A staff shortage of clinical research nurses leaves a few to cover the jobs of many, and heavy workloads lead to decreased quality care and practices. A new plan of hiring inexperienced nurses was implemented at a comprehensive cancer center to help quickly fill roles; however, challenges arose with training. In response, the research nurse leadership team created a course using the clinical research nursing scope and standards of practice. The results validated the need for this course and supported plans to continue to provide the course to new hires.

**AT A GLANCE**
- The clinical research nurse specialty scope and standards can be used to educate experienced and inexperienced research nurses about their professional roles.
- The lack of experienced clinical research nurses can create a challenge for institutions with robust clinical trial pipelines.
- Using a questionnaire before and after education implementation can be an efficient way to measure effectiveness of a nursing education course.

**Clinical Research Nurse Education**

Using scope and standards of practice to improve care

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Clinical research has become a global enterprise, and advances in the basic sciences have exceeded the capacity of the clinical research infrastructure (Hastings et al., 2012). Therapeutic trials using novel agents in specialties, such as oncology, create challenges because they require nurses with advanced specialty skills. An additional focus on clinical translational research to include community and practice-based settings increasingly constrains nursing resources (Hastings et al., 2012). The Tufts Center for the Study of Drug Development (Morgan, 2016) conducted research from about 2001–2016 and found that protocols have more case report form pages, endpoints, procedures, eligibility criteria, and amendments.

**Early Difficulties**

An increase in the turnover rate of clinical research nurses was noted in 2017; much of this turnover was from the new hires. Turnover rates rose from about 10% in 2015 to 28% in 2017. The nursing leadership team also heard patient complaints related to scheduling errors, nurse oversight, or the odd mishap. They realized that the number and type of complaints that came through the patient advocacy office were related to patients feeling as though they were not receiving quality care coordination. At the same time, members of the research nurse leadership team were hearing from the clinical research nurses that they were feeling overwhelmed and did not have time to train new staff. The leadership team realized that implementing the new recruitment plan had overburdened the existing clinical research nurses by adding training and onboarding of new staff to the workload. The overwhelmed nurses did not have time to build the necessary foundation of research training for new staff, and...