



## St. Mary's Campus & Claremont Services CNSp Report



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## SNHS ICNP CNSp User Group

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| Ms Anna Kimmins               | Ms Niamh Hulm             | Ms Elizabeth Adams        |
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| Dr Melissa Corbally           |                           |                           |
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| Dr Mary T Kelly               |                           |                           |

## Glossary

|                 |   |
|-----------------|---|
| <b>ANP</b>      | <b>Advanced Nurse Practitioner</b>                          |
| <b>CNSp</b>     | Clinical Nurse Specialist                                   |
| <b>CSO</b>      | Central Statistics Office                                   |
| <b>DCU SNHS</b> | Dublin City University School of Nursing and Human Sciences |
| <b>ICN</b>      | International Council of Nurses                             |
| <b>ICNP</b>     | International Classification of Nursing Practice            |
| <b>MOU</b>      | Memorandum of Understanding                                 |
| <b>NT</b>       | Nurse Tutor   |

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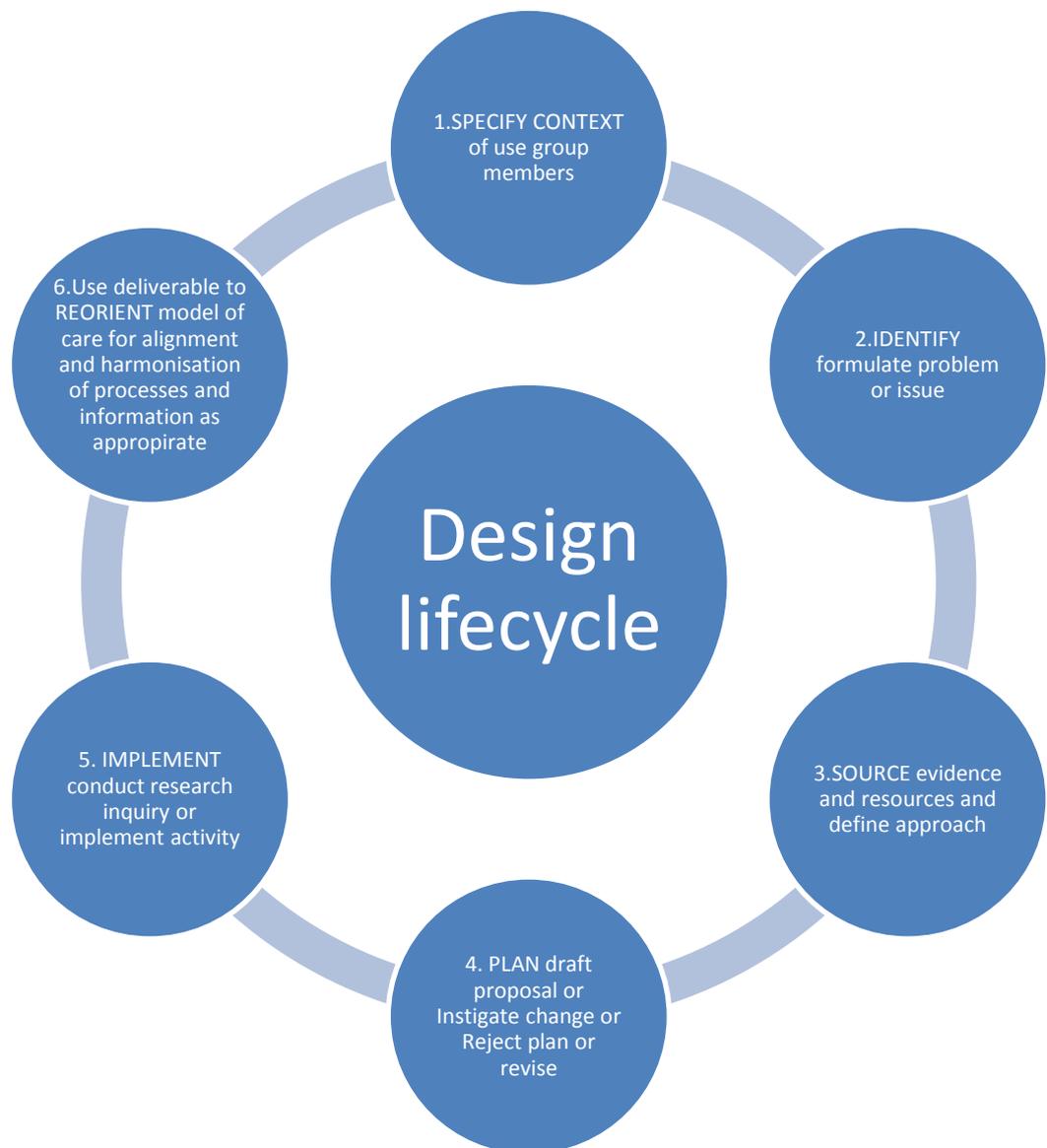
## 1. Introduction

