

The Clinical Research Nurse workforce – an insight into the national organisational structure.

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Background

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Background – Where did it all start?

Development of the Clinical Research Nurse (CRN) role since the late 1980's.

Increasing research governance

NHS Cancer Plan 2000 led to set up of National Cancer Research Network

Increase in national research infrastructure following DH report “Best Research for Best Health” (2006)

- Set up of the NIHR
- Roll out of topic specific networks
- Funding for Clinical Research Facilities
- Funding and structure of Biomedical Research Centres / Units.

Growth of NIHR portfolio led to increase in funding available.

Increase in CRN posts and beginning of the emergence of non nursing roles

Situation in 2012

Known large increase in the size of the CRN workforce.

Limited empirical data on workforce size and structure:

- MacArthur and Hill (2006)
- Ledger (2008)
- Coulson and Grange (2012)

Small number of unpublished workforce reviews:

- Simpson (2006)
- Carrick – Sen (2007)
- Edwards (2008)

Anecdotal articles speculating on workforce size:

- Pidd and O'Neill (2011) – “conservative estimate anticipates a UK wide workforce of around 10,000 by 2013”.

Overall research questions

- How is the CRN workforce currently organised within NHS Acute trusts?
- What is the experience of CRNs working within acute NHS hospital trusts?
- What is the most effective way to structure the CRN workforce?

Method

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Methodology

- Used a pragmatic mixed methods approach.
- Pragmatism allows the researcher to use a combination of whichever methods are needed to find answers to the research questions.
- Instead of focusing on methods, researchers initially emphasise the research question and then use all approaches available to understand the issues within it (Morgan 2007).
- For mixed methods researchers , pragmatism opens the doors to use of multiple method, different worldviews and different assumptions gained from different forms of data collection (Cresswell 2009).
- A pragmatic approach enabled the researcher to initially consider the research questions to be explored. This then led to the use of a variety of data collection methods in order to gain a broader understanding of the issues being explored.

What did I do?

2 Phase study:

Phase 1: National Survey

- To gain an overview of the current CRN workforce and the teams within which they are based.
- To identify which organisations have reviewed their CRN workforce and what form this has taken.

Phase 2: Case Study of 4 organisations

- To explore and compare the experience of CRNs within different organisations using a quality framework.
- To explore the experience and perception of senior research staff (R&D Directors, Lead CRN and PI's concerning the CRN workforce)
- To further examine the workforce structure currently in place.

What did I do?

National survey of UK CRN workforce.

Planned survey to send to Lead CRN across the UK.

Planned participants (n = 177):

- 161 Acute NHS Trusts
- 14 Scottish Health Boards
- 1 organisation each in Wales and Northern Ireland

Developed survey using framework which identifies the 6 challenges of Quality Improvement

Piloted with Network Managers in December 2013 prior to re structure of national network infrastructure

Aimed to send to Lead CRN in each organisation or the individual responsible for the CRN workforce.

Survey ran from April to July 2015

Physical & Technological

infrastructure and technologies supportive of improvement and quality of care

Structural

structuring, planning and co-ordinating the improvement effort

Political

negotiating the buy-in, conflict, opposition, and other politics of change

Emotional

energising, mobilising, and inspiring people to join in the improvement effort

Educational

establishing and nurturing a learning process to support continual improvement

Cultural

giving 'quality' a shared, collective meaning, value and significance

Results

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Responses

Type of Trust	Total number	Total sent survey	Number of replies received
Small Acute	25	21	16 (14.5%)
Medium Acute	46	36	26 (23.5%)
Large Acute	43	38	29 (26%)
Teaching	24	24	19 (17%)
Specialist	19	16	12 (11%)
NHS Scottish Health Boards	14	7	7 (6%)
Wales & Northern Ireland	2	2	2 (2%)
TOTALS	173	144	111 (77%)

Responses



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Results

- An inconsistent workforce structure, both nationally and within organisations, was identified.
- Organisations had a range of different workforce structures in place to support their CRN workforce.
- For the majority of organisations, the structure had evolved in a reactive manner in response to local and national influences.
- The CRN workforce is mainly comprised of band 6 and band 7 research nurses with 50% (55/111) organisations having band 5 research nurse posts.
- 53% (59/111) organisations had reviewed their workforce to further improve recruitment of which 25% (15/59) had subsequently re-structured.
- Smaller organisations favoured a generic workforce covering many clinical areas.
- The case study phase demonstrated that for many organisations, the oncology CRN workforce was managed separately from the remainder of the CRN workforce.

