National Research Priorities for Nursing

ACKNOWLEDGEMENTS

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Many nursing faculty provided time and expertise towards the development process. CASN would like to give heartfelt thanks to the members of the CASN Research and Scholarship Committee who led the development of the research priorities. Their continued commitment to the advancement of nursing knowledge and the development of nursing research has been essential in moving this project forward. CASN also gratefully acknowledges the many nursing faculty who took the time to give thoughtful input to the creation of the research priorities through in-person forums and online surveys.

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PREAMBLE

The purpose of developing national research priorities for nursing is (a) to identify key areas where the development of nursing knowledge is of current importance to health care in Canada, (b) to support research capacity in these areas, and (c) to provide potential non-government funders of health research with direction regarding research needs related to nursing. The overarching goal of this initiative is to generate and translate nursing knowledge that will promote the health of Canadians and optimize the delivery of health care.

While the national nursing research priorities provide nurse researchers with lines of inquiry to pursue, they are not meant to be prescriptive or exclusive of other research interests. Instead, they represent an effort to highlight areas where the advancement of the knowledge base for nursing practice is of current importance for the profession and for health care.
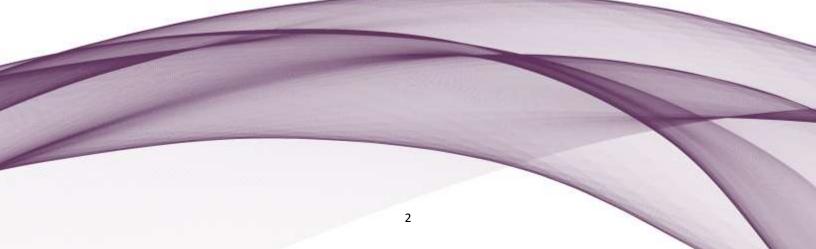
CASN's Mission and Strategic Priorities

The CASN mission is to lead nursing education and scholarship in the interest of healthier Canadians. This mission, and CASN's goal to advance nursing knowledge, provided the impetus for this initiative. The delineation of research priorities for nursing aligns with CASN's strategic priority to "foster the development of research and scholarship in nursing education to support disciplinary knowledge, nursing's contribution to interprofessional knowledge, and innovative, quality health care."

RESEARCH PRIORITIES DEVELOPMENT PROCESS

The work of identifying national nursing research priorities involved a four-phase, iterative, multi-step process.

The **first phase** was to involve stakeholder consultation. At CASN's November 2016 Graduate Studies Forum, participants were asked to identify research priority areas to advance nursing knowledge. A world café-style discussion was employed to support the identification of major research priority areas for nursing. Present at the Forum were faculty from schools across Canada, representing a cross-section of research-intensive and teaching-focused universities, as well as a number of colleges. At the end of the Forum, participants were encouraged to contact CASN staff to communicate any additional thoughts.

In the **second phase**, the work of 2016 Forum participants was brought together in a draft synthesis. A wide variety of priority research areas were identified relating to specific populations (e.g., aging,

vulnerable and equity-seeking), specific topic areas (e.g., chronic disease management, competency-based curricula), specific research approaches (e.g., outcome evaluation, knowledge translation, patient engagement), and the role(s) of nursing within the health care system. CASN staff in consultation with the CASN Research and Scholarship Committee conducted a thematic analysis of this data. From this, three broad domains of nursing research were identified:

1. Nursing Practice
2. Nursing and the Health System
3. Nursing Education

Each domain had priority research areas and a description of the specific focus of the priority research area was developed. The majority of the topic areas fell under the first domain, Nursing Practice.

In the **third phase**, the draft synthesis was reviewed and revised at the 2017 Graduate Studies Forum. CASN's Research and Scholarship Committee presented the results of this synthesis to participants and participants engaged in further deliberation and debate. The following recommendations emanated from these discussions, underscoring the need to include the following:

- The LGBTQ2S population as an equity-seeking community
- The provision of support throughout transitions of care
- The role of the clinical nurse specialist
- Indigenous communities (versus grouping these Canadians with other populations)
- The need to care for older patient populations across diverse care contexts
- Nursing leadership, nursing roles, and scopes of practice
- The concept *health care technology*, reflecting a broad consideration for nursing care and patient safety possibilities.
- Patient engagement
- Ethical considerations

In follow-up, the Research and Scholarship Committee met throughout 2018 to undertake further review and revision of the draft synthesis as well as determine next steps, in response to the 2017 Forum feedback.

In the **fourth phase**, CASN's Research and Scholarship Committee carried out an online validation survey. This was circulated to the deans and directors of the schools of nursing in Canada and to the broader Canadian nurse educator community to determine the level of agreement with the research priority areas identified. All those who were contacted were also asked to send the survey to their networks.

