



IRISH RESEARCH NURSES & MIDWIVES

**Annual General Meeting and
14th National Conference
9th & 10th November, 2022
‘New Horizons: Navigating the
Road Ahead’
The Strand Hotel, Limerick**



@Irish_RNM

IRNM22





FOREWORD

On behalf of the IRNM Working Committee I am delighted to welcome you to our Annual General Meeting and Fourteenth Annual Conference.

This is our first face to face conference since 2019. When we went into a national lockdown in March 2020 we could not have imagined that it would be more than two years before we would be able to meet again in person.

The theme of the conference this year is 'New Horizons: Navigating the Road Ahead'. We have emerged from a global pandemic which impacted every aspect of our lives including healthcare delivery and clinical research. We are now fully accustomed to the 'new normal' in the conduct of clinical trials. Going forward we are cautiously optimistic, but acknowledge there will be challenges as well as solutions.

We are delighted to have expert speakers to talk about their research and also provide updates on recent changes in health research. Forum two includes speakers presenting their own research projects. Abstracts submitted for this session and for the poster presentations are included in the conference brochure .

The IRNM is now fourteen years in existence and has gone from strength to strength. This is due in no small part to the time and dedication of the working committee members. The core group volunteer their time whilst juggling work and family commitments. We also appreciate that behind every committee member there is an organisation who is supporting the IRNM indirectly.

We are extremely grateful to the Health Research Board (HRB) for continued funding of the IRNM.

The IRNM conference is not just for research nurses and midwives, we are delighted to welcome colleagues from all other health disciplines, science, industry and patient organisations.

We hope you enjoy the day and would very much welcome your comments and feedback. #IRNM22

Carole Schilling

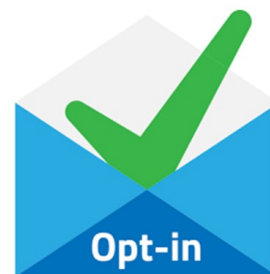
Chairperson IRNM

With special thanks to: The Health Research Board, AscensionQ, The Skin Wounds and Trauma Research Centre (SWaT) School of Nursing and Midwifery, RCSI



**SKIN WOUNDS, and
TRAUMA - SWaT
Research Centre**

IRISH CLINICAL RESEARCH NURSE AND MIDWIFE DATABASE



**Are you a clinical research nurse or midwife practicing in Ireland?
Are you listed on the CRNM Database?**

The Clinical Research Nurses and Midwives (CRNM) Database was established in 2019 as part of the Count Me In study, which aimed to describe the research nurse and midwife workforce in Ireland. The purpose of the database is have a live record of the number of CRNMs in Ireland at any time, with basic demographics about work locations, in order to allow IRNM to advocate for your professional development and support at a national level.

The database is maintained securely by the IRNM committee. While you may be contacted by IRNM for information or research purposes your personal data will not be shared without your permission. You can alter your personal profile at any time, or opt out if you no longer wish to be included in the database.

For more information visit the IRNM website: <https://irnm.ie/crn-database-submission/>

IRNM EDUCATION & TRAINING MODULES



Did you know that IRNM now offer online training modules for members?

Topics available include Study Feasibility , Social Media, Participant Recruitment and Informed Consent, and blood sampling. More presentations will be added in due course, and members are asked to consider submitting further topics. Certificates of completion are available, and where possible the modules are accredited for professional development.

To access the modules, create a personal log-in on the IRNM website.

For further details visit: <https://irnm.ie/resources/>

IRNM COMMITTEE MEMBERS

To learn more about the IRNM Committee please visit our website:

<https://irnm.ie/about-irnm/>



Ms. Carole Schilling, Registered General Nurse; Postgraduate Certificate Nursing (Clinical Research); MSc Nursing.

IRNM Chairperson

Current Role: Clinical Research Nurse RCSI/Beaumont Hospital

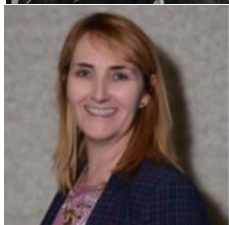
Contact: caroleschilling@beaumont.ie



Dr. Hazel A. Smith, Registered Midwife; PhD.

IRNM Communications Officer

Current Role: Honorary Research Midwife, James Paget University Hospitals NHS Foundation Trust



Dr. Veronica McInerney, RGN BNSc, H Dip Onc, MSc, Dip PM PhD.

IRNM Treasurer

Current Role: Administrative Director, Advanced Therapies and Cancer Group, HRB Clinical Research Facility, University of Galway

Contact: veronica.mcinerney@universityofgalway.ie



Ms. Deirdre Hyland, Registered General Nurse; Registered Midwife; MSc Nursing.

IRNM Principle Investigator

Current Role: Director of Research Nurse Education at RCSI CRC

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Ms. Louise A. Barry Registered General Nurse, MSc Health Sciences .

Current Role: Lecturer, Department of Nursing and Midwifery, University of Limerick

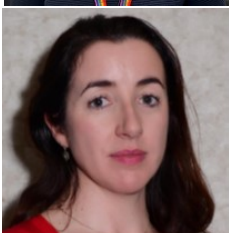
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Ms. Sharon Carr, Registered General Nurse,

Current Role: Lead Nurse, Educational lead NI Clinical Research Facility Belfast

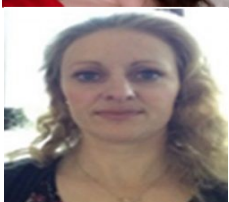
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Ms. Derval Reidy, Registered General Nurse; MSc. Nursing

Current Post: Assistant Director of Nursing at the Wellcome Trust/ HRB CRF at St James's Hospital.