Is your CRN workforce embedded in a defined structure?

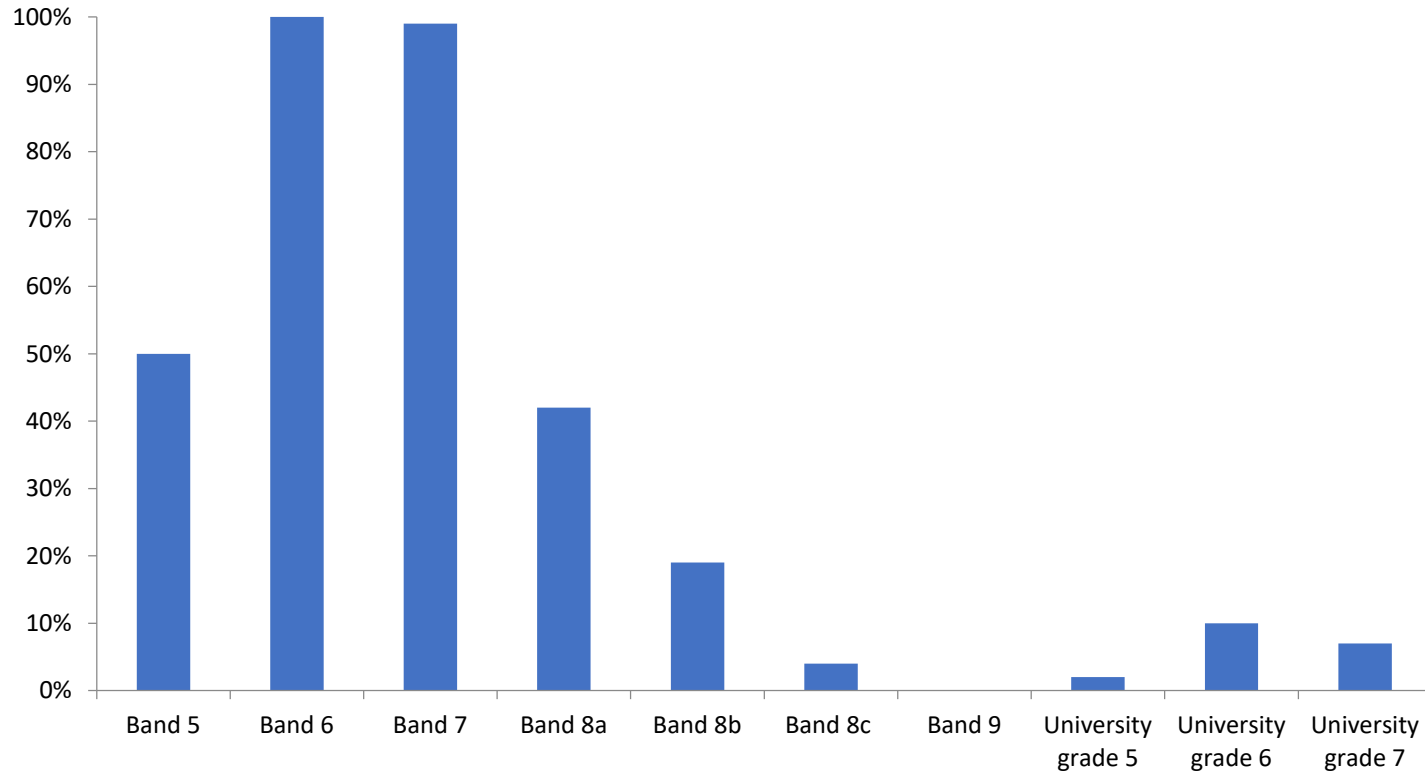
Answer Options	Response Percent (Count)
RN workforce works as part of the Local Research Networks or within one of the divisions.	86% (73)
Organisation has one or more Clinical Research Facilities (CRFs)	34% (29)
Organisation is part of the Network of Experimental Cancer Medicine Centres (ECMC)	16.5% (14)
Organisation has been assigned as one of the NIHR Biomedical Research Units	10.5% (9)
Organisation is part of an Allied Health Sciences Centre	10.5% (9)
Organisation has been assigned as one of the NIHR Biomedical Research Centres	9.5% (8)
Answered question (Skipped question)	85 (26)

