EDITRORIAL



Clinical Nursing WILEY

Cultivating clinical-academic partnerships through a Virtual **Nursing Grand Rounds series**

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Cultivating clinical-academic partnerships and engaging nurses in evidence-based practice and research are increasingly important (Albert et al., 2019; Storey et al., 2019; Whalen et al., 2020). For decades, nurses have demonstrated creative methods for engaging in continuing education programmes and increase research capacity within interdisciplinary teams from clinical to academic settings. Nursing grand rounds can be used as a method of continuing education for nurses and have proven to enhance interprofessional education and communication within healthcare teams, ultimately leading to positive outcomes for patients (Ryan et al., 2019). A key purpose of nursing grand rounds is to provide an inclusive forum that cultivates a culture of collaboration, community service and lifelong learning. Schools of nursing have the opportunity to lead continuing education for nurses in both clinical and academic settings.

Historically, grand rounds have been led by medical staff as a way to present case studies and share clinical information to improve practice. Over time, grand rounds have been adopted by other disciplines, including nursing, as they provide opportunities to highlight and improve nurses' engagement with research and evidence-based practice. Healthcare organisations use nursing grand rounds as a tool to build research capacity for nurses, professional development and continuing education, and to support an infrastructure for interdisciplinary team communication and collaboration (Salinas et al., 2019). In hospitals with Magnet® designation and those engaging in shared governance processes, the grand rounds forum meets the objectives for professional development and structural empowerment (Crow et al., 2014) whereby nurses lead their own practice from the bedside to the boardroom, and demonstrate leadership in the evidence-based environment (Hallock, 2019).

Clinical academic partnerships between higher education and healthcare institutions offer mutual benefits by promoting the

dissemination of clinical research, recognising nursing expertise and learning from peers (Albert et al., 2019). Nurses are naturally curious, and faculty who encourage nursing students to participate in nursing grand rounds can instil the convention for future practice. This was the impetus for the Johns Hopkins School of Nursing (JHSON) to start a monthly Virtual Nursing Grand Rounds series, with continuing nursing education credits, led by nurse researchers and interprofessional colleagues from around the world (Nakhongsri et al., 2015). The structure for expert speakers and live participation was used to deliver pertinent and state of the science topics chosen to support a culture of inquiry, nursing leadership and interprofessional practice (Laibhen-Parkes et al., 2015).

The Johns Hopkins School of Nursing is embedded in the Johns Hopkins Health ecosystem with a network of hospitals and community services locally and internationally. We formalised partnerships between the Johns Hopkins School of Nursing and the Johns Hopkins Health System by developing a collaborative chapter through Sigma Theta Tau International Honor Society of Nursing (Sigma). Through this endeavour, there is improved collaboration in continuing education programmes, and scholarly outputs between both entities. This example of Sigma leadership serves as an international exemplar of clinical academic partnership and now serves as a new model for Sigma chapter leadership, globally.

As the COVID-19 pandemic took hold across the nation, we wanted to uphold our commitment to interprofessional lifelong learning through innovation and excellence by implementing a Virtual Nursing Grand Rounds series. At a time when the option for in-person meetings was not currently available, we looked to using available online resources to facilitate this connection between the clinical and academic communities of healthcare providers.

Careful review of potential speakers and topics was narrowed down, and internal and external experts were invited to present 30- or 60-min fully interactive, synchronous presentations on topics such as gun violence prevention; mindfulness and resilience; smoking cessation; and palliative care, climate change and COVID-19. In each case, the planners used a nursing framework, even though selected presenters included physicians, surgeons, nurses, pharmacists and researchers. Guiding principles included relevance to nursing, evidence-based practice, implications for diversity and inclusion, and how the presentation supports the interprofessional education initiative across the Hopkins enterprise. Each speaker was asked to extrapolate experience, evidence and current practice into their Grand Rounds session to facilitate optimal discussion, questions and answers. For example, the guest speaker on gun violence prevention, Dr. Joseph Sakran, a chief trauma surgeon at Johns Hopkins, provided a personal story how he was shot in the throat at the age of 17, how there are more states requiring a licence to open a barbershop than to own guns, and how he leads policy from the emergency provider perspective. Additionally, another talk was undertaken by two nurse practitioners who discussed their experiences with expeditiously transitioning from in-person to telehealth visits with patients, to retain access to health care for managing chronic conditions during the COVID-19 pandemic stay-at-home orders in the United States. Their discussion highlighted not only the benefits of telehealth, but also the challenges with ensuring patient privacy, use of web cameras for patients with psychiatric disorders and challenges with digital access and literacy among patient populations. These dynamic presentations stimulated questions from the audience, many who were healthcare providers that were experiencing similar challenges and were looking to these nurse experts for evidence-based strategies to mitigate these contemporary challenges in clinical practice.

The Virtual Grand Rounds series is well-attended, with a range of 60–80 participants in each meeting. All nursing faculty, students, alumni and colleagues and in the greater community received invitations, and there was equal representation of post-licensure attendees. To maintain the interactive quality, the highest technological standards were used to monitor the questions and answers and to record the grand rounds to make them accessible for those who could not attend but could receive credit for up to thirty days after the event. Hence, the importance of having a registration procedure was a critical element in planning the events. Early on, the series received highly favourable reviews and it became clear that the demand was for at least monthly sessions, if not more often.

In today's vigorous healthcare environment, a Virtual Nursing Grand Rounds series provides an opportunity to collaborate and generate lively discussion through a platform that showcases topics and situations which many may not otherwise experience. Through this nursing grand round series, our aim is to cultivate clinical-academic collaborations, foster lifelong learning within the scientific nursing community that will promote positive patient outcomes and strengthen the voice of clinical nursing.

CONFLICT OF INTEREST

The authors report no conflict of interest.

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How to cite this article: Goodwin M(, Baptiste DL, Davidson PM. Cultivating clinical–academic partnerships through a Virtual Nursing Grand Rounds series. *J Clin Nurs*. 2020;00:1–2. https://doi.org/10.1111/jocn.15573