

# **The Centre for Advancing Practice**

# **Multi-professional Practice- based Research Capabilities Framework**

**First Edition 2024**



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# Multi-professional Practice-based Research Capabilities Framework

## Introduction

To response to the need to better serve evolving community needs and expectations the NHS has published several plans. The [NHS Long Term Plan](#) aims to give people accessing services more options, better support and properly joined-up services at the right time, in the right setting. The [NHS People plan](#) focuses on making best use of the full range of staff skills and experience. Together these plans seek to achieve the best possible outcomes and experiences for the public.

The [NHS Long Term Workforce Plan](#) sets out intentions to modernise career pathways. To support their uptake, new opportunities are emerging for staff to develop across enhanced, advanced and consultant levels of practice. This will support staff retention and expand the number of senior decision makers. Active engagement of health and care practitioners in, and with, research is of central importance. It is key to:

1. ensuring safe evidence-based practice,
2. further strengthening and developing the evidence base, and
3. informing service design, clinical reasoning and shared decision-making with the people and communities they work alongside.

Other national strategies align with this theme. For example,

- A central ambition of the [Chief Nursing Officer for England's \(2021\) Strategic Plan for Research](#) is to create a people-centred research environment. This will empower nurses to lead, participate in and deliver research fully embedded in practice and professional decision-making.
- Similarly, [Health Education England's \(2022\) Allied Health Professions' Research and Innovation Strategy for England](#) addresses the need to build the capability and capacity of the Allied Health Profession (AHP) workforce to engage with, implement, undertake and lead research and innovation in practice. It aims to establish a broad culture within which research and innovation is 'everybody's business'.
- The [Chief Midwifery Officer for England's \(2023\) Strategic Plan for Research](#) centres on ensuring quality evidence and evaluation are embedded within maternity policy and programmes. It also aims to ensure that midwives' contributions to research and building the evidence base are visible, valued, and supported by strengthening research capacity.

The central importance of engaging in, and with, research in contemporary practice is emphasised by the four pillars of practice:



Successfully transforming the workforce and service delivery requires active engagement with all four pillars by all practitioners. What that looks like, varies for individual practitioners at different stages of their careers, reflecting their particular circumstances and contexts.

There is no single 'correct' path to follow. However, all practitioners must make considered use of research evidence to inform decision-making. Beyond that, the emphasis might be on supporting, delivering or leading research. All contribute to the collective effort required to transform services, and the experiences and outcomes of individuals and communities. In so doing, all contribute to making the most effective use of a limited public purse. They also participate in the recruitment, retention, engagement and development of staff through more varied, exciting and rewarding career opportunities.

## Purpose and intended use

The purpose of the **Multi-professional Practice-based Research Capabilities Framework** is to:

1. facilitate transformation of health and care service delivery.
2. enhance outcomes and experiences of individuals and communities.
3. support health and care professionals to engage in, and with, research.

The Framework elaborates incremental research capability development as one of the **pillars** across four **levels** of practice. The focus is specifically on **practice-based** health and care professionals. The intended audience does not extend to colleagues in medicine and dentistry, for whom well-established guidance and structures already exist.

The Framework aims to highlight and promote active involvement in, and with, research as an integral component of practice for all health and care professionals. This is the case regardless of the setting in which they work - whether primary, secondary or tertiary care, in the community, social care or elsewhere. The Framework outlines a **common set of core capabilities** for the diverse disciplines outside medicine and dentistry. The expectation is that **all** practice-based health and care professionals develop these **fundamental** capabilities,

relevant to their level of practice. **It is, however, recognised that individuals or groups of practitioners may possess or choose to develop capabilities beyond those outlined at a particular level of practice.** This might relate to different entry level qualifications. It could apply to those in research delivery leadership roles or actively pursuing a clinical or practitioner academic development pathway.

The intention of the Framework is to facilitate and accelerate the development of practice-based research capabilities, capacity and career pathways across the health and care professions.

Developing research alongside the other three pillars of practice will strengthen practitioners' contributions to transforming services, outcomes and experiences.