The need for knowledge transfer across and between academics and practitioners is an essential connection to deliver an effective health and social care service. In the School of Nursing and Human Sciences ICNP User Group we have established a number of working groups to explore and develop new configurations, new solutions, and new practices in partnership with our linked services. In this brief paper we report on the annual progress of the Clinical Nurse Specialist Group (CNSp), specifically focusing on enhancing older persons' services. This report has been drafted to inform interested stakeholders about our progress to date. It aligns with the goals of the centre by providing a space for narrative inquiry which can lead to research situated in context and underpinned by values and preferences of both the service providers (CNSp), and the service users (older persons). Access to safe care in older person's services is our collective primary focus. As one of the most vulnerable groups in our society, the older person demographic in Ireland reinforces the notion that we must do more to provide targeted interventions for our ageing population. Citizens are living with rather than dying from chronic diseases, consequently, individuals are living longer with chronic disease comorbidity and multi-morbidity. Future requirements for additional support are therefore on the rise (McEvoy, 2013), and the CNSp group possess valuable insights which can promote and prioritise care providing a spring board for future research activity.

## 2. Background

Recent reports from Institute of Community Health Nursing, comment on specific complex health issues such as frailty, suggesting that it is a condition which increases with old age (Roe, O Halloran, Normand, and Murphy, 2016). Setting the Direction (Casey et al, 2016) provides a development framework to support nursing practice skills and competencies, highlighting the need for proactive actions with CNSps to develop competencies in Acute Medical Assessment Units. Recommended actions for service delivery and service planning development include creating work programmes on management of frail older persons and patients with chronic illness who present in Acute Medical Assessment Units (AMAU's). The Central Statistics Office Report (CSO, 2015) reports that the population of 80 years and older in Ireland is projected to increase 3-fold between 2011 and 2046

(CSO, 2015). Reviewing the evidence and scoping of relevant policy suggests establishing a participatory user group of CNSp focusing on service delivery of older persons is a worthy endeavour. Figure 1 provides a graphical overview locating the design approach agreed and adopted in 2016 by the CNSp group.



**Figure 1 Design Approach Adopted**

Ursula Guin as a poet and author suggests there are two kinds of knowledge, local and universal. In this interim report we attempt to capitalise on both the local (clinical) and universal (evidence base), using the core constructs of knowledge “what we know”. Our goal is identifying and analysing the context of practice, considering problems and challenges encountered in practice, and using a research enquiry lens to detect potential methods that can be used to predict the knowledge needed to solve the problem or attempt to do so. Described by Botin , Bertelsen and Nøhr as a techno-anthropology approach, this design provides a platform for co creating and re-designing care delivery processes (Botin , Bertelsen and Nøhr 2015). Our collective objective is to facilitate the sharing of knowledge, identify gaps, and as part of this process address core practice related issues that impact on service users or the service user environment.

The CNSp is identified as a practitioner with specially focused knowledge and skills to improve quality of patient and client care. Described in 2011 in the Scape Report as a nurse specialist, the CNSp assesses, plans, delivers, and evaluates care across all health and social care settings. The CNSp is inextricably linked to clinical services and provides both direct and indirect care he/she can critically evaluate practice settings with a view to improving the quality of patient/client care (Scape, 2011). Formation of this user group was therefore considered in line with CNSp role and function. Other members of the group included senior nurse managers, an advanced practitioner and student and academic staff.

