NURSING RESEARCH SOCIETY OF INDIA

NURSING RESEARCH GUIDELINES

BOOKLET- 1

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NURSING RESEARCH SOCIETY OF INDIA

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THE SPIRIT OF PROFESSIONAL GUIDELINES FOR NURSING RESEARCH IN INDIA

Practice as a nurse is based upon a relationship of mutual trust between patients and health care practitioners. Nursing, a service profession demands much dedication. The promise or the commitment the nurse made to the public upon graduation through the oath to provide compassionate humanistic care with sound professional and ethical principles in their practice. This means that nurse is committed to the society and the service provided is a moral enterprise.

Nurse, being a professional has the moral responsibility to develop health care practices that are affordable, and cost effective state of the art interventions. For developing such knowledge, the nurse is committed to conduct research. Evidences created by good quality research only will yield scientific knowledge. The nurse is destined to follow the moral and ethical principles along with scientific vigor while conducting research. Nursing Research Society of India takes it as a privilege to submit such guidelines to fellow nurses as the only organizations for nurse researchers in India.

Table of contents

PROFESSIONAL GUIDELINES OF PRACTICE AND BEHAVIOUR FOR NURSE RESEARCHERS

Preamble

Nurses are doing thousands of research every year all over the world. Many countries give guidelines for conducting such research. In India, neither government nor any registered nursing organizations or even the nursing council had not specified nursing research guidelines. However Indian Council of Medical Research provide guidelines, and the nurse researchers are following the same guidelines. ICMR guidelines are mainly concentrating on RCTS and animal and biomedical research. Nursing a humanistic profession conducts mainly non experimental quantitative research and qualitative research requires very specific guidelines based on these methodology. The following guidelines should serve as reference to research institutions, organizations and individual researchers in India.

Introduction

These are professional guidelines that nurse researchers must uphold for the proper conduct of a research that contribute for the sustenance and development of nursing as a profession. Nursing Research Society of India (hereafter called as NRSI) being the registered nursing research organization in India for nurse researchers takes it as their professional responsibility to set guidelines for nursing research in India. Though NRSI set the guidelines for the proper conduct of research by nurses, but these are not just our guidelines. They are the guidelines that patients and members of the public tell us what they expect from nurse researchers. They are the guidelines shown every day by good nurses and midwives across India. Nurses who are doing research is called as Nurse

Researchers in this document and hereafter written as NR (singular and NRs – plural)

Nurses and midwives can use it to promote safe and effective nursing practice in their place of work. Employer organizations should support their staff in upholding the guidelines in their Professional Code as part of conducting genuine researches that promote the quality and safety of participants involved.

Participants and service users, and the public can use it to provide feedback to nurses and midwives and also approach authorities concerned for if violation occurs. The guidelines contain a series of statements that taken together to signify what good nursing research looks like. It puts the interests of participants first, their safety and confidentiality and also promotes trust through professionalism.

This document is set as guidelines for nursing research rather than standards. Standard require mandatory compliance and may be accompanied by an enforcement mechanism. This document is aspirational in intent and to provide recommendations for the professional conduct of specified activities. These guidelines are not intended to be mandatory, exhaustive or definitive and should not be taken to the precedence over the judgment of individuals who have competence in the subject addressed.

It contains six core areas namely;

- Professional competence
- Participant priority
- Preserve safety
- Promote confidentiality
- Ethical code of conduct
- Authorship/ publishing

1. Professional competence

1.1. Professional competence is the broad **professional** knowledge, attitude, and skills required in order to work in nursing profession. Knowledge of research methodology and the application of concepts, processes related to various types of research and skills to carry out research are required for a nurse researcher to prove **professional competence**.

a. Nurses should conduct research with populations and in areas only within the boundaries of their competence, based on their education, training, supervised experience, consultation, study, or professional experience.

b. NRs planning to conduct research involving populations, areas, techniques and technologies new to them, should undertake relevant education, training, supervised experience, consultation, or study before attempting such researches.

c. In those emerging areas in which generally recognized standards for preparatory training do not yet exist, NR nevertheless take reasonable steps to ensure the competence of their work and to protect clients/ research participants, organizational clients, and others from harm.

