

## **Speakers**

Jean Jenkins
 Clinical Advisor, NHGRI, NIH



- Alexis Bakos
   Acting Director,
   Division of Nursing, HRSA
- Ann Cashion
   Acting Scientific Director, NINR
   Intramural Research Program, NIH





# A Blueprint for Genomic Nursing Science

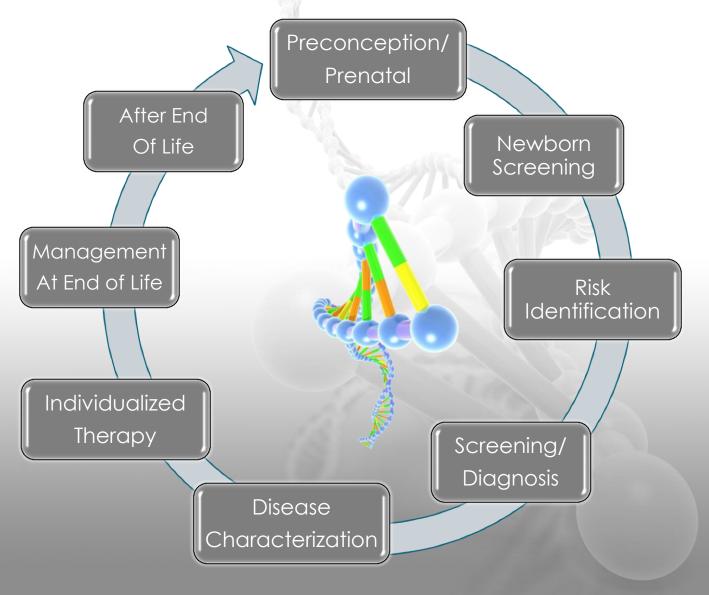
- >Todays webinar includes
  - information about the purpose,
  - methods to establish,
  - and focus of the Blueprint,
  - as well as next steps.
- This Blueprint targets research to build the evidence base to inform integration of genomics into nursing practice and regulation.

## **Funding**

- Intramural Program of the National Institutes of Health
  - National Cancer Institute
  - National Human
     Genome Research
     Institute
  - National Institute of Nursing Research



## Genetic and Genomic Influences Across the Healthcare Continuum





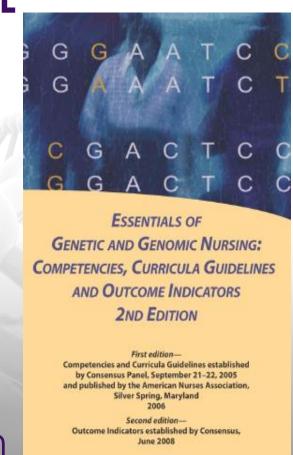
### **Essentials of Genetic and Genomic Nursing**

Define essential genetic and genomic competencies for **ALL** nurses regardless of level of academic preparation, practice setting or specialty

Endorsed by 50 nursing organizations

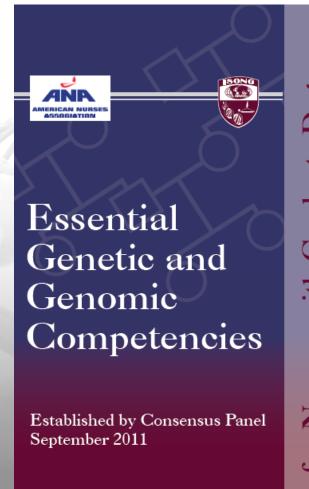
October 22-24 2006 Strategic Implementation Meeting

- >2<sup>nd</sup> Edition incorporated Outcome Indicators
  - Specific Areas of Knowledge
  - Clinical Performance Indicators
- >3<sup>rd</sup> Edition may be published in 2013 which includes some updates



## **Essential Genetic and Genomic Competencies** for Nurses with Graduate Degrees

- Define essential genetic and genomic competencies for **ALL** graduate nurses regardless of level of academic preparation, practice setting or specialty.
- >Established by a process of consensus



## Significance

- Evidence specific to outcomes of genomically competent nursing practice and the impact on the public's health is extremely limited if not entirely absent.
- The paucity of outcome data is hindering efforts to incorporate genomics into curricula, licensure, academic and healthcare organization accreditation.
- >No one health care discipline is at the forefront in the assessment of the evidence.
- Nurses are one of the primary health professions on the leading edge in the integration of genomics.
- The outcomes of this initiative can be used as a model to advance similar efforts to establish a research outcome agenda across other healthcare disciplines.