CRN team structures

Answer Options	Proportion of response (count)
Working directly with Consultants on their research studies	63.5% (52)
In a structured research team within one clinical area	55% (45)
Working within clinical teams with non-research colleagues	51% (42)
Working within a Clinical Research Facility	40% (33)
Working in one area in different research teams	38% (31)
Working independently in one or more clinical teams but not within a research or clinical team	21% (17)
Other (please specify)	30.5% (25)
Answered question (<i>skipped</i>)	82 (29)

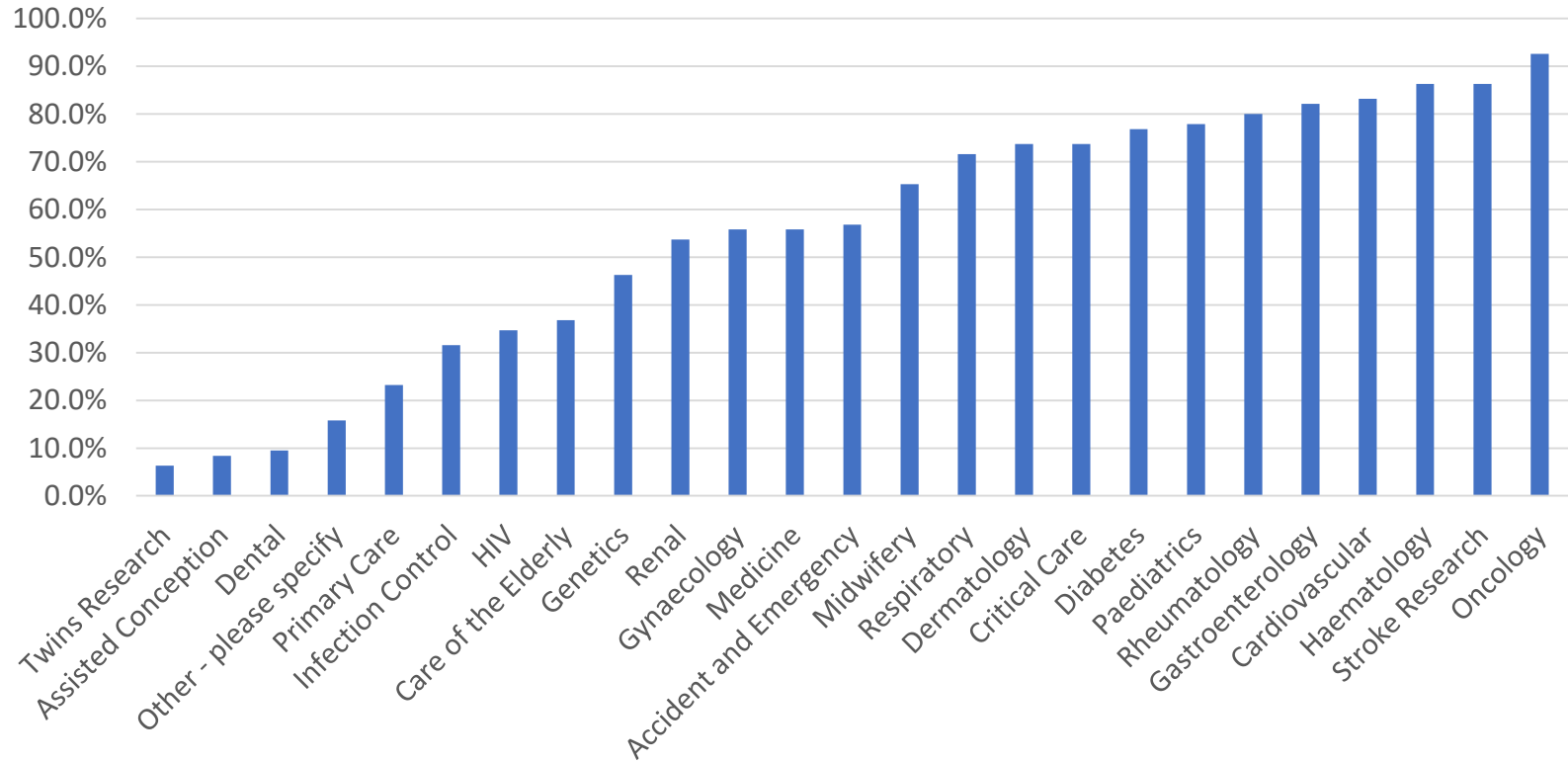
