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## Embedding a Nurse Scientist into Clinical Practice Christine Bell PhD RN CAPA WCC

## Background

- The Institute of Medicine 2011 report called for a doubling of nurses with doctorates by 2020, specifically to conduct inquiry and research, centered in the nursing workforce.
- "Nurses educated as researchers and scientists must valve, relate to, and interact with nurses who possess other types of doctoral or master's education".
- The report focused on partnerships between nurses practicing in the clinical arena and nurse scientists.
- This partnership will optimize nursing's' impact on advancing patient outcomes by bridging research with translational practice, at the point of care.
- This 'partnership' is the focus of this project: to integrate a PhD prepared nurse into clinical practice, combining expertise, experience and education to empower and equip nurses towards research and evidence-based nursing.

### Team

- Professional Development and Quality Director
- Chief Executive Nursing Officer
- Finance
- Perioperative Nurse Manager
- Research Department

## Setting

• A Magnet designated orthopedic specialty teaching hospital serving Eastern Massachusetts and New England.



2025

## Process

- A clinical practice nurse attained her PhD in nursing research and advocated to create a position of Nurse Scientist to build a program of nursing research and clinical inquiry among clinical practice nurses.
- A proposal of a nurse scientist role, based on review of existing job descriptions and organizational strategic goals, was submitted to the executive director of nursing who then presented the idea to the executive board.
- A position of 10 hours a week was granted, with the remainder of hours to remain in clinical practice.
- This gave protected time for projects, meetings, and developing the program.
- This also kept the nurse in the clinical practice flow to gain ground level input about challenges and barriers to research and Evidence-Based Nursing.

## Results

- This dedicated nurse scientist position has been in place two years.
- Return on investment includes increases in:
  - abstract submissions
  - poster and podium presentations
  - nursing research projects
  - EBP & QI projects
  - dedicated meetings with CPNs
  - mentoring, coaching and supporting nurses
  - education of nurses
  - literature reviews
  - identifying measurable outcomes
  - in-person support on clinical units
  - completion of languishing projects
  - time management
  - increased rigor of project designs
  - celebration of nursing work that had been siloed to the department it was conducted in

		2023	2024
ng	Abstract Submissions	7	31
	Abstract Accepted	6	14
	Abstract Declined	1	9
	Abstract Pending	0	8
	Poster Presentations	6	11
	Podium Presentations	1	4
	Manuscripts Submitted	2	1
	Manuscripts Accepted	0	pd

- invaluable to the success of this program.
- councils

- advancement.

# https://doi-org.libproxy.umassd.edu/10.1111/wvn.12624 https://doi.org/10.1111/jocn.15837 https://doi.org/10.1016/j.outlook.2024.102110







## **Implications for Practice**

• Utilizing a nurse researcher who understands the institutional culture and is a colleague has proven

Time management, always a challenge, has been improved by on unit consultations, at the point of the work being done, in real time.

• The Nurse Scientist acts as a mentor for the unit-based

CI projects better align with the Magnet process and organizational strategic goals.

• Real time Magnet document writer.

• Protected time has allowed the Nurse Scientist to expand dissemination, both locally and nationally, of nurses' work, ensuring that nurses are able to share their strong work and receive credit for it. • This may assist in retention and educational

## Conclusion

• Advance degree nurses are increasing. • Creating a place for DNP and PhD prepared nurses to interact with clinical practice at a bedside level may improve patient outcomes, dissemination of knowledge, moral, job satisfaction, retention and professionalism of the clinical practice nurse.

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