The structure of the Framework is based on four levels of practice (entry, enhanced, advanced and consultant levels of practice, as set out in a later section). It will be a valuable tool for:

#### **individual practitioners:**



- when planning their professional and career development,
- to support discussions during supervision;

#### **service and departmental managers when:**



- job planning,
- developing job descriptions,
- informing job evaluations,
- identifying and reviewing objectives during professional development reviews;

#### **health and care organisations aiming to:**



- embed a culture that values engagement in, and with, research,
- recognise, delineate and support research potential and research activity as part of everyday practice for health and care professionals;

#### **education and training providers:**



- when planning or revising the learning outcomes and content of academic award-bearing study,
- when designing other continuing professional development opportunities.

## Strategic alignment

The design of the **Multi-professional Practice-based Research Capabilities Framework** aims to ensure alignment with existing national regulatory requirements, strategies and frameworks, (as outlined in Appendix 1). The anticipation is that it will also align with any other forthcoming national research strategies in England.

The Framework focuses on health and care professionals working in England. It may be a useful reference for those in the other three nations and other health and care disciplines.

## Founding and guiding principles

The following principles further underpin the development and application of the Framework:

The Framework outlines the common core research capabilities expected across the health and care professions. It accommodates to the greatest extent possible the variability across the different professional groupings. For example, academic entry levels, professional structures and starting points in terms of current levels of research engagement. Authors welcome national research leaders to provide further contextualisation and application of the common core capabilities with reference to individual professions, disciplines, groups or contexts.

Support workers, technicians, assistants, associate practitioners<sup>1</sup> and pre-registration learners make valuable contributions through engaging with and supporting research. However, this first edition of the Framework does not include those working at these levels of practice. Appendix 2 identifies documents that outline the related competencies expected of them.

The Framework sets out explicit expectations of core research capabilities **in practice**. It is intentionally and expressly **not** limited to clinical or practitioner academic capability development or pathways. Those aspiring to, or pursuing, clinical/practitioner academic roles and careers should use this framework alongside existing university academic career frameworks.

The Framework draws upon robust scoping of existing uni- and multi-professional research-related frameworks and the like (see Appendix 3). When applied systematically, it can enhance:

- career development,
- clarity for those aspiring to and holding research leadership roles,
- the development of job descriptions,
- the identification and review of objectives in appraisals,
- supervision discussions,
- the review and development of research-related educational content.

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<sup>1</sup> Support workers, senior support workers, technicians, assistants, assistant practitioners and associate practitioners work with and alongside the health and care professionals and in those disciplinary areas, playing an important and growing role in delivering of safe and effective care for people accessing health and care services and wider communities.

