



Irish Research Nurses Network

11th Annual National Conference

TOGETHER IS BETTER!
Celebrating Clinical Research in
Ireland and 10 Years of IRNN

Gresham Hotel, Dublin 1
Wednesday 7th & Thursday
8th November 2018

 @Irish_RNN #IRNN18

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Acknowledgements and Thanks

The IRNN Committee wish to thank the Health Research Board, whose continued support has made this conference possible. We would also like to acknowledge and thank Roche (Ireland) and Genomics Medicines Ireland, who provided non-conditional sponsorship to supplement the costs associated with the event. Thanks must also go to our numerous supporters and collaborators, without whom IRNN could not carry out its mission to support clinical research nurse practice and professional development.

As the conference theme states: Together is Better!

Foreward

It's my great pleasure to welcome you to the 11th IRNN annual conference, which is also the 10th anniversary of the group. I hope you will agree that we have come a long way during the past decade, not just in building supports for clinical research nurses/midwives but also the growth of the clinical research infrastructure in Ireland. There have been challenges, not least the need to sustain funding and resources for clinical research during a lengthy economic downturn, but thankfully the endless commitment of researchers, and the willingness of funders to recognise the need for clinical and scientific advances to improve patient care, meant that the clinical research infrastructure has continued to grow.

Not all the positive developments initiated 10 years ago have been sustained. The loss of research nurse/midwife education and development as a dedicated strand of the national clinical research infrastructure meant that the postgraduate certificate programme established under the DCCR award is no longer available, and it is still requested by employers and research nurses/midwives keen to obtain academic training in their chosen area of specialist nursing practice.

On a positive note however, the IRNN is immensely proud of the growth of the network, and, as you will hear during the conference, is going from strength to strength. We have always been grateful to our supporters and partners, and never more so than this year. Thanks to funding awarded by the Health Research Board we are in a position to continue to increase IRNN services and to support the professional development of clinical research nurses for the next three years.

I want to thank the members of the IRNN committee for all they do, not just the current group but those that have served over the last 10 years. We rely on research nurses and midwives to give their time and talents to keep the network going and hope that this year more research nurses and midwives will choose to join the committee. We also appreciate that behind every committee member there is an organization or investigator who is supporting us indirectly. Some of the existing committee members have needed to step back, and there was never a better time to get involved. If you are interested please get in touch. I hope you enjoy the conference today and will join me in wishing a happy 10th birthday to IRNN!

Deirdre Hyland
Chairperson IRNN

IRNN Committee



Deirdre Hyland Chair

Deirdre completed her General Nurse and Midwifery training in St. James's Hospital, Dublin. She later completed a Higher Diploma in ENT nursing in the Royal Victoria Eye and Ear Hospital/RCSI and an MSc in Nursing Practice in 2003 in RCSI. Deirdre has been employed in the RCSI Clinical Research Centre since 2004, and has gained experience in a range of study types and disease areas. Since 2009 her primary role has been in clinical research nurse/midwife education and support both within RCSI and as part the national clinical research infrastructure.



Hazel Ann Smith Vice-Chair

Hazel is the Research Coordinator for the Paediatric Intensive Care Unit at Our Lady's Children's Hospital, Crumlin and Adjunct Lecturer in Paediatrics, Trinity College Dublin.

Hazel sits on the cross-hospital research committee for all three Dublin paediatric hospitals and is a committee member for the UK Clinical Research Facilities Network (UK CRF) Theme 3 'Developing and sharing best practice for staff education, training and development'.



Carole Schilling Treasurer

Carole completed her BSc (Hons) Nursing and registered as a general nurse in 1993. She worked as an ICU nurse for 5 years before becoming a cardiology research sister. In 1999 Carole completed an MSc in Nursing. Carole has gained considerable experience in both the clinical research setting as a research nurse and in the pharma/CRO industry as a clinical research associate. Most recently she has held the post of Quality and Regulatory Affairs Manager in the RCSI Clinical Research Centre. Carole stepped down from this role in August 2018 and is currently enjoying a short career break.



Veronica McInerney Secretary

Veronica is a registered general nurse who holds a H.Dip in Oncology Nursing, Masters in Health Research and was awarded a PhD from NUI Galway for research in quality of life of patients with advanced cancer. Veronica was instrumental in establishing and managing the Cancer Clinical Trials Unit at Galway University Hospital. In 2010, Veronica was appointed Clinical Nurse Manager in the HRB Clinical Research Facility NUI Galway and she took up her current position of Early Phase and Cell Therapy Trial Manager at CRF NUI Galway in 2014.

IRNN Committee



Anjali Patel
Working Group

Anjali completed her Bachelor of Nursing and RGN training in New Zealand. Anjali moved to Ireland in 2006, and completed an MSc in Public Health in UCD (2012), and the Postgraduate Certificate in Nursing (Clinical Research) in RCSI in 2014. Anjali has experience in clinical research and industry settings. She is currently working as a Clinical Research Nurse in RCSI on the iPATH project.



Siobhan Egan
Working Group

Siobhan is a CNM2 in Clinical Research and has worked in clinical research for over two years. Her experience includes both industry sponsored and academic clinical trials. Siobhan has a keen interest in education and coordinates CASPIR – Critical Appraisal Skills Programme Ireland – which is facilitated by the Health Research Institute through the UL/UL Hospitals Clinical Research Unit.



Valerie Trimble
Working Group

Valerie completed her nurse training in the UK in the early 80's and completed her midwifery training in St. James's Hospital, Dublin, in 1983 and has worked as a nurse there ever since. She is a long serving Research Nurse with the Dept. Clinical Medicine in TCD, working mainly in the area of gastroenterology. Valerie has completed the Postgraduate Certificate in Nursing (Clinical Research) in RCSI.



Jean Foley
Working Group

Jean graduated from St Vincent's Hospital, Dublin as a registered General Nurse. She holds Certificates in Nurse Management, Practice Nursing and a post graduate certificate in Clinical Research from RCSI, Dublin. Having been a nurse in Dublin and Cork, followed by time as a Research nurse with Minerva, Jean joined Alimentary Health as Clinical Nurse specialist in research before joining the Clinical Research Facility Cork in 2012.



Maeve Kelsey
Working Group

Maeve is the Clinical Trials Nurse Manager with the Health Research Board CRF-C and has been a member of the IRNN working group since 2012. Maeve is a registered General Nurse and Midwife and completed the Postgraduate Certificate in Nursing (Clinical Research) in 2013 in RCSI. She also successfully completed her Masters in Clinical Trials with the University of Edinburgh in 2017. She is also interested in Patient and Public Involvement (PPI) in patient focused research.



Derval Reidy
Working Group

Derval has worked in Clinical research for over seven years as a research nurse and study coordinator and in the latter years managed large scale Phase II clinical trials in South Africa. Derval is a qualified general nurse and holds a degree in Industrial Microbiology from University College Dublin and a Master's degree in Public Health. She is the assistant Director of nursing in the HRB/Wellcome Trust CRF in St James's Hospital.



