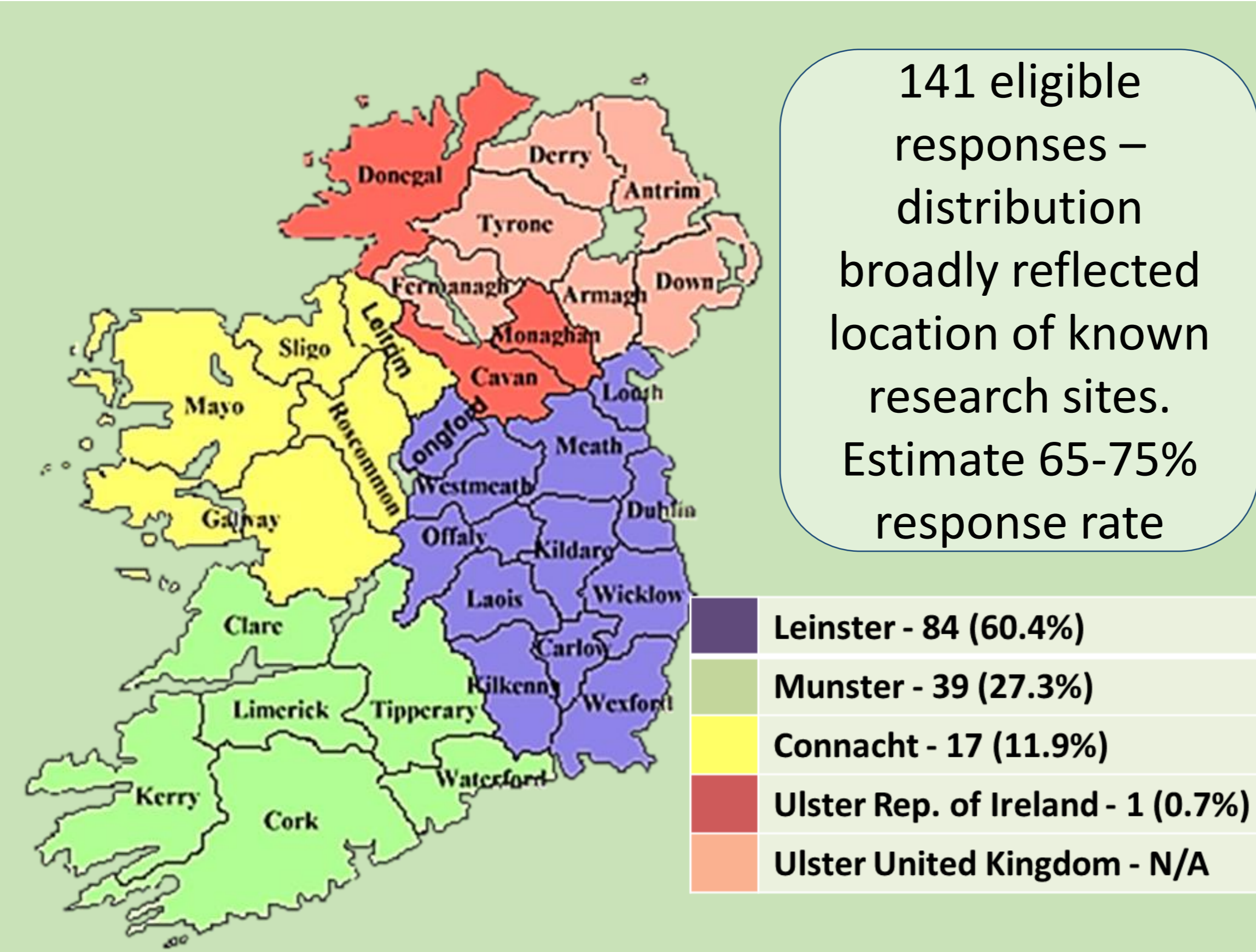


## Introduction

Nurses and Midwives have been employed in clinical research settings for over 20 years in Ireland, with a surge in the number of posts in the past 10-15 years as more research facilities opened. However, despite recommendations made in a report commissioned by the Health Research Board (NCNM 2008), there has been a failure to create a formally recognised role or career pathway for clinical research nurses or midwives (CRNs), and the disparities described in the NCNM report in 2008 have not been addressed. This poster reports data on the terms and conditions of employment of CRNs in 2019 from the IRNN 'Count me In' study. While the number of CRNs in Ireland was unknown it was estimated to be in the region of 200.



