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# The role of the nursing research supervisor: competencies, impact and challenges in evidence-based practice

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**KEY WORDS:** Research supervisor, nursing, evidence-based practice, research culture, interdisciplinarity.

## ABSTRACT

Nursing research is essential for improving the quality of care and health outcomes of patients. This review study aims to analyse in depth the functions, competencies and strategies associated with the Nursing Research Supervisor, as well as their impact on the implementation of evidence-based practice, the generation of a scientific culture and the improvement of clinical outcomes. Through a critical and structured approach, the aim is to make this role visible as a fundamental pillar for advancing towards more scientific, collaborative and excellence-oriented nursing.

The study examines key resources that facilitate nursing research, highlighting professional education, the development of a research culture, and the establishment of a solid infrastructure to support nurses' participation in research projects. The need for interdisciplinary collaboration to integrate diverse expertise and improve patient care is highlighted. Access to funding is seen as a determining factor in conducting quality research. Various strategies are identified to obtain funding such as interdisciplinary collaboration, quality mentoring and seeking alternative sources.

In conclusion, key resources for nursing research include an appropriate infrastructure, ongoing education programmes, a solid research culture, interprofessional collaboration, and good institutional support. The integration of these factors, together with appropriate funding and leadership from skilled Research Supervisors, is essential for promoting innovation in care and improving health outcomes for patients.

# INTRODUCTION

Nursing research is a fundamental pillar for the ongoing improvement of clinical practice, innovation in care and excellence. The Nursing Research Supervisor plays a strategic role in this field, leading research, training and coordination activities, and acting as a bridge between clinical practice, the scientific-academic environment and institutional policies.

Their functions include fostering a solid research culture, promoting the implementation of evidence-based practices (EBP), facilitating interdisciplinary collaboration and managing access to sources of funding. In addition, they oversee the methodological and ethical quality of projects, promoting scientific integrity and contributing to the effective application of results in the clinical setting. These actions are essential for integrating scientific knowledge into care, improving clinical outcomes and reinforcing the professional development of nurses.

This review study aims to analyse in depth the functions, competencies and strategies associated with the Nursing Research Supervisor, as well as their impact on the implementation of evidence-based practice, the generation of a scientific culture and the improvement of clinical outcomes, and to synthesise key aspects such as interdisciplinary collaboration and obtaining funding for research. The role is thereby made visible as a fundamental pillar in the advance towards more scientific, collaborative, innovative and excellence-oriented nursing care.

## THE ROLE OF THE NURSING RESEARCH SUPERVISOR

Nursing Research Supervisors play an essential role in academic, scientific and professional development within the healthcare environment. Their functions are diverse, ranging from methodological guidance to the ethical and critical training of future researchers.

Among a supervisor's main responsibilities is the monitoring of the research process, providing critical input on people's progress, encouraging their academic growth and providing ongoing and motivating accompaniment (1). This kind of supervision involves not only technical aspects, but also the establishment of effective relationships and the clear definition of mutual expectations, thus creating a structured framework conducive to autonomous learning and rigorous scientific production (2).

The literature shows that the relationship between supervisor and researcher is based on trust, two-way communication and the establishment of clear goals, factors associated with better results in both scientific production and professional development (5).

Active mentoring and role modelling also form part of essential practices in research supervision, especially at PhD level. The quality of supervision has been identified as being closely related to the experience, formal preparation and reflective nature of the supervisor (3).

As far as competencies are concerned, the supervisor is expected to possess interpersonal and leadership skills, sound methodological knowledge and the ability to provide constructive feedback and problem solving during the different stages of the research process (1). Supervisors with specific training in mentoring and leadership get better results in motivating and retaining junior researchers (7). In addition, adopting a person-centred approach to research mentoring allows for collaborative relationships and fosters an environment that prioritises the well-being and holistic development of healthcare workers (4).

To reinforce these capacities, a number of complementary certifications have proven beneficial. These include certification in mentoring and leadership, which supports scientific productivity and career development (5), certification in clinical supervision, useful for providing reflective support in advanced practice settings (6), training in higher education, which provides pedagogical tools for effective supervision (3), and certification in research and methodology, which strengthens the design and drawing up of scientific projects (2).

Overall, the Nursing Research Supervisor not only facilitates the production of rigorous knowledge, but also actively contributes to the consolidation of a scientific culture that has an impact on the quality of care and the professional nature of the discipline. A supervisor's attributes also include the capacity to articulate institutional research strategies, promote the transfer of knowledge and lead innovation in healthcare practice (10). Competencies and functions are summarised in Table 1.