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Ms. Sabina Mason, Registered General Nurse;

Current Role: Critical Care Research Nurse Coordinator

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Ms. June Considine, Registered General Nurse and Registered Children's Nurse;
MSc. Nursing.
Current Role: Clinical Nurse Manager, Department of Paediatrics and Child Health
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Ms. Siobhan Egan, Registered General Nurse /Registered Nurse Intellectual Disability; MSc.
Current Role: Clinical Nurse Manager 2 at Health Research Institute, UHLG
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Mr. Seán Kearns, Registered General Nurse; PG Certificate Clinical Research
Current Role: Clinical Research Nurse in St Vincent's University Hospital
Contact: sean.kearns@ucd.ie



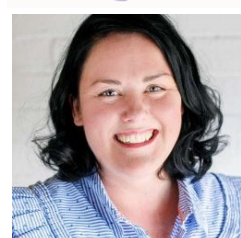
Ms. Elaine Conway, Registered General Nurse; MSc. Nursing
Current Role: Senior Research Nurse at Clinical Research Unit, University of Limerick
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Ms. Gillian Corey: Registered General Nurse.
Current Role: ALERT Clinical Research Nurse (CNM2) .
Contact: aislingmurphy@ucc.ie



Ms. Danielle Dawson: Registered General Nurse;
Current Role: Lead Research Nurse, Nurse Manager, NI Clinical Research Facility Belfast
Contact: danielle.dawson@belfasttrust.hscni.net



Ms. Simone Walsh: PMP, RGN, MSc Public Health, BSc Nursing Management, PG Cert medical Toxicology, FFNMRC SI.
Current Role: Senior Research Projects Manager of the RCSI Skin Wounds and Trauma (SWaT) Research Centre
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Annual General Meeting and Master Class

Wednesday 9th November 2022

The Strand Hotel Limerick

13.30-14.00	Registration & Refreshments	Level 6 Break Out Area
14.00-15.00	Annual General Meeting (Open to IRNM Members Only) <ul style="list-style-type: none"> • Update on IRNM Activities – Ms Carole Schilling, Chairperson • Communications Update – Dr. Hazel A Smith, Communications Officer • Treasurer’s Report – Dr. Veronica McInerney -Treasurer • HRB Grant Update – Dr. Hazel A Smith, HRB/IRNM Grant Sub-Committee Member • Proposals • Any Other Business 	City View & Harris Suite
15.30-17.00	Mindfulness Workshop Ms Ciara McCullough, The Mindset Coach Open to both IRNM and non-IRNM members	City View & Harris Suite
19:00	Evening reception and meal	City View & Harris

SPEAKER PROFILE: MASTER CLASS



Ms. Ciara McCullough, Mindset Coach

Twitter: @MindsetCoachIRL

Website: <http://www.themindsetcoach.ie/>

Ciara McCullough is a Social Activist, Mental Health Campaigner & Mindset Coach. In her own words, Ciara says " I share my story so loudly, so that others don't have to suffer in silence." Ciara shares her story in order to promote positive mental health and empowers people to discover the power of their mind.

Her journey of self discovery and personal development started when she was 22, just after her third attempt of suicide. The turning point in her story was when she discovered that she had a choice. This was the catalyst of real change and transformation. Since then, Ciara has developed an unshakable mindset and now shares her story to inspire others to know that this is possible for them too. Ciara has worked alongside some of Ireland's leading mental health organisations such as : Mental Health & Well Being Summit, Cycle Against Suicide and See Change. As a qualified Mental Health & Wellbeing Coach, Ciara now endeavours to not only share her story, but to work with clients to educate them about their mind, how it works and how to harness it's potential for growth.

CONFERENCE AGENDA

09:00-10:00	Registration & Refreshments: Poster Viewing	
10:00-10:10	Welcoming Remarks: Ms Carole Schilling Chairperson IRNM)	
Forum 1	Chairperson: Dr. Mairead O'Driscoll Chief Executive Health Research Board (HRB)	
10.15-10.30	Opening Address	Ms Mairead Cowan Director of Nursing, Medicine Directorate, University of Limerick Hospital Group
10.30-11.00	Dr Eoghan De Barra: Consultant in Infectious Diseases, Beaumont Hospital	
11.00-11.30	Ms Sabine Lindén (RN): Office for Clinical Trials, Research and Education Department, Academic Hospital, Uppsala, Sweden	
11.30-12.00	Refreshments and Poster Viewing	
Forum 2	Chairperson: Dr. Veronica McInerney Administrative Director, Advanced Therapies and Cancer Clinical Research Group, HRB Clinical Research Facility Galway	
12:05-12:20	A Survey Of The Knowledge, Awareness And Practices Of Irish Ambulance Practitioners Towards Patient's Thermal Comfort During Transport To The Emergency Department.	Mr Damien Gaumont, Advanced Paramedic, Critical Care Paramedic Trainee, National Ambulance Service, Critical Care And Retrieval Service
12:20-12:35	The DANCE Factors: A Review Of The Clinical Research Training And Education Needs Across NHS Lothian	MS Danielle Marlow, Development Coordinator, University Of Edinburgh
12:35-12:50	The Impact Of A Visual Sun Protection Campaign On Sun-Related Attitudes And Behaviours Of Healthcare Workers- A Nursing Initiative	Ms Evelyn Power, Skin Cancer Clinical Nurse Specialist, University Hospital Limerick
12:50-13:05	A Physiotherapy And Nurse Led Transition To Home Intervention For Older Adults Following Emergency Department Discharge: A Pilot Feasibility Randomised Controlled Trial	Ms Gillian Corey, Clinical Research Nurse CNM 2 ALERT, Emergency Department, University Hospital Limerick
13:05-13:20	Research Transition - Bridging The Gap Between Research & Clinical Care	Ms Lorraine Hodson, Head Of Nursing Research & Innovation, Great Ormond Street Children's Hospital
13:20-13:35	The Psychometric Properties Of The Workplace Resilience For Clinical Research Nurses During The Severe COVID-19 Pandemic	Ms Wen Wen Chang, Clinical Research Nurse, NP, National Taiwan University, The School Of Nursing
13:35-14:20	Lunch and Poster Viewing	
14:20-14:30	Launch of the IRNM Orientation Pack (version 4.0)	
Forum 3	Chairperson: Ms Louise A. Barry Lecturer, Department of Nursing & Midwifery, University of Limerick	
14:35-15:05	The Psychological Care of Patients with Stevens-Johnson Syndrome (SJS) and Toxic epidermal necrolysis (TEN) – Building a Research Project.	Prof Pauline O'Reilly: School of Nursing & Midwifery University of Limerick
15:05-15:35	Public and Patient Involvement in Genomics	Ms Nuala Ryan Chair, Nicolaides-Baraitser Syndrome (NCBRS) Worldwide Foundation
15:35-15:45	NREC update and comments	Dr Emily Vereker Head of National Office for Research Ethics Committees (NREC)
15:45-16:05	HRB-NCTO update and comments	Dr Fionnuala Keane Manager, HRB, National Clinical Trials Office (NCTO)
16:05-16:15	Chairperson's remarks: Presentation of prizes and close of conference	Ms Carole Schilling Chairperson IRNM

CONFERENCE SPEAKERS



Ms. Mairéad Cowan, Director of Nursing University Limerick Hospital Group



@maireadoconnel3; @magnetulhg

Ms. Mairead Cowan trained as a nurse in St. James Hospital Dublin and has worked in the Irish Health Service for 30 years. During this time, she has held various roles which included Staff Nurse, CNM2, CNS, Research Development Project Officer, Assistant Director of Nursing. She has been in her current role as Director of Nursing UL Hospital Group for the past 7 years, her current brief is DON Cancer Directorate and Magnet 4 Europe Lead

Educational Background: H Dip oncology Nursing and MSC Nursing (University College Dublin). She is adjunct Professor University of Limerick and is a member of Professional Doctorate Course Board Department of Nursing, University of Limerick.