1.2. Maintaining Competence

NRs undertake ongoing efforts or continuing education to develop and maintain their competence in the areas of research in terms of newer methodology and newer techniques of analysis.

1.3. Basis for Scientific and Professional Judgments

NR's work is based upon established scientific and professional knowledge of the discipline and in the case of interdisciplinary research; the researcher should have a competent authority to guide the research.

1.4. Delegation of Work to Others

NRs who delegate work to research assistants should:

(1) Avoid delegating such work to persons who have a multiple relationship with those being served that would likely lead to exploitation or loss of objectivity;

(2) Authorize only those responsibilities that such persons can be expected to perform competently on the basis of their education, training, or experience, either independently or with the level of supervision being provided; and

(3) See that such persons perform these services competently.

2. Participant priority

NRs put the interests of people participating in the research first. NRs make their care and safety as main concern and make sure that their dignity is preserved and their needs are recognized, assessed and responded to. NRs should make sure that those participating in research are treated with respect, that their rights are upheld and that any discriminatory attitudes and behaviours towards them are challenged through

2.1. Treat people as individuals and uphold their dignity. Obtain Informed consent that includes: treat people with kindness, respect and compassion, avoid making assumptions and recognize diversity and individual choice, make sure that any treatment, assistance or care for which NRs are responsible is delivered without undue delay, and uphold people's human rights and respect, support and uphold a person's right to accept or refuse participation.

2.2. People's physical, social and psychological needs are not curtailed for the purpose of research and act in the best interests of people at all times.

2.3. NRs should make sure that they get properly informed consent and document it before carrying out any research activities

2.4. NRs should oblige to all relevant laws about mental capacity that apply in the country, and make sure that the rights and best interests of those who lack capacity are still at the centre of the decision-making process in research, and keep clear and accurate records relevant to all research activities.

2.5. NRs should respect participant's right to privacy and confidentiality and make sure that participants are informed about how and why information is used and shared if need arises.

2.6. NRs should share necessary information with other healthcare professionals and agencies only when the interests of participant preservation and public protection override the need for confidentiality, and share only information as far as the law allows.

2.7. NRs should complete all records at the time or as soon as possible after an event.

2.8. NRs should identify any risks or problems that have arisen during data collection and should keep the record of the steps taken to deal with them.

2.9. NRs should complete all records accurately and without any falsification, taking immediate and appropriate action in any paper or electronic records, making sure they are clearly written/ recorded dated and timed, and do not include unnecessary abbreviations, jargon or speculation.

2.10. NRs should take all steps to make sure that all records are kept securely, and store all data and research findings appropriately. Be accountable to delegated tasks and duties to others or research assistants and delegate only tasks and duties that are within the other person's scope of competence,

making sure that they fully understand all instructions. Make sure that research assistants are adequately supervised and supported

3. Preserve safety

NR should make sure that participant and public safety is protected. NRs work within the limits of their competence, exercising their professional 'duty of candor' and raising concerns immediately whenever they come across situations that put participant's safety at risk.

3.1. Avoiding Harm

NR should take reasonable steps to avoid harming their research participants, from whom they collect data or perform interventions on and minimize harm where it is foreseeable and unavoidable. Be open and candid with all participants about all aspects of treatment, including when any mistakes or harm have taken place. Act immediately to put right the situation if someone has suffered actual harm for any reason or an incident has occurred which had the potential for harm. Explain fully and promptly what has happened, including the likely effects, and apologize to the person affected and, where appropriate, to their advocate or family. Document all these events formally and take further action (escalate) if appropriate. Act without delay if you believe that there is a risk to patient safety or public protection. Take all reasonable steps to protect participants who are vulnerable or at risk from harm, neglect or abuse. Be aware of, and reduce as far as possible, any potential for harm associated with nursing research. Take measures to reduce as far as possible, the likelihood of mistakes, near misses, harm and the effect of harm if it takes place. Take all reasonable personal precautions necessary to avoid any potential health risks to participants of research.