## Background to the 'Count Me In' study

The challenges faced by Irish CRNs include:

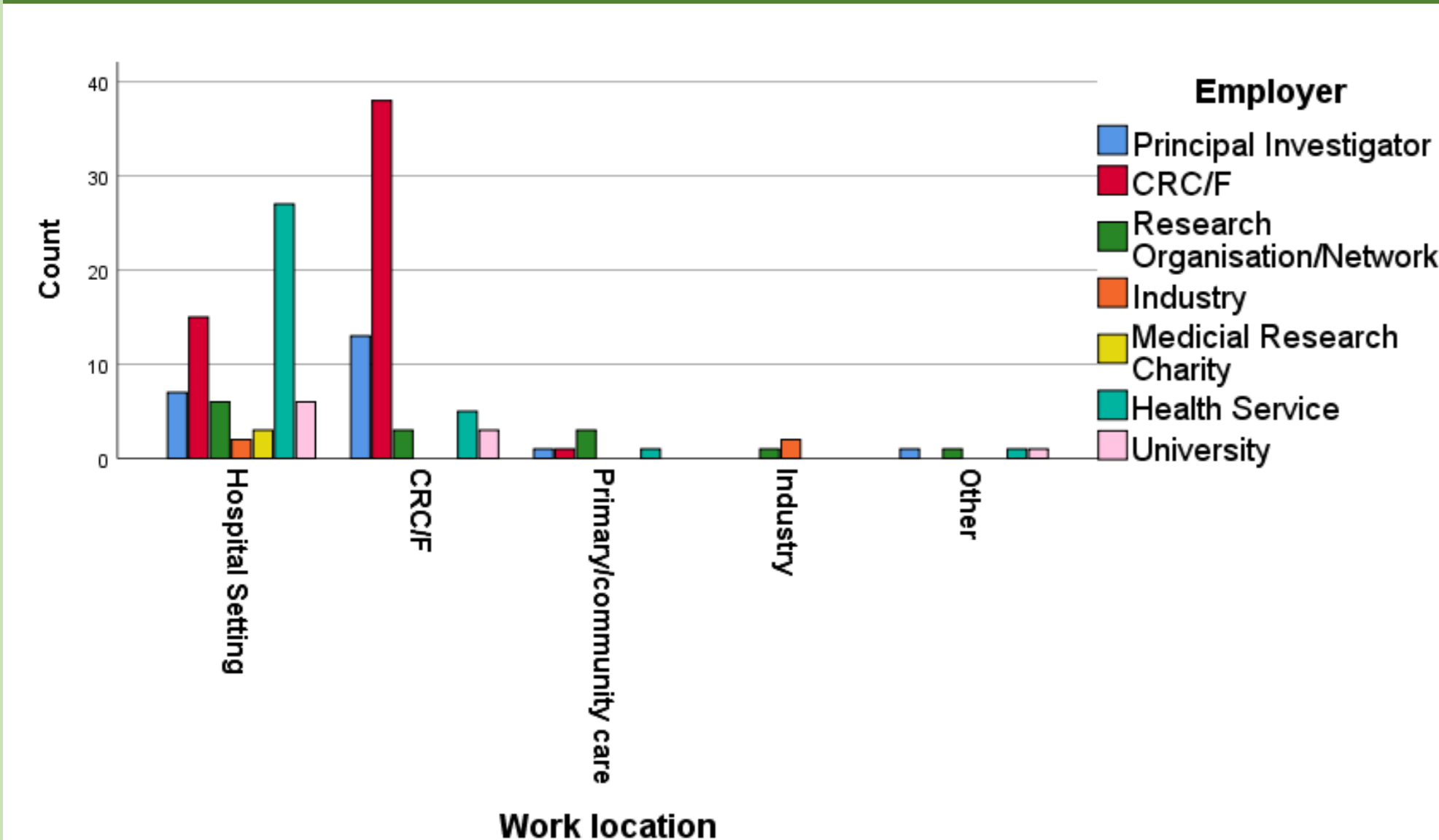
- No national approach to employment of CRNs
- Number of CRNs in Ireland unknown
- Variable job titles, responsibilities and terms of employment
- Lack of job security, educational, or career pathway
- Poor integration of CRNs into health services

The 'Count Me In' Study aimed to describe:

- The number of CRNs currently working in Ireland
- Where they are located
- Their terms and conditions of employment
- Their roles and responsibilities.