Claire Magner
Working Group

Claire was previously the Clinical Audit & Research Nurse in the Paediatric Intensive Care Unit (PICU) in Our Lady's Children's Hospital, Dublin 12. Claire is now the Programme Director for the Higher Diploma in Children's Nursing in University College Dublin. Claire is also a Honorary Research Associate & Clinical Senior Lecturer with the Faculty of Nursing & Midwifery for the Royal College of Surgeons in Ireland.



Thora El-Sayed
Working Group

Thora graduated from the North Infirmary Hospital, Cork in 1978 as a registered General Nurse. She completed the Certificate in Practice Nursing 1999 and obtained a level 9 Post-Graduate Certificate in Nursing (Clinical Research) in 2013 from RCSI. Thora has extensive clinical experience in Ireland and overseas. She started working as research nurse and study coordinator in Cork in 1999 and joined RCSI in 2013 where she currently works as a senior research nurse.

Conference Agenda

08:30–09:30	Registration & Refreshments; Poster Viewing	
09:30	Welcoming Remarks: Deirdre Hyland (Chair of the IRNN)	
Forum 1	Chairperson: Dr Fionnuala Keane, COO HRB/Clinical Research Coordination Ireland	
9.45	Opening Address	Dr Darrin Morrissey, Chief Executive of the Health Research Board
10.00	1: The Changing World of Clinical Research Nursing	Ms Elizabeth Ness, Director, Office of Education and Compliance; Center for Cancer Research, National Cancer Institute, USA
10.30	2: The Changing World of Clinical Research Nursing	Dr Susan Hamer (RN), NIHR CRN Director of Nursing, Learning and Organisational Development
11.00–11.30	Refreshments/Viewing of stands and posters	
Forum 2	Chairperson: Prof Eileen Savage, School of Nursing & Midwifery, UCC	
11.30	Chairs introduction and remarks	
11.35	The PIPPIN Project; Paediatric Intensive Care Public Patient INvolvement, Where we started...	Dr Claire Magner, Assistant Professor/Lecturer, School of Nursing and Midwifery, UCD
11.50	Door to Decision in under 30! A National Quality Improvement Collaborative Programme	Ms. Roisin Walsh, Clinical Research Nurse, RCSI Clinical Research Centre
12.05	“I’m afraid of upsetting them further” Student midwives’ education needs in relation to bereavement care	Ms. Sarah Cullen, Clinical Midwife Specialist in Bereavement, National Maternity Hospital
12.20	The Whitehouse Report 2018: Nursing and midwifery structures and strategies across the UK and Ireland	Ms. Hazel A Smith, Research Coordinator, PICU, Our Lady’s Children’s Hospital, Crumlin
12.35	What people with MND and their caregivers think about dysphagia and what do they want from dysphagia-related health services?	Dr. Dominika Lisiecka, Speech & Language Therapist, UCC
12.50	Discussion	
13.00–13.45	Lunch/Viewing of stands and posters	
Forum 3	Chairperson: Ms Eibhlin Mulroe, Chief Executive Officer, Cancer Trials Ireland	
13.45	Research in the health service: where are we, where are the gaps and where are we going?	Dr. Ana M. Terrés Head of Research and Development, HSE
14.15	Growing and Nurturing a Culture of Research – The Importance of Relational Issues	Dr Denise O’Brien, Lecturer/Assistant Professor, School of Nursing, Midwifery & Health Systems, UCD
14.45	SAFE – Starts with an S but begins with the patient	Ms Simone Grey, Research Nurse, UCD & Ms. Shirley Thornton, Family Carers Ireland
15.15	Public Patient Involvement in Clinical Research	Dr Derick Mitchell, CEO IPPOSI, and Ms Julie Power, founder and chairperson of Vasculitis Awareness Ireland and EUPATI Fellow
15.45	Chairpersons remarks: Presentation of prizes and close of conference	Chair: Ms Deirdre Hyland

Speakers Profiles



Deirdre Hyland

**Registered General Nurse, Registered Midwife, H Dip ENT Nursing,
MSc Nursing. Chairperson IRNN**

Presenting: Welcoming Remarks

Deirdre is Director of Research Nurse Education in the RCSI Clinical Research Centre in Beaumont Hospital. From 2009 – 2016 Deirdre co-ordinated the Postgraduate Certificate in Clinical Research Nursing which provided education and training for over 100 research nurses and other research staff. She delivers a number of short educational courses, including Good Clinical Practice (GCP) courses for IMP trials, medical device investigations and sponsor responsibilities, and has developed training resources that have been shared nationally. Deirdre is committed to collaboration and networking across the clinical research sector in Ireland and internationally. She serves as:

- Working group member of the Irish Research Nurses Network (IRNN)
- Member of the International Association of Clinical Research Nurses (IACRN)
- Member of the UKCRF Network Education Workstream
- Member of the board of the Irish Platform for Patient Organisations, Science and Industry (IPPOSI)
- Clinical Representative on the Quality Working Group of Clinical Research Coordination Ireland (CRCI)
- Member of national PPI Working group
- IRNN representative on Irish Health Research Forum (IHRF)



Dr. Fionnuala Keane

BSc PhD, HRB CRCI Chief Operating Officer

Chairing Forum 1

Dr Fionnuala Keane graduated in 1994 with a B.Sc. Honours in Biochemistry and in 1999 with a PhD in Biochemistry from the National University of Ireland Galway. From Oct 1999 to Feb 2001 Fionnuala worked as a Postdoctoral Research Fellow in molecular biology and neurochemistry at the Department of Biochemistry, UCD. She joined Novartis Ireland Ltd in Feb 2001 and worked there as a Central Nervous System Hospital Specialist with the sales and marketing team until June 2003. At this point Fionnuala joined ICORG, the All Ireland Co-operative Oncology Research Group and she remained in ICORG from July 2003 to May 2014.

Fionnuala was appointed to the role of Development Lead for the HRB CRCI in May 2014 to develop and deliver a 5 year business plan in line with the HRB strategic objectives, working in close collaboration with the CRF/C directors. In May 2015 Fionnuala was appointed to the role of Chief Operating Officer for the HRB CRCI.

Speakers Profiles



Darrin Morrissey
BSc PhD, Chief Executive Health Research Board

Presenting: Opening Address

Immediately before joining the HRB, Darrin was the Director of Programmes and Investments with Science Foundation Ireland, where he led the delivery of funding to science & technology research across the Irish public sector research institutions. Darrin's prior experience includes 16 years spanning research, manufacturing and commercial success in the pharmaceutical and biotech industries. In a variety of roles in companies including GSK and Sanofi, Darrin's work ranged from leading the development of the GSK oncology business in Ireland, to managing clinical trials across various therapy areas, and from developing and delivering national and international business strategies, to the launch of melanoma other oncology products on global markets.

Darrin qualified with a BSc in Microbiology and he holds a PhD from University College Cork. His PhD research focused on the molecular mechanisms that underlie the spread of cancer. He also worked as a postdoctoral researcher at UCC, where he managed 'first-in-human' clinical trials of food products affecting the gut microbiome. Darrin also holds a Diploma in Advanced Management awarded by National University of Ireland Galway.