3.2. Avoid Multiple Relationships

3.2.1. NR refrains from entering into a multiple relationship if the multiple relationships could reasonably be expected to impair the researcher's objectivity, competence, or effectiveness in performing his or her functions as a researcher, or otherwise risks exploitation or harm to the person with whom the professional relationship exists. Multiple relationships that would not reasonably be expected to cause impairment or risk of exploitation or harm are not unethical.

3.2.2. If an NR finds that, due to unforeseen factors, a potentially harmful multiple relationship has arisen, the NR takes reasonable steps to resolve it with due regard for the best interests of the affected person and maximal compliance with the Code of Ethics.

3.2.3. NR should think carefully before entering into multiple relationships with any person or group, such as recruiting students or clients as participants in research studies or investigating the effectiveness of a product of a company that they own. (For example, when recruiting students from your any nursing course to participate in an experiment, be sure to make clear that participation is voluntary. If participation is a course requirement, be sure to note that in the class syllabus, and ensure that participation has educative value by, for instance, providing a thorough debriefing to enhance students' understanding of the study.)

3.2.4. One of the most common multiple roles for researchers is being both a mentor and clinical supervisor to students they teach in class. NRs need to be especially cautious that they do not abuse the power differential between themselves and students.

3.3. Conflict of Interest

NR should refrain from taking on a professional role when personal, scientific, professional, legal, financial, or other interests or relationships could reasonably be expected to:

(1) Impair their objectivity, competence, or effectiveness in performing their functions as a nurse researcher.

(2) Expose the person or organization with whom the professional relationship exists to harm or exploitation.

3.4. Unfair discrimination

NR should not engage in unfair discrimination of participants of the study based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis proscribed by law.

3.5. Sexual Harassment

NRs should not engage in sexual harassment. Sexual solicitation, physical advances, or verbal or nonverbal conduct that is sexual in nature, that occurs in connection with the researcher's activities is unwelcome, is offensive, or creates a hostile environment, and in such cases the nurse researcher is abusive to a subject/ research participant.

3.6. Other harassments

NRs should not knowingly engage in behavior that is harassing or demeaning to persons with whom they interact in their study/work based on factors such as those person's age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, or socio-economic status

3.7. Exploitative Relationships

NRs should not exploit persons whom they have as research participants.

3.8. Recruiting participants

NRs must meet professional, institutional, and ethical standards for conducting research with human participants and recruitment should not be biased in any context.

3.9. Debriefing

a. NR should provide a prompt opportunity for participants to obtain appropriate information about the nature, results, and conclusions of the research, and they take reasonable steps to correct any misconceptions that participants may have of which the NRs are aware.

b. If scientific or humane values justify delaying or withholding this information, NRs take reasonable measures to reduce the risk of harm.

4. Maintaining confidentiality

NR should have a primary obligation and take reasonable precautions to protect confidential information obtained through or stored in any medium, recognizing that the extent and limits of confidentiality may be regulated by law or established by institutional rules or professional or scientific relationship.

4.1. Discussing the Limits of Confidentiality

a. NR should discuss with persons including, to the extent feasible, persons who are legally incapable of giving informed consent and their legal representatives and organizations with whom they establish a scientific or professional relationship (1) the relevant limits of confidentiality and (2) the foreseeable uses of the information generated through their research activities.

b. Unless it is not feasible or is contraindicated, the discussion of confidentiality occurs at the outset of the relationship and thereafter as new circumstances may warrant.

c. NR who uses information via electronic transmission inform participants of the risks to keep privacy and limits of confidentiality

4.2. Minimizing Intrusions on Privacy

NR should include in written and oral reports, only information germane to the purpose for which the communication is made. NRs discuss confidential information obtained in their work only for appropriate scientific or professional purposes and only with persons clearly concerned with such matters.