Her interests include staff development, talent management, development of specialists & advanced practice nursing roles, workforce planning and build research culture and capacity within nursing.



Dr Eoghan de Barra , Senior Lecturer
Dept. of International Health and Tropical Medicine
Royal College of Surgeons in Ireland
Consultant in Infectious Diseases & General Internal
Medicine, Beaumont Hospital, Dublin.



@EoghandeB

Dr. Eoghan de Barra received his medical degree in Dublin and proceeded to gain specialist training in Infectious Diseases and General Medicine in Ireland and South Africa. In 2011 he took a post as Research Fellow and Lecturer in the department of Tropical Medicine and International Health at the Royal College of Surgeons in Ireland (RCSI), Dublin and conducted malaria vaccine research in Dublin and at the University of Oxford. In 2014 he took up a post at Imperial College NHS Trust, London as a Consultant in Infectious Diseases and General Internal Medicine, where he was the clinical lead for the OPAT programme, a site lead for Neuro-Infection, a regional lead for TB including large numbers of MDR TB and led the Trust's Ebola response. In 2017 he returned to Dublin taking up a post as Consultant in Infectious Diseases and Senior Lecturer at Beaumont Hospital / RCSI. He is past secretary of the Infectious Diseases Society of Ireland, current UEMS-ID national representative and principal investigator for several COVID-19 clinical trials and vaccine studies



Ms. Sabine Lindén , RN MSSc Office for Clinical Trials, Research and Education Department, Academic Hospital, Uppsala, Sweden

Ms. Sabine Lindén has expertise in clinical research nursing. She is the national project lead for a working group which aims to establish national competency documents for CRNs. She is the president for the national Swedish CRN network and worked with creating, implementing, and evaluating introductory programs for newly hired CRNs. Finally, she leads the organizing committee for the national Swedish CRN conference

CONFERENCE SPEAKERS

	<p>Dr Pauline O'Reilly, Senior Lecturer in the Department of Nursing & Midwifery University of Limerick</p> <p>  @PaulineOReilly7; @NursingMid_UL; @EHSFacultyAtUL </p>
<p>Dr Pauline O'Reilly is a Senior Lecturer in the Department of Nursing & Midwifery. Prior to this, she was Head of Department from January 2012 until June 2017. Within her career she has been involved in clinical nursing practice, management, research, and lecturing. Dr O'Reilly's teaching career commenced in 1993, where she taught in a School of Nursing. In 2000, she became a faculty member of the Department of Nursing and Midwifery in the University of Limerick. During this time, she has been a Course Director for the Higher Diploma in Midwifery, the BNS, the BSc (Intellectual Disability) and BSc (Mental Health) programmes. She has over twenty years' experience of lecturing in the University of Limerick. Dr O'Reilly teaches across a range of programmes with a particular focus on research methodologies.</p> <p>She has been nominated four times for an excellence in teaching award. In addition, she was awarded the Dr Ledwith Gold medal for the highest academic achievements in nursing registration exams.</p> <p>She was the Principal Investigator in a HRI funded project viz; 'The Development of a Psychological Intervention for Patients with Stevens-Johnson syndrome'. Recently, Dr O'Reilly's project titled 'The design and psychometric evaluation of a health-related quality of life outcome measure (QoLTEN) for adults with Stevens-Johnson syndrome/toxic epidermal necrolysis (SJS/TEN)' was selected for funding to the value of €356,000 from the HRB Investigator Led Projects 2022 scheme. As Principal Investigator, she will lead on this project with both national and international experts in the area.</p>	
	<p>Ms Nuala Ryan , Chair Board of Trustees, NCBRS Worldwide Foundation</p> <p>  @ncbrsworldwidefoundation </p>
<p>Ms. Nuala Ryan has experience as a HPRA patient advisory committee member, member of HIQA Steering Committee for public engagement on use of Health information, patient advisor on DASSL committee - research project related to health information system, member of HSE Research and Development (R&D), Patient and Public Involvement (PPI) in Research Advisory Panel , member of IEHG-UCD Working Group on Incidental findings, panel-list on multiple patient panel discussions, member EUPATI National Platform, Ireland.</p> <p>Areas of interest include, awareness raising on the importance of genetic research in early diagnosis and treatment of rare disease, advocate for research into Nicolaides-Baraitser syndrome (NCBRS), advocate for the development of an integrated Irish E-Health Patient Record, involving patients in clinical research planning/design and patient outcome measures.</p>	

CONFERENCE SPEAKERS

	<p>Dr Emily Vereker , Head of Office, National Office for Research Ethics Committees</p> <p> @NREC_Office; 2. @emverek</p>
<p>Dr Emily Vereker is the Head of National Office for Research Ethics Committees in Ireland and has oversight of a high performing professional team that underpins the national system for research ethics review, now an integral component of the Irish infrastructure for health research.</p> <p>Prior to taking up this interim role, Emily joined the Health Research Board in January 2019 as Programme Manager of the Secretariat to the Health Research Consent Declaration Committee, a statutory body appointed by the Minister for Health under the Health Research Regulations.</p> <p>Prior to her career in health research regulation, Emily was the Senior Patents & Licensing Manager in Trinity College Dublin, with specific case management role in life sciences. She gained over 10 years of experience in intellectual property portfolio management, technology commercialisation and collaborative academic-Industry agreements. Prior to working in technology transfer, Emily spent over 5yrs as a Postdoctoral researcher at the Montreal Neurological Institute, McGill, Canada. She is a graduate of National University of Ireland, Maynooth and received her doctorate from Trinity College Dublin.</p>	
	<p>Dr Fionnuala Keane , Manager, HRB NCTO</p> <p> @HRB_NCTO</p>
<p>Dr Fionnuala Keane is the manager of the National Clinical Trials Office. Fionnuala 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 working in a variety of clinical research roles, including clinical trial, monitoring, project management, pharmacovigilance and programme lead.</p> <p>Fionnuala was appointed to the role of Development Lead for the HRB CRCI in May 2014 to develop a 5-year business plan in line with the HRB strategic objectives, working in close collaboration with the CRF/C directors. Following a successful funding application for the development and delivery of HRB CRCI, Fionnuala then served as its Chief Operating Officer from May 2015 to April 2021 to the end of its funding award. From May to July 2021 Fionnuala worked as a Project Manager with UCC on the EU Response and WHO Covid 19 trials for Ireland. In August 2021, after a successful funding application by the Host Institution, UCC, for the new HRB National Clinical Trials Office (HRB NCTO), Fionnuala was appointed as Manager of the HRB NCTO to lead the team on its programme of work as a central point of contact for Clinical Research in Ireland and she continues in this role to date.</p>	