Over recent years Darrin has been a member of a wide range of national development policy groups, including the Life Sciences Alliance, the Smart Ageing Steering Group, the Knowledge Transfer Ireland Stakeholder Forum and the British Irish Chamber of Commerce Higher Education & Research Steering Group.



Elizabeth Ness
Director, Office of Education and Compliance;
Center for Cancer Research National Cancer Institute

Presenting: The Changing World of Clinical Research Nursing

Elizabeth (Liz) Ness brings with her over 35 years of nursing experience and 25 years of clinical research experience. She earned her BSN from Boston College and her MS in Nursing Education from the University of Maryland School of Nursing. Currently, she is the Director of the Office of Education and Compliance at the Center for Cancer Research (CCR), part of the intramural research program (IRP), at the National Cancer Institute. Her primary responsibilities include coordinating, developing and evaluating both educational and quality management activities for the CCR. Ms. Ness has also served as the lead Research Nurse for the Developmental Therapeutics Clinic at Lombardi Cancer Center in Washington, D.C. She is an active member of the Oncology Nursing Society (ONS). She

has helped ONS develop 2 web courses related to clinical trials. She served as an author and co-editor for the 3rd edition of the ONS Manual for Clinical Trials Nursing and the project team lead for the 2nd edition of the Oncology Clinical Trials Nurse Competencies. Ms. Ness is active in International Association of Clinical Research Nurses (IACRN) serving on the Education Committee and co-editor of the IACRN Core Curriculum. In addition to local presentations, Ms. Ness has presented nationally and internationally on topics related to clinical trials and professional development. Ms. Ness is also a teaching assistant at Drexel's School of Nursing in the clinical trial research program

Speakers Profiles



Dr Susan Hamer

**Director of Nursing, Learning and Organisational Development
for the NIHR Clinical Research Network (NIHR CRN)**

Presenting: The Changing World of Clinical Research Nursing

Dr Susan Hamer is Director of Nursing, Learning and Organisational Development for the NIHR Clinical Research Network (NIHR CRN). Susan is passionate about purposeful change and in particular the development of the healthcare workforce. As lead nurse Susan works with colleagues to ensure that the clinical leadership culture is vibrant and integrated across the large managed network which is the NIHR CRN. As a committed adult educationalist Susan understands that a positive work environment is key to high performance. She has taken an active interest in the relationship between clinical practice and research and understands that evidence availability

and changes in practice are not always directly linked. Susan is enthusiastic about the possibilities for technology to enhance practice and to support innovation in the development of patient led services. She sees the development of accessible information as crucial to this.

Susan is a regular writer and is the author of "Achieving Evidence-Based Practice" and "Leadership and Management: A Three-Dimensional Approach". She is a Fellow of the Queens Nursing Institute.



Professor Eileen Savage

**Chair in Nursing at UCC & Vice Dean of Graduate Studies and
Interprofessional Learning for the College of Medicine and Health at UCC**

Chairing Forum 2

Eileen has an established track record in research funding and publications. The main focus of her research is on chronic illness management, particularly self-management, symptom management (including mental health symptoms), and the relationship between physical and mental health and well being. Professor Savage has completed studies funded by the Health Research Board, Ireland, Health Service Executive, Department of Health, the Irish Research Council for Humanities and Social Sciences, the Ombudsman Office for Children, and European

Commission (Erasmus -multilateral programme). She is co-Chair of two National Working Groups set up by the HSE to implement recommendations specific to the preparation of future healthcare professionals arising out of the Making Every Contact Count Framework and the Framework for Self Management Support for individuals with chronic conditions. These Frameworks relate to the Department of Health's Healthy Ireland strategy.

Speakers Profiles



Ms. Hazel A. Smith

BSc (Hons): MSc, Research Coordinator, PICU, Our Lady's Children's Hospital, Crumlin

Presenting:

The Whitehouse Report 2018: Nursing and midwifery structures and strategies across the UK and Ireland

Hazel A Smith started her post as Research Coordinator for the Paediatric Intensive Care Unit in Our Lady's Children's Hospital, Crumlin, in August 2016. Hazel's research role includes being the (Irish) principal investigator for an international multi-site study and supporting home grown research and implementing the findings into clinical practice. Hazel teaches research methodology and has developed a short research course (accredited by the Nursing and Midwifery Board of Ireland). Hazel is the co-author on the 'The Whitehouse Report: Review of research nursing and midwifery structures, strategies and sharing of learning across the UK and Ireland in 2017'. This report is the result of a project undertaken by Claire Whitehouse through the Florence Nightingale Foundation and sponsored by the Chief Nursing Officer for England, Jane Cummings.

Hazel sits on the cross-hospital research committee for all three Dublin paediatric hospitals, is the vice-chair for the Irish Research Nurses Network and a committee member for the UK Clinical Research Facilities Network (UK CRF) Theme 3 'Developing and sharing best practice for staff education, training and development'. Hazel is a published author in both medical and nursing journals, and for the Cochrane Pregnancy and Childbirth Group, is a reviewer for medical and nursing journals and an invited speaker (including for the World Health Organization). Hazel started her role as Adjunct Lecturer in Paediatrics in February 2017 and has also lectured, on maternal and child health inequities, for the Centre for Global Health, Trinity College Dublin.



Dr. Dominika Lisiecka

PhD in Medicine in health, MSc in Speech & Language Therapy

Presenting:

What people with MND and their caregivers think about dysphagia and what do they want from dysphagia-related health services?

Dr. Dominika Lisiecka graduated with a Master's Degree in Speech & Language Therapy and Master's Degree in Pedagogy from Academy of Education in Warsaw (2003). She has been working as a speech & language therapist in Ireland since 2005. Her clinical experience includes community, residential and acute settings (both paediatric and adults). Dominika's PhD focused on the lived experience of dysphagia in Motor Neuron Disease from the perspective of the patient and carer.

In 2015 Dominika was awarded a Research Training Fellowship for Therapy Professionals for her PhD project (Health Research Board, HPF-2015-993). Currently Dominika lectures in adults neurology (School of Allied Health, University of Limerick) and she continues to work clinically. Her research interests are dysphagia, neurological conditions, palliative care, quality of life, and quality of care.

Speakers Profiles



Dr. Claire Magner
PhD, MSc, BSc Hons, RGN, RCN

Presenting:
The PIPPIN Project; Paediatric Intensive Care Public Patient INvolvement, Where we started...

Claire Magner is an Assistant Professor and Lecturer in Children's Nursing at the UCD School of Nursing, Midwifery and Health Systems. She is a graduate of Middlesex University London, with a bachelor's degree in general nursing (1999), a higher diploma in children's Nursing (UCD, 2005), a master's degree in clinical practice (RCSI, 2009) and a PhD in analgesia and sedation practice in Paediatric Intensive Care (RCSI, 2014). She has a background in adult, cardiac and paediatric intensive care.

Dr Magner is the Programme Director for the Graduate Diploma in Critical Care Nursing (Children's) in UCD.

