

Future of AP research

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Research Lead for Advancing Practice



- Clinical research is everyone's future**
- Clinically research active hospitals have better patient care outcomes**
- One of the four pillars**

Multi-professional framework for advanced clinical practice in England



Multi-professional consultant-level practice capability and impact framework



- “..embedding clinical research at the heart of patient care across the NHS, making participation as easy as possible and ensuring all health and care staff feel empowered to support research..”

Policy paper

Saving and Improving Lives: The Future of UK Clinical Research Delivery

Published 23 March 2021

- **Clinical research is everyone's future (NIHR)**
- Encouraging a research-positive culture in health and care organisations is important for patients and staff
- Evidence shows clinically research-active hospitals have better patient care outcomes.

Open Access Research

BMJ Open Does the engagement of clinicians and organisations in research improve healthcare performance: a three-stage review

Annette Boaz,¹ Stephen Hanney,² Teresa Jones,² Bryony Soper²

To cite: Boaz A, Hanney S, Jones T, et al. Does the engagement of clinicians and organisations in research improve healthcare performance: a three-stage review. *BMJ Open* 2015;5:e009415. doi:10.1136/bmjopen-2015-009415

ABSTRACT

Objective: There is a widely held assumption that engagement by clinicians and healthcare organisations in research improves healthcare performance at various levels, but little direct empirical evidence has previously been collated. The objective of this study was to address the question: Does research engagement (by clinicians and organisations) improve healthcare performance?

Strengths and limitations of this study

- This review brings together for the first time a diverse body of literature addressing whether engaging clinicians and healthcare organisations in research is likely to improve healthcare performance.
- It also explores the mechanisms through which improvement is achieved to try and understand

Research strategies

Making research matter
Chief Nursing Officer for
England's strategic plan for
research

Allied Health Professions' Research and Innovation Strategy for England



“Our research & innovation makes a difference.”

- **Generating a research culture**
- **Embedding research into clinical care**
- **Becoming a research active clinician**

- **Research in practice. The ‘clinician researcher’.**
- **Added value**

Research in all forms

- **Quantitative,**
 - E.g. RCT
- **Qualitative**
 - E.g. interview, focus group.
- **Qi**
- **Audit and service evaluation**
- **Workforce evaluation**