FORUM CHAIRPERSONS



Dr Mairead O'Driscoll , CEO of the Health Research Board



@hrbireland

Dr Mairéad O'Driscoll is the CEO of the HRB, the lead agency in Ireland for health research. Before being appointed CEO, she held other senior roles in the HRB including Director of Research Strategy and Funding with responsibility for a budget of approx. €40 million pa and awards portfolio of approx. €150m, and Head of Policy, Evaluation and External Relations. She worked as a researcher in academia and industry before moving into policy research, first with the Royal Society in London and then with the Wellcome Trust. She also spent time in South Africa where she worked on the development of a national research and technology foresight study. She is a member of several national and international groups, and is a graduate of Trinity College, Dublin and the University of London.



Dr. Veronica McNerney, Administrative Director of the Advanced Therapies and Cancer Research Group, HRB Clinical Research Facility Galway



@CrfgHrb

Dr Veronica McNerney is the Administrative Director of the Advanced Therapies and Cancer Research Group, HRB Clinical Research Facility Galway. Her focus is to improve health outcomes through the delivery of clinical trials using the best clinical research standards.

Veronica's expertise lies in research project development and the management of all clinical research activities required to successfully execute clinical and translational research projects from both the 'sponsor' and 'site' perspective.

With a special interest in First in Man, Cell Therapy Research and Quality of Life research, enhancing the knowledge of future Clinical, Nursing and Scientific leaders is a core principle to Veronica's clinical and research practice. She teaches on undergraduate and post graduate courses in Nursing, MSc Clinical Research, MSc Regenerative Medicine and MSc Cell Manufacturing at NUI Galway and is co-author on several peer reviewed paper

FORUM CHAIRPERSONS



Ms. Louise A Barry, Lecturer, Department of Nursing and Midwifery, University of Limerick



@NursingMid_UL

Louise graduated from the University of Limerick (UL) in 2007 with a BSc in General Nursing. She has a higher diploma in the rehabilitation of the older person, a certificate in nurse prescribing and an MSc of Health Sciences (Nurse/Midwifery Education). She has worked in various capacities across the public and private sector in care of the older person services across the mid-west. She is also a registered nurse tutor who worked as a lecturer in the University of Limerick for 4 years. Louise has a keen interest in ageing research. She is a PhD Candidate with the Nursing and Midwifery Department in University of Limerick.

SINCERE THANKS

The IRNM wish to sincerely thank our Forum Chairpersons, Invited Speakers and Abstract Presenters both Oral and Poster who gave of their time and expertise to make this conference possible.

Thank you also to the Health Research Board, for their ongoing supporting



Research Forum 1:	Damien Gaumont , Advanced Paramedic, Critical Care Paramedic Trainee, National Ambulance Service, Critical Care and Retrieval Service	
Abstract Title:	A Survey of the Knowledge, Awareness and Practices of Irish ambulance practitioners towards patient's Thermal Comfort during transport to the Emergency Department.	
Author/s:	Damien Gaumont	Email: damien.gaumont@hse.ie Twitter handle: @DamienGaumont
<p>Background: Being cold while injured increases anxiety and the perception of pain. The value of Thermal Comfort (TC) has been recognised by nursing theorists. Ambulance practitioners' education is centred around emergency actions, not prolonged care. There is paucity in the prehospital literature and education, of strategies to reduce heat loss and little attention is given to patient TC.</p> <p>Aim: This study attempts to investigate the Irish National Ambulance Service (NAS) practitioners' knowledge, awareness, and practices to cater for their patient's TC.</p> <p>Methods: This was a mixed methods study of Knowledge, Attitude and Practice (KAP) of TC in ambulance personnel.</p> <p>Results: A total of 110 participants surveyed. Their feelings about their education on TC was divergent and 96% supplemented their knowledge with external education. Most participants feel that they have good awareness of patients' need for TC (95%) and that TC is an integral part of their practice (96%). A total of 34% feel that they don't have sufficient equipment to deal with thermoregulation issues.</p> <p>Discussion: Emergency actions rather than nursing care is the background of prehospital education. The increased diagnostics and treatment possibilities available may have distracted from human needs. Evidence suggests a need to review the techniques, strategies and equipment to improve patient satisfaction and prevent iatrogenic hypothermia, in particular to critically ill. The epistemology of the findings should be used to design curricula, strategies and equipment. A new blanketing method is proposed.</p> <p>Conclusions: For the majority of NAS practitioners patients' TC is at the forefront of their care. There is a significant divergence in the perception of knowledge of the maintenance of TC. There may be some confusion about the harm suffered from being cold. Practitioners are not satisfied with the equipment available to manage patients' TC and thermal emergencies. Further research is required.</p>		
Research Forum 2:	Danielle Marlow , Development Coordinator, Edinburgh Clinical Research Facility	
Abstract Title:	The DANCE Factors: A Review of the Clinical Research Training and Education Needs across NHS Lothian	
Author/s:	Danielle Marlow	Email: danielle.marlow@ed.ac.uk Twitter handle: @dumfrieslass
<p>Clinical research makes a vital contribution to the NHS and patients by improving health outcomes and quality of care,^{1,2,3} enhancing the resilience and growth of the NHS workforce,^{4,5,6,7} and increasing the economy.⁸ This research is underpinned by a diverse range of professionals, and the Government's commitment to embed research in the NHS means that research should become a part of everyone's day-to-day role in the NHS, and that this workforce has the skills and opportunities to meet the rising ambitions for UK clinical research.</p> <p>A scoping review was undertaken which focussed on identifying the skills, training and development challenges faced by staff conducting clinical research in NHS Lothian and determine the system wide barriers that lead to these challenges and how the training and development environment might be shaped to address and overcome them.</p> <p>"Saving and improving lives" aims to develop a "sustainable, supported research delivery workforce" – offering rewarding opportunities for all staff and exciting careers for those from all professional backgrounds who lead research⁹. Given this ambition and the findings from the clinical research workforce in NHS Lothian, the following DANCE factors were recommended to facilitate the delivery of this aim: Develop current and future staff; Attract new talent to NHS Lothian; Nurture existing staff to be the best they can and show future employees that staff development and wellbeing are priorities for NHS Lothian; Communicate the fantastic work that is being undertaken by teams, showcasing; Enable all staff to have agency and power over their own learning, progression, and career development.</p>		

Research Forum 3:	Evelyn Power , Skin Cancer CNS, University Hospital Limerick	
Abstract Title:	The Impact of a Visual Sun Protection Campaign on Sun-Related Attitudes and Behaviours of Healthcare Workers- A Nursing Initiative	
Author/s:	Ms Evelyn Power, Skin Cancer CNS, Dr Emma Porter, Dermatology Registrar, Ms Michelle Dolan, Irish Skin Foundation, Dr Sinead Field, Consultant Dermatologist	Email: Evelyn.power@hse.ie Twitter handle: @EvelynPower7

Skin cancer is the most common cancer in Ireland, with over 13,000 cases diagnosed annually¹.