Dr Magner's research interests are primarily in children's critical and complex care, pain assessment and management, the role of the gut microbiome in health and illness, processes of care and public and patient involvement. She has experience in using quantitative research methods, and clinical audit.



Ms. Sarah Cullen
BSc, MSc, Clinical Midwife Specialist in Bereavement,
National Maternity Hospital

Presenting:
"I'm afraid of upsetting them further" Student midwives' education needs in relation to bereavement care

Sarah is a Clinical Midwife Specialist in Bereavement in the National Maternity Hospital. She qualified as an RGN from Trinity College Dublin & Tallaght University Hospital in 2010 and as a RM from University College Dublin & the National Maternity Hospital in 2012. She completed an MSc by research in 2017 examining the area

of hospital care during second trimester miscarriage.

She is the vice chair of Joint Research Network (NMH/UCD) and has been involved in research projects examining second trimester miscarriage, bereavement education for student midwives, recurrent miscarriage, perinatal autopsy & mental health following pregnancy loss.



Ms. Roisin Walsh
Director of Nursing, Learning and Organisational Development
for the NIHR Clinical Research Network (NIHR CRN)

Presenting:
Door to Decision in under 30! A National Quality Improvement Collaborative Programme

Róisín is the Clinical Service Development Manager with the National Thrombectomy Service in Ireland. Based in the CRC in Beaumont Hospital Dublin, Róisín is leading the national quality improvement project to reduce stroke presentation time to decision time for thrombectomy to under 30 minutes, for any

patient presenting to any participating centre within Ireland.

Róisín has over 20 years clinical nursing and nurse management experience, including clinical nurse manager, specialist nurse roles and assistant director of nursing. Róisín completed a MSc in Clinical Leadership in 2015.

Speakers Profiles



Ms. Eibhlín Mulroe
MBA, CEO Cancer Trials Ireland

Chairing Forum 3

Ms Mulroe was appointed CEO of the Cancer Trials Ireland) in June 2015 and manages a cross functional team of clinical program leads, Data & Statistics, Quality and Pharmacovigilance. She works to implement the strategic plan in consultation with the Dr Jonathan Westrup, Chair of the Board of Directors and Prof Bryan Hennessy, Clinical Lead. Under her leadership, in 2016, Cancer Trials Ireland rebranded and established a Patient Advocate Advisory Group.

In her early career Ms Mulroe worked in Irish Politics and then the NGO sector where she worked as CEO of the Asthma Society of Ireland. She then worked as an Account Manager with MedMedia working on marketing campaigns with corporate clients. In July 2007, she

became the first CEO of the Irish Platform for Patients' Organisations, Science and Industry (IPPOSI) and Chair of a Task Force in the European Patient Academy for Therapeutic Innovation (EUPATI). Ms Mulroe was appointed by the Irish Minister for Health to the Department of Health Steering Group on Rare Disease Policy in 2010, she represented patients on the Health Information and Quality Authority (HIQA) Research Ethics Advisory Board, HIQA, HTA Advisory Board and was a member of the HSE Patient's Forum. She served as the patient representative on the Legal Consultative Panel of the Irish Medicines Board (now HPRA).

Ms Mulroe led IPPOSI to partake in 2 EC Research Consortiums, BBMRI and EUPATI, the latter is a unique initiative to develop an EU Patient Academy.



Ana M. Terrés
PhD, MSc, BSc. Head of Research and Development, HSE

Presenting: Research in the health service: where are we, where are the gaps and where are we going?

Dr. Ana Terres developed her career originally in biomedical research. She graduated with a BSc in Biology, an MSc and a PhD from the University Complutense of Madrid (Spain), and was subsequently awarded a Marie Curie fellowship from the EU for biomedical research at the Department of Clinical Medicine, St. James Hospital and Trinity College Dublin. She has over twenty years of

experience in research and administration, management, governance and strategic development of research in the Higher Education Sector. She was Director of Research Support at Dublin City University until November 2017 when she moved to the Health Service Executive to take a position as Assistant National Director and Head of Research and Development.

Speakers Profiles



Denise O'Brien PhD MSc, BNS, RNT, RM, RGN
Assistant Professor/Lecturer and Head of Subject for Midwifery,
School of Nursing Midwifery and Health Systems, UCD Dublin

Presenting:
Growing And Nurturing a culture of Research –
The importance of Relational Issues

Dr Denise O'Brien is an Assistant Professor/Lecturer and Head of Subject for Midwifery in the School of Nursing Midwifery and Health Systems in UCD Dublin. Denise commenced her academic career in UCD in 2006, prior to this Denise practised as a Midwife tutor/ midwifery practitioner for 5 years in the National Maternity Hospital. Her clinical expertise was gained over 15 years in the National Maternity Hospital and the Coombe Women's and Infants University Hospital.

Denise has taught in the discipline of midwifery since 2000 and has extensive experience in curriculum development and design at both undergraduate and postgraduate level. Denise was awarded her PhD in 2015 for a Participatory Action Research study collaborating with women and midwives exploring women's understanding, experiences and supports needs to exercise informed choices during pregnancy and childbirth in

Ireland. The completed informational resource developed by participants and Denise "Choices for Childbirth" was offered to the Health Service executive and some of the content was published/ is available at the following link <http://whatsupmum.ie>. Since completing her PhD Denise has continued to expand her research portfolio both with her colleagues in UCD and the National Maternity Hospital and with international collaborators.

Her areas of publication include Informed choice, shared decision-making, relational decision-making, Advanced Practice Midwifery/ Nursing, women's experiences of antenatal midwifery clinics, promoting physiological birth, and Perineal Management. Denise is a reviewer for the journal Midwifery.



Simone Gray
Registration and Diploma in Nursing, BSc Nursing, MSc Nursing

Presenting:
SAFE: starts with S but begins with the patient

Simone completed her training in St Vincent's University Hospital in 2002. She worked as a staff nurse in Our Lady's ward which specialised in Medicine for the Older Person. She spent 6 years in a surgical ward specialising in ENT and Plastics. Simone moved to Nursing Practice Development to take on the role of Clinical Placement Coordinator and later took on the role of Nursing and Healthcare Assistant Support for 2 years.

In 2017 Simone moved to the Mater Misericordiae University Hospital as Staff Development Facilitator, based in the Emergency and Medicine Directorate. This included areas such as Care of the Older Person, Acute Medical Unit, Stroke and Neurology.

Simone returned to St Vincent's University Hospital in January to take up the post of Research Nurse working for the SAFE Study (Systematic Approach to improving care for Frail Older Patients).

She has a Bachelor of Science in Nursing from the Royal College of Surgeons (2005). She also completed her Masters in the Royal College of Surgeons in 2008. She has a special interest in frailty and the delivery of person centred care in the acute setting. Her current projects include Intentional Rounding, End PJ Paralysis and the Red Tray Initiative.

