A Clinical Librarian–Nursing Partnership to Bridge Clinical Practice and Research in an Oncology Setting

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Nurses today work in practice settings where the expectation is to “draw upon the best evidence to provide the care most appropriate to each patient” (Olsen, Goolsby, & McGinnis, 2009, p. 10) while caring for patients with high acuity in highly specialized settings. Within the nursing profession, the Magnet Recognition Program® advocates for exemplary professional practice and the generation of new knowledge through research and clinical innovation. Nurses working in a clinical setting are often the best resource to identify important clinical questions and gaps in practice, but a lack of resources presents challenges to nurses in fully developing their questions and identifying the most appropriate methods to answer them. These challenges often fall into three broad categories: individual nurse characteristics, organizational characteristics, and environmental characteristics (Dobkins, Ciliska, Cockerill, Barnsley, & DiCenso, 2002). Creating a dedicated partnership between nurses and library staff is one method that can overcome these challenges to use existing resources and support nurses who are asking and answering important clinical questions (DePalma, 2005; Vrabel, 2005).

Research in the Literature

Nurses are interested in research and understand the benefit to their professional growth and clinical practice. A survey of 794 nurses found that 94% (n = 750) of respondents agreed or strongly agreed with the statement that “research helps build a scientific base for nursing,” and 96% (n = 763) said they believe that research is needed to improve nursing practice (Yoder et al., 2014). A survey of 375 nurses at Memorial Sloan Kettering Cancer Center (MSKCC) in New York revealed that participants strongly valued research, with 96% (n = 360) responding that research findings should guide practice and 99% (n = 371) noting that engaging in research contributes to their professional growth (Ginex, 2013). In addition, the survey results indicated that organizational support for research was insufficient; 64% (n = 240) of participants stated that qualified mentors were not available, and 78% (n = 293) indicated that organizational support for research was insufficient; 64% (n = 240) of participants stated that qualified mentors were not available, and 78% (n = 293) detailed that time was not provided during the workday for research projects (Ginex, 2013). In the Yoder et al. (2014) study, 58% (n = 457) of participants agreed or strongly agreed that general administration was moderately or extremely supportive of research, whereas 50% (n = 395) found that 94% (n = 750) of respondents agreed or strongly agreed with the statement that “research helps build a scientific base for nursing,” and 96% (n = 763) said they believe that research is needed to improve nursing practice (Yoder et al., 2014). A survey of 375 nurses at Memorial Sloan Kettering Cancer Center (MSKCC) in New York revealed that participants strongly valued research, with 96% (n = 360) responding that research findings should guide practice and 99% (n = 371) noting that engaging in research contributes to their professional growth (Ginex, 2013). In addition, the survey results indicated that organizational support for research was insufficient; 64% (n = 240) of participants stated that qualified mentors were not available, and 78% (n = 293) indicated that organizational support for research was insufficient; 64% (n = 240) of participants stated that qualified mentors were not available, and 78% (n = 293) detailed that time was not provided during the workday for research projects (Ginex, 2013). In the Yoder et al. (2014) study, 58% (n = 457) of participants agreed or strongly agreed that general administration was moderately or extremely supportive of research, whereas 50% (n = 395) said that general administration was similarly supportive. Sixty-three percent (n = 236) of nurses in the Ginex (2013) study responded that they would be interested in doing a research or evidence-based practice (EBP) project, but only 50% (n = 188) said they felt supported to participate in this endeavor.

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Supporting interest in research and EBP proves to be a challenge and is where nurse researchers, clinical librarians (CLs), and others can play a role in bridging this gap.

Library resources, particularly a CL, can provide a wealth of information and support to busy clinical nurses with an interest in research or EBP. Many hospitals have CLs on staff, and professional organizations may also have librarians available to membership. This article highlights the role of a CL at a hospital and at a professional organization to illustrate how a dedicated partnership can support clinical nurses and foster nursing research.

Library and Nursing Collaborations

Clinical institution: The MSKCC Library has an active partnership with the nursing department. A dedicated CL supports the clinical, research, and educational endeavors of the nursing staff. The CL is integrated in key departmental committees that include the Nursing Research Committee, Nursing Informatics Council, Nursing Practice Council, and Nursing Communications Task Force. The role of the CL in these meetings is to conduct literature searches when needed and to provide information and access to library resources and services. The CL also writes columns and announcements regarding library matters for internal nursing publications and the internal MSKCC nursing website.

By serving as the primary point of contact for library resources and services, the CL provides in-depth literature searches that address specific clinical questions, as well as serves as a resource for quick fact-checking and citation verification. Nurses with a clinical question can meet individually or in small groups with the CL to learn how to search the literature. The CL also offers customized training on EBP information resources, highlights new resources, assists in setting up current awareness searches or news alerts on selected research topics, and pursues nursing staff recommendations for acquiring new resources and content for the library’s collection.

In addition, the CL supports the Nursing Research Fellowship and Nurse Residency programs by presenting an orientation of library and EBP information resources that include the following databases and data sources: CINAHL®, Cochrane, EMBASE®, PubMed, Trip, and Web of Science. Attention is given to formulating a PICO (patient problem or population, intervention, comparison, and outcomes) question and developing keyword and controlled vocabulary search strategies for optimal results. Online guides in the areas of nursing resources, EBP, the Magnet program, and nursing journal clubs have been created by the CL (see Figure 1). These resources and more are available on the MSKCC Library website and accessible remotely. Many hospital libraries offer similar services. MSKCC is also available on Twitter, with the handle @MSKCC_Library.