*Table 1: Roles and competencies of the nursing research supervisor (Source: prepared by the authors).*

| Function/Competence | Description |
|---|---|
| **Supervision and Monitoring** | Monitoring and following up on the progress of the research, ensuring that the established deadlines and goals (indicators) are met. |
| **Providing Constructive Feedback** | Providing critical and constructive input on drafts, helping people improve their projects and studies. |
| **Fostering the Academic Role of Nurses** | Promoting the academic development of healthcare workers, encouraging autonomy and professional growth. |
| **Establishing a Solid Framework for Research** | Helping structure the research, ensuring a solid and appropriate design. |
| **Mentoring and Role Modelling** | Serving as a mentor, acting as a role model and guiding people in their decisions and research projects. |
| **Ongoing Training** | Taking part in training programmes to improve competencies, guaranteeing quality training. |
| **Research Capacity Building** | Fostering research skills and competencies, providing opportunities for growth in both clinical practice and research. |
| **Collaboration with External Experts** | Collaborating with other experts when necessary to ensure quality and an appropriate approach to research. |
| **Promotion of Institutional Relations** | Fostering relationships between research groups, incorporation of nurses into research groups, relationships with hospitals, departments, institutes and universities to consolidate collaborative networks. |
| **Strategic Direction and Coordination** | Taking part in the drawing up of internal policies and regulations, research strategies and priority lines. Forming part of management committees and research commissions. Acting as a link between the hospital and academic and scientific institutes. |

## PROMOTING A CULTURE OF RESEARCH IN HEALTH INSTITUTIONS

Promoting a research culture within healthcare institutions is a fundamental part of improving the quality of patient care and fostering ongoing professional development in nursing. A nursing research supervisor plays a crucial role in this process, and uses a variety of different strategies to create a research-friendly environment.

Strategies for promoting a research culture include structured mentoring, effective clinical supervision, formal research training, the creation of a supportive environment, the provision of appropriate incentives and resources, as well as institutional management support, as shown in table 2.

Several studies show that when an institutional culture fosters research, greater scientific production is obtained, the transfer of results is increased and clinical quality and safety indicators are all improved (7).

Structured mentoring has been shown in systematic reviews to enhance the acquisition of research competencies, facilitate access to funding opportunities and reinforce the retention of nursing research talent (8).

Effective clinical supervision includes the integration of research into daily practice, practical problem solving and the articulation of ongoing improvement strategies, which has been correlated with improved clinical outcomes and increased staff satisfaction (1).

Research training, supported by international evidence, positively impacts the ability of healthcare workers to generate applicable knowledge and lead projects of high clinical impact (3).

The creation of a supportive institutional environment, including material resources, making time available and professional acknowledgement is described as a key facilitator for the consolidation of a sustainable scientific culture (9, 10).

Providing the appropriate incentives and resources, such as protected time, access to mentoring and formal acknowledgement is a strategic motivational factor for increasing research participation (11).

Committed institutional leadership, through specific policies and resources for nursing research, has been identified as a predictor of success in integrating research into nursing practice (9, 10).

*Table 2: Strategies for promoting a research culture within health institutions. (Source: prepared by the authors).*

| Strategy | Description | References |
|---|---|---|
| **Structured Mentoring** | Developing research capacity through formal, guided mentoring. Enabling nurses to access resources and support from experienced mentors. | Farquharson (2024); Hafsteinsdóttir et al. (2017) |
| **Effective Clinical Supervision** | Integrating research into daily clinical practice. This involves solving practical problems and fostering research readiness. | Severinsson (2012) |
| **Formal Research Training** | Providing structured training programmes to enhance research competencies. Ensuring that supervisors can guide nurses. | Jackson et al. (2021) |
| **Setting up a Supportive Environment** | Fostering an institutional environment that facilitates research through the allocation of resources, protected time and institutional support. | Berthelsen & Hølge-Hazelton (2017); Palmer et al. (2023) |
| **Appropriate Incentives and Resources** | Providing incentives such as protected time and access to mentors, which improves satisfaction and participation in research. | Hagan (2018) |
| **Supportive Institutional Management** | Management should ensure resources and active support for nurses by promoting research-friendly institutional policies. | Berthelsen & Hølge-Hazelton (2017); Palmer et al. (2023) |

## IMPLEMENTING EVIDENCE-BASED PRACTICE (EBP)

The Nursing Research Supervisor plays an essential role in the integration of evidence-based practice (EBP) in the clinical setting. Structured mentoring improves preparedness for EBP as well as cultural and organisational perceptions of implementation (12). In addition, having mentors with experience in funded research facilitates the development of new initiatives (7). Supervision that encourages reflection, analysis and problem-solving contributes significantly to incorporating scientific evidence into daily practice (1). In addition, training supervisors in research reinforces their competencies to lead evidence-based processes (3). Finally, creating an environment that promotes leadership and communication, and overcomes organisational barriers, favours the sustainability of EBP (13, 14).