Measuring the **IMPACT** of your role is vital

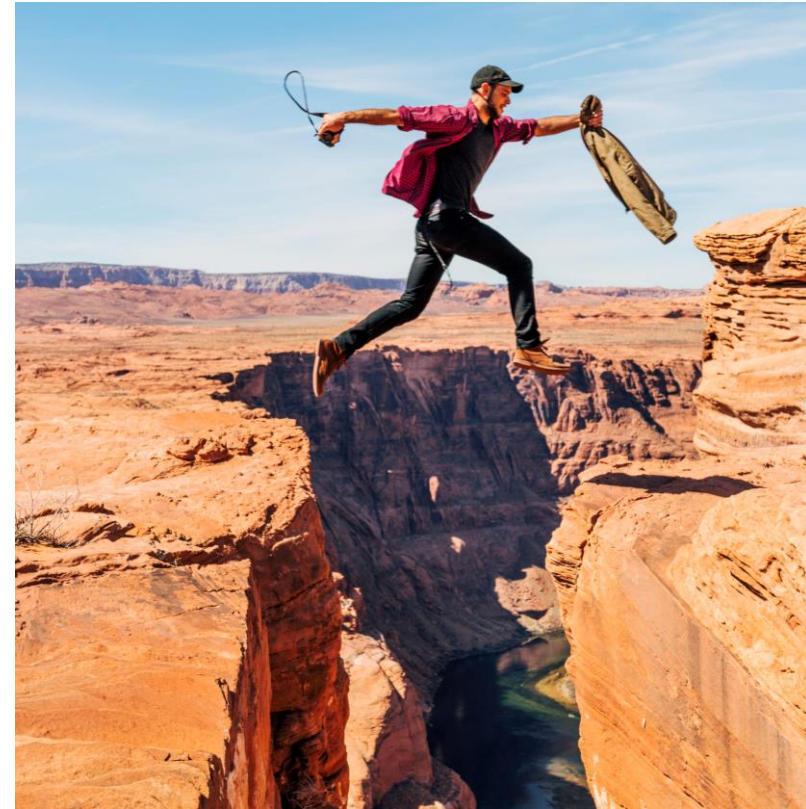


VICTOR
visible impact of research

The gaps


- Only 11 % of APs are involved in any form of research.
- Even lower % disseminate findings in any form.
- Only 0.5% of primary care trusts state that research is a framework priority.

<http://dx.doi.org/10.1136/bmjopen-2021-055475>



Understand research capacity and activity

“Encouraging new starters and building research from grass-roots; that will change culture here”



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Understanding research capacity and activity across Allied Health Professionals in a local NHS Trust

Chalmers, S., Connell, L., Roddam, H., Hemingway, R., & Cherriman, A.

Introduction

There is good evidence that Trusts who participate in research have improved healthcare performance (Boaz et al., 2015). Organisations seeking to improve allied health research capacity and culture require valid and reliable methods so outcomes of research capacity building initiatives can be evaluated and measured over time.

Aim

To evaluate the current research capacity, culture, and activity at individual, team and organisational levels among AHP staff working in Bolton NHS Foundation Trust (BFT).

Methods

- Validated survey: The Research Capacity and Culture (RCC) tool (Holden et al., 2012)
- Individual interviews (n=1)

Results

- 25% survey response rate, n=104
- 8 different AHP groups (2.9% SLTs)
- Median 7 years working at the Trust (IQR 3-13 years)
- Median 19 years qualified (IQR 14-22)

Highest domain scores (7/10)	Lowest median scores (7/10)
Designing questionnaires (6)	Securing research funding (3.5)
Team level	Ethics applications (4)
Staff involvement in research planning (5)	Access to software (3)
Research relevant to practice (5)	Organisation level
Promoting EBP(6)	Identified experts for advice (4)
	Access to funding for research (4)
	Engagement with Universities (4)

Current research activities



Building AHP research: selected themes

- Barriers to building research capacity:**
 - Time
 - Sustainability

"Some do well for a few months and then it slides because of clinical demands"
- Research capability needs:**
 - Mentors and shared learning
 - Skill set


"Some teams have research success, it would be interesting to understand how they built that"

Conclusions

Research success and skill were reported at similar levels across individual, team and organisation domains. Interventions to build research culture and capacity for AHPs require simultaneous top-down and bottom-up approaches particularly targeting the barriers and skills with the lowest scores reported by BFT AHP staff.

Implications for practice

Knowledge of existing research culture and capability can assist strategic decisions about how to engage healthcare workers in research activities. Applying the behaviour change wheel COM-B can identify appropriate intervention functions for building research capacity.



Cordrey et al. *BMC Health Services Research* (2022) 22:85
<https://doi.org/10.1186/s12913-022-07480-x>

BMC Health Services Research

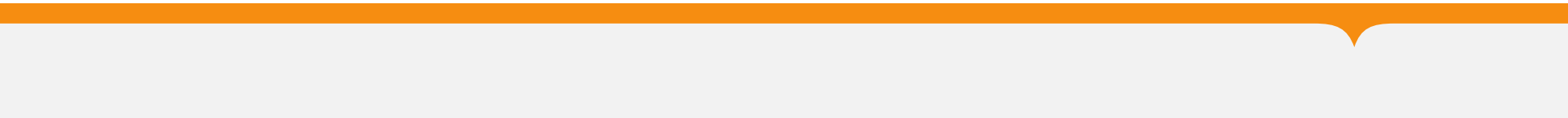
RESEARCH

Open Access



Exploring research capacity and culture of allied health professionals: a mixed methods evaluation

Terry Cordrey^{1,2*}, Elizabeth King^{1,2}, Emma Pilkington¹, Katie Gore^{1,2} and Owen Gustafson^{1,2}



- The RCC tool is a valid and reliable questionnaire that measures indicators of research capacity and culture at individual, team and organisation domains.

