Implementation of a Nurse Led Intervention Study

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Background/Significance: RN led intervention studies are a valuable asset to pediatric care in the hospital setting. Unfortunately, there are few intervention protocols in existence and investigators must address many challenges when initiating their research study. At Children’s Hospital of Wisconsin (CHW) there are many resources available for nurses to support their research. We will present one protocol, the challenges faced by the RN investigator and how the challenges were addressed.

Purpose of the project: “Parent Communication for Infants with a Heart Defect” (Karen Pridham, PI) is a feasibility study testing how a guided participation approach focusing on communication styles supports how well both parents can work together while caring for their baby. The nurse’s role is to engage parents in exercises that foster positive communication. The Translational Research Unit (TRU) nurses were taught interventional techniques used during scheduled Guided Participation (GP) sessions. These focus on guiding the parents to share information, set goals, work on problem solving techniques, encourage negotiating and compromising, and promote emotional regulation.

Literature Review: The study is guided by Barbara Rogoff’s Guided Participation model which facilitates how individuals learn through both guidance and participation with experts (e.g. the nurse). For this study, nurses were taught how to guide parents in their communication and working together. A parent activity handbook was created for parents to reference.

Description of Sample or Population: Families were eligible if their infants were diagnosed with a congenital heart defect. The four RN’s from the TRU department were trained on the intervention and were responsible for implementation and administrative oversight.

Setting: TRU is located at the Milwaukee Campus and supports over 90 pediatric research protocols.

Results or Outcomes: Initiation of the project included training of the nurses who are integral to the research. To date 10 families have enrolled with 22 GP sessions completed with the research nurses. Challenges to initiating this research included the need for extensive GP training for direct care nurses, regularly scheduled reflective supervision sessions with RNs, coordinating study tasks per study protocol, and maintaining ongoing inpatient and outpatient communication with families. These challenges were overcome by utilizing the TRU research nurses. They have expertise in recruitment of vulnerable populations, protected time to learn the intervention/protocol, have special training in the research process, and a thorough understanding of research.

Conclusions and Implications: Management of the study by the TRU research nurses has enabled coordination of the intervention and data collection across fetal diagnosis clinics, inpatient units, and the developmental clinic. The long term goal of this research is direct care nurses in all divisions will be able to use the GP approach for parent communication.