There were 149 respondents from both linguistic groups and all regions in Canada. The majority (107) identified themselves as educators, twelve identified as clinicians, seven identified as health administrators, five identified as government or nursing policy professionals, and eighteen did not specify, (indicating "other"). It was determined in advance of the survey that priority areas in
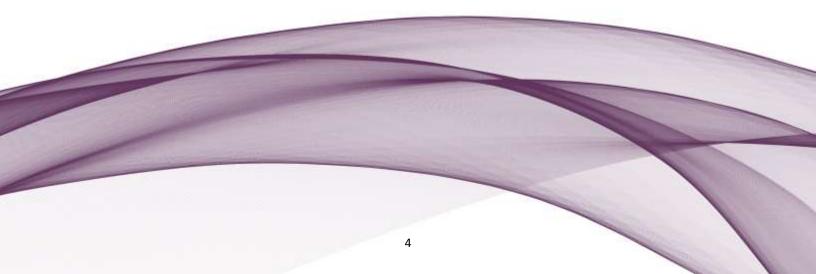
which the level of agreement among respondents was 80% or higher would be retained. For seven of the research priority areas, over 80% agreed that it was important or very important. For three priority areas, however, only 60%, 61%, and 74% respectively of respondents agreed that it was an important research area. As a result, these were removed.

Respondents were also asked to comment on each priority area and multiple thoughtful comments were provided. Their responses were collated, a careful thematic analysis was carried out, the themes were synthesized into categories, and the description of each of the seven priority research areas was modified in light of this analysis.

RESEARCH PRIORITIES

The seven research priorities fall into the three domains: Nursing Practice, Nursing and the Health Care System, and Nursing Education. The priorities include the following:

1. Indigenous and other vulnerable and/or equity seeking communities
2. Chronic disease management and care delivery across space and time
3. Home care and primary health care nursing
4. Care of older adults across diverse care contexts
5. Roles, scopes of practice, and value of RNs and/or NPs to health care
6. Nursing care, quality improvement, and patient safety
7. Nursing education outcomes

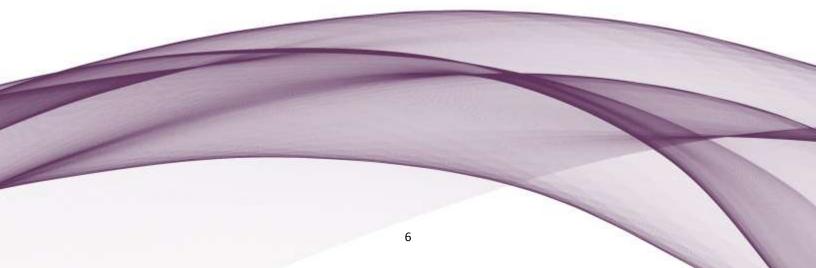# Research Priorities for Nursing in Canada

Domain: Nursing Practice

Research Priority 1:

Indigenous and other vulnerable and/or equity-seeking communities

Non-marginalizing research, targeting social determinants of health, intersectionality, vulnerable and/or equity-seeking populations including: Indigenous communities, rural and remote communities, LGBTQ2S, the frail elderly, persons needing palliative and end-of-life care, persons with mental health problems, substance users, the homeless, and recent immigrants/refugees; to develop and evaluate evidence-informed, strength-based approaches that

    a.   engage vulnerable populations in the care;

    b.   optimize quality of life;

    c.   avoid preventable health costs;

    d.   promote health;

    e.   prevent illness;

    f.   improve accessibility and quality of health care services; and/or

    g.   improve/optimize equity and health outcomes.

Domain: Nursing Practice

Research Priority 2:

Chronic disease management and care delivery across space and time

Research to develop interventions, evaluate outcomes, and promote knowledge translation of evidence-informed patient-centred, collaborative nursing approaches targeting chronic disease management related to self-care, symptom management, management of the chronic illness trajectory, family caregiver navigation of system supports, models of family caregiver support, and environmental impacts on chronic illness in order to

a. improve quality of life;

b. reduce health risks;

c. avoid preventable health care costs;

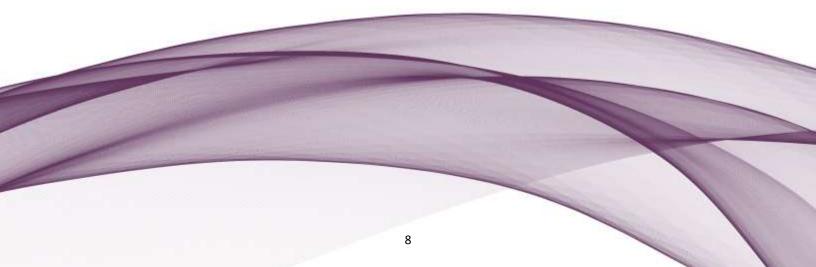d. provide necessary support throughout transitions of care; and/or

e. improve/optimize health outcomes.