4.3. Disclosures

4.3.1. NRs may disclose confidential information with the appropriate consent of the organization/ participant or another legally authorized person on behalf of the client/patient unless prohibited by law. NR should only disclose confidential information without the consent of the individual only when it is mandated by law, for a valid purpose such as to:

(1) Provide needed professional services;

(2) obtain appropriate professional consultations;

(3) protect the participant or others from harm;

5. Practice Ethical code of conduct

5.1. Informed consent

When NRs conduct research in person or via electronic transmission or other forms of communication, they obtain the informed consent of the individual or individuals using language that is reasonably understandable to

that person or persons except when conducting such activities without consent is mandated by law or governmental regulation or as otherwise provided in this Ethics Code.

5.1.1. For persons who are legally incapable of giving informed consent, NRs nevertheless

(1) Provide an appropriate explanation,

(2) seek the individual's assent,

(3) Consider such persons' preferences and best interests, and

(4) Obtain appropriate permission from a legally authorized person, if such substitute consent is permitted or required by law and in such situation, obtain an audiovisual recording of such assent or informed permission.

5.2. NR should appropriately document written or oral consent, permission, and assent in the prescribed format.

5.3. NRs who conduct research when obtaining informed consent, for all types of research should inform participants about :

(1). Purpose of the research, expected duration and procedures.

(2). Participants' rights to decline to participate and to withdraw from the research once it has started, as well as the anticipated consequences of doing so.

(3). Reasonably foreseeable factors that may influence their willingness to participate, such as potential risks, discomfort or adverse effects.

(4). Any prospective research benefits.

(5). Limits of confidentiality, such as data coding, disposal, sharing and archiving, and when confidentiality must be broken.

(6). Incentives for participation.

(7). Whom participants can contact with questions about research and research participants rights.

(8). Cover the likelihood, magnitude and duration of harm or benefit of participation, emphasizing that their involvement is voluntary and discussing treatment alternatives, if relevant to the research.

(9). Keep in mind that the Ethics Code includes specific mandates for researchers who conduct experimental treatment research. Specifically, they must inform individuals about the experimental nature of the treatment, services that will or will not be available to the control groups, how participants will be assigned to treatments and control groups, available treatment alternatives and compensation or monetary costs of participation and the means by which assignment to treatment and control groups will be made; available treatment alternatives if an individual does not wish to participate in the research or wishes to withdraw once a study has begun; and compensation for or monetary costs of participating including, if appropriate, whether reimbursement from the participant or a third-party.

5.4. Informed Consent for Recording Voices and Images in Research

NR should obtain informed consent from research participants prior to recording their voices or images for data collection unless (1) the research consists solely of naturalistic observations in public places, and it is not anticipated that the recording will be used in a manner that could cause personal identification or harm, or (2) the research design includes deception, and consent for the use of the recording is obtained during debriefing

5.5. Patient, Student, and Subordinate as Research Participants

(1). When NRs conduct research with clients/ patients, students, or subordinates as participants, they take steps to protect the prospective

participants from adverse consequences of declining or withdrawing from participation.

(2). When research participation is a course requirement or an opportunity for extra credit, the prospective participant is given the choice of equitable alternative activities

5.6. Dispensing With Informed Consent for Research

NRs may dispense with informed consent only

(1) where research would not reasonably be assumed to create distress or harm and involves

(a) the study of normal educational practices, curricula, or classroom management methods conducted in educational settings;

(b) only anonymous questionnaires, naturalistic observations, or archival research for which disclosure of responses would not place participants at risk of criminal or civil liability or damage their financial standing, employability, or reputation, and confidentiality is protected; or

(c) the study of factors related to job or organization effectiveness conducted in organizational settings for which there is no risk to participants' employability, and confidentiality is protected or

(2) where otherwise permitted by law or institutional regulations.

