



“How may our findings be useful?” Translating research knowledge on nursing practice in rural and remote Canada

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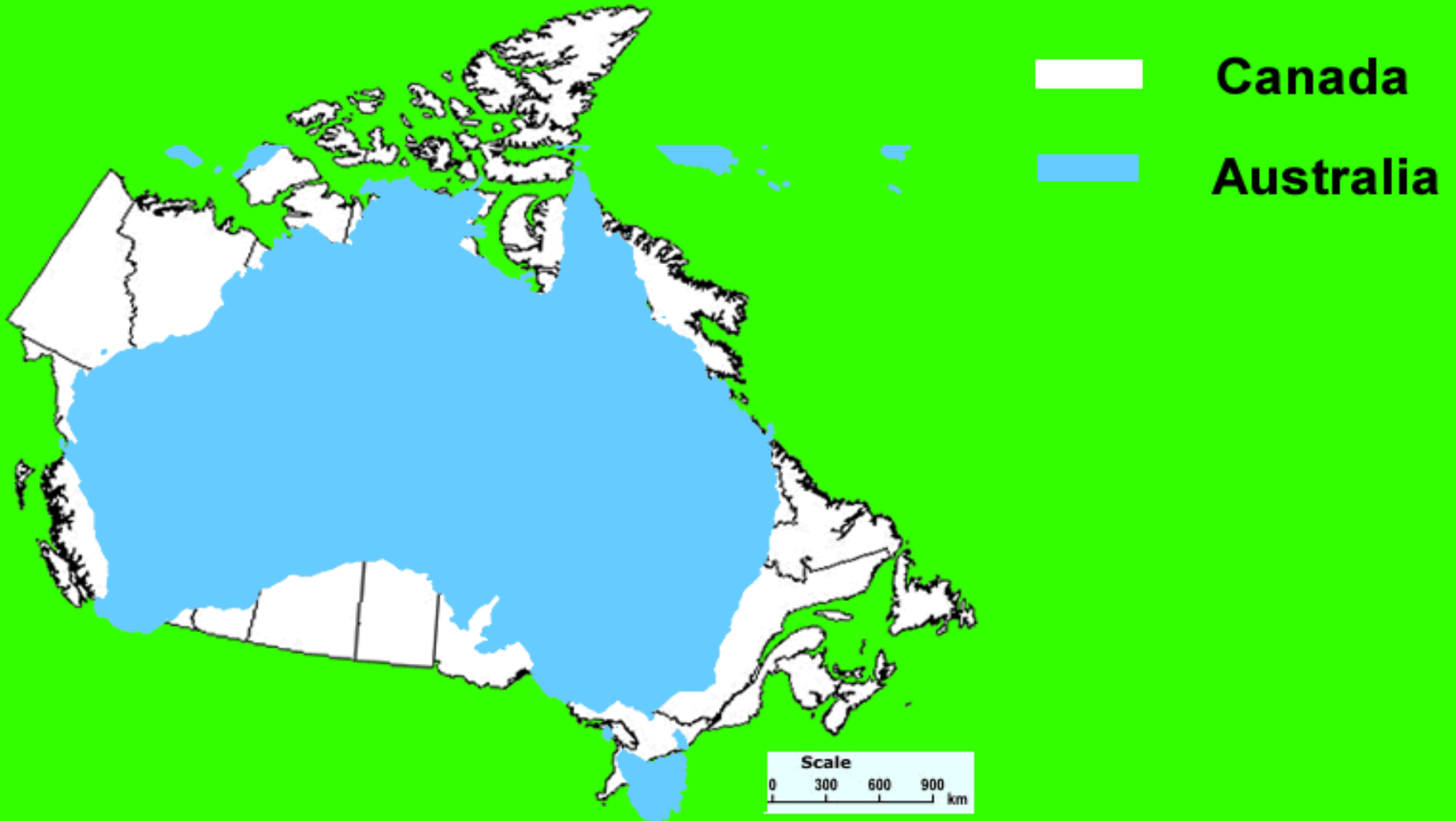
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8th National Rural Health Conference

Alice Springs, March 13, 2005

Geographical size comparison Australia and Canada



Australia and Canada

Australia

- 7,686,850 sq km
- 20, 285,430 people
- 2.6 people/sq km

Canada

- 9,984,670 sq km
- 32, 136, 654 people
- 3.3 people/sq km

Australia and Canada Aboriginal population comparison

Australia

Aboriginal population of 427, 000 represents 2.2% of total population

Canada

Aboriginal population of 1, 007, 330 represents 3.4% of total population



Knowledge Translation (K.T.)

