METHODIST

Student Investigator Guidelines for Submitting a Nursing and Allied Health Evidence Based Practice or Quality Improvement Study

1. Review the guidelines below to determine steps necessary to complete a Nursing and/or Allied Health Evidence Based Practice (EBP) or Quality Improvement (QI) Study at Methodist. ***It is important that students wishing to complete an evidence-based practice (EBP) or quality improvement (QI) study at Methodist contact the Nursing Research and Evidence Based Practice Council (NREBPC) Chair or Co-Chair prior to beginning developing the study.*** To do so, contact Administrative Support for the NREBPC (sheri.oneel@nmhs.org) who will notify chair or co-chair to contact student/staff member.
2. All documents are on www.bestcare.org and saved under ***IRB Nursing and Allied Health Study Forms.*** Most documents are saved in a word document for ease of typing.
3. To ensure the completeness of the IRB application and subsequent documents, students shall collaborate with their faculty advisor.
   a. Methodist Health System (MHS) employees completing studies as a student or any non-Methodist employee student should contact their faculty advisor for direction and completion of the IRB requirements.
   b. Faculty advisors are required to be co-investigators on all studies and participate in the student development and submission of the IRB materials.
   c. As a co-investigator, the faculty advisor listed has verified the completeness and accuracy of the IRB application.
   d. Students are required to have a clinical partner at the Methodist institution where they conduct the study. A clinical partner is an employee of MHS who acts as a liaison and contact person between the investigator and the MHS location of project.
   e. The clinical partner shall provide the investigator a letter indicating they agree to fulfill the clinical partner role.
   f. Clinical partners are encouraged to participate in dissemination of the project such as being co-authors and/or presenters as *mutually agreed upon.*

Student Quality Improvement or Evidence Based Practice Studies

1. Student/faculty advisor(s) visits with NREBPC Chair or Co-chair **prior** to study planning to ensure study is in alignment with Methodist strategic and clinical unit priorities.
   a. NREBPC Chair or Co-chair will verify service leader approval of study
   b. NREBPC Chair or Co-chair will assign a Methodist clinical partner for student.
2. Student(s) are required to have an IRB review of project at their college/university. If the college/university IRB committee deems the study to be EBP or QI, students are able to submit their IRB application @ https://hcfms.com/irb-review-form-student/.
3. The following documents are required for a complete submission:
   a. Copy of IRB application submitted to college/university
   b. Copy of letter from college/university letter deeming study QI or EBP.
   c. Letter from Methodist Clinical Partner agreeing to serve in this role.
   d. Letter of support from Methodist Service Leader/Manager.
   e. CITI training ***transcript with scores*** for the student, faculty member, and clinical partner.

f. If access to the electronic health record is needed, please include a letter of support for Electronic Health Record (EHR) access (if student will need to access the medical record) – *modify this letter and submit to the individual noted on the letter to obtain permission.*
    i. If investigator is a student and a MHS employee with an existing Cerner username, the investigator can use that employee username for the project. When the investigator first signs on, select *Clinical Student* to identify the sign-on relationship rather than Primary Nurse or another option.
    ii. If investigator is a student with an existing Cerner username, the investigator can use that username for the project. When the student first signs on, select *Clinical Student* to identify the sign-on relationship.
    iii. If investigator is a MHS employee with an existing Cerner username and not a student, but they are doing an IRB project at a MHS affiliate, the employee investigator can access the EHR using their existing Cerner username. When the investigator first signs on, select *Clinical Resource* to identify the sign-on relationship rather than any other option.
    iv. If investigator is not a MHS employee or student, the approved method to access MHS medical records is through NeHII (Nebraska Health Information Exchange Initiative). Access to NeHII can be obtained via this link. http://www.hcfms.com/quicklinks/access-request/. If NeHII access does not meet the needs for the project, the investigator will need to obtain Vice President of Compliance approval for Cerner access.

4. After verification of the complete document submission, the documents will be submitted to the nursing representative on the Methodist IRB Committee for an internal review process.
    a. If the IRB nursing representative agrees that this meets guidelines for QI or EBP, the student will receive an emailed letter giving student(s) permission to move forward with the study. This letter may take up to 3-4 weeks from submission. Please plan accordingly.
    b. If the IRB nursing representative feels the study is a research study, student will be contacted via email to complete a full IRB application.