**Validation of the research capacity and culture (RCC) tool:
measuring RCC at individual, team and organisation levels**

Libby Holden ^{A D}, Susan Pager ^B, Xanthe Golenko ^A and Robert S. Ware ^C

+ Author Affiliations

Australian Journal of Primary Health 18(1) 62-67 <https://doi.org/10.1071/PY10081>

Submitted: 29 October 2010 Accepted: 2 May 2011 Published: 21 October 2011

(Hint: research infrastructure and empowerment are essential)

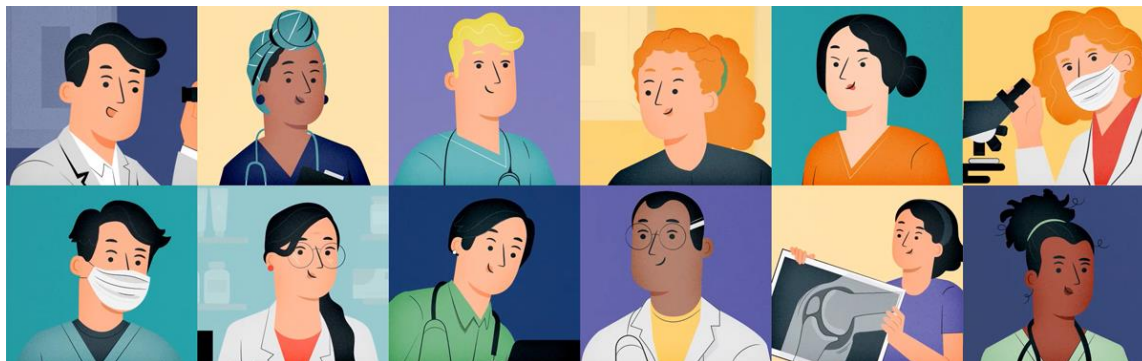
The path?

- Understand research capacity/culture
- **Identify skill gaps**
- Support at all levels for research in practice
- Embed mentorship
- Skills and confidence uplift
- Specific support for NIHR type path, progression to Consultant practice
- Publication strategy
- Project funding



NIHR Associate PI scheme

- 6 month in-work training opportunity, providing practical experience for healthcare professionals starting their research career.
- NIHR portfolio research trial. Mentorship from PI. 2hr/week



HEE-NIHR Integrated Clinical and Practitioner Academic Programme

- HEE Internship Scheme
- HEE/NIHR Pre-doctoral Clinical and Practitioner Academic Fellowship (PCAF) Scheme
- HEE/NIHR Clinical Doctoral (DCAF) Scheme
- HEE/NIHR Advanced Clinical and Practitioner Academic Fellowship (ACAF) Scheme
- Plus, a bridging scheme

NIHR-AoMRC Clinician Researcher credential

- A framework of Master's level qualifications
- For any regulated profession to lead and support clinical research delivery
- Postgraduate Certificates aligned with the Framework will launch in September 2022. Master's extension pathways, including a Postgraduate Diploma exit pathway, will launch in autumn 2023.


- The University of Exeter and Newcastle University will both launch Postgraduate Certificate courses in September 2022.
- The courses: practical elements of clinical research, aimed at experienced healthcare practitioners from all professional backgrounds.
- For those who aspire to take on the roles of Collaborator, Co-Investigator or Principal Investigator (PI).

Barriers

- Clinicians feel overstretched and [unable to find time for research](#).
- In some organisations there is a perception that research is 'someone else's business'.
- Current pressures on the healthcare workforce
- Funding
- Difficulty balancing a research career with clinical work and access to training
- Challenges in identifying a project, finding a mentor and accessing peer support

Article

Bridging the gap between research and clinical care: strategies to increase staff awareness and engagement in clinical research

Maggie Shepherd , Ruth Endacott³, and Helen Quinn

Background Research active hospitals have better patient outcomes and improvements in healthcare are associated with greater staff engagement in research. However, barriers to research activity include inadequate knowledge/training and perceptions that research is a specialist activity. Nursing is an academic discipline but the infrastructure supporting nursing research worldwide is variable and sustaining clinical academic careers remains challenging. The National 70@70 Senior Nurse Research Leader programme provides dedicated academic opportunities and fosters a research culture across England; we were supported by one National Institute of Health Research 70@70 leader to increase research.