Speakers Profiles



Dr Derick Mitchell

IPPOSI The Irish Platform for Patient Organisations, Science and Industry

Presenting: Public Patient Involvement in Clinical Research

Dr Derick Mitchell is the Chief Executive of IPPOSI. Derick has over ten years experience of working in patient engagement, scientific communications, multi-stakeholder management and advocacy at both the national and European level. Derick leads IPPOSI's participation in EUPATI – a unique initiative to develop an EU-wide Patient Training Academy. He is also a member of a number of national committees including the eHealth

Ireland committee, the Medical and Life Sciences Committee of the Royal Irish Academy as well as the oversight group on implementation of the National Rare Disease Plan for Ireland. Derick has a PhD in Molecular Medicine from University College Dublin, as well as a BSc in Biotechnology from NUI Galway.



Mrs. Julie Power

Founder of Vasculitis Ireland Awareness

Presenting: Public Patient Involvement in Clinical Research

Prior to diagnosis in 2005 with a rare disease called Granulomatosis with Polyangiitis Vasculitis, Julie worked for 17 years as an Occupational Therapist, specialising in Neurology and Palliative care. Following diagnosis, her life and that of her family's was totally changed. The uncertainty and isolation Julie experienced on her patient journey has fuelled her interest in raising awareness, improving care and research. Julie believes knowledge is power and that patient involvement throughout the entire treatment and research process is mutually beneficial to the Researchers, Clinicians, Service Providers and Patients.

In 2010, she founded Vasculitis Ireland Awareness, an All Ireland support group for anyone affected by Vasculitis in Ireland, liaising closely with Vasculitis UK and the Vasculitis Foundation.

Julie is a patient representative in the Irish Rare Kidney Disease Registry and Bio bank Steering Committee, the recently formed Vasculitis Ireland Network (VINE) and in planning for a pilot NI Vasculitis service. She graduated as a EUPATI (European Patient Academy in Therapeutic Intervention) fellow in 2016 after completing the 14 month intensive research and development course. Julie has been a member of the Northern Ireland Rare Disease Partnership (NIRDPA) board of directors since 2015.

This year, she was invited onto the Irish Platform for Patient Organisations Science and Industry (IPPOSI) board and is actively involved in improving care for those affected by rare disease both in NI and ROI

Abstracts

Poster Abstract 1	Michelle Barrett, RGN, MSc
Abstract Title:	Cancer Organisation Websites: Dietary and Nutritional Advice For Symptom Management
Author/s	M.Barrett, P.Uí Dhuibir, C.Njoroge, D.Walsh

Nutrition-impact symptoms are common at all cancer stages and increase the risk of malnutrition. Despite this, cancer patients are not routinely referred to a dietitian. Those with cancer may therefore seek information from alternative sources. National Cancer Organisations (NCO) offer both dietary and nutritional advice.

Aim: To review the dietary and nutritional advice provided on NCO websites.

Methods: We identified and searched English-language NCO websites for nutritional and dietary advice under four headings; cancer sites, disease stages, nutritional-impact symptoms and treatment. We report the nutritional-impact symptoms data.

Results:

- Nine websites were searched.
- Nutritional advice for anorexia, sore mouth and dysphagia often recommended high-protein and high-calorie intake. Examples of food and recipes were provided, but none defined the diets (i.e. grams per day).
- No micronutrient advice was provided (except increase sodium and potassium for diarrhoea).

- Little or no nutritional/diet advice for early satiety and smell abnormalities.
- Dietary advice for anorexia and nausea & vomiting (small frequent meals), constipation (increase fluids) and dysphagia (soft food) was consistent between sites, but other advice was not.
- Healthcare professional input universally advised for specific guidance.
- Websites contained links to other pages so accessing information was not straightforward.

Conclusions:

1. Nutritional advice for symptoms varied and was non-specific, with limited micro-nutrient advice limited.
2. High-calorie, high-protein diets recommended but were unclear.
3. Dietary advice practical for common symptoms
4. Referral to dietician recommended by all NCO.
5. Website navigation was challenging and negatively impacted information access.

Abstracts

Poster Abstract 2:	Sandra Mulrennan (@DrNurseSandra)
Abstract Title:	Does working together, better improve the delivery of research and development of nursing careers- – an integrated clinical and research team approach?
Author/s	Sandra Mulrennan, Andrea Lake

This project uses an alternative method within an established hospital/community healthcare service to promote research through working together. The rationale for this project is to improve the patients' exposure, experience and access to research, facilitate the development of knowledge and skills within research, and provides nursing career and academic opportunities. Within Europe, this method of working is not unheard of; however remains uncommon.

Our aim is to share the experience and knowledge gained and highlight that it is possible to further enhance nursing careers, increase the profile of research and help towards meeting national agendas crossing these mostly separate roles.

Method: Nursing leadership and buy in to support development of new roles, income generation and ways of working within a service area.

Result:

- Dual skilled people delivering trials.
- Integrated clinical service-research management and governance meetings and patient pathway reviews for research, all of which resulted in improved performance within the clinical service. This model has rolled out to other Allied HCP namely podiatrists and dieticians within the diabetes service.
- Overall created a more joined up service.

Conclusion: By adopting an integrated approach to research, we have not only delivered a high standard of research but we have also managed to improve on nursing skills, knowledge and job satisfaction, increase the portfolio of research offered, better support the needs of our academic colleagues and industry and ensure patients have the access to research they are entitled to. Support from the senior clinical and research teams were essential.

Poster Abstract 3:	Sally Whelan (@Sally_Whelan), RGN, RNT, MA, BA (HONS)
Abstract Title:	Using Dementia Care Mapping to Evaluate the Impact of MARIO, a Social Robot.
Author/s	Sally Whelan, Eva Barrett and Dympna Casey

Aim/Objectives: MARIO is a social robot developed to increase the social connectedness of people living with dementia (PLWD). This study aimed to evaluate the impact of MARIO on PLWD in a nursing home using Dementia Care Mapping (DCM). This is a structured method of non-participant observation used to record the behaviour of PLWD, their social interactions, mood and engagement levels.

Methodology: Two qualified DCM mappers conducted mapping on one PLWD for two hours. Their results achieved 88% agreement. Then participants with dementia (n=10; Male=3, Female=7) were mapped over a five hour period, before they worked with MARIO (baseline). Participants worked individually with MARIO and a facilitator, for a minimum of 6 sessions over the following two weeks. Immediately after the last session, each

participant was re-mapped (post MARIO). The quantitative data was analysed using a pre-prepared DCM excel package and SPSS. Qualitative data was analysed thematically. This study received ethical approval from NUI Galway.

Results: Immediately after they used MARIO participants had improved mood, engagement and they initiated more social interactions. The increase in participants' overall wellbeing scores was statistically significant: Wilcoxon signed rank test, Z = -2.371, p < .018, with a large effect size (r = 0.5925).

Conclusion: This suggests that MARIO can positively affect the wellbeing of PLWD in the short-term. However, the capacity of participants to become more socially connected, and use their increased readiness to interact with others was limited by the availability of conversational partners in the nursing home.

Abstracts

Poster Abstract 4:	Mary Dunne, MSc Psych, MSc ILS, MCILIP, ALAI and Mairea Nelson, MSc MCILIP (@hrbdrugslibrary)
Abstract Title:	The HRB National Drugs Library: a resource for research
Author/s	Mary Dunne and Mairea Nelson

Nurses regularly work with people affected by drug and alcohol misuse. The HRB National Drugs Library is a free, open-access resource providing a unique collection of Irish and international research evidence in this area. We are funded by the Department of Health, and based in the Health Research Board, Dublin.