Prevention remains a cornerstone of the National Cancer Strategy². The COVID-19 pandemic prompted re-imagining of traditional health promotion. Working with the Irish Skin Foundation (ISF), we created a novel video-based sun protection campaign and explored how digital health promotion initiatives could support adoption of healthy sun protective behaviours.

Methods: This mixed methods study incorporated a focus group followed by a two-part online survey. It was open to all staff of the UL Hospital Group. Five short animated videos were created and displayed across six hospitals and hospital social media channels from June - September 2021. Surveys comprised of detailed questions on attitudes and behaviours regarding sun exposure.

Results: Of 4500 staff invited to participate, 857 completed part 1 and 704 completed part 2, 90% of respondents in each were female. Those who completed part 2, 64% reported the campaign improved how they protect their skin. 79% reported raised awareness of skin cancer, 65% said it influenced them to discuss sun protection with others.

Conclusion: The campaign had a positive impact on UL Hospital Group staff members' attitudes towards skin protection and skin cancer awareness. Healthcare workers represent a unique cohort for health promotion, as opportunity is created for further promotion of messaging to patients.

Research Forum 4:	Gillian Corey , Clinical Research Nurse CNM2 ALERT49, Emergency Department, University Limerick Hospital	
Abstract Title:	A Physiotherapy and Nurse Led Transition to Home Intervention for Older Adults Following Emergency Department Discharge: A Pilot Feasibility Randomised Controlled Trial	
Author/s:	Gillian Corey, Mairéad Conneely, Aoife Leahy, Margaret O' Connor, Ahmed Gabr, Anastasia Saleh, Blessing Okpaje, Íde O' Shaughnessy, Aoife McCarthy, Aoife Synott, Lorna Ryan, Louise Barry, Ida Carroll, Anne Griffin, Siobhán Leahy, Dominic Trépel, Damian Ryan, Katie Robinson, Rose Galvin.	Email: Gillian.corey@hse.ie Twitter handle: @gilliancorey6

Background: Older adults frequently attend the emergency department (ED) and experience high rates of adverse outcomes following ED presentation including functional decline, ED re-presentation and unplanned hospital admission.

Aim: Examine the feasibility of implementing a 6-week transitional intervention delivered by nursing and physiotherapy both face to face and via telephone support for older adults discharged from the ED (ED PLUS).

Methods: Older adults presenting to the ED with undifferentiated medical complaints and discharged within 72 hours were computer randomised in a ratio of 1:1:1 to deliver usual care, Comprehensive Geriatric Assessment (CGA) in the ED, or ED PLUS. ED PLUS is an evidence based and stakeholder informed intervention to bridge the care transition between the ED and community by initiating a CGA in the ED and implementing a six week, multi component, self management programme in the patient's own home. Feasibility (recruitment and retention rates) and acceptability of the programme were assessed quantitatively and qualitatively. Functional decline was examined post-intervention using the Barthel Index. All outcomes were assessed by a research nurse blinded to group allocation.

Research Forum 5:	Lorraine Hodsdon , Head of Nursing Research & Innovation, Great Ormond Street Children's Hospital	
Abstract Title:	Research Transition - Bridging the Gap Between Research & Clinical Care	
Author/s:	Lorraine Hodsdon, Waffa Girshab, Laura Chiverton	Email: Lorraine.hodsdon@gosh.nhs.uk Twitter handle: @RainytheGirl
<p>Background: Our vision is for research to be fully integrated into every aspect of the hospital, In 2018, staff feedback highlighted that ward teams felt underprepared and under-resourced to integrate these early access or newly licenced programmes into their existing service safely.</p> <p>Objectives:</p> <p>1, To empower ward based nursing staff to deliver new clinical treatments and build research capacity through outreach research education.</p> <p>2, To enhance the participant journey when transitioning from a research study back into clinical care.</p> <p>Implementation: A research hospital transition model was developed and implemented to bridge the gap between research and clinical care</p> <p>Outcome & Impact : Since 2019 successfully transitioned eight clinical trials into a compassionate use programme pathway building skills and research capacity within clinical areas and enhancing patient experience. Appointed one joint research nurse/CNS position to deliver a phase 1 clinical trial for a metabolic condition. The trial ended in 2021 with a phase 3 trial now underway fully embedded within the clinical service with the whole team confidently and competently delivering the research protocol alongside clinical care.</p> <p>The CRF led the development of the early access programme for patients with a metabolic condition, training the clinical nursing to safely deliver this intrathecal research treatment in the clinical service.</p> <p>Implications for nursing practice : This initiative builds research capability and capacity across nursing teams through education, outreach leadership and empowering staff to develop research skills. Future include working with patient infusion lounge to deliver infusion studies in partnership with clinical care.</p>		
Research Forum 6:	Wen-Wen Chang , Clinical Research Nurse, NP, The School of Nursing, National Taiwan University,	
Abstract Title:	The psychometric properties of the workplace resilience for clinical research nurses during the severe COVID-19 pandemic	
Author/s:	Wen-Wen Chang, Dr. Gordon Hill, Professor. We-Yu Hu	Email: d04426002@ntu.edu.tw Twitter handle: @changwenwen2
<p>Aim and objectives: Developing the psychometric properties on the resilience at work of clinical research nurses.</p> <p>Background: The escalation of community-transmitted infection of the Coronavirus (COVID-19) pandemic occurred in 2021 impacted on a number of areas of clinical research nurses' work. This study explored emotional labour, job satisfaction and resilience.</p> <p>Design: We conducted an on-line questionnaire survey using a cross-sectional design. Participants in Taiwan were recruited from May to August 2021 by using purposive and snowball sampling. Methods: We firstly developed an online questionnaire to investigate the work satisfaction of the pandemic on CRNs' emotional labour and its resilience. We used exploratory factor analysis to extract the construct. Principal Component Analysis and choose Varimax method.</p> <p>Results: We analysed data from 56 participants. The characteristics of the participants were mainly female, and work experience for more than 7 years. There were a total of 18 items collected out of 30 original items. Eighteen items were analysed, using exploratory factor analysis, and principal component method with varimax. This process identified two subgroups, factor naming as "Present the positive Personality "and "Exert the professional self-efficacy "</p> <p>Conclusions: This study aimed to explore the workplace resilience of CRNs during work adversity under the COVID-19 pandemic. Two factors of the resilience scale presented CRN's characteristics and professional abilities or perception of self-efficacy.</p> <p>Relevance to clinical practice: It is proposed that the results of this study should be incorporated into training and education systems on CRNs' professional competency to sustain the work tasks in the post-pandemic era</p>		