“...the exchange, synthesis, and ethically-sound application of knowledge - within a complex system of interactions among researchers and users - to capture the benefits of research for Canadians through improved health, more effective services and products, and a strengthened health care system” (CIHR 2004)



The Nature of Nursing Practice in Rural and Remote Canada

Aim - to examine and articulate the nature of registered nursing practice in primary care, acute care, community health, continuing care (home care) and long term care settings within rural and remote Canada



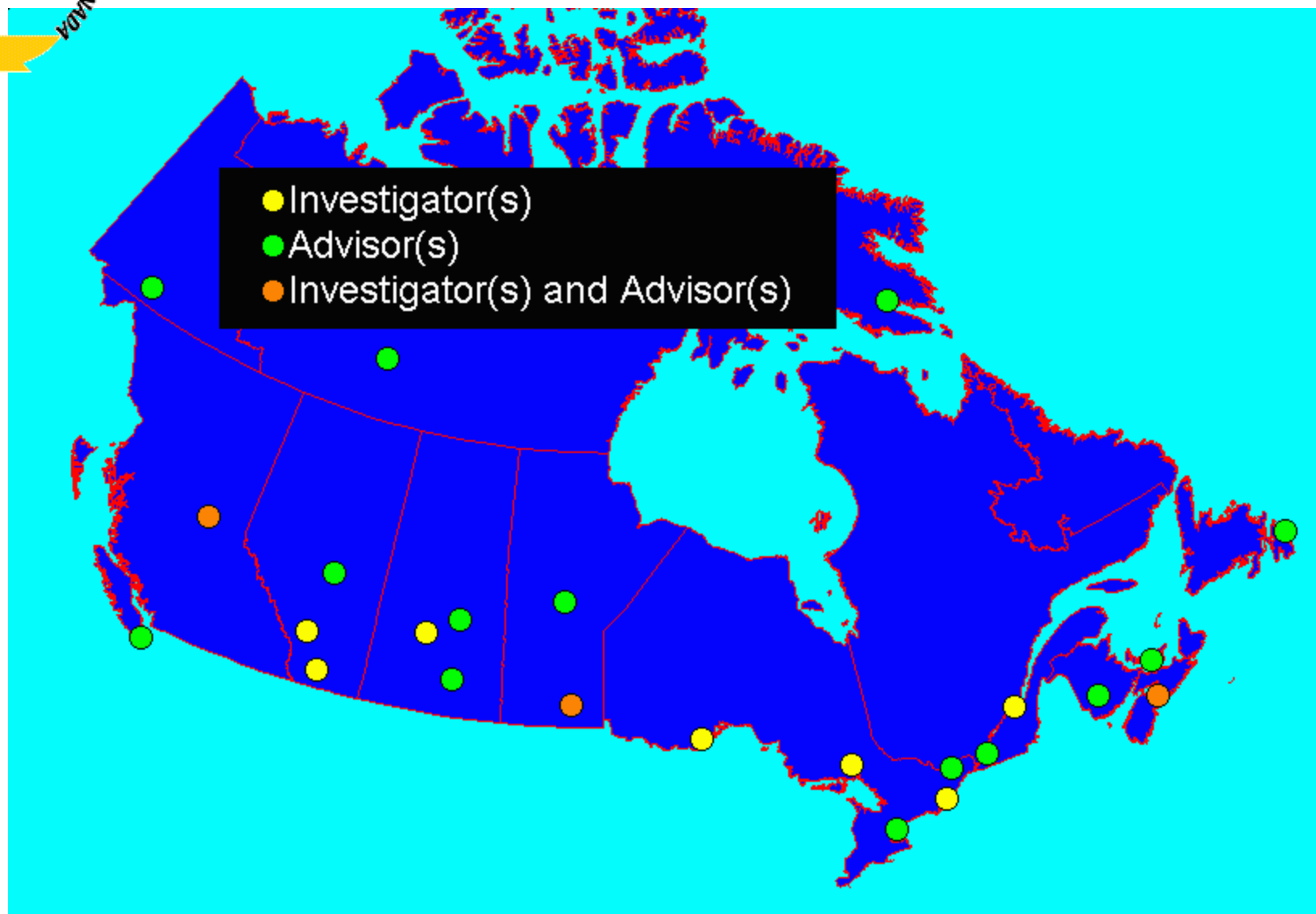
The Study Components

- Survey (4000 nurses - 68% response rate)
- Registered Nurses Data Base (RNDB)
- Narrative Study (152 in-depth interviews)
- Documentary Analysis (150 documents)