Through our website www.drugsandalcohol.ie, those researching this area can access a range of resources and services. These include a searchable collection of articles, books, conference items, Dail debates, and reports; and sections relating to key Irish data; international evidence and doing research.

In the last few years we have also developed a practitioner portal. The portal draws together publications of interest to practitioner groups such as nurses, midwives and allied health professionals.

In order to make it easy to find research we highlight some key documents and provide links to relevant subjects.

Our aim is to facilitate those involved in health and social care, education, and research to make evidence-informed decisions. At IRNN 2018 we would like to display a poster that illustrates the elements of our resources and services that would be most useful to nurses and midwives conducting research in the drugs and alcohol area. We are also happy to speak with IRNN members about new elements that would be useful to them so that together we can enable the production, dissemination and implementation of quality research in Ireland.

Poster Abstract 5:	Leanne Hays, PhD
Abstract Title:	Improving Outcomes in the Critically ill- Research in our Intensive Care Unit.
Author/s	Hays LMC, Brickell K and Nichol AD.

We coordinate an extensive research program in our ICU at St. Vincent's University Hospital with an aim to improve outcomes in the critically ill. In order for this program to be successful we have integrated research within the ICU and established an Irish Critical Care-Clinical Trials Network. We have been involved in several large, multicentre, randomized controlled trials (RCT) and global observational studies. This involves active collaboration with Irish (ICC-CTG) and international research groups. On the ground we coordinate, enrol and collect participant data on up to six RCTs and our ICU is often a lead study site.

We value a multidisciplinary research approach and encourage participation from nurses, doctors and allied health professionals. We provide study specific nurse training, GCP, research updates, support nurses to attend conferences and encourage their involvement in study screening and randomisation. The results of

this are evident from our participation in the global TRANSFUSE (transfusion of oldest versus freshest available red blood cells) and SPICE-III (Early Goal Directed Sedation versus Standard Care) RCTs. Our ICU recruited 108 TRANSFUSE participants and eagerly anticipated the results (NEJM, 2017). Our ICU was the fastest recruiting SPICE-III site worldwide. Our trainee doctors participate in global observational studies (EPIC-III, WEAN-SAFE). We are currently an active site for the TEAM study (early activity and mobilisation) and its nutrition substudy which involves both physiotherapist and dietician input. Our research links are expanding beyond ICU through collaboration with our ED for the TAME cardiac arrest trial (mild hypercapnia to reduce neurologic injury).

Abstracts

Poster Abstract 6:	Siobhan Egan, RGN, RNID
Abstract Title:	Successful Establishment of the Critical Appraisal Skills Programme Ireland (CASPIR) – a collaborative approach.
Author/s	Siobhan Egan, Dr. Marie Casey, Isabelle Delanois, Dr. Mary Clarke Moloney

CASPIR is the Irish branch of the internationally recognised Critical Appraisal Skills Programme UK. CASP have developed workshops and tools for critically appraising a wide range of research helping participants put knowledge into practice. CASPIR is coordinated by the Clinical Research Unit – a subunit of the Health Research Institute, University of Limerick in partnership with the Department of Public Health (Mid West) and University of Limerick Hospital Group. In 2016 a cohort of trainers from these departments trained through a train the trainer model by CASP UK thus establishing capacity. Training was enabled by funding from each department along with a grant from the Irish Research Council under the New Horizons Scheme: Strand 3 ; Enhancing Knowledge Exchange. CASPIR workshops commenced in 2017 and deliver bi monthly workshops to employees from the University of Limerick, University Hospital Limerick and Department of Public Health (Mid West). CASPIR workshops are facilitated by committed trainers from a

range of multidisciplinary professions including, medical, nursing, psychology, librarian, statistics, physiotherapy and business management. CASP trainers meet annually to share ideas, generate new course material along with reflecting on feedback from previous CASP participants.

The successful introduction of CASPIR is reflected in the number of participants who have partaken to date. In 2017 79 participants attended along with a bespoke workshop for 120 undergraduate student nurses from the University of Limerick.

The establishment of CASPIR succinctly reflects this years' conference theme of togetherness which includes the collaboration of departments, funding and dedicated trainers from a range of professions who deliver critical appraisal workshops.

Poster Abstract 7:	Evelyn Crowley, BSc, MSc
Abstract Title:	The DataCat Project: Using systematic data categorisation to quantify the types of data collected in clinical trials and to determine how much is directly related to defined trial outcomes
Author/s	Evelyn Crowley

Background: Data collection consumes a substantial amount of trial resources and, therefore, efforts should be made to only collect data which is necessary and relevant. Data collection is a crucial aspect of clinical trials as the data collected will be used to answer the research question, however, a substantial amount of data collected in trials may not be related to the trial outcomes as demonstrated by a pilot study conducted by the Trial Forge team. Results from this research have provided rationale to further investigate the types and amounts of data being collected across a range of trials.

Aim: To investigate how much data collected per participant per trial is related to the trial outcomes, as defined in the clinical trial protocol.

Methods: All data items collected per participant across 18 trials (6 pilot, 12 new) were extracted from data collection

study documents and listed. Two reviewers (one having in depth knowledge of the trial and one independent of the trial) categorised all listed data items individually into categories from a predefined list. Discrepancies in the categorisations were resolved through discussion, or were put to the wider project group if necessary. Once fully resolved, the number of data items per participant per category per trial were counted.

Results: Across the 18 trials included in the analysis, the mean proportions of data collected that were related to defined trial outcomes were 11.9 % (primary outcomes) and 42.5% (secondary outcomes). 45.6% of the data collected per participant per trial were not related to trial outcomes.

Conclusion: A substantial proportion of data being collected in clinical trials is unrelated to trial outcomes.

Abstracts

Poster Abstract 8:	Colleen Curran, BSc, H.Dip, MSc
Abstract Title:	An Evaluation of the Domiciliary In and Out Pilot Scheme compared to Consultant-led Care in Cork University Maternity Hospital
Author/s	Colleen Curran, Professor Louise Kenny (Department of Obstetrics and Gynaecology, UCC) and Dr Rhona O'Connell (School of Nursing and Midwifery, UCC)

Background: Maternity care in Ireland is provided as shared care between the woman's general practitioner and a hospital obstetric service, continuity of care is not a feature of this model of care. In 2013, a 'midwifery led care' service was introduced in Cork University Maternity Hospital. In this 'Domino' service, a small team of midwives provide continuity of care to women with low risk pregnancies.

Aim: To evaluate the Domino service compared to Consultant-led Care (CLC) in CUMH in terms of birth outcomes, satisfaction levels and breastfeeding rates.

Methods: A matched design cohort study was chosen by means of a retrospective, quantitative, comparative study with a qualitative element. This involved 199 women who received Domino care, matched with women who received standard care (n=150). Labour and birth outcomes were collected from the medical records. Women completed questionnaires on their birth experiences, levels of satisfaction and breastfeeding rates.