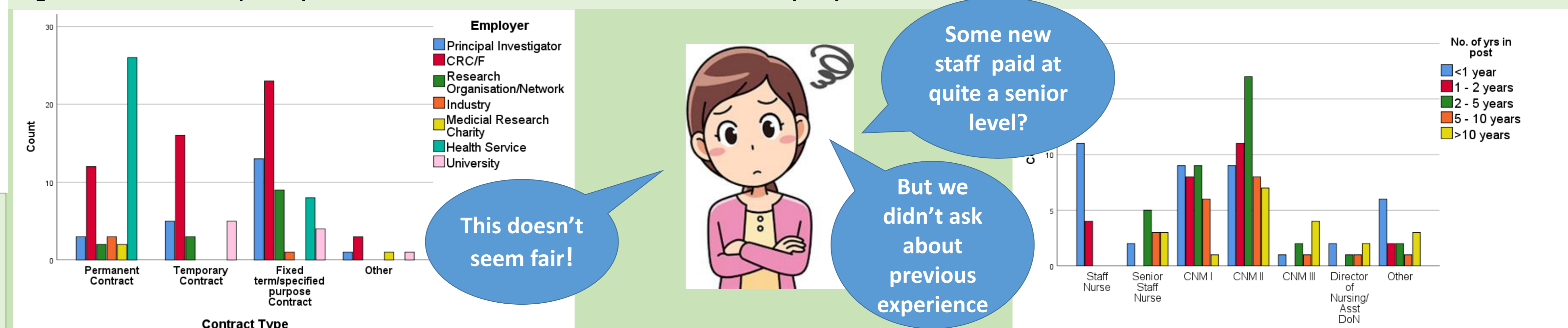
**Population:** Entire CRN workforce in Ireland

## RESULTS



## Terms and Conditions of Employment

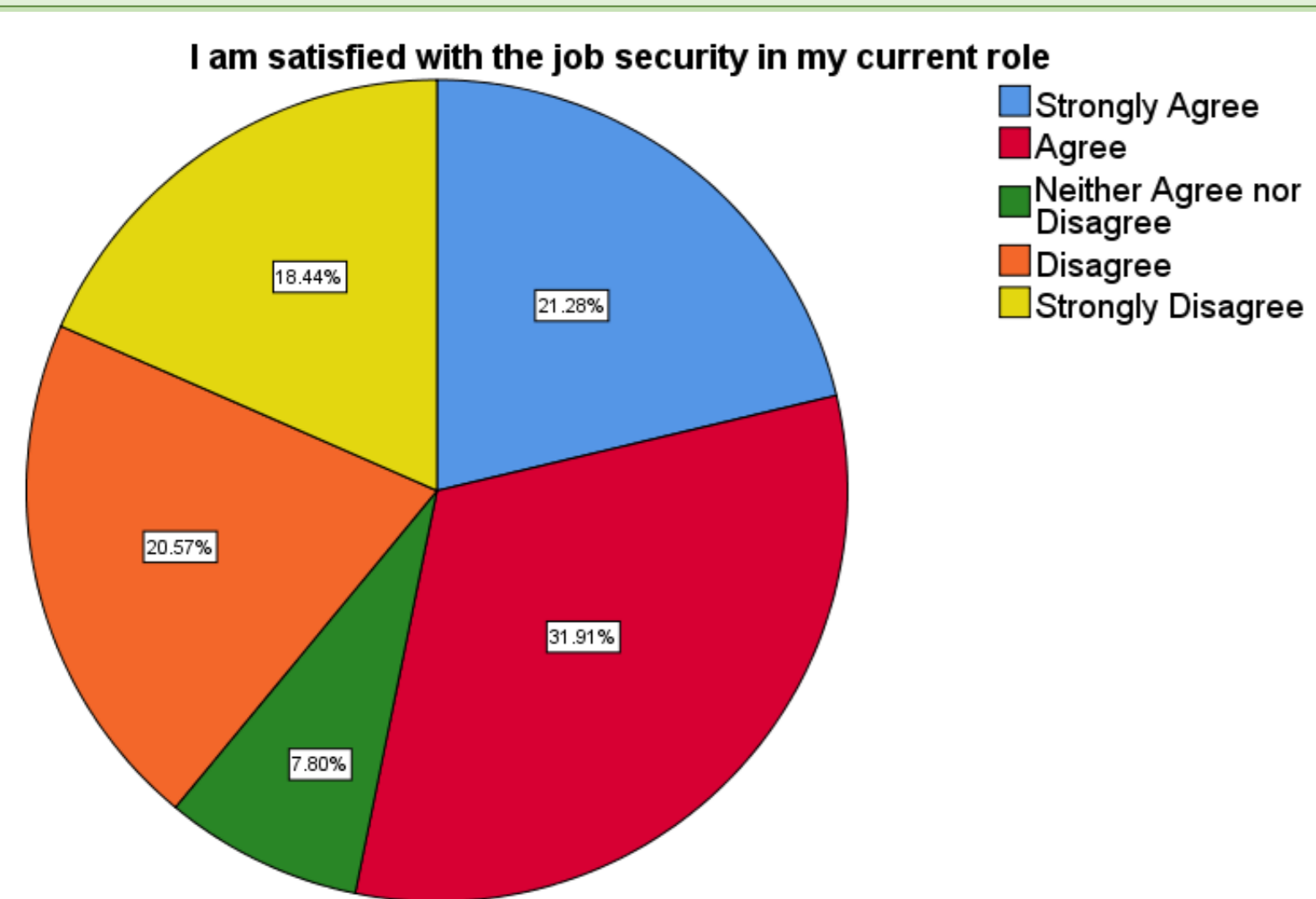
Correlation between the type of contract and employer showed that more than 72% of CRNs employed by CRFs and 82% of CRNs employed by a PI were on either a fixed term or temporary contracts, with limited scope for salary review. This in stark contrast to HSE-employed CRNs, where 76% hold permanent contracts, on incremental scales. This highlights a significant the disparity between terms and conditions of employment of CRNs.