Structure

Banding level of CRN workforce



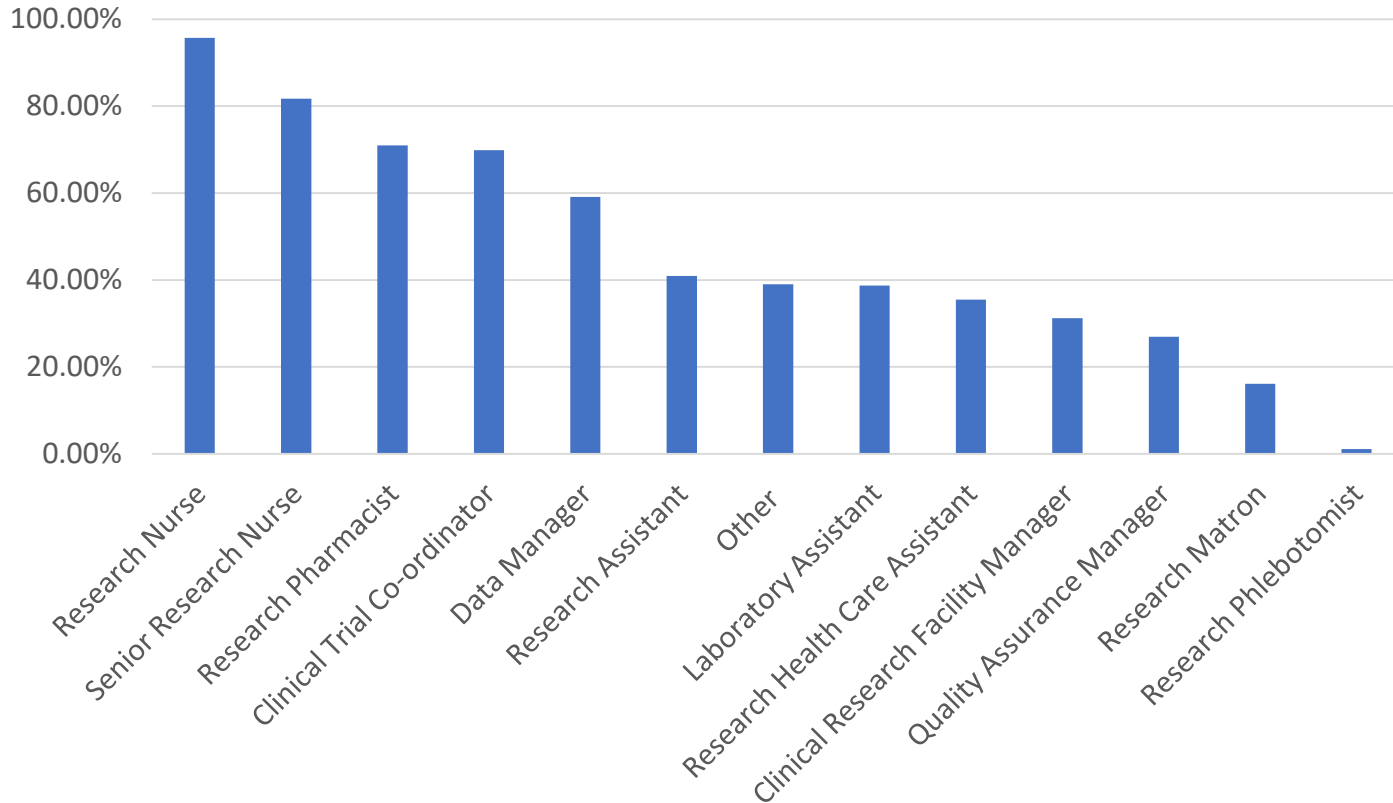
Structure

Clinical areas of CRNs

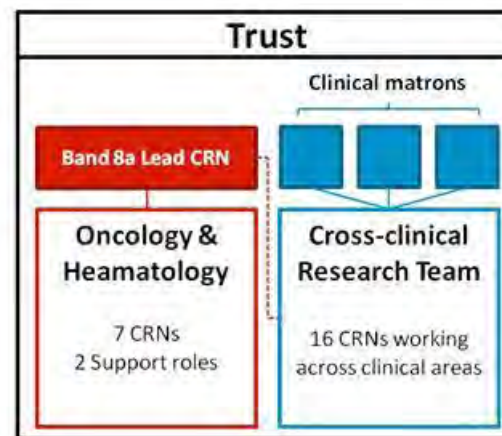
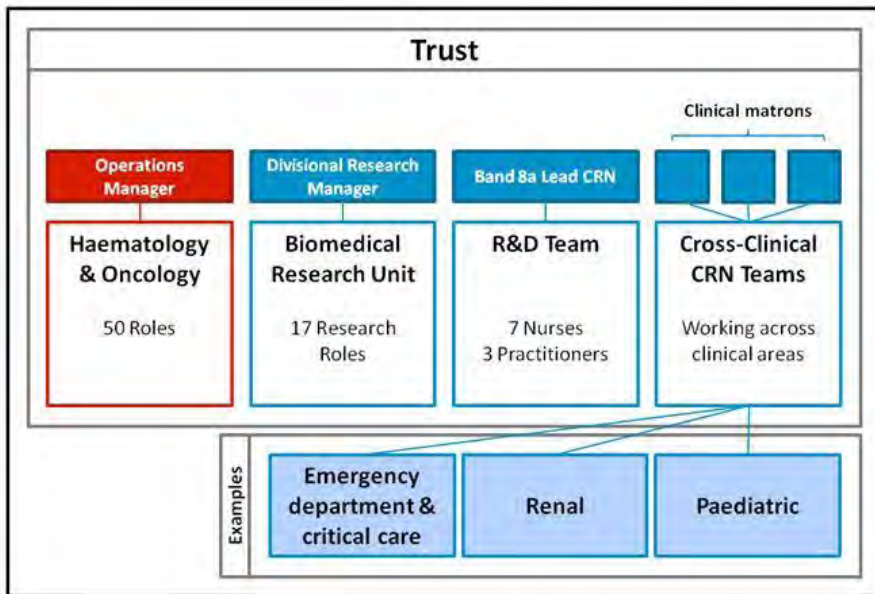
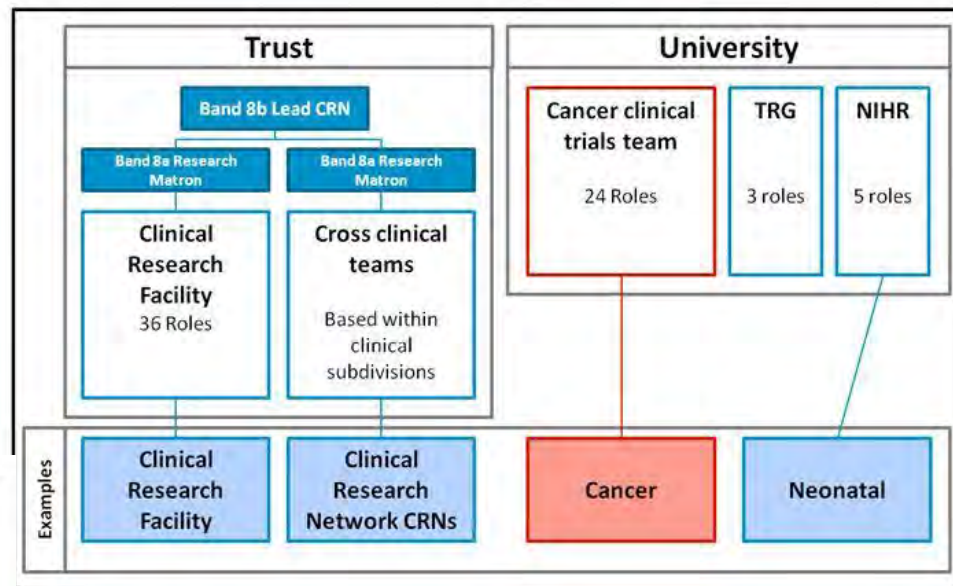
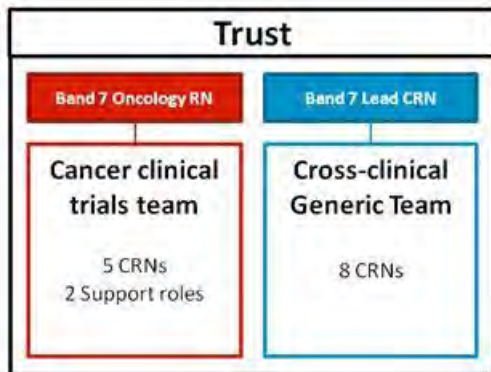