In addition to the guides and other resources, the library’s training and orientation program features specific educational workshops on how to effectively search databases, organize citations using various bibliographic management tools (e.g., EndNote, RefWorks), and understand the systematic review process and nursing mobile technology. This training and orientation is available to all hospital staff, but the library–nursing partnership increases awareness and access for nurses who are better able to take advantage of these resources.

Professional organization: The Oncology Nursing Society (ONS) has a master’s-prepared librarian who is available to ONS members. The ONS information resources supervisor works in the library and archives department at ONS’s national office and replies to a wide variety of questions from nurses, librarians, and others. Questions may be sent to library@ons.org or forwarded from customer service or other departments. The ONS library catalogs and links to PubMed, CINAHL Complete, and other resources are available at http://cybertoolsforlibraries.com/cgi-bin/CyberHTML?ONSCHO.

The information resources supervisor assists oncology clinical specialists in ONS’s education department with clinical questions sent to clinical@ons.org. The most common types of questions have been
compilation in an ONS publication: ONS Clinical Top 20: Answers to Your Questions About Chemotherapy and Biotherapy Administration. Two of the most commonly asked questions received are as follows: “Should nurses who are pregnant, breastfeeding, or trying to conceive handle chemotherapy or care for patients receiving chemotherapy?” and “What information is available about inpatient, outpatient, and radiation oncology staffing ratios and acuity levels?” In the past, the information resources supervisor highlighted some common clinical questions, as well as other subjects, in the online-only “Question Mark” feature in the ONS publication ONS Connect. One feature included interviews with individuals holding dual credentials as nurses and librarians (Vrabel, 2010). The “Question Mark” feature, the clinical practice resources section of the ONS website (www.ons.org/practice-resources/role-specific-resources/staff-nurses), and the ways in which the information resources supervisor and other ONS staff have used social media (e.g., @ONSmark on Twitter) to answer questions were documented in the poster presentation Nurse/Library Staff Collaboration Leads to Clinical Questions Reference Service (Vrabel, 2011).

The information resources supervisor contributes to ONS’s Putting Evidence Into Practice (PEP) resources, which can be found at www.ons.org/practice-resources/pep. Managed by an ONS research associate, PEP uses topic teams comprised of volunteer nurse researchers, advanced practice nurses, and staff nurses with experience in a PEP topic, and identifies the best available scientific evidence to help nurses improve nursing-sensitive patient outcomes by synthesizing published literature (Johnson, 2014). Topic leaders, who have experience and publications in a relevant area, confirm search strategies and determine inclusion and exclusion criteria based on what the research associate initially proposes. The PEP classification schema is based on the effectiveness of individual interventions and is described at www.ons.org/practice-resources/pep/evaluation-process.

ONS’s information resources supervisor also performs literature searches, sets up PubMed and CINAHL Complete alerts, and obtains articles for all PEP topics. ONS has set up a master tracking table of reviewed literature created as a library in Microsoft SharePoint®. This tracking table allows sorting by various column headings, such as relevant PEP topics (some studies are relevant to more than one PEP topic), specific interventions, study type, and reason for exclusion (e.g., descriptive only, outcomes not reported). Because multiple databases are searched and some new articles are identified via the electronic table of contents of new journal issues and other means—and because many advance online publication articles are subsequently retrieved when published in print—this results in many duplicate articles being identified. ONS also employs other library staff, such as an archivist, who devote considerable time to identifying duplicate or previously retrieved articles when keeping track of which articles need to be acquired. The benefits of having a tracking table such as this are that relevant, high-quality articles on a specific topic area can be identified and located easily. The information can be updated as new articles are published; unlike traditional systematic reviews for which the searching is done at a specific point in time, PEP content is frequently updated on the ONS website to reflect the latest evidence. Volunteers are continually being sought to review and summarize articles for the more than 20 PEP topics, resulting in authorship opportunities.

Conclusion

Nurses across the United States are being charged to support, conduct, and apply research findings to clinical and administrative practice. Translating these charges to the clinical setting is challenging but necessary because clinical nurses are in the ideal position to ask relevant questions about patient care and nursing practice. A strategic and ongoing partnership between medical library services and nursing can support nurses as they embark on the process of answering these questions and improving patient care and clinical outcomes as a result.

To investigate this type of collaboration, nurses should reach out to the library staff at their institution to assess available resources and services. They should then invite them to practice or research meetings to begin building a working relationship. If an institution does not have library services but has an academic affiliation, contact the academic librarians for guidance. Many professional organizations, such as ONS, have valuable resources that members can access when embarking on new research projects.

Numerous nursing initiatives at clinical institutions lend themselves to partnerships with CLs and medical library resources and services. From nursing educational endeavors to nurse-led practice changes, most begin with a spirit of inquiry. Librarians function as providers and organizers of information, and a culture of inquiry will provide ample opportunities for librarians to collaborate as research consultants and information educators in fostering and supporting nursing research, clinical trials, EBP, quality improvement initiatives, Magnet accreditation, and many other endeavors.
References