## Work Location and Employer

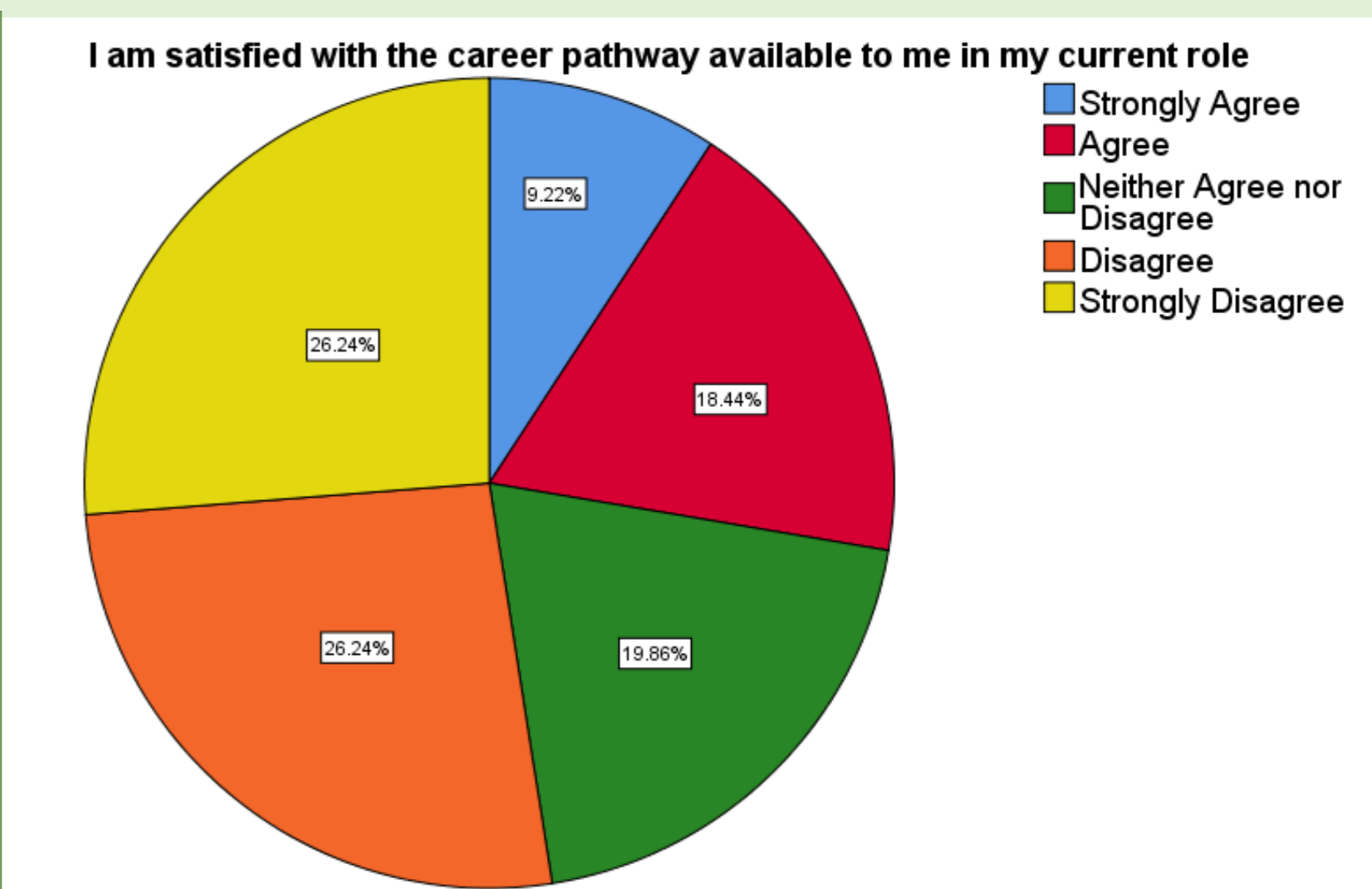
There was an even distribution of CRNs working in a either a hospital (46.81%) or a CRF (43.97%). CRNs located in these settings may not be directly employed by them – salary may be funded by Principal Investigators or external research organisations. 24.11% reported that they were employed by the HSE. This may represent oncology research nurses funded by Cancer Trials Ireland but employed through the HSE.