### **3. Approach Adopted**

The techno-anthropological methodology was used to guide activities from a practice development perspective. Identified for use in health informatics research as an approach to co-design and co-create new solutions. The over-arching phases adopted were considered a good fit with the CNSp group and included the following research and associated practice steps:

- Consider Interdisciplinary team involvement as appropriate
- Problem Analysis and Problem Formulation
- Selection of co- creators users and actors
- Selection of methods that can be used to predict the knowledge needed to solve the problem or attempt to do so (Botin , Bertelsen and Nøhr 2015 p.3).

### 3.1 Phase one

Early discussion with the Director of Nursing of St Marys Campus in December 2015 led to Dr Pamela Hussey meeting with the CNSp team in January 2016. A high level plan was agreed whereby the Clinical Nurse Specialists would draft initial topics for discussion, and Dr Pamela Hussey would extend an invite to interested academics to form a group in the DCU SNHS ICNP User Group Centre. A total of eight topics were identified by the individual CNSp's, seven of which have progressed to projects completed or for further development in 2017. The CNS user group met on five occasions between January and December of 2016. The participant breakdown of academics and clinical nurse specialists who attended meetings was as follows;

| CNSp | Academic Participants | Associated members |
|------|-----------------------|--------------------|
| 5    | 13                    | 7                  |

**Table 1 Breakdown of membership by grouping**

In addition to academic and clinical nurses, membership also included nurse leaders , a Nurse Tutor (NT), an Advanced Nurse Practitioner (ANP) older person services and a third year undergraduate intern funded to engage with the centre over the Summer recess period.

First principles included recognising that all knowledge is local and that with collaboration we can have a collective positive impact on our communities. The CNSp (and associated members) who engaged as part of this user group are front line practitioners who provide a broad range of services on the following specialist domains;

|      |                                 |
|------|---------------------------------|
| CNSp | Infection Control               |
| CNSp | Tissue Viability                |
| CNSp | Stroke and Rehabilitative Care  |
| CNSp | Complementary Therapies         |
| CNSp | Nurse Liaison Services          |
| ANP  | Community Older Person Services |

**Table 2: List of Clinical Practitioners and Senior Nurse Management.**

### 3.2 Phase Two

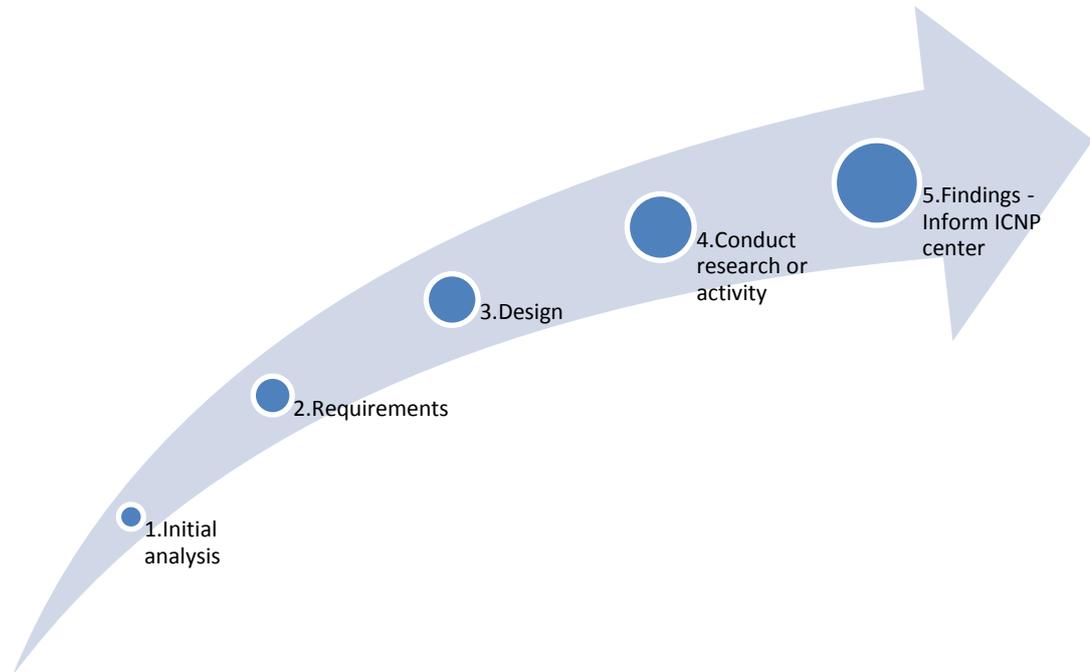
The group met collectively at the SNHS ICNP centre on five occasions, however additional meetings were held by break out groups over the course of the year in St Marys Services where much of the discussions and work was completed. Some of the initiatives progressed at a more advanced pace than others. This was primarily due to the fact that the topics under review were more complex and

