Clinical Inquiry: Creating our Future

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The Future of Nursing:
LEADING CHANGE, ADVANCING HEALTH
Florence Nightingale
Overview

• Clinical inquiry and the inquiring professional
• Practice knowledge
• Science competency
• Back to the future
LEADERS . . .

- Manage the present
- Create the future
- Selectively forget the past
What is clinical inquiry?

• Process
• Project
• Mindset
• Part of professional practice
“Excellence in nursing practice is a mindset of continually evaluating care improvements that result in enhanced outcomes for the patient, the family, and the organization.” (Pam Hinds)
We shape/create the future by asking questions and seeking answers
Why can’t we . . .
The Future of Nursing: Leading Change, Advancing Health

- Expand opportunities for nurses to lead and diffuse collaborative improvement efforts
- Research priorities for transforming nursing practice
  - Barriers to collaboration
  - New models of care teams
  - Care technologies to support nursing decision-making and care delivery
Examples of One Hospital’s Research Projects

- Reducing Catheter Associated Blood Stream Infections Initiative
- Evaluation of Neonatal Thermoregulation throughout the Perioperative Experience
- Measuring Parental Treatment Decision Making in Diverse Family Structures
- Nurses’ and Physicians’ Knowledge and Attitudes toward Pediatric Pain
- Evaluating Fasting Times of Patients Undergoing Surgery or Radiology Tests
Examples of DNP Clinical Inquiry Projects

- Program Evaluation: Pressure Ulcer Prevention in Oregon Providence Hospitals
- Clinical, Cost, and Quality of Life Outcomes in Patients Implanted with the HeartMate II LVAS
- Hospital Privileges for Rural Nurse Practitioners: Assessing Barriers
- Women’s Perceptions of Weight and Weight Gain During Pregnancy
- Domains of Life Function Scale for Patients with Pituitary Adenomas
- Understanding why women choose unmedicated labor
What type of knowledge is needed to direct our practice?
Processes for developing knowledge
Chinn & Kramer (2004)
What type of knowledge is needed to direct our practice?

*Formally expressed* nursing knowledge is developed using practice-grounded methods of inquiry as well as formal scholarly methods designed for each pattern of knowing (Chinn & Kramer, 2008).
What type of knowledge is needed to direct our practice?

- The full spectrum of nursing knowledge is needed to develop solutions for the complex health issues nurses encounter (Banks-Wallace et al., 2008)
- Evidence from differing paradigms of inquiry and a broad range of inquiry methods are needed to support clinical practice (Kirkham et al., 2007)
Nursing as a discipline

“a branch of learning represented by a community of scholars from the field of nursing who have a shared valuative (stance) perspective and use this perspective to identify phenomena specific to the discipline and to guide inquiry into such phenomena” (Bancroft in Kulbok et al., 1999)
Contrasting views... Or not?

“All avenues of inquiry lead to knowledge development for the discipline.” (Parse, 2009)

“the advancement of nursing knowledge only occurs when discipline-specific research is conducted.” (Marrs & Lowry, 2006)
What is research?

The R word

- Research is a role of all practitioners of nursing
- Level-appropriate research
- Curricula that use a progressive, competency-based approach to developing research skills across all levels of preparation
What is research?
The R word.

• Rolfe’s (2006) concept of praxis: the coming together of practice and research as part of the same act
  – Rolfe defines praxis as doing action or mindful action

• Research should be integrated with and is a natural component of practice
Doctoral preparation in nursing

- The DNP specialties
  - Advanced practice nursing
  - Aggregate/Systems/Organizational
- The PhD specialty
  - Research
Which term should we use?

- Clinical Inquiry
- Research
- Can we come to a common ground?
- Nursing science?
WE’VE ENDED THE TORTURE POLICY.

Blink Blink

YOU’LL FIND LOTS MORE BOXES.
Science

Bollen et al., 2009
What is science?

• “we are doing science whenever we seek to describe, predict, or influence the world around us” (Cook, 2010)
Scientific Competence

- Def: “competent action grounded in scientific knowledge, including theory” (Chinn & Kramer, 2008)
- Rolfe (2006): nursing as practice science
- Reed (2006): both researchers and practitioners practice science, but in different contexts
“Although the methods of science and those of quality improvement are different, a continual dynamic interaction between them facilitates the growth of knowledge, its timely adoption and the generation of new questions to be studied.” (Stevens, 2004)
Although the *methods* of the PhD and those of the DNP are different, a continual dynamic interaction between them facilitates the growth of knowledge, its timely adoption and the generation of new questions to be studied. (paraphrased from Stevens, 2004)
Application to EBP/EBN

• Evidence-based practice (EBP) is sacrosanct
• Evidence-based practice is necessary in today’s clinical arena
Application to EBP/EBN

• Criticisms of EBP
  – RCT is highest level of evidence
    • Other sources of knowing and paradigms of inquiry are devalued
  – Assumes one way of information flow: research \(\rightarrow\) practice
Evidence-based nursing (Reed, 2006): EBN would consider the practice of nursing and the practice of science as essential and synergistic in building nursing knowledge.
Application to Translational Science

- Critiques similar to EBP: one way
  - Science → Practice
  - Bench → Bedside (community)
## Application to Translational Science

### Table 4. From Research into Practice
*From Knowledge to System Change*

<table>
<thead>
<tr>
<th>Publishing Research</th>
<th>Spreading Innovation</th>
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</thead>
<tbody>
<tr>
<td>Aim: Truth</td>
<td>Aim: Change &amp; improvement practice</td>
</tr>
<tr>
<td>Methods:</td>
<td>Methods:</td>
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<tr>
<td>• Explanatory/predictive models</td>
<td>• Transformational methods</td>
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<tr>
<td>• Blinded tests</td>
<td>• Tests Observable</td>
</tr>
<tr>
<td>• No bias</td>
<td>• Stable bias</td>
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<tr>
<td>• All possible data</td>
<td>• Just enough data</td>
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<tr>
<td>• Fixed hypothesis</td>
<td>• Changing hypotheses</td>
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<tr>
<td>• One large test</td>
<td>• Sequential tests</td>
</tr>
<tr>
<td>• Stable cohort(s)</td>
<td>• Changing Populations</td>
</tr>
</tbody>
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Source: adapted from T. Nolan Associates in Process Improvement
Basic science includes behavioral and social science. Efficacy research addresses whether or not the intervention or innovation works – generally in a highly selected group or controlled environment. Effectiveness research examines the outcomes in a more realistic context – where real world issues, population variation, etc. are likely. Adoption research examines barriers to and facilitators of use and includes research on strategies to enhance uptake by clinicians, the public, communities, and policymakers.
**Dynamic Interaction**

- **Co-creating** nursing knowledge by giving voice to practice knowledge (Dluhy et al., 2007)
  - Consortium of nurse researchers and clinicians
• Nursing knowledge development is the responsibility of all professional nurses
• Clinical inquiry is the responsibility of all professional nurses
• Are we asking the right questions in order to advance nursing knowledge?
Predictions and Musings: This conference and beyond

- Scientific competence
- Co-create nursing knowledge
- Continual dynamic interaction
Back to the future: What will the future look like?
The Road Not Taken
Thank you!