Poster Abstract 1	Kate O'Connell , University College Cork/Cork University Hospital	
Abstract Title:	Women's Cancer Survivorship: The LYSA (Linking You to Support and Advice) Trial	
Author/s:	O'Connell K1,2*, Raigal L1, Kearns N3, Davis A2,4, Bermingham K2,4, O'Reilly, S1,2,5, Corrigan, M6, Coulter, J7,8, Collins, D2, Cleary, V2,7, Cushen, S9, O'Grady, A4, Byrne, F4, O'Neill, D2,4, Flavin, A10, Murphy A11, Dahly D12,13, Palmer B12,13, Connolly RM1,2**, Hegarty J3**.	Email: kateoconnell@ucc.ie Twitter handle: @KateOCon11
<p>Improvements in surveillance and treatments for cancer has resulted in increasing numbers of individuals living with and beyond a cancer diagnosis (1). The National Cancer Strategy 2017 (2) identified this cohort as priority; however few cancer centres nationally have dedicated survivorship clinics established. The Irish Cancer Society's Women's Health Initiative is supporting pilot studies in Dublin and Cork to address this gap.</p> <p>The LYSA study is a single centre randomized controlled trial (parallel arms) assessing the feasibility of introducing a nurse-led pilot clinic (complex intervention) in CUH, for women with HR-positive breast and gynaecologic cancer post primary curative therapy (NCT05035173, n=200). The intervention arm undertake electronic patient reported outcome (ePRO) assessment at baseline, and 2, 4, 6, 8, 10, 12 months. The control arm undertake ePROs at baseline and 12 months. The hypothesis being women who participate in a survivorship clinic intervention incorporating ePROs and targeted symptom management (intervention arm) will experience improvements in symptom burden and quality of life compared to those who did not (control arm).</p> <p>Primary Endpoints (Feasibility): Proportion of enrolled participants who complete the baseline and follow-up ePRO surveys, and the numbers who partake in health professional consultations after ePRO data triggers. Secondary Endpoints: change from baseline in cancer-related symptom scores assessed by ePROs, health related-Quality of Life Questionnaire (QLQ) scores, appraisal self-care agency-R scores, and adjuvant endocrine therapy medication adherence.</p> <p>Ethical approval December 2020. Accrual commenced March 2021. (Currently 173/200 enrolled)</p> <p>Early lessons learned in the development and implementation of this intervention will be presented.</p>		
Poster Abstract 2	Emily Browne , Wellcome – HRB Clinical Research Facility, St. James's Hospital, Dublin 8.	
Abstract Title:	The CRF Academy - a learning program for aspiring Clinical Research staff: An evaluation from the perspective of new staff members.	
Author/s:	Maria Lampropoulou , Roxanne Saltiga, Emily Browne , Ashitha Bhaskaran, Derval Reidy	E-mail: brownee7@tcd.ie
<p>Multiple new staff members were employed to facilitate the expansion of the Clinical Research Facility (CRF) and the re-starting of non-covid clinical trials. The majority of new staff had no prior experience in the field of Clinical Research. Due to the complex nature of clinical trials, a lack of experienced staff can create a challenge for CRFs and can overburden existing staff members with training responsibilities¹. In addition, the role transition period experienced by staff entering a clinical research position has previously been described as 'prolonged' and 'uncomfortable'². Therefore, 'The CRF Academy', an innovative training and induction program, was developed. The CRF Academy aimed to equip new staff with the skills necessary to fulfil the demands of their new roles and to develop quality practice. Thus, alleviating the strain on existing staff. During this 4 day interactive program new staff were trained on the following topics; Study Set Up, ICH-GCP, SAEs, Pharmacy (IMP) and Monitoring. The success and perceived benefits of the CRF Academy were assessed using a post-program questionnaire.</p>		

