

# TRAINING CLINICAL HEALTH RESEARCHERS TO BE EVIDENCE-BASED WHEN DESIGNING NEW STUDIES



**INTERVIEW GUIDE** with Hrund THORSTEINSSON, RN, PhD

Manager of the Department of Professional Development and Education of the Landspítali, University Hospital, Reykjavik, Island Leader of the EVBRES activity group responsible for the development of training school related to Evidence Based Research.

## Education:

2013 Ph.D. in Nursing, University of Iceland, Faculty of Nursing.

1990 M.S. Nursing, School of Nursing, University of Wisconsin-Madison. Major: Medical/oncology nursing and Nursing administration

1982/ B.Sc. Nursing, Department of Nursing, University of Iceland, Reykjavik.

## Employment Experience

Working experience as an RN (Registered Nurse), in different positions, at the National University Hospital, Reykjavik Iceland until a hospital merger in November 2000; after that at the Landspítali- University Hospital, Reykjavik, Iceland. I have worked within nursing management since 1983, and in the professional practice development and education field since 1994. I headed the Committee for clinical guidelines and evidence-based practice at Landspítali Hospital for several years and have been directed several evidence-based practice changes.

## Teaching experience:

From February 1983 to date I have been teaching part time at the Department of Nursing, University of Iceland. Started out as a clinical instructor, then as an assistant professor on and off since 1991 in a joint position. My fields have been adult medical-surgical nursing, learning and teaching at the clinical level in the Master of Science program, curriculum developer and program director of certification program for acute care nursing, OR (Operating Room) nursing, and CCU (Cardiac Care Unit) and anesthesia nursing.

I have also been responsible for the course on research methods in the undergraduate nursing program, evidence-based practice at the Bsc (Bachelor of science) and MS (Master of Science) level, adult learning as well as other related fields. I have been a project advisor on several theses at the undergraduate program, and on MS-committees.

**Reporter:** *Dr. Hrund Thorsteinsson you have been involved with both Evidence-Based Practice as well as the design and implementation of educational programs for many years. More recently you have become the leader of the EVBRES activity group responsible with developing a training school aimed at teaching clinical health researchers to be evidence-based when justifying and designing a new study as well as when placing results from a new study in the context of existing knowledge.*

*- Can you tell us more about the specific aims and the training schools you are leading in the framework of the COST Action CA-17117: Towards an International Network for Evidence-based Research in Clinical Health Research (EVBRES)?*

**Hrund THORSTEINSSON:** The overarching goal is to minimize waste in healthcare research. The aim of the first training school (TS) was to make clinical early career investigators and senior clinical health researchers aware of ways to avoid research waste and enable them to use existing evidence to justify and design new studies, and to place the results from the new study in the context of existing knowledge.

*- Based on your previous experience could you tell us why such an educational program is needed and what makes it different from similar programs?*

**HT:** I'm sure we all agree that resources for research will probably always be less than we think necessary, both in terms of funding and people. Research waste, that is research that is of no importance to either the research community or society (Lund, 2019), is costly and unethical; while evidence-based research (EBR) is a way to decrease research waste. There seems to have been a lack of emphasis on the importance of EBR in healthcare education. In the name of "academic freedom" and the need to publish, the focus on avoiding research waste when designing studies may be lacking.

Our goal was to create a program or TS that was clearly different from other available programs and to address a knowledge/attitude gap related to awareness of research waste, both in terms of cost and ethical responsibility. Furthermore, to enable clinicians to find and use knowledge from previous research to justify and design their studies.

*- A pilot of this program has already been conducted. What was the feedback received from participants?*

**HT:** We had a successful pilot TS in Tartu, and the participants were truly satisfied. Although the feedback was

mostly positive, some participants said there was too much and too advanced content covered in the 2 days. We (the teachers) also realized that the participants' background and training varied quite a bit, making the teaching challenging. Also, the main message about evidence-based research and avoiding research waste, did probably not get the attention and focus it should have in the program, despite our efforts. We always expected that we would need to revise the program, and that is what we are working on now.

- Which are the next steps foreseen for this program?

**HT:** We are going to add a 3<sup>rd</sup> day to the beginning of the TS, but it will be online. Thereby the participants will be able to prepare and study the content before they come to the location of the TS. The TS is supposed to be developed as an e-learning course in the future, so this is an opportunity to try it out. The content will be ready a few weeks in advance of the TS, so the participants will have time to prepare according to their individual needs. This makes it more likely that the participants are at a similar level when they start the latter part of the TS, making the teaching more focused. To plan is also to use various teaching methods, increasing groupwork and participants' involvement in the course.

- What impact do you hope this program will have in the long run?

**HT:** More EBR and less research waste, and perhaps more networking and teamwork. If clinical investigators are well prepared and realize what must be taken into consideration when justifying and designing new studies, better use of resources and available knowledge will follow.

**R:** Looking now more closely at the process of developing such a program. What pains and gains have you experienced until now?

**HT:** Participating in this kind of project is definitely a gain, both at the professional and personal level, I would say. It is a learning experience. I have learned a lot, in so many ways and met new and interesting colleagues.

- What challenges have you faced in the process of developing the training schools?

**HT:** Working in large groups, with people you don't know, takes time and is always challenging, no matter what. As Churchill said: "Democracy is the worst form of government, except for all the others". I can relate to that. The principles of democracy must be used when working in groups, but it takes time, lots of discussion, being aware of differences and respecting them and ensuring equality of all participants. The group members in my group were all highly motivated and eager to learn and contribute to the work. We come from different parts of Europe, each of us brought along our experience and ways of doing things, our culture and our education. Coming from a very small country, where the population is very homogeneous unfortunately, I was not prepared for how differently we

approach these things. Acknowledging the differences is important and embracing the diversity, as well as acknowledging that every group member brings something of value to the table.

- What is the value this process is adding both from your individual perspective as well as from the evidence-based community perspective?

**HT:** The value from the individual perspective is like I said meeting new people and learning from them, and perhaps having an opportunity to work with them on some studies in the future. It is the same for the evidence-based community, I guess. In general, increasing knowledge and discussion about EBR and ways to avoid research waste will benefit all, especially the end-users of research evidence.

**R:** Research is one of the 10 essential public health services and is a requirement for the advancement of public health practice.

- How do you think that the content of the Evidence-Based Research training school is relevant for Evidence-Based Public Health Practitioners?

**HT:** The content and the networking at the EBR training school is most definitely relevant for public health practitioners. It is relevant to all health professionals that are or want to be base their decisions on evidence. The content of the TS is transferrable and generalizable independent of field of study. **An EBR approach will also make sure that research is relevant for public health / clinical practice, thus, should be more easily implemented.**

- Could such a program be adapted to better respond to their needs and integrated in the training of public health professionals?

The plan is that the program and the changes we are making fit all consumers of research and researchers, independent of healthcare field. This is our overall goal, and we are certainly doing our best to reach that goal. Everyone should be able to benefit and apply the knowledge to their own field.

**R:** Would you like to add anything else, maybe an answer to a question unaddressed in this interview?

**HT:** Participating in this COST project, EVBRES, has made me more broadminded in some ways, I have learned a lot. It has made me realize the need for and benefit of more cooperation between the European countries. If you get the opportunity to join a COST project, don't hesitate to take it. Yes, it is a lot of work, but it is worth it.

*Interview conducted by Raluca Sfetcu*