required additional time and reading to progress. A summary of activity completed in the DCU SNHS ICNP CNSp user group is included in section four to provide insight on the developments of initiatives completed or in progress. The ideas which evolved as part of the collaborative process will progress independently with relevant stakeholders in 2017. Research activity conducted in this group is underpinned by the Memorandum of Understanding (MOU) between the two institutions St Mary's Campus and School of Nursing and Human Sciences, who agreed to collaborate and facilitate ongoing research partnerships in 2015. Initial discussions have been limited to nursing, however it is anticipated that interdisciplinary approaches will be included where appropriate on specific projects which are planned to progress in 2017. For example project G cited in section four provides an example where interdisciplinary engagement will be pursued.

From the outset it was apparent that the members of the group had a broad set of skills and experiences, and consequently were at different points in their professional development and focus. It was considered important to provide a relaxed space for reflection and discussion so that the group could form norm and storm (Hussey Kennedy and Spencer, 2014 Tuckman, 1953). The following working objectives were agreed in the first group meeting held in March.

- a. The clinical nurse specialists agreed to spend some time considering their practice environment. Specifically they would take stock of practice issues and identify as appropriate where academics may be of assistance in supporting the CNSp in tackling issues currently identified in the practice context.
- b. The identified issues would be explored and discussed within the DCU SNHS ICNP User Group in confidence and realistic working plans with associated deliverables would be set in place over the year.
- c. The centres primary goal is to establish the user group as a formal centre to advance uptake and use of ICNP in Ireland. This specific working group would explore possible future deliverables in relation to this goal, however it was generally agreed that deliverables from this working group was beyond the scope of providing content for mapping to ICNP in 2016. Rather initial data from research inquiry would provide a focus in the instance. Figure 2 provides an overview of the lifecycle of the CNSp group in 2016. In most instances participants have achieved steps 1-3 from initial analysis to considering a design approach. With the exception of the projects relating to undergraduate activity where the deliverables are presented in appendix 1. Three of the participating groups have progressed to forming

projects with a focused design brief. For example Group B has completed ethical application, Group D is currently analysing data with a view to further development, while Group F has secured funding in addition to completing an MSc in general nursing practice.



**Figure 2: Research Lifecycle link to ICNP Goal**

The agreed deliverables for the group for 2016 were as follows;

Agreed Deliverable 1 The group would disseminate the work completed in January 2017 in a short report which would be posted on the centres website <https://www.dcu.ie/snhs/icnpusergroup.shtml> under reports and updates.

Agreed Deliverable 2 The group would participate in the DCU Spring Teaching and Learning School in January 2017 at a dedicated workshop.