#### Aims of this Initiative

- Establish a blueprint for genomic nursing science that can be used to focus research efforts to fill identified evidence gaps
- >Establish the blueprint through
  - Analysis of the evidence
  - Expert evaluation of the current state of the science
  - Public comment



#### **Methods**

- State of the Science Advisory Panel Convened
- Evidence Reviews
- Meetings
  - Interactive Webinars (2)
  - In-person meetings (2)
- Public Comment

## **Advisory Panel**

- >16 members (2 coordinators, 14 invited members)
- >Members were selected based on:
  - Expertise In Genomics
  - Nursing Research
  - Nursing Workforce Issues
  - System Change
  - Health Services Measurement
  - Evidence Based Synthesis
- > Represented
  - Practice Environments
  - Academics
  - Under-represented Populations
  - Interdisciplinary Groups
  - Federal Agencies
    - HRSA, Bureau of Health Professions, Division of Nursing
    - National Institute of Nursing Research

## **Advisory Panel Members**

#### Co-Chairs:

Kathleen Calzone, PhD, RN, APNG, FAAN National Cancer Institute Jean Jenkins, PhD, RN, FAAN National Human Genome Research Institute

#### **Members:**

Alexis Bakos, PhD, MPH, RN Ann Cashion, PhD, RN, FAAN Nancy Donaldson, PhD, RN, FAAN W. Gregory Feero, MD, PhD Suzanne Feetham, PhD, RN, FAAN Patricia Grady, PhD, RN, FAAN Ada Sue Hinshaw, PhD, RN, FAAN Ann Knebel, PhD, RN, FAAN Nellie Robinson, MS, RN, FAAN Mary Ropka, PhD, RN, FAAN Diane Seibert, PhD, CRNP, FAANP Kathleen Stevens, EdD, RN, ANEF, FAAN University of Texas Health Science Center Lois Tully, PhD National Institute of Nursing Research JoAnn Webb, MHA, RN American Organization of Nurse Executives

Health Resources and Service Administration National Institute of Nursing Research University of California, San Francisco National Human Genome Research Institute University of Wisconsin-Milwaukee National Institute of Nursing Research Uniformed University of the Health Sciences National Institute of Nursing Research Children's National Medical Center University of Virginia Uniformed University of the Health Sciences



Genomic Nursing State of the Science Advisory Panel

### **Evidence Reviews**

- >Two approaches
  - Systematic evidence review
  - Research Portfolio Online Reporting Tools (RePORT) for NINR and other nursing specific research

#### **Webinars**

#### >Webinar #1

- Introduction of Panel Members
- Introductions to the Genomic Nursing State of the Science Advisory Panel Initiative
- Purpose and Significance of the Genomic Nursing State of the Science Initiative
- Methods to Achieve These Aims
- Overview of Completed Work

#### >Webinar #2

- Stakeholder perspectives
  - Nursing leadership, consumers, medicine
- Systematic Evidence Review presentation
- Requests from Panel for additional preparatory materials

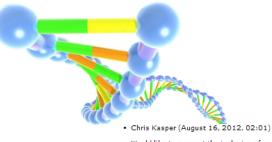
## In Person Meetings

- >Meeting 1-June 8, 2012
  - · Models for establishing the research agenda
  - Overview of the evidence gaps
  - Scope of research
  - Key priorities
  - Specific research directions
  - Funding considerations

#### <<<PUBLIC COMMENT PERIOD>>>

- Meeting 2-September 20, 2012
  - Key note: Patricia Grady, NINR Director
    Setting the Context of Genomic Research at NINR
  - > Review of Public Comments
  - > Revision of blueprint based on Public Comments
  - > Manuscript
  - > Discussion of next steps

## **Public Comment Period** July 16-August 16, 2012





Would like to suggest the inclusion of research initiatives in the emerging areas of genotoxicity of metals and epigenetic effects of battlefield toxicants. Both of these areas of research are rapidly expanding due to the introduction of new technology as well as international conflicts.