Poster Abstract 3	Damien Gaumont , Advanced Paramedic, Critical Care Paramedic Trainee, National Ambulance Service, Critical Care And Retrieval Service	
Abstract Title:	A Survey Of The Knowledge, Awareness And Practices Of Irish Ambulance Practitioners Towards Patient's Thermal Comfort During Transport To The Emergency Department.	
Author/s:	Damien Gaumont	E-Mail: Email: damien.gaumont@hse.ie Twitter handle: @DamienGaumont
<p>Background: Being cold while injured increases anxiety and the perception of pain. The value of Thermal Comfort (TC) has been recognised by nursing theorists. Ambulance practitioners' education is centred around emergency actions, not prolonged care. There is paucity in the prehospital literature and education, of strategies to reduce heat loss and little attention is given to patient TC.</p> <p>Aim: This study attempts to investigate the Irish National Ambulance Service (NAS) practitioners' knowledge, awareness, and practices to cater for their patient's TC.</p> <p>Methods: This was a mixed methods study of Knowledge, Attitude and Practice (KAP) of TC in ambulance personnel.</p> <p>Results: A total of 110 participants surveyed. Their feelings about their education on TC was divergent and 96% supplemented their knowledge with external education. Most participants feel that they have good awareness of patients' need for TC (95%) and that TC is an integral part of their practice (96%). A total of 34% feel that they don't have sufficient equipment to deal with thermoregulation issues.</p> <p>Discussion: Emergency actions rather than nursing care is the background of prehospital education. The increased diagnostics and treatment possibilities available may have distracted from human needs. Evidence suggests a need to review the techniques, strategies and equipment to improve patient satisfaction and prevent iatrogenic hypothermia, in particular to critically ill.</p> <p>The epistemology of the findings should be used to design curricula, strategies and equipment. A new blanketing method is proposed.</p> <p>Conclusions: For the majority of NAS practitioners patients' TC is at the forefront of their care. There is a significant divergence in the perception of knowledge of the maintenance of TC. There may be some confusion about the harm suffered from being cold. Practitioners are not satisfied with the equipment available to manage patients' TC and thermal emergencies. Further research is required.</p>		
Poster abstract 4	Gillian Corey , Clinical Research Nurse CNM2 ALERT, Emergency Department, University Hospital Limerick	
Abstract Title:	Can Index Barthel Score at Emergency Department Presentation Predict Adverse Outcomes Among Older Adults at 30 Days and 6 Months?	
Author/s:	Gillian Corey, Louise Barry, Ida Carroll, Damian Ryan, Aoife Leahy, Rose Galvin	E-Mail: Gillian.corey@hse.ie
<p>Background: Frailty is acknowledged as a significant syndrome particularly in the older population. Monitoring frailty in late life aetiology and recognising the value of frailty as a marker of risk for adverse health outcomes is vital and ensures the identification of opportunities for intervention with this cohort in clinical practice (Bandein-Roche et al, 2015). The aim of this prospective cohort study is to examine if an index Barthel Score at Emergency Department presentation predicts adverse outcomes among older adults at 30 days and 6 months.</p> <p>Methodology: 650 older adults (≥65 years) attending a university model 4 hospital ED were recruited. Baseline evaluation included the Barthel Index. Adverse outcomes (hospital readmission or death) were recorded by a research nurse at 30 days and 6 months blinded to Barthel score. Descriptive statistics were used to profile the population and report the incidence of adverse outcomes.</p> <p>Results: At 30 days 61 older adults had either being admitted to hospital (n=28) or died (n=33) and at 180 days a further 72 had been admitted (n=43) or died (n=29). A total of 29% (n=189) of the population had a Barthel score of ≤15 indicating moderate dependency. Of this cohort, 70% had an adverse outcome-readmitted or died within 180 days.</p> <p>Conclusion: It may be worth looking at introducing the Barthel Index as a routine measure of activity for older adults presenting to the ED. This tool demonstrates an increased risk of adverse outcomes among older adults who present with moderate dependency. Early intervention either in the hospital or community setting with this 'at risk' cohort may serve to reduce adverse outcomes among this group. Can frailty tools improve care to this cohort are they the way forward?</p>		

Poster Abstract 5	Evelyn Power , Skin Cancer Clinical Nurse Specialist, University Hospital Limerick	
Abstract Title:	The Impact Of A Visual Sun Protection Campaign On Sun-Related Attitudes And Behaviours Of Healthcare Workers- A Nursing Initiative	
Author/s:	Ms Evelyn Power, Skin Cancer CNS, Dr Emma Porter, Dermatology Registrar, Ms Michelle Dolan, Irish Skin Foundation, Dr Sinead Field, Consultant Dermatologist	E-mail: Evelyn.power@hse.ie Twitter handle: @EvelynPower7
<p>Skin cancer is the most common cancer in Ireland, with over 13,000 cases diagnosed annually¹.</p> <p>Prevention remains a cornerstone of the National Cancer Strategy². The COVID-19 pandemic prompted re-imagining of traditional health promotion. Working with the Irish Skin Foundation (ISF), we created a novel video-based sun protection campaign and explored how digital health promotion initiatives could support adoption of healthy sun protective behaviours.</p> <p>Methods: This mixed methods study incorporated a focus group followed by a two-part online survey. It was open to all staff of the UL Hospital Group. Five short animated videos were created and displayed across six hospitals and hospital social media channels from June - September 2021. Surveys comprised of detailed questions on attitudes and behaviours regarding sun exposure.</p> <p>Results: Of 4500 staff invited to participate, 857 completed part 1 and 704 completed part 2, 90% of respondents in each were female. Those who completed part 2, 64% reported the campaign improved how they protect their skin. 79% reported raised awareness of skin cancer, 65% said it influenced them to discuss sun protection with others.</p> <p>Conclusion: The campaign had a positive impact on UL Hospital Group staff members' attitudes towards skin protection and skin cancer awareness. Healthcare workers represent a unique cohort for health promotion, as opportunity is created for further promotion of messaging to patients.</p>		
Poster Abstract 6	Lorraine Hodson , Head Of Nursing Research & Innovation, Great Ormond Street Children's Hospital	
Abstract Title:	Research Transition - Bridging The Gap Between Research & Clinical Care	
Author/s:	Lorraine Hodsdon, Waffa Girshab, Laura Chiverton	Email: Lorraine.hodsdon@gosh.nhs.uk Twitter handle: @Rainythegirl
<p>Background: Our vision is for research to be fully integrated into every aspect of the hospital, In 2018, staff feedback highlighted that ward teams felt underprepared and under-resourced to integrate these early access or newly licenced programmes into their existing service safely.</p> <p>Objectives:</p> <ol style="list-style-type: none"> 1, To empower ward based nursing staff to deliver new clinical treatments and build research capacity through outreach research education. 2, To enhance the participant journey when transitioning from a research study back into clinical care. <p>Implementation: A research hospital transition model was developed and implemented to bridge the gap between research and clinical care</p> <p>Outcome & Impact : Since 2019 successfully transitioned eight clinical trials into a compassionate use programme pathway building skills and research capacity within clinical areas and enhancing patient experience. Appointed one joint research nurse/CNS position to deliver a phase 1 clinical trial for a metabolic condition. The trial ended in 2021 with a phase 3 trial now underway fully embedded within the clinical service with the whole team confidently and competently delivering the research protocol alongside clinical care.</p> <p>The CRF led the development of the early access programme for patients with a metabolic condition, training the clinical nursing to safely deliver this intrathecal research treatment in the clinical service.</p> <p>Implications for nursing practice : This initiative builds research capability and capacity across nursing teams through education, outreach leadership and empowering staff to develop research skills. Future include working with patient infusion lounge to deliver infusion studies in partnership with clinical care.</p>		