Aim The purpose of this work was to develop initiatives to facilitate clinical research and bridge the gap between clinical care and research.

Brandenburg and Ward
Health Research Policy and Systems (2022) 20:6
<https://doi.org/10.1186/s12961-021-00801-2>

Health Research Policy
 and Systems

RESEARCH

Open Access

“There hasn’t been a career structure to step into”: a qualitative study on perceptions of allied health clinician researcher careers



Caitlin Brandenburg^{1*}  and Elizabeth C. Ward^{1,2}

Do Consultants and Advanced Practitioners see themselves as clinical academics? Answer? Possibly, with stronger positive response from Consultants.

How do we support clinicians to deliver the research pillar?

Abs.no: 550

Theme: Evolving Practice
Runner-Up Student Poster Award

As practice evolves, are consultants & advanced practitioners considered clinical academics? Hannah Jarvis & Professor Lisa Roberts, University of Southampton, School of Health Sciences (hj1d19@soton.ac.uk)

Purpose:

- ❖ There is an urgent need for consultants and advanced practitioners to engage in research to improve the evidence base of physiotherapy.
- ❖ There is no universal definition of the term 'clinical academic'. These roles make up less than 0.1% of the non-medical workforce.
- ❖ This study aimed to determine whether consultants, advanced practitioners and their managers consider these to be 'clinical academic' roles

Results: (n=56 responses)

"Do you feel these NMAHPs should be considered clinical academics?"

Consultants

Advanced practitioners

■ Yes ■ Possible ■ No ■ Don't know

Conclusions:

- ❖ Twice as many respondents considered consultants to be clinical academics compared with advanced practitioners
- ❖ The most favored response to "Do you feel NMAHP Consultants and Advanced Practitioners should be considered Clinical Academics?" is "Possibly"
- ❖ Consultants and advanced practitioners are ideally placed to identify clinically-important questions
- ❖ Further work needs to be done to support clinicians to deliver the research pillar in their roles

Methods:

- ❖ National survey (convenience sample)
- ❖ Content derived from PPIE with n=25 respondents and pilot with n=3, to ensure face and content validity
- ❖ Recruited via social media (Twitter) in March-April 2021.
- ❖ Analysis: descriptive statistics and content analysis of open questions.

Demographical Information n= (%)

Consultants	16 (28.6%)
Advanced Practitioners	33 (58.9%)
Combined manager and consultant/advanced practitioner	6 (10.7%)
Manager	1 (1.8%)
Allied Health professionals - Physiotherapists	44 (78.6%) - 28 (50%)
Female	45 (80.4%)
Male	11 (19.6%)

Four themes:

Inclusion criteria: Consultant, Advanced Practitioners and managers of these roles, band 7 or above, registered with the HCPC or NMC & practicing in the UK.

What are we working on right now?

- Linking with CNO, CAHPR and NIHR
 - **Enhanced, advanced and consultant level practice: the development of a research-related capability framework and career pathway(s)**
- Talking to publishing houses
- The conference.....
 - Can be first step for an AP into the formal research world
 - Need to maximise this opportunity – publish abstracts.
 - Highlight good practice of working with an academic partner
 - Create research networks

What can be done now?

- Support and champion your established AP researchers
- Encourage research in practice for all APs, at all levels. Most change will come with the majority taking first steps.
- Promote any research ++
- Establish AP research mentors
- Form strategic academic partnerships
- Dragons Den for small amounts of money via the regional hubs
- Encourage all to submit abstracts
- Writing skills: for papers and funding applications
- Identify APs for specific NIHR track mentorship

- **Thank you.**
- **Any questions?**



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