Nursing informatics, ethics and decisions: implications for translational research
Kaltoft, Mette Kjer; Nielsen, Jesper Bo; Dowie, Jack

Publication date:
2014

Document version
Final published version

Citation for published version (APA):

General rights
Copyright and moral rights for the publications made accessible in the public portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

• Users may download and print one copy of any publication from the public portal for the purpose of private study or research.
• You may not further distribute the material or use it for any profit-making activity or commercial gain
• You may freely distribute the URL identifying the publication in the public portal

Take down policy
If you believe that this document breaches copyright please contact us providing details, and we will remove access to the work immediately and investigate your claim.
Objective: To introduce, in the multi-disciplinary contexts of clinical decision making and policy formation, a theory-based decision-analytic framework for the transparent forward translation of research into practice, simultaneously identifying and communicating the need for backward translation from practice to research.

Methods: Web-based decision analytic software is used to demonstrate how the weights for what matters, i.e. person/patient-important criteria, can be combined, using the same 0-1 scale, in an expected value calculation, with evidence-based ratings for option performance on those criteria to produce a preference-sensitive opinion.

Results: The MCDA/Annalisa framework combines Nursing Informatics and Nursing Ethics (left below) in the clinical context of a nurse’s decision to disclose or not information to a near relative (six criteria: beneficence, non-maleficence, autonomy, justice, veracity, confidentiality). For a mini-HTA (right example) it was used in a systematic review on whether to invest in nurse handheld computers (chosen criteria are related to the patient (effectiveness, safety, satisfaction, Quality of Life), organization (staff and work environment, internal and external communication and relationships) and economy (start-up costs, financial implications, externalities).

Conclusion: Web-and MCDA*-based decision support can provide nursing with a template, technique and tool for translating research findings into practice. It also can identify weaknesses in the current evidence base in order to influence research priorities. The optimal decision in each case depends on both the weights attached to the selected criteria and the performance ratings for the options on those criteria. Inevitable trade-offs can be communicated interactively in the decision-analytic framework to aid multi-disciplinary collaboration.

References:
2. Callard F, Rose D, Wykes T. Close to the bench as well as at the bedside: involving service users in all phases of translational research. Health Expectations 2011:1–12.