## THE IMPACT OF RESEARCH ON CLINICAL PRACTICE AND PATIENT CARE

The impact of research on clinical practice is a key indicator of quality and professional development within the healthcare environment. The role of the Nursing Research Supervisor is essential for facilitating, observing and measuring this impact in a systematic way, ensuring that the evidence generated is effectively translated into tangible improvements in patient care.

The use of specific tools to measure impact, such as the one proposed by Newington et al. (15), allows for an objective assessment of aspects such as process optimisation, research capacity building, the implementation of results and economic benefits derived from clinical research.

The evaluation of clinical and economic outcomes is another crucial aspect. Studies such as that of Pintz et al. (16) have shown that the application of evidence-based practices in hospital settings can significantly improve the quality of care, reflected in increased patient and staff satisfaction, reduced hospital stay and infection rates, and lower hospital costs. This data allows supervisors to show the tangible value of research for healthcare managers.

Monitoring the implementation of evidence-based practice also allows for impact assessment. Gawlinski (17) highlights the importance of involving clinical nurses early in the research process to facilitate better adoption of research-derived recommendations. This approach not only favours the incorporation of new practices, but also increases staff motivation and commitment.

In addition, the evaluation of research training programmes has been found to be an effective way to promote a culture of ongoing improvement. Black et al. (18) documented the fact that participation in research programmes increases healthcare workers' interest in advanced education, boosts their participation in dissemination activities, and reinforces their clinical competencies. This in turn has a direct impact on patient care.

Another essential component is building up a research culture in the clinical setting. According to Berthelsen and Hølge-Hazelton (9), a solid research culture is characterised by team acceptance of the value of research, institutional support, the daily use of evidence in clinical practice, and the availability of resources to facilitate the scientific development of staff.

Finally, the commitment and participation of nursing staff in research processes are essential to ensuring better transfer of knowledge to care practice. Initiatives that promote clinical leadership in research, such as those described by O'Brien et al. (19), favour the integration of research into daily activity, consolidating an approach focused on ongoing improvement. The literature shows that the promotion of clinical-research leaders increases the sustainability of change and favours the implementation of evidence-based innovations (19).

## INTERDISCIPLINARY RESEARCH

Interdisciplinary collaboration plays a key role in the development of solid, innovative research focused on improving care. In complex clinical settings, where patients have multiple biological, psychological, social and spiritual needs, the integration of knowledge from different disciplines allows for a more holistic, effective and evidence-based approach to care.

One of the main benefits of interdisciplinary research is improved clinical outcomes. Ma et al. (20) showed that both collaboration between nurses and other healthcare workers, as well as cooperation among nurses themselves, is significantly associated with a reduction in adverse events such as hospital-acquired pressure ulcers and patient falls. These findings underline that interdisciplinary collaboration not only strengthens communication and clinical decision-making, but also has a direct and positive impact on patient safety and quality of care.

Moreover, a collaborative environment promotes a culture of research and ongoing professional development. Levites Strekalova (21) highlights the fact that the integration of training and career development activities in collaborative contexts prepares PhD students, postdoctoral students and junior faculty to work effectively in interdisciplinary teams. This experience contributes to reinforcing their ability to obtain funding, lead complex research projects and implement results in clinical practice. Collaboration thus becomes a key driver of academic and scientific growth within nursing.

Another relevant aspect is the integration of complementary knowledge and competences. Nursing, by its very nature, benefits greatly from interaction with disciplines such as medicine, psychology, social work, physiotherapy and pharmacy. Goldsberry (22) argues that interprofessional collaboration not only breaks down traditional hierarchical barriers, but also promotes transformational leadership in the educational and clinical environment. This synergy facilitates the design of more comprehensive interventions that address both the biological and psychosocial aspects of care, thus improving the patient experience.

Finally, interdisciplinary research also has a positive impact on nurses' commitment and job satisfaction. According to Nordfjaern et al. (23), people working in cohesive interprofessional teams perceive a greater ability to meet not only the clinical, but also the psychosocial and legal needs of their patients. This perception increases nurses' sense of purpose, belonging and motivation in daily work, which has a direct impact on the quality of the working environment and the care provided.