Domain: Nursing Practice

Research Priority 3:   Home care and primary health care nursing

Research to develop interventions, evaluate outcomes, and promote knowledge translation of evidence-informed, collaborative nursing approaches to home care and to primary health care, including digitally delivered health care, and nursing care of family caregivers in order to
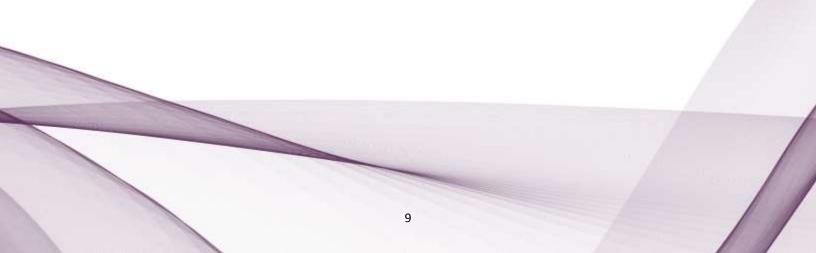
    a.   improve/optimize quality of life of patients, families, and informal caregivers;

    b.   reduce health risks to patients and informal caregivers;

    c.   avoid preventable health care costs;

    d.   increase emotional, social, and material resources of patients, their family and informal caregivers; and/or

    e.   improve/optimize health outcomes.

Domain: Nursing Practice

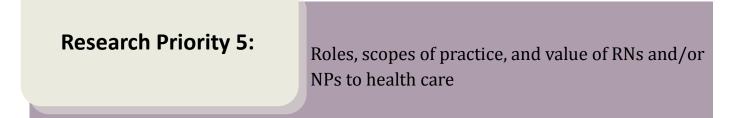**Research Priority 4:**   Care of older adults across diverse care contexts

Research to develop, evaluate outcomes, and promote knowledge translation of evidence informed, collaborative nursing approaches targeting the care of the older person in the community, in long-term care facilities, and during acute care hospitalizations in order to

    a.   optimize quality of life;

    b.   reduce health risks;

    c.   avoid preventable health care costs;

    d.   manage dementia; and/or
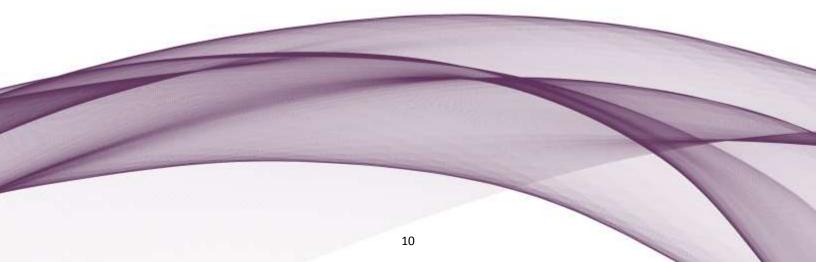
    e.   improve/optimize health outcomes.

Domain: Nursing and the Health Care System

Research Priority 5:

Roles, scopes of practice, and value of RNs and/or NPs to health care

Research to examine and evaluate the roles and scopes of practice of registered nurses, practical nurses, clinical nurse specialists, and nurse practitioners providing collaborative, team-based care to diverse patient populations, in diverse contexts, and to determine the value of registered nurses and nurse practitioner in relation to

    a.   nursing-sensitive outcomes;

    b.   patient safety;

    c.   patient satisfaction;

    d.   health outcomes; and

    e.   health care costs.

Domain: Nursing and the Health Care System

Research Priority 6: Nursing care, quality improvement, and patient safety

Research to assess and evaluate the delivery of nursing care in relation to patient safety, quality improvement, and system barriers to safe care, in diverse health care contexts including but not limited to the following:
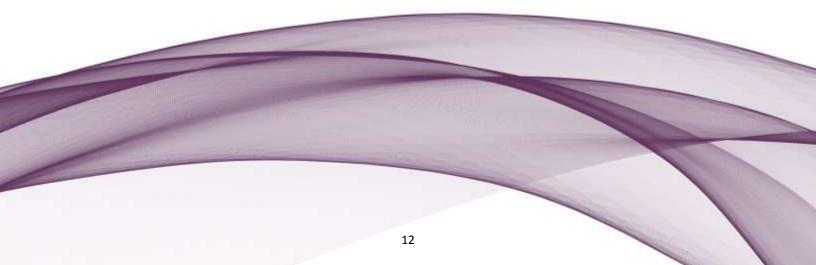
a. acute care;

b. long-term care;

c. community-based care; and

d. home care contexts.

Domain: Nursing Education

Research Priority 7:   Nursing education outcomes

Research to develop, evaluate, and promote knowledge translation of evidence-informed, interprofessional education approaches, curricular models for nursing education, pedagogical approaches that foster skills in clinical reasoning, critical thinking, and evidence informed decision-making, simulation-based learning, and transition-to-practice modalities in relation to

a. relevance of learning for nursing practice;

b. experience of new graduates entering the workforce; and

c. readiness of new graduates for the nursing profession.