness and assist in building capacity and skills for the future.

**CONCLUSION**

Due to the broad range of specialist skills needed, CRNs may become the best-placed nurses to embrace nurse consultant posts in the future (Stephens-Lloyd, 2004). They could become key leaders in the profession, improving standards by emphasising the importance of working from a well-proven evidence base, for all nurses.

**REFERENCES**