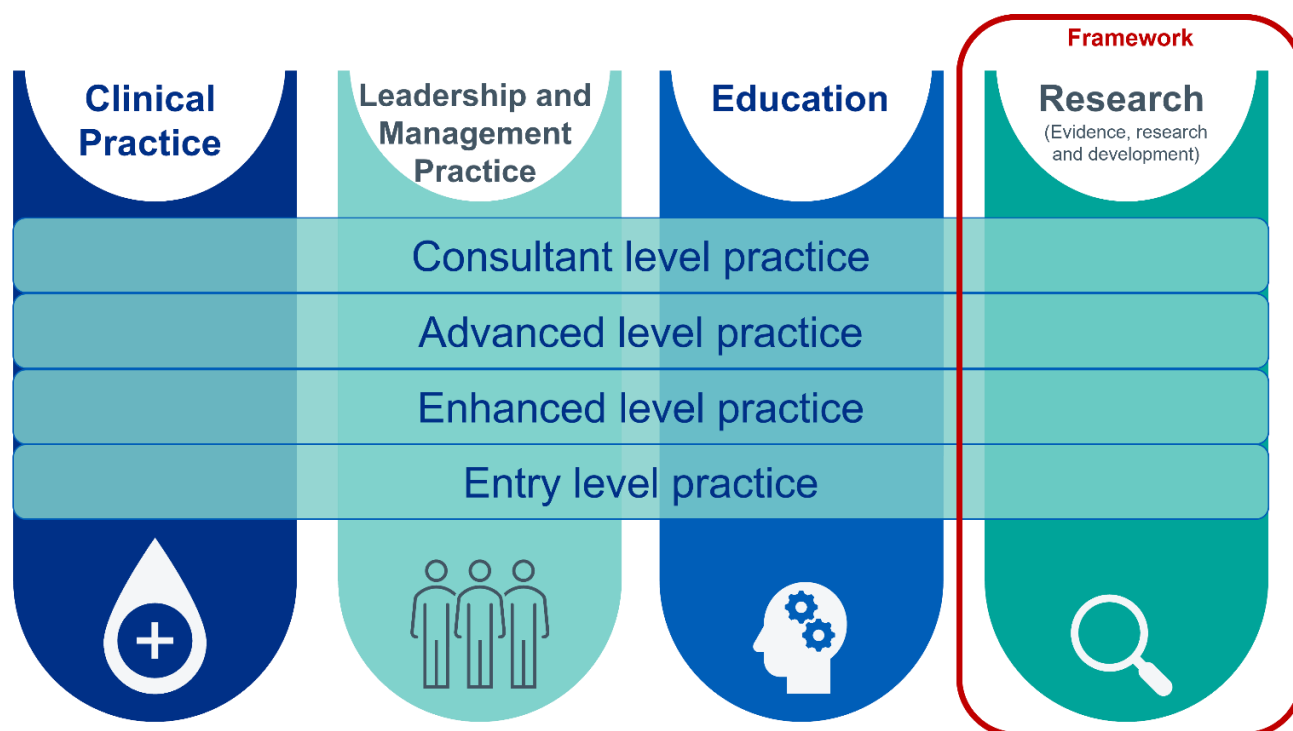
Capabilities represent a step beyond competencies. Competencies outline what individuals know or are able to do in terms of knowledge, skills, attitudes and behaviours. Capabilities describe the extent to which individuals can:

- adapt to changing circumstances,
- generate new knowledge and solutions in complex situations,
- continue to develop and improve their performance <sup>2 3 4</sup>.

The organisation of the Framework is based on eight non-hierarchical, inter-related **domains** identifying a range of **capabilities**. It elaborates the research pillar and provides a stepped approach guiding development of research capabilities across four levels of practice. Figure 1 below illustrates the relationship between the Framework and the four pillars of practice. The capabilities presented at each level incorporate and extend those that precede it. Progression to the next level involves achievement of the capabilities outlined at the previous level.

The Framework recognises the development of capabilities related to audit, service evaluation, quality improvement and knowledge mobilisation are transferrable. They may be forerunners to, and run in parallel with, progression and extension of research capabilities.

The Framework provides a structure to help guide practice-based research-related career development. There is an expectation that the application of research capabilities will 'look' different for each practitioner. This will reflect individual and professional circumstances and contexts.



**Figure 1: Situating the Framework within the context of the four pillars of practice**

<sup>2</sup> Fraser S. & Greenhalgh T. (2001) Coping with complexity: educating for capability. *British Medical Journal* 323, 799–803.

<sup>3</sup> McGee P, Inman C Eds (2019) *Advanced practice in healthcare: dynamic developments in nursing and allied health professions*. 4th ed. Chichester: John Wiley & Sons.

<sup>4</sup> Brunner et al (2018) An eHealth capabilities framework for graduates and health professionals: Mixed-methods study. *Journal of Medical Internet Research* 20(5), DOI: 10.2196/10229

The Framework provides a structure to assist managers when:

- considering team skills mix,
- developing job descriptions,
- undertaking job evaluations,
- identifying and reviewing objectives during individual professional development reviews.

The Framework also provides a structure to help guide services, organisations, local, regional and national systems and education providers in the development and expansion of practice-based research-related developmental and career pathways for the health and care professions, for the benefit of services and the people and communities they serve.