Funding Partners

- **Canadian Health Services Research Foundation**
- **Canadian Institutes of Health Research**
- **Nursing Research Fund**
- **Ontario Ministry of Health and Long-Term Care**
- **Alberta Heritage Foundation for Medical Research**
- **Michael Smith Foundation for Health Research**
- **Nova Scotia Health Services Research Foundation**
- **British Columbia Rural and Remote Health Research Institute**
- **Saskatchewan Industry and Resources**
- **Provincial and Territorial Nurses Associations**
- **Government of Nunavut**
- **Canadian Institute for Health Information**





Decision-Maker Involvement

- Survey: design, content, facilitated sampling/access
- Documentary analysis: document identification/access, analysis, report writing
- Narratives: promotion/participant recruitment
- Overall: framing findings; directing translation efforts; making connections



Rural and Remote Nursing

Access to Care

Quality of Care

Sustainability of Care



Access to Care

- **Supply and Distribution of Nurses**
- **Education of Nurses**



Documentary Analysis

- Little policy support for rural & remote nursing
- Workplace supports such as access to continuing education are minimal



Quality of Care

- **Community as Shaping Practice**
- **Working on the Edges of Practice**



Advanced Nursing Practice

- 8% work in Primary Care
(i.e., advanced practice/nurse practitioner)
- BUT 39% make advanced decisions on a daily basis
- AND less than 10% have advanced education



Sustainability of Care

- **Predictors of Intent To Leave**
- **Migration of Nurses**



Retaining Rural Nurses

RNs who plan to leave their jobs were:

- Unsatisfied with job scheduling, level of autonomy & on call requirements
- More likely to be making advanced decisions & working in remote settings
- Less satisfied with the community where they work



Mobility of Rural Nurses

- By 2006, Canada is projected to lose the equivalent of 13% of the 2001 RN workforce through retirement and death (O'Brien-Pallas et al., 2003)
- BUT, up to 27% of Canada's rural nurses have moved from their province of graduation
- AND 20% of rural nurses plan to retire by 2007



Nature of Nursing Practice

Recognizing nurses and the complexity of rural and remote practice

- Access to Care
- Quality of Care
- Sustainability of Care





What was problematic? - 1

- Researchers do not think like decision-makers
 - We had to find ways to answer their questions of us: e.g. What do you want to see happen as a result of your study?



What was problematic? - 2

- With whom are we are translating knowledge?
 - Public/communities
 - Staff nurses/other health professionals
 - Managers and planners within health authorities
 - Provincial/territorial policy-makers/planners
 - Federal policy-makers and associations
 - Educators
 - Researchers
 - Research Funding Organizations
 - Universities



What was problematic? - 3

- What to focus on in this plethora of data
 - We asked: How can our findings be of use to you in furthering your agenda for rural/remote nursing?



How results would be of use

- Creating policy direction
- Maintaining policy direction
- Implementing changes:
 - in practice
 - in the community
 - in organizations
- Increasing awareness about the value and strengths of rural nursing



What was problematic? - 4

- Differing levels of interest and involvement of advisors/jurisdictions
 - Researchers need to be responsive and flexible



What was problematic? - 5

- Conflicts between academic demands and knowledge translation needs
 - Maintain academic publication output while undertaking KT
 - Publish fact sheets, reports and research synopses



Knowledge Exchange

“...collaborative problem-solving between researchers and decision makers that happens through linkage and exchange. Effective knowledge exchange involves interaction between decision makers and researchers and results in mutual learning through the process of planning, producing, disseminating, and applying existing or new research in decision-making”. (CHSRF 2005)



Translating Knowledge

- A partnership model promotes the incorporation of findings into policy, practice and organizational change.
- There are not many recipes out there.
- Both researchers and decision-makers take on new roles.
- New supports are needed.



Recommendations - 1

Funding Agencies

1. Continue expectation of KT in research grants – but with adequate funding and time expectations
2. Revise track record assessment to include KT
3. Establish knowledgeable peer review



Recommendations -2

Universities

1. Build in support for KT in promotion and tenure criteria and processes



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