There seems to be little correlation between time in post and nursing grade. 46.1% of respondents were < 2 years in post, while 25.53% were 2-5 years in the role. 4.18% were in their current CRN post for 5-10 years, with 14.18% (N=20) in post for more than 10 years. This could be seen to reflect the lack of permanency and security of tenure associated with the CRN role. However, the majority of respondents (60.28%) reported that their salary scale was at Clinical Nurse Manager (CNM) 1 or CNM 2 level, with less than 20% reporting that they are employed at staff nurse level. While this might be attributed to the responsibilities of the role it also indicates a disparity between clinical research experience and employment grade, and a lack of a consistent approach to the recruitment of CRNs nationally. However, we did not ask about prior clinical or research nurse experience, which could have been factors in deciding employment level or grade.



## Satisfaction with Job Security and Career Pathway

- 53.2% reported satisfaction with job security in their current role. When this statistic is broken down it shows that 88.2% of those employed through HSE are satisfied with job security, compared to those employed by CRFs (46.4%), Investigators (27.3%) and Universities (20%).
- Satisfaction with career pathway was less divisive, with no group expressing overall satisfaction: HSE: 26.5%, CRFs: 35.2%, Investigator: 9.1% and University: 20%. This strongly indicates that the lack of security of tenure and a defined career pathway is still a major challenge for CRNs in Ireland.



## RECOMMENDATIONS AND CONCLUSION

### Recommendations: Terms and Conditions of Employment

- CRNs should be employed as core staff in permanent posts, at a grade appropriate to their roles, responsibilities, and prior clinical and research experience
  - Should be entitled to annual increments or salary review on par with other nursing services
  - Sites with sufficient staff numbers should aim for a workforce skill mix from entry level (staff nurse/midwife) through to specialist, advanced practice or management grades
  - Novice CRNs should be supported by more experienced colleagues and have a realistic expectation of career progression based on competency and experience.
- The Health Research Board (HRB) and Department of Health (DOH) should enter negotiations about the status of CRNs and consider either:
  - Agreed numbers of CRNs employed through health services (regardless of source of salary) **or**
  - CRNs employed through academic institutions should hold honorary contracts with the their affiliated hospital for professional support and development

### Conclusion

The study confirmed that there is no strategic approach to the employment of CRNs, regarding terms and conditions, security of tenure and and career pathway. The study report will be disseminated to key stakeholders, with recommendations that the findings are incorporated into future national clinical research strategies. Whilst the work environment for CRNs has improved with the establishment of CRFs, the issues described in the HRB funded NCNM report (NCNM 2008) are still evident. The lack of:

- standardisation of terms and conditions of employment
- a clear or defined career pathway
- opportunities and support for professional development

all contribute to the absence of job security. This report provides a definitive review of the current status of CRNs in Ireland, and an opportunity to acknowledge and address these anomalies.

**Limitations:** The scale of the study was limited by available timescale and resources. It is hoped that the findings lead to more in-depth studies in this area.