## Defining and describing the Framework's four levels of practice

### Entry level practice

The Standards of Practice or Proficiency published by regulatory bodies represent their threshold requirements for professional registration. These standards provide recognised and established threshold expectations of **all** registrants in particular professions. Always applicable while an individual remains on the register, they are a logical reference point for research-related capabilities at the start of practitioners' careers. The following have informed framework contents at the entry level:

- the Nursing and Midwifery Council's Standards of Proficiency for Registered Nurses.
- the Nursing and Midwifery Council's Standards of Proficiency for Midwives.
- the General Osteopathic Council's Practice Standards.
- the General Pharmaceutical Council's Standards for Pharmacy Professionals.
- the Health and Care Professions Council Standards of Proficiency.

**The definition of the academic level underpinning entry to each profession is frequently noted within the Standards of Practice/Proficiency as published by the relevant regulatory body.**

### Enhanced level practice

Enhanced Practice is a level of practice that already exists within the Allied Health Professions workforce. It is delivered by established clinicians, who are autonomous professionals, making a significant impact on patient care and clinical services.

Through use of profession-specific knowledge, skills, and behaviours, they make autonomous decisions within a defined area of practice, mitigating and managing risk to the patient, themselves, others, and the service. There are no 'generic' Enhanced Practitioner roles; practitioners are post qualification/registration and have experience and a recognised body of **profession-specific** knowledge. Recognising and formalising Enhanced Level Practice will drive cultural change and provide a positive impact on services.

Practitioners working at enhanced practice level do so across different sectors and settings. They hold and apply a focused depth of professional knowledge, skills, and behaviours within their individual scope of practice and sphere of influence to meet population health, patient care, service delivery, and workforce needs. Fundamental to practice at enhanced level (and all levels of practice) is practitioners having and exercising a developed understanding of their personal scope of practice at any one point in time and the limits of their scope and competence, and therefore knowing when they need to seek advice and guidance to ensure that patient safety is upheld.

**The Enhanced Clinical Practitioner Apprenticeship Standard, and Health Education England (now NHS England) expectations shaped capabilities at this level.**

## Advanced level practice

In 2017 Health Education England published the Multi-professional Framework for Advanced Practice in England. Advanced level practice is delivered by experienced, registered health and care practitioners. It involves a high degree of autonomy and complex decision making and is based on a master's degree or equivalent.

Advanced practice requires the demonstration of core capabilities across all four pillars of practice. It includes:

- the analysis and synthesis of complex problems across a range of settings,
- enabling innovative solutions to enhance the experiences and improve the outcomes of people accessing services and wider communities.

Advanced level practitioners exercise autonomy and decision making in complex situations. They manage uncertainty and variable levels of risks and are accountable for their decisions.

**The research pillar of the Multi-professional Framework for Advanced Practice shaped capabilities at this level.**

## Consultant level practice

In 2020, Health Education England published the Multi-professional Consultant Level Practice Capability and Impact Framework. Consultant level requires practitioners to demonstrate capabilities outlined for all four pillars of practice and to offer consultancy as a foundation for sharing expertise across systems of health and social care. Those working at this level deliver values-based professional practice. They work with individuals, families, carers, communities and others in complex and changing situations. They also provide leadership across pathways, services, organisations, and systems. Consultant practitioners support others to learn, develop, and improve in and from practice. In doing so, they support workforce transformation and promote excellence.

Consultant level practice involves continuous evaluation and improvement. It creates knowledge-rich and inquiring cultures across services and the system. It encompasses supervising research, contributing to and leading interdisciplinary research and innovation programmes that contribute to the knowledge base. Consultant level practice positively impacts:

- on development,
- quality,
- innovation in practice,
- expanding capacity and capability in research
- evaluation across the system and beyond to improve effectiveness.

The Framework for Higher Education Qualifications level 8 (doctoral level) equivalence characterises consultant level practice. An academic award at doctoral level is not mandatory for enabling effective consultant-level practice. However, consultant practitioners aspiring to work in clinical academic roles normally need to attain a doctorate as part of that role development.