Allison Vorderstrasse (August 15, 2012, 20:55)

Thank you for addressing this great need.

I had a few comments/additions:

Under the area of Common Chronic Conditions, I would highlight the need to explore clinical and personal utility of risk factors/counseling including genomic risk testing. This is also an area where environmental factors are highly influential as you have acknowledged, so possibly areas such as nutrigenomics and epigenetics would be included in that area as well.

Under the area of client self-management, it seems that effective interventions to support selfmanagement would also be highly relevant. Along those lines I would add to the interdisciplinary collaborators in terms of health coaches, nutritionists, and others in behavioral medicine/integrative medicine who are so active in this area of research and practice.

Elizabeth Ness (August 10, 2012, 14:36)

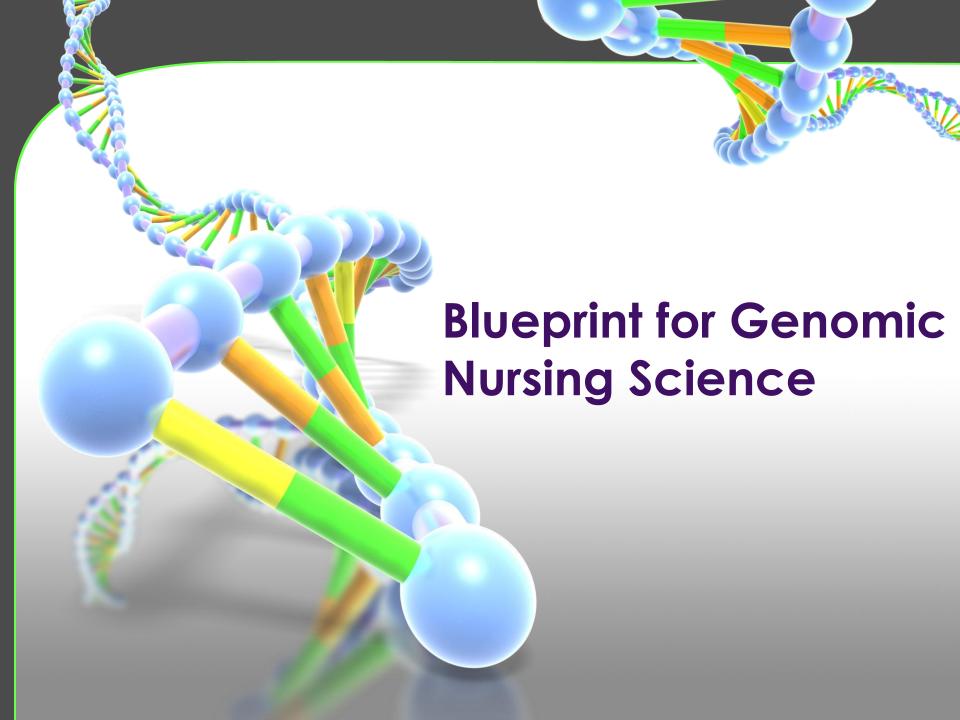
I would like to echo other reviewers? comments about the hard work that the group has put in to developing this draft research agenda. One thing that seems to be missing and not sure if it falls under capacity building, but there is nothing about the knowledge or assessing the knowledge that research nurse coordinators need to have related to genetics/genomics that is beyond what the "average" nurse needs to have. This is particularly important given that many clinical research studies have some type of genomic component to them as either a primary or secondary objectives and many of these studies have nurses functioning as study coordinators whose role is to reinforce the informed consent process as well as obtain samples and ultimately provide patient education. Thank you for the opportunity to comment.