Results: The women who received the Domino service experienced less: induction of labour, epidural analgesia, more spontaneous vaginal births, less perineal damage and increased breastfeeding initiation. There was no statistically significant difference in rates of episiotomy or chances of birth complications or postnatal complications. Both groups were positive in relation to satisfaction responses. Postnatal care was the area with most dissatisfaction for women receiving standard care.

Conclusion: Both groups were satisfied with their care, expressing gratitude towards the midwives. Both groups had positive opinions about the service although transferred women voiced dissatisfaction about lack of continuity of care and planned home visits. Women who received Domino care experienced reduced intervention in their birth and had greater breastfeeding success. Both cohorts were satisfied with the service they received.

Poster Abstract 9:	Una Cronin, BSc Nursing Mgmt, Grad Dip Emergency Nursing
Abstract Title:	Sliding CT in the Emergency Department
Author/s	Cronin U, O'Connell A, Browne L, Ryan D, Cummins FH

Introduction: A sliding CT scanner was installed in the resuscitation zone in the new Emergency Department of University Hospital Limerick (UHL) with the expressed objective of reducing time to scan for patients requiring CT, minimizing transportation and maximising process efficiency. Historically patients were transferred to the main hospital radiology department for CT. The aim of this study was to determine its impact on waiting times for brain imaging.

Methods: A retrospective cohort of all adult patients attending with a head injury and subsequent CT brain for two distinct 2 month periods from 1 February 2016 (group 1) and 1 February 2018 (group 2) were identified. These time periods corresponded to before and after installation of the CT scanner.

Patients were classified by Glasgow Coma Score as mild (GCS 13-15), moderate (GCS 9-12) and severe (GCS 3-8). Group comparisons for time were performed using the Kruskal-Wallis rank sum test. Continuous variables are presented as median (interquartile range).

Results: One hundred and sixty five patients were included in the study (76 in group 1 and 89 in group 2). There was no significant difference in overall completion time with median times of 89(106.5) minutes and 93(98) minutes in 2016 & 2018 respectively (p=0.967). Additionally there was no significant difference in completion time by GCS category albeit there is a trend towards improving times in the moderate group

Abstracts

Poster Abstract 10:	Vijayalekshmi Nair
Abstract Title:	The Existence Of Burnout Among Paediatric Intensive Care Nurses In An Irish Paediatric Hospital
Author/s	(1) Vijayalekshmi Nair (2) Eileen Furlong

Background: Nurses, especially in intensive care unit (ICU), are at high risk of developing burnout due to the nature of their role and work environment. Globally, there is a concern with nursing attrition and burnout is a known factor affecting nurse retention. It is important that the prevalence and associated characteristics associated with burnout are identified to improve nurses' working environment.

Objectives: Examine the prevalence of burnout among paediatric ICU nurses in Ireland.

Methods: The Maslach Burnout Inventory-Human Services Survey (MBI-HSS) was distributed to 116 nurses working in paediatric ICU settings. Categorical variables are displayed as number (percentage) and examined using chi-square test.

Continuous variables are shown as median (IQR) and investigated using Mann-Whitney U Test.

Results: Seventy-four (63.4%) nurses returned the questionnaire. Emotional exhaustion had the highest median (IQR) score, 21.5(14.0, 29.3), with 62.2% of nurses feeling emotionally drained from their work. Nurses with moderate or high levels of emotional exhaustion had higher total depersonalisation scores compared to nurses without emotional exhaustion, 6.50(3.75, 9.25) versus 2.00(2.00, 6.00), $p=0.001$, respectively. Nurses with emotional exhaustion reported that, at least once a week or more, they worried their job was hardening them emotional compared to nurses without emotional exhaustion, 39.1% versus 14.3%, $p=0.04$, respectively. Personal accomplishment levels did not significantly differ between those with emotional exhaustion or experiences of depersonalisation.

Poster Abstract 11:	Shaunagh Browne, RGN/RCN
Abstract Title:	The Challenges involved in paediatric clinical trials: a literature review
Author/s	Shaunagh Browne, Emma Cobbe, June Considine, Kayleigh O' Keeffe

Title: The Challenges involved in Paediatric Clinical Trials- A Literature Review

Background: There are many challenges involved in paediatric research, both for patients, families and research staff. Due to the vulnerability of this patient group and the specific considerations involved, paediatric research often poses different challenges in both recruitment, retention of patients and compliance with protocols and procedures.

Objectives: We endeavour to identify the over-arching themes in the current literature and discuss what strategies we can use to combat these challenges.

Methods: To perform a literature review to identify existing papers which discuss the various challenges involved for patients, their families and research staff as a result of partaking in a paediatric clinical trial.

Results: Following an extensive review of the literature, it is evident that the common themes established are issues surrounding informed consent and assent. These appeared to be related to the patient, the family and research staff. We will discuss these issues in more depth and identify strategies which can be utilised to improve the experience of patients, families and research staff.

Conclusions: We have identified a number of the issues surrounding informed consent and informed assent which are reported in existing literature and how we can combat these challenges. To conclude, we believe it is paramount that a specific SOP be created for each clinical research facility, detailing how informed consent and informed assent should be obtained in paediatric clinical trials. The CRF-C in Cork will be proceeding with development of an SOP in the coming months.

Abstracts

Poster Abstract 12:	Aileen Molloy, RGN, RCN, BSc, PgDip (@eyeleanmolloy) Róisín Bradley, RGN, RCN, BSc, PgDip, MSc, Mary Kavanagh, RGN, RCN, BSc, PgDip
Abstract Title:	Central Venous infections 2017/2018 in paediatric cohort with severe haemophilia
Author/s	Aileen Molloy, Róisín Bradley, Mary Kavanagh

Background: Our Lady’s Children’s Hospital Crumlin (OLCHC) is the National Paediatric Centre for Haemophilia. Several patients with severe haemophilia received treatment for CVAD infections over 2017/2018.

Aim: To determine the number of paediatric patients with severe haemophilia who have been treated for CVAD infections at OLCHC in 2017/2018, and the outcome of these infections.

Method: Review of Electronic Health Records (EHR) for all children with Haemophilia A & B treated at this centre to ascertain those with severe deficiency. Further systematic review of EHR to identify how many administered factor via CVAD, how many had been tested for CVAD infections in 2017/2018, and to determine the associated outcome.

Results: 86 patients with severe haemophilia were treated at this centre in 2017/2018. 35% [N=30] patients administered factor via CVAD during this time period. 27% [N=8] positive blood cultures were attributable to CVAD infection. 25% [N=2] had CVAD removed and now use PIVC. 50% [N=4] had CVAD removed and replaced with new CVAD. 25% [N=2] had CVAD infection successfully treated with intravenous antibiotics (IVAB).

Conclusion: More than ¼ of paediatric patients with severe haemophilia who use CVADs for factor administration required hospital intervention for CVAD infections in this time period. This equates to 9% of all patients treated for severe haemophilia at this centre during this time. Hospital interventions included inpatient admission, blood cultures, removal of CVAD, replacement of CVAD, treatment with IVAB, and CVAD retraining for caregivers.