**The expectations set out in the research pillar of the Health Education England (2020) Multi-professional Consultant Level Practice Capability and Impact Framework shaped framework capabilities at consultant level.**

## Development of the Framework

Initial desk-based research scoped and collated a 'library' of multi- and uni-professional research capability frameworks (and similar) in England. Mapping these frameworks against the research pillars / elements of the capabilities established for entry, enhanced, advanced and consultant levels of practice. The initial draft of the Multi-professional Practice-based Research Capabilities Framework presented the reviewed, analysed and synthesised contents of 26 frameworks (see Appendix 3).

A phased approach was taken to engagement to help refine the draft Framework.

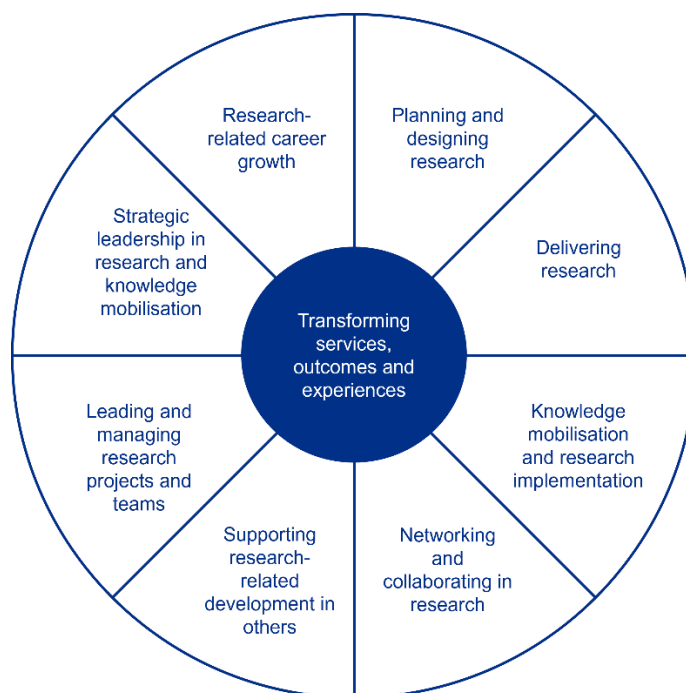
Phase 1 (spring 2023) involved national leaders of the relevant professions in NHS England, Health Education England and the National Institute for Health and Care Research. Phase 2 (summer 2023) involved a broader group of stakeholders including:

- national professional leaders and representatives within NHS England
- the National Institute for Health and Care Research
- the Council of Deans of Health
- the Council of Allied Health Professions Research
- the professional bodies for in-scope professional groups
- practitioners.

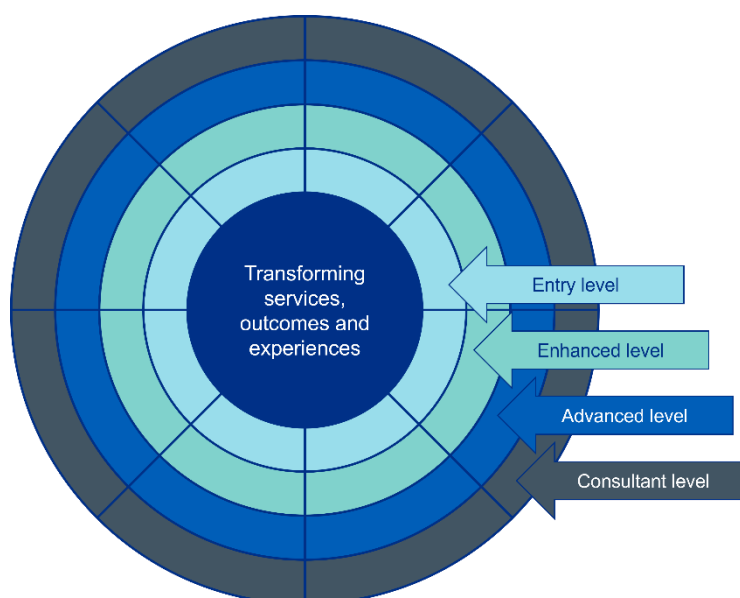
The first edition of the Multi-professional Practice-based Research Capabilities Framework considered all feedback received. Every effort was made to ensure the Framework is inclusive of as many professions as possible. A glossary of key terms is provided at Appendix 5.