5.7. Offering Inducements for Research Participation

(1). NR should make reasonable efforts to avoid offering excessive or inappropriate financial or other inducements for research participation when such inducements are likely to coerce participation.

(2). When offering professional services as an inducement for research participation, NRs clarify the nature of the services, as well as the risks, obligations, and limitations.

5.8. Humane Care in Research

Experimentation and research with human participants made tremendous contributions to improving peoples' lives. However, there have also been several reports of unethical research practices and abuses of human participants in research. It was in response to reports of such abuses, ICMR had come up with guidelines. The following are important for NRs also.

A. Respect for persons — individuals should be treated as independent agents, and individuals with diminished independence are entitled to special protections. NR should show respect for life.

B. Beneficence — individuals should not be exposed to harm or unnecessary risk and any benefits should be maximized.

C. Justice — individuals should be exposed to fair and equitable procedures, and fair distribution of costs and benefits.

5. 9. Deception in Research

NR should not conduct a study involving deception unless they have determined that the use of deceptive techniques that is justified by the study's significant contribution to science, education or applied value and if no other alternative procedures are available.

(a) NR should not deceive prospective participants about research that is reasonably expected to cause physical pain or severe emotional distress.

(b) NR should explain any deception that is an integral feature of the design and conduct of an experiment to participants as early as is feasible,

preferably not later than at the conclusion of the data collection, and permit participants to withdraw their data.

5.9.1. Institutional Approval

When institutional approval is required, NR should provide accurate information about their research proposals and obtain approval prior to conducting the research. They conduct the research in accordance with the approved research protocol.

5.9.2. Conflicts between Ethics and Law, Regulations, or Other Governing Legal Authority and organizational demands.

If NR's ethical responsibilities conflict with law, regulations or other governing legal authority, and organizational demands, they should clarify the nature of the conflict, make known their commitment to the Ethics Code and take reasonable steps to resolve the conflict consistent with the General Principles and Ethical Standards of the Ethics Code. Under no circumstances, these guidelines be used to justify or defend violating human rights.

5.9.3. Informal Resolution of Ethical Violations

When NRs believe that there may have been an ethical violation by another NR, they should attempt to resolve the issue by bringing it to the attention of that individual, if an informal resolution appears appropriate and the intervention does not violate any confidentiality rights of the participants involved.

5.9.4. Reporting Ethical Violations

If an apparent ethical violation has substantially harmed or is likely to substantially harm a person or organization and is not appropriate for informal resolution, NRs take further action appropriate to the situation. Such action might include referral to state or national

committees on professional ethics, to state licensing boards or to the appropriate institutional authorities.

5.9.4. Co-operating with Ethics Committees

NR should cooperate in ethics investigations, proceedings and resulting requirements of the organization or association to which they belong. Failure to cooperate itself is an ethics violation.

5.9.5. Improper Complaints

NR should not file or encourage the filing of ethics complaints that are made with reckless disregard for or willful ignorance of facts that would disprove the allegation.

5.9.6. Unfair Discrimination against Complainants and Respondents.

NR should not deny persons employment, advancement, admissions to academic or other programs, tenure, or promotion, based solely upon anybody who be the subject of an ethics complaint.

5.9.7. **Duties to environment**

NR should: Ensure that the research does not impact on the environment in a manner that is harmful to the health and well-being of the population, nature and the environment. In all instances health researchers must ensure that the environment is protected for the benefit of present and future generations as is required by the Indian Constitution. Recognize that natural resources are limited and guard against their exploitation. Health researchers should protect the environment and the public by assuring that the all waste products are disposed according to biomedical waste management protocol.