Poster Abstract 13:	Mairead McMorow, Bsc, General and Childrens Integrated Programme, Pg. Dip in Neonatal Intensive Care, Msc in Neonatal Intensive Care (Presenter) and Catherine Clune Mulvaney (Co-author)
Abstract Title:	How nurses and doctors influence parental hope and expectations in the NICU
Author/s	Mairead McMorow and Catherine Clune Mulvaney

The admission of a critically ill baby to the Neonatal Intensive Care Unit (NICU) is a crisis event (Rosenthal & Nolan 2013). Parents by very nature of being human have hopes and expectations for their baby’s future from the moment they discover they’re pregnant and finding themselves in the unit with a baby fighting for their lives can be truly devastating (Charcuk & Simpson 2003). Nurses and doctors play a vital role in communicating with these parents and managing these hopes and expectations in an environment often characterised by uncertainty (Green et al. 2015a).

The purpose of this study is to explore how nurses and doctors understand and manage parental hope and expectation in critical circumstances within a tertiary Irish Neonatal Intensive Care Unit.

A qualitative descriptive design was utilised and 12 unstructured interviews took place (8 Nurses, 4 Doctors) using a purposeful sampling technique. Data analysis was performed using Colaizzi’s

(1978) framework and themes entitled: The NICU Journey–Hope is born, Managing parental hope and expectation–Living on a wing and a prayer, and Coping mechanisms–Enduring the journey ,emerged from the data.

It was revealed that nurses and doctors play a crucial role in influencing parental hope and expectation in the NICU. Nurses and doctors recognise the vulnerability of their young patients and as a result strive to guide parents to a healthy ‘middle ground’ where they have a realistic vision for the future while keeping hope alive. This study provided insight into how nurses and doctors work together as a team to communicate effectively with parents and support them through the NICU journey. It also revealed how nurses and doctors utilise coping mechanisms in order to deal with their own occupational stress. This study has possible implications for clinical practice and the development of guidelines, policies and education.

Supporting Research Nurses and Midwives in Ireland

IRISH RESEARCH NURSES NETWORK

The primary aim of IRNN is to provide a supporting network for research nurses/midwives in Ireland, and we would like to see all research nurses/midwives incorporated into the network. IRNN is now 10 years old, and there has never been a better time to join!

WHY YOU SHOULD BE AN IRNN MEMBER:

- Be part of a nationwide network of Clinical Research Nurses & Midwives
- Contribute to the development of the Research Nurse/Midwife role in Ireland
- Receive updates and notifications about:
 - Job opportunities
 - Education, training & networking events
 - New legislation & guidelines for practice
 - What's happening around the country
- Be eligible to represent your institution as a member of the IRNN Committee
- Be eligible to attend IRNN member events, such as the Annual General Meeting, Educational Workshops and Study Days and the Annual IRNN Conference
- Be eligible to apply for funding to attend national and international conferences and seminars, or funding to provide a training event in your area
- Be eligible to receive funding to attend meetings of working groups or committees relevant to research nursing.

HOW TO JOIN IRNN OR RENEW MEMBERSHIP

Visit the IRNN website (<https://irnn.ie/>), enter the details requested and pay annual membership. Alternatively, you can request an invoice by contacting hello@irnn.ie

IRNN/HRB RESEARCH NURSE/MIDWIFE SUPPORT AND DEVELOPMENT GRANT

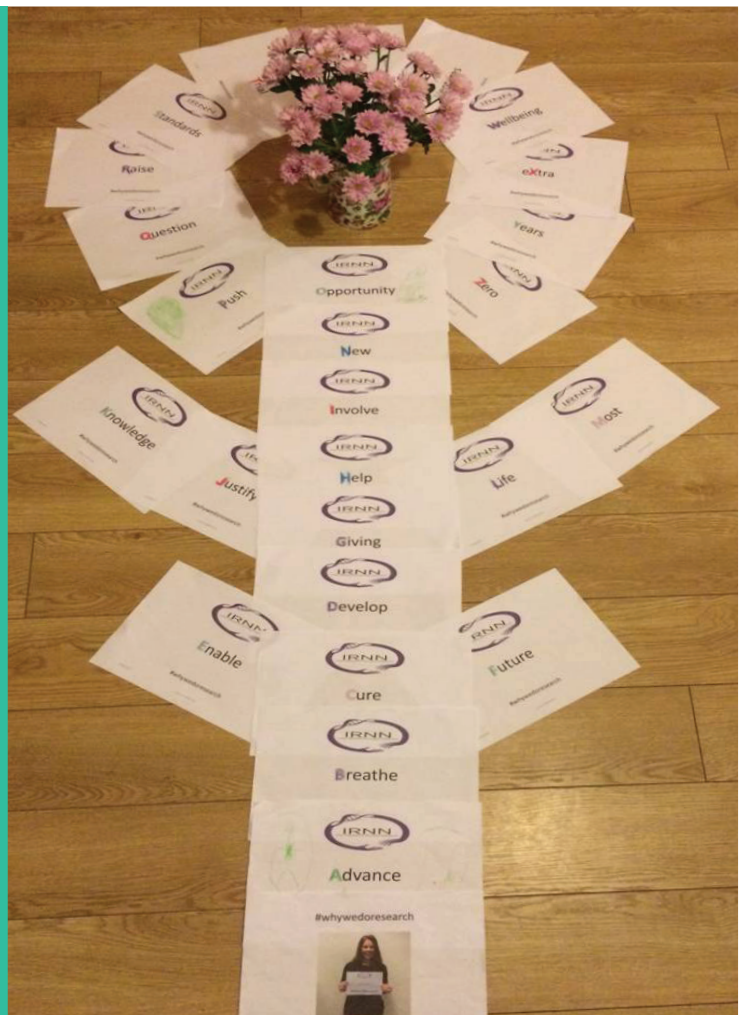
In 2017 the IRNN, in collaboration with Clinical Research Coordination Ireland (CRCI) obtained an award from the Health Research Board (HRB) to support IRNN activities and the professional development of clinical research nurses and midwives in Ireland. The success of this initiative was recognised to the extent that IRNN have now received funding for the next three years: 2018 – 2021! This award will benefit IRNN members in a number of ways, and details of how individual, or indeed groups of, IRNN members can apply for funding to support networking, professional development and quality initiatives are available on the IRNN website. Terms and conditions must apply, and support available will be proportionate to the availability of funding, the justification made in the application, and the persons previous engagement with and membership of IRNN.

#WhyWeDoResearch



#WhyWeDoResearch is an international twitter campaign aimed at raising research awareness for healthcare professionals, patients and public.

To join in just pose for a photograph holding a placard (there is one in every conference pack!) explaining in simple terms why doing research is important. Tweet your picture using the hashtag #WhyWeDoResearch and the best tweet from the conference will win a #WhyWoDoResearch t-shirt!



Follow @Irish_RNN on twitter for information on job vacancies, conferences and other events that are of interest to research nurses & midwives and all the latest updates on clinical research.

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