

The Benefit to the Renal Community of the NIHR 70 @ 70 Nurse and Midwife Research Leadership Programme

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Background

Patients admitted to research active hospitals have more confidence in staff, are better informed and have better outcomes and research active trusts have improved staff morale and recruitment. Nurses and midwives have an unparalleled contribution to make to the development of patient centred research, prioritising frontline care issues. Despite being by far the largest group of healthcare professionals across the NHS, the proportion of nurses and midwives undertaking research is significantly less than other health professions. This is reflected across the renal speciality, as well as the wider research community. It is recognised that nurses and midwives require additional support to operationalise their research potential.

Methods

In 2019 the NIHR developed a senior nurse and midwife research leadership programme -NIHR 70@70 Nurse and Midwife Research Leaders - with the aim of strengthening the voice and influence of nurses and midwives within research across healthcare. The programme funds 70 senior nurses and midwives to drive forward the nursing and midwifery research agenda both within organisations and strategically as a unified group of senior staff. Whilst the programme is essentially organisationally based, it encourages the Chief Nursing Office One Professional Voice campaign providing an opportunity for speciality-specific collaborations to influence the research agenda and promote research opportunity within specialisms. With two renal nurses and one renal midwife in the first cohort of 70@70 Nurse and Midwife Research Leaders the renal community looks to benefit from this.

Findings

The programme is in the first of a 3 year tenure and as such, collaborations are in their infancy. Work is beginning however, to look at how nurses within the Renal speciality can be supported to undertake high quality research and ensure impact to quality of patient care offered to patients with kidney disease nationally. Discussions of how non-medical clinical academic careers can be supported and embedded within the renal field are under way. In addition, developing the expertise of renal research delivery nurses is a focus in order to ensure that delivery of renal clinical trials is of the highest quality. Collaboration with associated charities and sources of research funding is also essential.

Conclusion

The NIHR 70@70 Nurse and Midwife Research Leader programme is an opportunity for nurses and midwives who are committed proactive champions for nursing and midwifery research to drive forward real change across the research system. Promoting the importance of an integrated research culture to improve quality of care and health outcomes is essential. Whilst the programme encourages participants to develop capacity and capability for research within their organisations, broadening this focus to include intra-specialty collaboration within the renal community could lead the way in developing future research leaders and supporting the identification of direct care research priorities within kidney care.