

Stranger In a Strange Land: Embedding Research Staff Within a Trauma Services Department

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INTRODUCTION

- Historically, at our institution research and trauma services have been two distinctly different teams. That model introduced many opportunities for communication breakdown that delayed workflow for each respective team.
- The American College of Surgeons (ACS) identifies research as a critical component to Trauma Center performance. Trauma Centers must demonstrate research productivity in order to be considered for ACS Level I Trauma Center verification ¹
- The need for dedicated trauma research support was identified during a comprehensive assessment of our academic Level II Trauma Center in 2017.
- To support the continued growth of our trauma center, a 1.0 FTE was added to our Trauma Services department with the title: Trauma Research Nurse.
- The purpose of the Trauma Research Nurse is to assist in growing a productive trauma research program to support the research requirements for an ACS Level I Trauma Center verification.

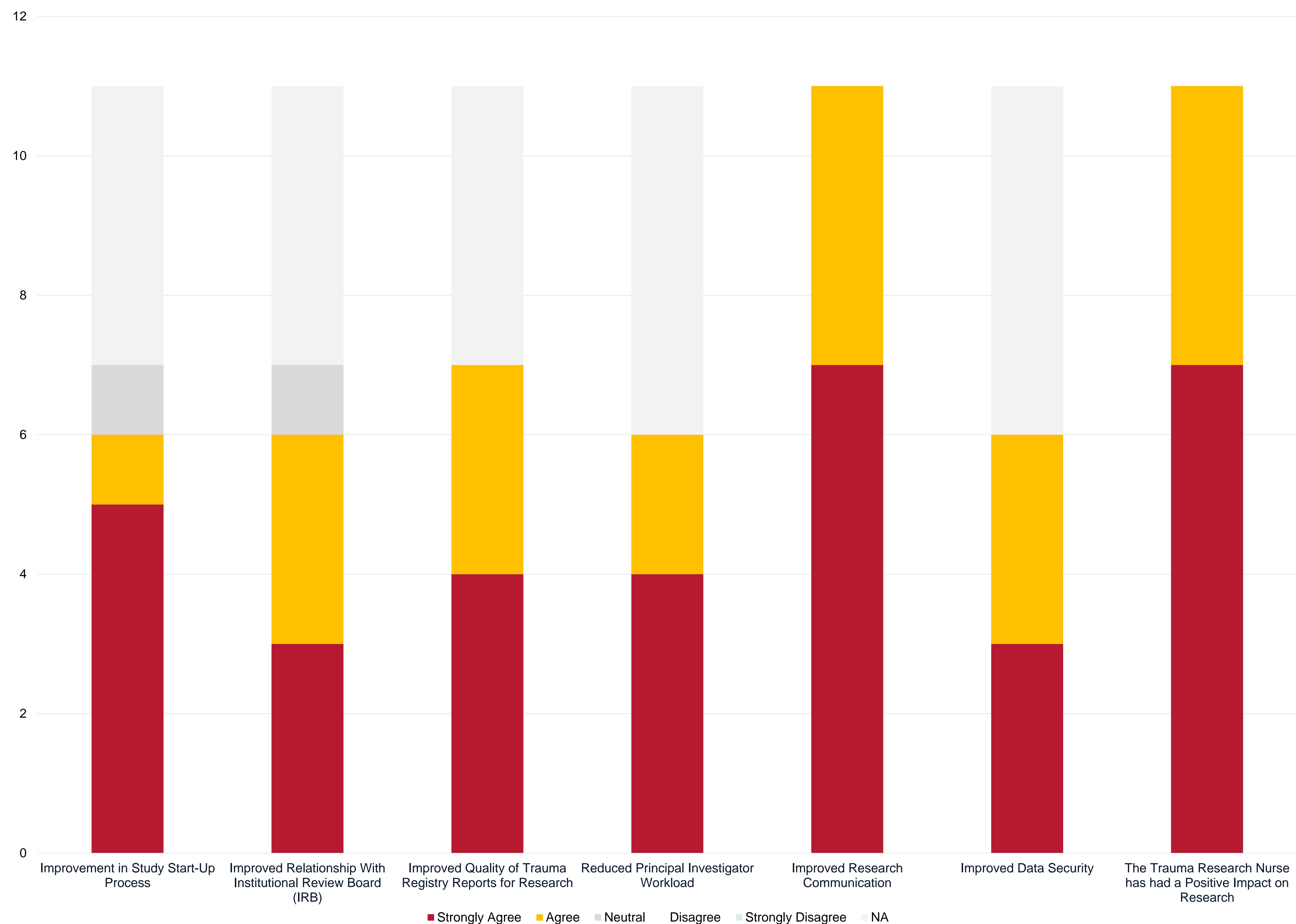
OBJECTIVES

- With the addition of a Trauma Research Nurse, our Trauma Center has been able to ameliorate the research workflow as evidenced by:
 - Obtaining Institutional Review Board (IRB) approval for 10 new studies within 12 months.
 - Implementation and utilization of Research Electronic Data Capture (REDCap) databases to house research data sets, thus improving research data security.
 - Improved Principal Investigator (PI) satisfaction by decreasing the administrative burden associated with regulatory and compliance requirements unique to human subjects research.
 - Decreased workload of trauma registrars tasked with generating reports for research purposes.
 - Trauma registry reports generated by the Trauma Research Nurse are customized for each research protocol.
 - Development and implementation of a Trauma Research Volunteer Program.
- Additional observed benefits of the Trauma Research Nurse
 - Supports the MAGNET designation of our hospital by:
 - Acting as a co-investigator for two studies.
 - Serves on the IRB as a primary reviewer.

References

Resources for the Optimal Care of the Injured Patient. 6th ed. Chicago, IL: American College of Surgeons; 2014

TRAUMA RESEARCH NURSE: STAKEHOLDER SURVEY_(n=11)



RESULTS

- All stakeholders surveyed (n=11) found the addition of the Trauma Research Nurse to positively impact our Trauma Center. Additionally, all survey respondents report that communication concerning current research projects has improved.
- There were no negative findings appreciated during our survey (no disagrees or strongly disagrees reported)
- Overall, the findings of our survey demonstrate the following favorable outcomes: improvement in the study start up process (45% Strongly Agree, 10% Agree), improved working relationship with the IRB (36% Strongly Agree, 27% Agree), improvement in the quality of trauma registry reports for research (36% Strongly Agree, 27% Agree), reduction in PI workload (36% Strongly Agree, 18% Agree), and improved research data security (27% Strongly Agree, 27% Agree)

DISCUSSION/ NEXT STEPS

In the future, we would like to be able to further integrate research into the Trauma Services' culture by seamlessly tracking variables outside the National Trauma Data Set to aid in future research. This would add depth and flexibility to the trauma registry without greatly increasing the demands placed on trauma registrars and trauma nurse coordinators.