

EDITORIAL: NURSING AND MIDWIFERY RESEARCH AND SCHOLARSHIP IN THE HUNTER NEW ENGLAND LOCAL HEALTH DISTRICT

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It is a great privilege to contribute some brief thoughts about emerging research opportunities for nursing and midwifery in the Hunter New England Local Health District (HNELHD) in this 5th Edition of HNEHandover. This editorial speaks to the notion of building and capitalising on RESEARCH capacity in Nursing and Midwifery in the HNELHD. To this end I have asked the University of Newcastle School of Nursing and Midwifery Honours program coordinator Dr. Jane Maguire and the Co-Chair of the nursing and midwifery network BRICS (Building Research and Interdisciplinary Collaborations) Dr. Vanessa McDonald to co-write this editorial. The HNELHD Nursing and Midwifery research network BRICS was launched in October 2012 with the aim of creating a world-leading network for nursing and midwifery research and capitalising on these relationships in the translation of research outcomes into clinical practice.

The Hunter Medical Research Institute (HMRI) in collaborations with Hunter New England Health and The University of Newcastle is the basis for the BRICs initiative. The Nursing and Midwifery Network will potentially see researchers from across Australia and the world, collaborating with local teams in the conception, development and implementation of nurse led research projects (Editor's emphasis) which influence direct care and health outcomes (<http://www.abc.net.au/news/2012-10-12/boost-for-nursing-and-midwifery-research/4309342>, retrieved 26 November, 2012). In line with recommendations from the 2012 NSW Health and Medical Research Strategic Review the BRICs Network aims to facilitate collaborations between nursing and interprofessional health researchers from medicine, allied health and bioscience backgrounds.

The NSW Ministry of Health's (2012) Health and Medical Research Strategic Review is considered the NSW research blueprint for the next ten years. The review puts forward eleven thematic recommendations where the translation of knowledge into the delivery of care is at the forefront. It highlights the importance of improving research infrastructure to enable research organisations to build critical mass and improve chances of winning competitive funding grants. There are two main strategies: 1) to foster translation and innovation from research and 2) to build global relevance and research capacity. The report calls for leadership by health districts and research centres through establishing a strategic investment approach to interprofessional collaboration around health research (p.iii). The review can be found at the following URL: http://www0.health.nsw.gov.au/pubs/2012/pdf/medical_strategic_review_.pdf

There is no doubt that interprofessional collaboration is important in health research, as these models are likely to result in improved patient outcomes by combining a broad knowledge and skill base. Furthermore, funding for projects is increasingly tied to partnership approaches and the translation of research findings into clinical practice. Nevertheless, it is also important to not forget that discipline focused research is still highly valued.

In the HNELHD there are at least five Nursing clinical chairs working within research and practice development units, or from the auspices of joint positions within the rural setting, older persons, mental health, and paediatrics, across the University of Newcastle and the University of New England. In the wise words of Professor Judy Lumby following her appointment as the EMLane Chair of Surgical Nursing at Concord Hospital, "clinical chairs are required

to find a balance between research, teaching, administration, committee work within the university, the health care facility and higher degree student supervision... For this reason we all need to be vigilant regarding our priorities and our resources given the enormous pressure for nurses to obtain research funding in an increasingly competitive environment" (Lumby, 1996). Seventeen years later Lumby's comments are still relevant; however clinical chairs and research leaders now have greater interprofessional penetration, more collaborative expertise and accumulated capacity within nursing and midwifery ranks.

The Nursing and Midwifery Centre for Practice Opportunity and Development (CPOD) for example, a shared venture between the HNELHD and the University of Newcastle has provided advice and support for nursing research for the last seven years. In this time CPOD has assisted to build nursing research capacity with projects such as the Head and Neck Cancer Project, the Ambulatory Care Project, the Osteoporosis Fracture Prevention Project, the Clinical Preceptors project, the Clinical Nurse Consultant Review and an earlier NSW project sponsored through the Nursing and Midwifery Office exploring the New Graduate transition into the workforce. Such projects have collaboratively brought together nurses at the front line to deliver innovation and improvements to the quality of care.

Examples of existing human capital within the HNELHD that can liaise with centres like CPOD in the identification of research and quality projects are: The Essentials of Care (EOC) coordinators, Clinical Nurse Consultants (CNCs) and the trained Practice Development (PD) facilitators across the district, many of whom are working at the front line on the wards. Even though Nursing and Midwifery research infrastructure in the HNELHD is relatively small and generally linked to the universities joint professorial positions, there is an enormous amount of goodwill and considerable nursing and midwifery experience and knowledge between the HNELHD and partner universities. Sometimes, all it takes is a conversation about a quality project or research idea with an experienced nurse researcher, or CNC and before long with combined commitment, these ideas generate into patient centred projects. There are a number of District resources you can access to discuss and plan research or quality ideas to improve patient care. Perhaps one day there will be a one stop Nursing and Midwifery research centre?

District groups such as ENRICH (Centre for Education and Nursing Research for Child Health); Collaborating Centre for Older Person's Care (CCOPC); BRICs; Innovation and Support; University Schools and Priority Research Centres (PRCs); Hunter Medical Research Institute (HMRI), Nursing Research and Practice Development Unit (NRPDU) and the HNEhandover journal can all in some way assist to create and support nursing and midwifery research. To support Honours students for example, CPOD provides scholarships across the district and in both universities each year tied to clinical projects within CPOD. For intranet users detailed information about these groups can be found at the following URL - http://intranet.hne.health.nsw.gov.au/nm/nursing_and_midwifery_research

As successful nursing researchers, my colleagues Jane and Vanessa have attracted external funding from the NHMRC and have both published in prestigious journals, such as The Lancet, Nature Genetics and Stroke. Each has experience in bridging the gap between discipline based and interprofessional research. If you are thinking about becoming involved in research here are some

ideas for strategies on how you might move forward:

- Collaborate with nursing, medical, bioscience, and allied health colleagues and biostatisticians in the development of projects;
- Develop a programme of research shared with a research centre, such as HMRI to build effective collaborations;
- Nurture your existing connections within your facility and engage in clinical research at ward level that will ultimately benefit patients and is of mutual interest between facilities and researchers;
- Value each team member's ideas and their expertise to any given question;
- Contribute to research and guideline committees either locally, or through your specialty organisations, allowing you to develop a reputation in your given area;
- Work with nurses in positions where research is an essential domain of their position descriptions (such as CNCs and CNSs) and opportunities exist to conduct research that is part of clinical practice;
- Aim to translate research findings into the clinical setting despite the challenges – nurses are grounded by being with patients 24/7 and are in a prime position to address this gap; and
- Value your research connections and engage with clinical projects either on a full-time or part-time basis through Honours research and internally funded projects that can grow into programmatic externally funded research.

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Anthony (Tony) O'Brien
Editor HNE Handover

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We would also like to extend an invitation to all Clinicians and Academics to contribute and/or review for the next edition in 2013. If you are interested in contributing please contact HNEHandover@hnehealth.nsw.gov.au with your expression of interest.

Tony O'Brien
Editor

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