### **3.3 Phase Three Group Progress**

Specific cues in the initial workshop prompted the group to think about a possible way forward to address the identified issue/s. Discussions included developing or trying a new approach to the issue/s or practice under consideration. When plans were agreed specific groups implementation plans were drafted including scope to monitor how it was received in the practice setting. Core

features of the undertakings included gathering data for evaluation of progress on the agreed specific activities. Some of the activities were agreed in early meetings others evolved over the summer recess and some did not progress. The reasons for staff dropping out of the group included competing agendas, time pressures or a CNSp was engaging in third level programmes in other universities and it was important to ensure no conflict of interest occurred. There were also incidences which on deeper discussion and closer inspection the sub group agreed were not considered clinically pragmatic to develop at the time. What follows in section three are a brief summary of the specific group projects, and the current status of the project progress at the time of drafting this report.

## 4. Summary of Activity and Group Projects

|                |  |
|----------------|--|
| <b>Group A</b> | <b>Undergraduate Resource enhancement</b>  |
| <b>Group B</b> | Transitioning care family support          |
| <b>Group C</b> | Complementary Therapy Interventions        |
| <b>Group D</b> | Tissue Viability                           |
| <b>Group E</b> | Infection Control and Wound Management     |
| <b>Group F</b> | Stroke Rehabilitation                      |
| <b>Group G</b> | Patient information a socio technical lens |

**Table 3: Summary of Group Projects**

Details of the group projects and their progress are summarised in the following sections.

### 4.1 Group details summary

Group A Enhancing undergraduate resources for older person placement.

Project title: Improving the student experience in St Mary's Campus (updating/refinement of an existing resource for undergraduate students who are attending specialist placement )

Members: Anne Marie Payne, Anne Kirwan, Anna Kimmins, Orla Ffrench, Daragh Rodger, Maree Barry, Melissa Corbally

Summary: The group identified the need to make visible all key learning areas in Saint Mary's Campus and developed a list of desirable places/persons which students could access while on placement. This was incorporated into an existing pamphlet to be used during induction.

Status: Final document completed see appendix one

Group B Transitioning older family relatives into residential care

Project title: Family members' perspectives of the process of transitioning older family relatives into residential care: a narrative study.

Members: (initially Ms Anne Kirwan, Ms Anna Kimmins, Dr Briege Casey, Ma Maree Barry)  
continuing: Ma Orla Ffrench, Ms Daragh Rodger and Dr Melissa Corbally

Summary: The group met on several occasions to discuss the need to examine the experiences of relatives who anecdotally struggle with transitioning their loved ones into care. The focus of this study is to explore family members' perspectives of the process of transitioning older family

relatives into residential care:

Status: Ethics application submitted November 25<sup>th</sup> 2016.

Group C: Complementary Therapy

Project Title: Complementary Therapies Joint Contracture Project

Members: Ms Niamh Hulm ,Dr Briega Casey ,Dr Carla O Neill , Ms Susan Hourican

Summary: The optics of complementary therapy embedding complementary therapies using an evidence base with case study. Focusing on a specific health issue - contractures in the older person.

Status: In progress literature review completed, audit of contractures in service completed. Interdisciplinary educational programme and poster in development scheduled for 2017.

Group D: Tissue Viability Study.

Project Title: A retrospective review of pressure ulcer data in the inpatient population of St Marys Hospital, mapping trends over time

Members: Ms Maree Barry & Dr Catriona Murphy

Summary: A review of existing data collected on inpatients over a 10 year timeframe on tissue viability

Status: Draft data file has been developed and initial analysis completed further analysis is scheduled for Q1 2017

Group E Evaluating tissue viability nurse and student interaction

Project Title :Evaluation of student nurse experience of working with the tissue viability nurse

Members: Ms Maree Barry, Ms Anna Kemmis, Ms Anne Kirwan and Dr Melissa Corbally.

Summary: A questionnaire was developed and is currently in circulation (see appendix 2). Data is presently being gathered and is awaiting review. The response to questionnaires has been very good. Most respondents were enthusiastic in their completion of questionnaires.