Lisa Aiello-Laws (August 8, 2012, 18:26)

Thank you for your hard work. This is an important document to structure the future.

I have a few comments. These issues may be more specific within the categories than you want to add, but

- 1.In order to increase compliance with assessing family history, would we want to develop, or decide on, a specific tool as the recommended tool that can be used in EMRs and other computer systems? To ease and expedite the providers' usage.
- 2. I think psychosocial should be its own category. With the lack of parity in mental health care, this area is often ignored. This can include client issues, community issues, as well as nursing attitudes and beliefs.
- 3. Within research and curriculum, I agree that we need to follow up/research if genetics/genomics is being integrated, and its' effectiveness.



## **Advisory Panel Conclusions**

- >Focus on research producing clinically evidence along the translation science continuum
  - Use multifacted methodologies and measurements
  - Build on existing work
- >Framework is NINR Strategic Plan Areas
- Clients definition consistent with Genomic Nursing Competencies
  - Persons, families, communities, and/or populations
- >Two major research areas
  - Focus on the Client
  - Focus on the context in which health care is delivered
- >Cross cutting themes

#### Focus on the Context versus Client

#### Context

- > Capacity building of the profession
  - Nurse scientists
  - Nursing faculty
  - Students
  - Practicing nurses at all levels of academic preparation, role, clinical specialty
- >Environmental influences
  - Health disparities
  - Cost
  - Policy implications
  - Public education

#### Client

>Evidence needed to guide practice

## Innovation

Specific Nursing Research Category	Topic Areas
Technology development	Incorporation of new technologies (e.g. whole genome sequencing)
	Ethics
	Policy and guidelines to support applications
	Applications (e.g. clinical and analytic validity, and clinical utility)
	Genomic bioinformatics
	Translation, dissemination, implementation i. Use of technology in information delivery ii. Performance improvement by provider (e.g. point of care support) iii. Resources that support genomic research (e.g. registries of tools, best practices, nursing outcomes)

## Innovation

Specific Nursing Research Category	Topic Areas
Informatics Support Systems	Data storage and use to facilitate research process and outcomes
	Facilitate cross-generational sharing of genomic data (e.g. family history, laboratory analysis
	Managing, analyzing, and interpreting genomic information (e.g. sequencing data)
	Point of care decision support for client and healthcare provider
	Common terminology and taxonomy
	Common formats for data storage/exchange and queries
Environmental Influences	Evidence based guidelines
	Healthcare reform
	Economics (e.g. cost effectiveness)
	Regulatory gaps and/or variability

Training		
Specific Nursing Research Category	Topic Areas	
Capacity Building	Training future nursing scientists in genomics	
	Preparing nursing faculty in genomics	
	Education of current and future workforce in genomics (e.g. research nurse coordinators, advanced practice nurses, other healthcare professionals)	
	Preparation of clinical and administrative leaders to advance appropriate genomics/genetics integration into	

practice

**Bioethics** 

Education

result interpretation)

Optimal methods to:

Innovative use of biorepositories (e.g. informed consent,

-train the existing nursing workforce in genomics

genomic translation, research, and practice

-train the nursing leadership in genomics to support

-integrate nursing genomic competencies in basic

prelicensure and postlicensure in academic programs

Cross Cutting Themes	
Specific Nursing Research Category	Topic Areas
Health Disparities	Racial, ethnic, socioeconomic, and cultural influences on disease occurrence and response to disease and treatment
	Genomic health equity (e.g. access)
	Diseases that disproportionately affect specific groups (e.g. minorities
	Tamara la al III anno a sull'an

Cost

Policy

**Public Education** 

Cost effectiveness Value

Targeted therapeutics Overcoming misinformation and genomic "myths"

Comparative effectiveness

Health literacy

Genomic literacy

Policy as a context of science Research to inform policy

#### Health Promotion and Disease Prevention

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Specific Nursing Research Category	Topic Areas
Risk Assessment	Biologic plausibility (e.g. pathways, mechanisms,

Comprehensive screening opportunities

Risk-specific healthcare decision-making

biomarkers, genotoxicity)

Components of risk assessment (e.g. biomarkers, family

Risk communication

Informed consent

history)

DTC marketing and testing (e.g. uptake, utilization,

dissemination) Informed consent

Match of values/preferences with decisions

Risk perception/risk accuracy

Effect of decision support on decision quality (e.g.

