

SUMMARY

In The Netherlands, like in most of its surrounding countries, there is a growing need for health care. Due to technological innovations and changes in the organization of health care, both the nature and the extent of nursing care is becoming more complex and performed at an advanced level.

An important result of all of this is the growing need for further professionalization of nursing care. Scientific research is one of the tools that can be used to accomplish this.

In the present report, the Advisory Council on Health Research (Raad voor Gezondheidsonderzoek - RGO) details its recommendations for research and research infrastructure in the field of nursing and patient care.

The impetus for the advice was a letter, dated 23 June 2000, from the Minister of Health, Welfare and Sport requesting the RGO to advise her about priorities in nursing research. The minister asked the RGO to take account of such issues as 'the effectiveness and efficiency of nursing interventions', 'the role of nurses and caregivers in the coordination of care', and the implementation of research results. Furthermore she asked the RGO to pay attention to the infrastructure of scientific research and, as far as it is relevant, to the scientific training of nurses and nursing researchers.

After a description of the applied methodology and a concise sketch of the research areas in the first two chapters, the third chapter provides advice regarding the infrastructure of nursing research. According to the Council, there are a number of important bottlenecks that occur within the research infrastructure.

One of these bottlenecks is the small numbers of staff in the research groups at academic medical centres. Even at centres with a special group of researchers focussing on nursing care, the number of researchers (and surely the number of permanent staff) is often even too small to enable the proper performance of a research programme. In some centres, only a very small number of (mutually independent) research projects exists.

Another bottleneck in the research infrastructure is the limited access to in- and outpatient care for research purposes. Even though all academic medical centres also function as an environment for training and research, many nursing researchers feel they have little opportunities to obtain access to patient care to do research.

Furthermore, as the greater part of research in the field of nursing is performed by non-academic institutions, many nursing researchers do without an academic environment that relates patient care to research and research training.

Another bottleneck is the lack of a formal alliance between nursing researchers in the academic medical centres, and between these researchers and those from non-academic research centres.

The Council discusses the requirements of research in chapter 4. In order to gain an impression of the needs for research, an overview of activities in research and implementation in the area of nursing and home care was used, as well as the inventory of the requirements of research that the Health Research and Development Council (ZON) performed in December 2000 as part of its research programme entitled “Tussen weten en Doen” (Between Knowledge and Action). The collected information suggests that, although nurses already have spent a great deal of work in activities to rationalise their work, still little use is made of the results of scientific research. On the other hand, there appears to be a great shortage of research that can provide them with support. Given this shortage and considering the research-expertise of the present research groups, the Council thinks that research in effectiveness and efficiency of nursing care should be promoted and given priority, as well as research that may contribute to the development and implementation of guidelines and evidence based practice. In addition, the Council holds the view that research into ‘harmonisation and continuity of care’, ‘patient problems and their determinants’ and ‘measuring care’ is important.

In chapter 5, the Council provides a concise discussion of the possibilities that nurses have for training in scientific research. These possibilities are incomplete, according to the Council, which holds the opinion that evidence based nursing care requires a scientific attitude among nurses. Therefore, and in order to promote the cooperation with other health care researchers, nurses should be given more opportunities to receive a research training and nursing researchers should be given more opportunities to receive training in clinical research.

Finally, in chapter 6, the Council summarises its findings and provides a number of recommendations.

Research in the area of nursing is of great importance, however in its present state inadequate to satisfy research needs. In order to stimulate research into nursing, the Council proposes a programme that must arrange for both the expansion of the research infrastructure and, related to it, the promotion of important topics in the field of research as well. This programme should have a

duration of eight years, which should be sufficient to redress deficiencies in research.

As part of the programme that focusses on the expansion of research infrastructure, the Council proposes three measures.

In the first place, research should be concentrated in those groups for research in the field of nursing that can, in the short-term, meet a number of conditions. These conditions include the presence of a permanent staff of scientific personnel (the extent equivalent to at least 3 to 4 full time members), preferably under the direction of a professor with a teaching commitment in the field of nursing care. Moreover, these groups should bring their research in line with the research programmes of the relevant academic medical centre; they should participate in an academic research school and have access to and agreements with organisations for inpatient or outpatient care for conducting research. In order to further research in these groups, fellowships (with a maximum of two per centre) with a postdoctoral assignment for a period of eight years should be established for promising researchers. According to the Council, funding of these fellowships must be subject to the presence of a research and education plan, guidance from senior researchers and the availability of agreements regarding the access to in- or outpatient health care institutions for research purposes. The core sites that the Council, in principle, found worthy of consideration are the research groups at the Groningen University, the Utrecht University Medical Centre, the St Radboud University Medical Centre, and the University of Maastricht. Assuming two fellowships lasting for a period of eight years per core site, the cost of this measure was estimated at a total of about Euro 4.6 million (approx. DFL 10.2 million).

As a second measure, the Council proposes to finance the steps the centres will have to take to satisfy the above mentioned conditions. The Council is thinking here of a supplementary subsidy for the costs of methodological training of nursing researchers, extensions of temporary appointments for the completion of a PhD thesis, and the development of a “research environment” in in- and outpatient health care institutions. Funding of these activities should take the form of a supplement on top of research subsidies acquired elsewhere. Assuming a maximum available subsidy supplement of Euro 18 000 (DFL 40 000) per year per centre, the costs of this item is estimated at a total of Euro 72 000 (DFL 160 000) per year.

The third measure for stimulating the infrastructure involves the establishment of an organisation that will fulfil a powerful bridging function between not only research and practice, but between the academic research groups themselves, and between academic and non-academic research institutions as well. The Council

attaches great importance to this, because the cooperation between the research institutes is so crucially important to the area of research. The tasks of this organisation involve the stimulation and support of cooperation between the relevant groups and institutions, drawing attention to the important (international) developments and gaps in research, and the development of priorities and posteriorities in (collective) research. The organisation should also make a contribution to the accessibility and distribution of research results, the translation of research results into the guidelines for practice, and the promotion of the quality of the guidelines.

For that part of the programme that focuses on stimulation of research in general, the Council gives priority to research on the ‘efficiency and effectiveness of nursing care’ and the ‘development and implementation of guidelines based on evidence based practice’. Other topics, such as ‘harmonisation and continuity of care’, ‘patient problems and their determinants’ and ‘measuring care’ should also be addressed.

The assessment and supervision of the research questions should fall under the responsibility of a duly created programme committee with the Netherlands Organisation for Health Research and Development (ZonMw) This committee should also contribute to agreements between researchers and intramural and extramural care institutions regarding the workplace function of these institutes. A bottom-up research programme for a period of 8 years and a maximum cost of Euro 7.3 million (DFL 16 million) is considered appropriate.

In the opinion of the Council, research in the field of nursing as well as its relation with other health care research will be promoted by broadening the opportunities for nurses to train themselves in clinical epidemiological research. The Council therefore advises to support initiatives to establish for registered nurses a nationwide programme “Master in clinical epidemiology”.