Poster Abstract 7:	Gillian Corey , Clinical Research Nurse CNM2 ALERT, Emergency Department, University Hospital Limerick	
Abstract Title:	Recruitment Process: Developing a Template, the Way Forward	
Author/s:	Gillian Corey, Louise Barry, Elaine Conway	E-mail: Gillian.corey@hse.ie
<p>Background: Looking at the recruitment process there is minimal recent literature around this process on how it is carried out. Having recruited over 1000 participants in the last 3 years I can see the ad hoc recruitment process and as a result I have developed a simple recruitment specific checklist.</p> <p>Aim to streamline the recruitment process to ensure ongoing robust recruitment. To promote ongoing best practice and to ensure that a clearly designed process is developed and implemented.</p> <p>Methods: 650 adult charts were reviewed and the recruitment process looked at. Of that 63% required further input or clarification and that was recorded in the consenting folder. The note to file folder had a further 25% additional information this was stored separately from the consents. None of this data was recorded online. The data was recorded in the research nurse's weekly diary. This information was not uniformly stored or documented.</p> <p>Conclusion: With a recruitment checklist in place there will be a more robust recruitment process which will help to identify issues and any areas of concern.</p> <p>With this checklist the information will be all be stored together with an easily accessible template that can be adapted to the various studies.</p> <p>It will have recruitment data readily available should it be needed. It will also identify the numbers of participants that declined to participate and the reasons why. This will help to ensure that all the study data is recorded in a prescribed way. This will lead to better designed studies and to more accurate efficient data collection and recording.</p> <p>This checklist will tighten the recruitment process and will ensure that navigating the road ahead will be easier and evidence based as the process will be documented.</p>		
Poster Abstract 8:	Hazel A Smith , International Association of Clinical Research Nurses	
Abstract Title:	Extending the description of the clinical research nursing workforce	
Author/s:	Hazel A Smith, Catherine A Griffith, Hyacinth Lee, Carolyn T Jones, Kathleen A Grinke, Rosemary Keller, Georgie Cusack, Shaunagh Browning, Gordon Hill, Cheryl A Fisher	Twitter handle: @smithhazelann E-Mail: smith.hazelann@gmail.com
<p>Aim: To compare, between the USA and UK, job titles and most frequently performed activities as reported by nurses employed to support research.</p> <p>Methodology: Cross-sectional anonymised survey, using Bevan's validated five-dimensional model, of registered nurses involved in clinical research. Distribution of the survey was done through IACRN's membership list and by academic, by funded facilities and other research nurses' networks.</p> <p>Results: Majority of the 233 respondents were from USA (n=183, 78.5%) and 50 (21.5%) were from the UK. Differences in academic qualifications were found. The most popular work location was academic clinical research medical centre (n=90/183, 50.3%) in USA and hospitals (n=19/50, 38.0%) in UK.</p> <p>Although Clinical Research Nurse was the most common job title, it featured more in the UK compared to the USA, 68.0% (n=34/50) versus 37.7% (n=69/183), respectively. A greater variety of job titles existed in USA compared to UK.</p> <p>Few similarities in the frequency of the 56 activities were found. When both UK and USA respondents selected the same answer, it was generally for 'infrequent'. This suggests that what is shared across nursing in clinical research is what we don't do rather than what we do undertake.</p> <p>Conclusions: Due to the sample size, it is difficult to determine if these are true differences. However, given the growth in international collaborations to develop and enhance CRN as a speciality, we need to consider how the role of nursing in clinical research is delivered across different countries to ensure global inclusion.</p>		

Poster Abstract 9:	Siobhan Egan , CNM3 Study Coordinator, University Hospitals Limerick	
Abstract Title:	TiLLIRI Study – Clinical Research Nurse (CRN) led national trial coordination – shared reflections	
Author/s:	Siobhan Egan (CNM3 TiLLIRI Study, University Hospital Limerick) Dr Thomas O'Halloran (Clinical Fellow, University Hospital Limerick) Dr Denis O'Keeffe (Consultant Haematologist, University Hospital Limerick).	E-mail: Siobhan Mary.Egan@hse.ie Twitter handle: @siobhanegan2
<p>Introduction: (T) thrombosis (I) in patients with (L) lower (L) limb (I) injuries (R) requiring (I) immobilisation (TiLLIRI) is a prospective observational study. The coordination of this multicentre study is led by a CRN/ CNM3 across 12 participating sites nationally.</p> <p>Background: Patients requiring temporary lower limb immobilisation after an injury have an increased venous thromboembolism (VTE) risk. Consecutive patients aged 18 years and older with an immobilised injured lower limb are eligible for inclusion. The primary outcome is the incidence of symptomatic VTE at 90 days. The successful impact of the CRN role in multisite coordination is reflected in the current recruitment of 1,200 patients.</p> <p>Aims: Explore the experiences of a CRN in coordinating a national research study. Share the opportunities and challenges of multisite coordination. Demonstrate the importance of the CRN role in influencing successful recruitment through positive engagements.</p> <p>Results :Shared Reflections</p> <p>The impact of CRN leadership, communication, project management skills and team engagement are highlighted as key attributes for successful multisite coordination. Recommendations for future practice and CRN role development are explored.</p>		



IRNM PROGRAMME MANAGER

IRNM is seeking to appoint a Programme Manager to implement key recommendations of the 'Count Me In' Study, which was completed and reported in 2019. These included the need for standardised job descriptions and grading structures for nurses and midwives working in clinical research settings, and integration and alignment with clinical services.

The individual appointed will be a registered nurse or midwife who has the experience, skills and attributes to manage an ambitious programme of research and development in partnership with IRNM members and research infrastructure partners. The key function of the appointment is to complete an in-depth research project to explore the clinical research nurse/midwife (CRNM) role and identify associated knowledge, skills and competencies. Findings will be used to develop template job descriptions that align employment grade with the requirements of the particular post and to provide a model for competency development and career progression for CRNMs, from entry level through to advanced practice and/or management.

The programme manager will also develop and maintain the CRNM Database, and develop strategies to increase awareness of this resource, increase participation in the database, and generate reports. The Programme manager will also support IRNM committees and working groups in the achievement of IRNM aims and objectives and associated work packages.

This is a Health Research Board (HRB) funded post. The successful candidate will be employed through the RCSI Clinical Research Centre, located on the Beaumont Hospital campus.

IRNM PROGRAMME MANAGER PRINCIPLE DUTIES AND RESPONSIBILITIES

Roles and Competencies Project

Working with the collaboration and support of the Principal Investigator (PI) and IRNM

Roles and Responsibilities Sub-Committee the Programme Manager will:

- Be responsible for project planning, implementation and management of activities needed to achieve the stated project objectives.
- Develop detailed project plans and work-packages focused on successful delivery of the project outputs within the specified timeframe.
- Establish the Project Stakeholder Group

CRNM Database

The Programme Manager will:

- Establish a process for annual review of the IRNM CRNM Database to ensure it is up to date, accessible to CRNMs nationally, and compliant with data protection requirements
- Work with Communications and Engagement Sub-Committee to maximise awareness of and inclusion in the database amongst CRNMs nationally
- Compile an annual summary of database statistics
- Based on evolving project findings, expand dataset to include additional variables of value to defining the CRNM in Ireland