Communication

**Decision Support** 

knowledge, personal utility)

## Advancing the Quality of Life

Specific Nursing Research Category	Topic Areas
Family	Family context(e.g. family functioning, and structure, family relationships, and communication)
	Ethical issues
	Healthcare provider communication with families
Symptom Management	Biologic plausibility (e.g. pathways, mechanisms, biomarkers, epigenetics)
	Clinical utility
	Personal utility
	Pharmacogenomics (e.g. therapy selection, medication titration)
	Decision making
	Evidence based effectiveness of approaches

## Advancing the Quality of Life

Specific Nursing Research Category	Topic Areas
Disease States (encompassing acute, common complex, and chronic)	Genomic based interventions that reduce morbidity and mortality
	Gene/environment interactions (e.g. epigenetics, genotoxicity)
	Pharmacogenomics
	Evidence based effectiveness of treatments/support
Client Self Management	Collecting and conveying information that informs self management (e.g. family history)
	Lifestyle behaviors
	Environmental exposure and protection (e.g. occupational)
	Synergy of client and provider expectations (e.g. client/family centered care)
	Personal utility

## **Next Steps**

- >Further refinement of the Blueprint
  - NINR funded initiative
- >Infrastructure
  - Designing, implementing, and evaluating clinical and educational infrastructure to support genomic capacity and competency

#### > Measurement

- Existing measures adapted for genomic use
- Build capacity to measure the impact of genomically focused nursing practice on patient care quality, costs, and outcomes
- Database infrastructure

#### >Funding

 Agencies and other funding streams (e.g. foundations) should explore avenues for funding blueprint nursing science

### **Conclusions**

- Genomics underlies all healthcare and is fundamental to nursing practice
- Nursing research in genomics will help establish evidence base needed to facilitate translation of genomics into practice to improve health outcomes
- The Blueprint for Genomic Nursing Science provides the platform to accelerate research addressing critical gaps

# Blueprint for Genomic Nursing Science

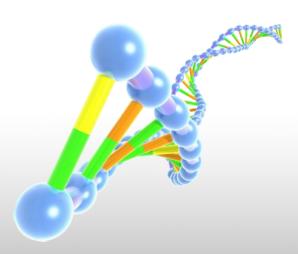
>Journal of Nursing Scholarship March 2013 Genomic Special Issue (all articles open access)

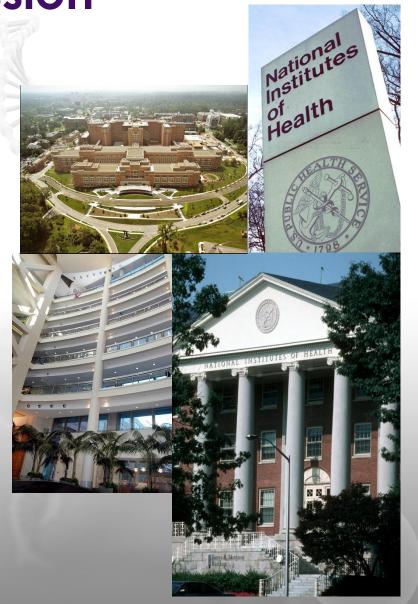
http://www.genome.gov/27552093

Or

http://www.ninr.nih.gov/sites/www.ninr.nih.gov/files/jnu\_12007\_Rev\_EV.pdf

## **Questions/Discussion**





## Journal of Nursing Scholarship Genomic Nursing Webinar Series

- Revisit the webinars presented by nursing and medical expert authors of manuscripts published in the Journal of Nursing Scholarship 2013 Genomics Special Issue.
- Archived video and slides from each webinar available at:

http://www.genome.gov/27552312