## ACCESS TO FINANCING FOR RESEARCH PROJECTS

Access to funding is an essential component in advancing nursing research, facilitating the ongoing improvement of clinical practice and promoting excellence in patient care. Securing appropriate resources enables not only the development of serious research, but also the sustainable and effective implementation of research findings in clinical settings.

One of the main enablers of access to funding is interdisciplinary collaboration. Collaborative networking with people from other disciplines not only enriches the quality of projects, but also reinforces their competitiveness in funding calls. Farquharson (7) highlights the fact that multidisciplinary collaboration, together with mentoring from researchers with experience in fundraising, are key factors for the successful funding of nurse-led projects.

High-quality mentoring is also critical for early-stage researchers to develop solid proposals and learn how to navigate the complex funding application process. Experienced mentors provide strategic and technical guidance in formulating research questions, choosing methodology and justifying impact, which increases the likelihood of obtaining competitive funding (7).

A robust institutional infrastructure is also essential. This includes elements such as protected research time, administrative assistance, access to technological and bibliographic resources, and dedicated research space. When these conditions are present, nurses can devote sustained efforts to their projects, increasing their scientific productivity and funding possibilities (7).

Furthermore, it is important to consider alternative sources of funding. Some authors suggest that faced with high competition for traditional funding such as from government agencies, nurse researchers could explore local or private options, including community organisations, philanthropic foundations, clinical agencies and professional associations (24). This diversification of sources allows innovative lines of research to be sustained, even in resource-limited contexts.

Further crucial criteria for accessing funding is the quality of the research team. Funding agencies value the previous experience, technical skills and cohesion of the team, as well as the methodological clarity of the project. Multidisciplinary teams with complementary competencies and solid backgrounds are therefore essential (25).

Likewise, innovative and high-impact proposals are more attractive to agencies seeking to foster scientific development. These opportunities are especially designed to foster creative solutions to complex clinical problems (26).

Finally, institutional support should be made evident not only in tangible resources, but also in policies that value and promote nursing research. The engagement of clinical leaders, integration with universities, and the creation of environments that celebrate research are critical elements in the sustained success of funding programmes (27).

## PRACTICAL IMPLICATIONS AND FUTURE LINES OF RESEARCH

The professionalisation of the figure of the Nursing Research Supervisor/Coordinator involves formally recognising this post in the academic care organisation chart. Precisely defining their functions and competencies simplifies coordination with universities and institutes, streamlines ethical procedures and strengthens fundraising. From this position, the supervisor leads structured mentoring programmes that link mentors and junior researchers, according to their line of work and experience, establishes monitoring indicators and guarantees two-way feedback capable of boosting scientific productivity and the implementation of evidence-based practice. To sustain these actions, it is essential to have a robust infrastructure – specialised administrative staff, priority access to bibliographic and technological resources – backed by acknowledgement policies that incorporate incentives into a professional career and consolidate the research culture. As a hub of interdisciplinary collaboration, the supervisor promotes mixed teams that generate innovative and transferable clinical solutions.

Future lines of research should first compare the effectiveness of the different supervision models through quasi-experimental studies that relate each approach to scientific output, evidence-based practice and health outcomes. Economic analyses are also needed to quantify the return on the implementation of this approach. Equally valuable are longitudinal cohorts that identify the organisational and leadership factors that sustain evidence-based practice after the end of the projects, as well as studies that analyse the equity and diversity of the teams, examining the influence of gender, clinical experience and care setting on access to opportunities and resources. Finally, there is an urgent need to design and validate a scale that standardises the measurement of supervisor competencies and links supervisor performance to quality of care and clinical outcomes.

## CONCLUSIONS

Nursing research is essential for improving clinical practice and the quality of patient care. Building up a research culture in clinical settings, supported by professional development, ongoing nursing education and institutional leadership is essential for excellence in care. The role of the research supervisor is a key part of this process, facilitating the integration of research into daily practice, guiding healthcare workers and ensuring that projects are aligned with patient needs and quality standards. A supportive infrastructure is needed to encourage research and innovation in nursing. In addition, interdisciplinary collaboration enriches research, promoting a holistic approach to health problems and solutions. Access to funding and the existence of an appropriate infrastructure are essential factors for carrying out research projects that have a positive impact on clinical practice. These elements, together with the strategic support of the research supervisor, all contribute to ongoing improvement in healthcare and excellence in nursing.

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