Status: Ongoing

Group F Stroke Rehabilitation

Project Title: Stroke Rehab and Me

Members : Ms Adina Stefanuca Ms Daragh Rodger Dr Pamela Hussey

Summary: This group are developing resources for patient education on stroke rehabilitation

Status : In progress now an MSc Project

Group G Using a socio- technical lens for patient information

Project Title : Patient Information Resource

Members: Ms Daragh Rodger Dr Mel Duffy Dr Pamela Hussey

Summary: A patient information resource

Status : In progress working group established

## 5. Conclusion

This brief report provides a summary overview of work currently in progress in the SNHS ICNP CNSp Group. Making connections between clinical nurse specialists and academics provides a space for reflection and targeted action on local issues which can address health and social care problems. Some problems which if left unchecked can lead to unintended consequences or adverse outcomes. Our goal in creating this working group has been to co-create and co-construct a space for CNSp and Academics to reflect and communicate strategies to address problems or issues in context. To explore core contextual concepts such as time, people, and technologies in place to ascertain if a participatory approach and cross fertilisation of ideas between these groups of individuals can provide quick solutions or indeed act as a springboard to enable and facilitate further collaboration opportunities. As is the case in some participatory approaches which transfer from academia to practice development initiatives, not all of the topics and issues discussed and reviewed have progressed; however as evident in section four some progress is being made to collectively work together to address fragmentation of resources and continue to build on our early achievements. Members of the user group focused on identifying common ground, reflecting on potential projects of interest and developing relationships. For better health better care at a lower cost, it is important to gain a clear understanding of the context and its associated elements so we can address sustainable and responsible solutions for health and society.

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## Appendix 1

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### REPORTING FOR DUTY

Students attend three twelve-hour shifts Monday through Friday starting at 07.45. These days are arranged weekly with the Clinical Nurse Manager on the student's allocated ward. Alternative schedules are available

Bank holiday on the 1<sup>st</sup> week: Tuesday 09.00-13.00, Second day 07.45- 20.45 & Third day 07.45- 19.15

Bank Holiday weeks: First day 07.45-20.45 Second day 07.45-17.30 Third day 07.45-14.20

TCD students attend the Day Hospital, Monday through Friday 08.00 to 16.00. Student attending their Care of the Older Person placement attend as noted above

### BREAKS

All breaks are thirty minutes. Breakfast break should at a time to facilitate participation in the Drug Round

### SICK LEAVE

Attendance is 100%. If unable to attend your placement, please contact the Nurse Tutor's Office (01) 625 0303 by 08.30 (you may leave a

### PARKING

Parking is free and there are a number of car parks available on the campus

### BUS SERVICE

The following buses service the Chapelizod Gate: 25, 66, 66A, 66B and 67



Mary's Hospital /  
Phoenix Park Community  
Nursing Units  
Dublin 20

(01) 625 0300

Care of the  
Older Person  
Specialist Placement



*Our aim is to*

Link to flyer on [www.nursinginthepark.com](http://www.nursinginthepark.com)

## Appendix 2

Tissue viability resource linked to Project E

# Evaluation ~ St Mary's Campus

I'd like to evaluate your experience of working with me, Maree Barry, Tissue Viability Nurse (TVN) here in St Mary's Campus, I would really appreciate your feedback.

Tick which applies to you:

UCD Student

DCU Student

TCD Student

Other :

Tick which applies to you:

Student Nurse Year 2 Semester 1

Student Nurse Year 2 Semester 2

Student Nurse Year 3 Semester 1

Student Nurse Year 3 Semester 2

Other :

Please indicate how much time you spent with the TVN in St Mary's

Campus

15- 30 minutes

Greater than an hour

More than two hours

Other :

In what semester(s)year(s) did you receive lectures on tissue viability?

Year 2 Semester 1

Year 2 Semester 2

Year 3 Semester 1

Year 3 Semester 2

Other :

How would you rate your knowledge on Tissue Viability BEFORE your placement in St.Mary's Campus?

Poor

1

2

3

4

18

5

Excellent

How would you rate your knowledge on Tissue Viability AFTER your placement in St.Mary's Campus?

The same

1

2

3

4

5

Much improved

How has working with the TVN contributed to your learning?

Your answer

Is there any aspect of tissue viability that you learnt about while working with the TVN that you think will be of value in your future practice?

Your answer

Is there any area of Tissue Viability care that you would like more information or focus on?

Your answer

SUBMIT