Structure

Roles Within Research Teams



Research Nurse workforce structures

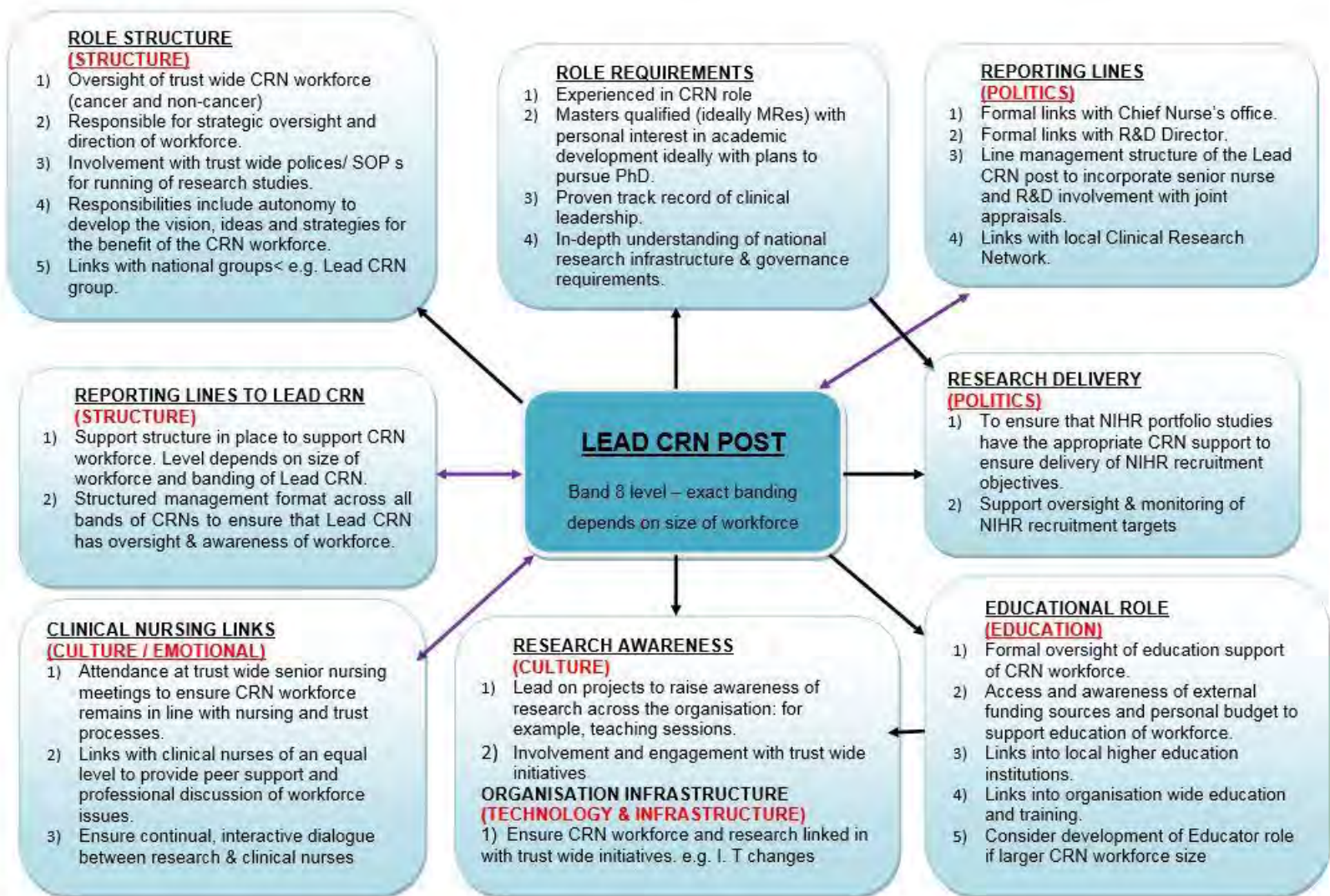


Recommendations and Conclusion

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Conclusion

- Study provides the first ever national overview of the CRN workforce.
- It identifies the reactive and inconsistent nature of its growth in response to external and internal influences.
- This dedicated nursing workforce is crucial to support ongoing progress in future research delivery so ensuring continued patient safety.
- Study can be used as the foundation for further in-depth analysis of this workforce to develop a more consistent structure and so support NIHR objectives and ongoing developments in evidence based care.
- Has identified some important attributes of a potential research nurse workforce structure.



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