5.9.8. Data and Specimen Storage

Data and specimens obtained as a result of research activity should be securely stored. Data, including tape recordings should be stored for a minimum of 2 years after publication or 6 years in the absence of

publication. There must be justifiable reasons for transfer of data and specimens which should be provided to Research Ethics Committees for data and specimens

6. Publishing/ authorship

6.1. A voidance of False or Deceptive Statements

a. NRs should not knowingly make public statements that are false, deceptive, or fraudulent concerning their research, practice, or other work activities or those of persons or organizations with which they are affiliated. (Statements include but are not limited to paid or unpaid advertising, product endorsements, grant applications, licensing applications, other credentialing applications, brochures, printed matter, directory listings, personal resumes or curricula vitae, or comments for use in media such as print or electronic transmission, statements in legal proceedings, lectures and public oral presentations, and published materials.)

b. NRs should not make false, deceptive, or fraudulent statements concerning their:

(1) Training, experience, or competence;

(2) Academic degrees;

(3) Credentials;

(4) Institutional or association affiliations;

(5) Services;

(6) Scientific or clinical basis for, or results or degree of success of, their services;

(7) Fees; or

(8) Publications or research findings.

c. NR should claim degrees as credentials for their health services only if those degrees were:

(1) Earned from a regionally accredited educational institution/ university or

(2) The basis for nurse/ midwife licensure by the state in which they practice.

6.2. Media Presentations

When NRs provide public advice or comment on research findings via print, Internet, or other electronic transmission, they should take precautions to ensure that statements are:

(1) Based on their professional knowledge, training, or experience in accord with appropriate nursing literature, research findings and practice;

(2) Consistent with this Ethics Code

6.3. Reporting Research Results

(1). NRs do not fabricate data.

(2). If NRs discover significant errors in their published data, they take reasonable steps to correct such errors in a correction, retraction, erratum, or other appropriate publication means.

6.4. Plagiarism

NRs should not present portions of another's work or data as their own, even if the other work or data source is cited occasionally. NR should keep in mind that self-plagiarism also should be avoided.

6.5. Publication Credit

(1).NR should take responsibility and credit, including authorship credit, only for a work they have actually performed or to which they have substantially contributed.

(2).Principal authorship and other publication credits accurately reflect the relative scientific or professional contributions of the individuals involved, regardless of their relative status. Mere possession of an institutional position, such as department chair, does not justify authorship credit. Minor contributions to the research or to the writing for publications are acknowledged appropriately, such as in footnotes or in an introductory statement.

(3).Except under exceptional circumstances, a student is listed as principal author on any multiple-authored article that is substantially based on the student's doctoral dissertation. Faculty advisors discuss publication credit with students as early as feasible and throughout the research and publication process as appropriate

6.6. Duplicate Publication of Data

NR should do not publish data that have been previously published as original data. This does not preclude republishing data when they are accompanied by proper acknowledgment

6.7. Sharing Research Data for Verification

After research results are published, NR should not withhold the data on which their conclusions are based, from other competent professionals who seek to verify the substantive claims through reanalysis provided that the confidentiality of the participants can be protected and unless legal rights concerning proprietary data preclude their release. This does not preclude

NRs from requiring that such individuals or groups be responsible for costs associated with the provision of such information.

6.8. Reviewers

NR who review material submitted for presentation, publication, grant, research proposal or tool validation, should respect the confidentiality of and the proprietary rights in such information of those who submitted it.

6.9. Test Construction/ Tool construction

NRs that develop tests and other assessment techniques use appropriate psychometric procedures and current scientific or professional knowledge for test design, standardization, validation, reduction or elimination of bias, and recommendations for use in appropriate forms.

6.10. Use standardized tools/ instruments

NR should obtain permission for using research instruments that are made and standardized and copy righted by others.

Conclusion:

These guidelines are prepared to provide a reference material for nurse researchers and hope that these guidelines will throw light on the research activities of nurses of India. With this humble attempt we believe nurses in India can really feel empowered and can use this booklet as ready reckoner for their research.

Best wishes!!

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