## Overview of structure and domains

Figure 2 shows the Framework capabilities organised into eight non-hierarchical, inter-related domains. The domains align with the evidence, research and development pillar of practice. They are to be interpreted in relation to individual roles, employment contexts and relevant professional and regulatory standards. Within each domain are a range of capabilities spanning the four levels of practice (see Figure 3). The number of capabilities within a domain has no bearing on its relative 'importance'.

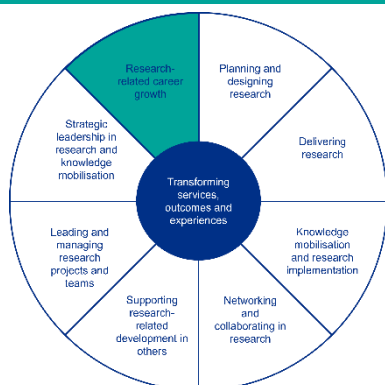


**Figure 2: Eight capability domains**



**Figure 3: Four levels of practice**

## Outlining the eight capability domains



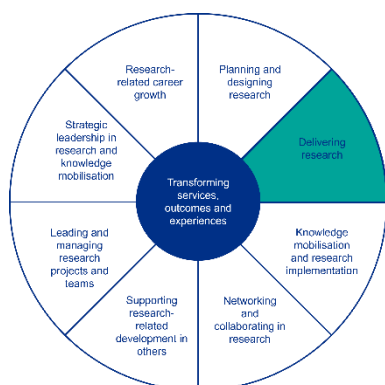
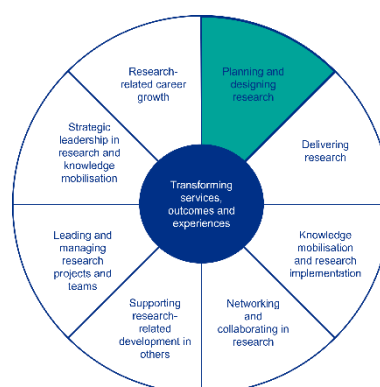
### 1. Research-related career growth

The focus of the **Research-related career growth** domain is on a proactive approach to research-related capabilities development in practice. These capabilities are the foundation for consistently embedding research into the day-to-day practice of all health and care practitioners.

### 2. Planning and designing research

Planning and designing domain brings together capabilities that underpin:

- the effective critique of research outputs,
- the evolving evidence base and wider sources of information / data,
- the development of robust protocols for individual inquiry and research projects.

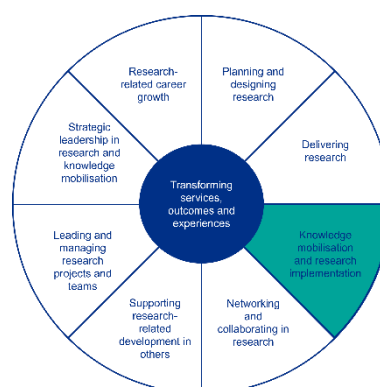


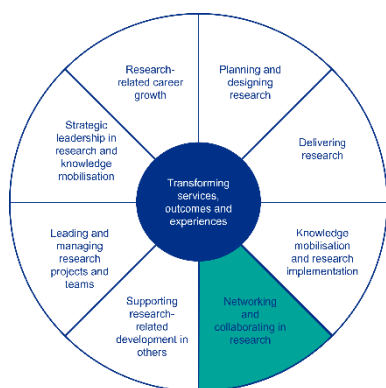
### 3. Delivering research

The **Delivering research** domain centres on capabilities related to promoting, supporting, contributing to and engaging in delivery of research. In accordance with the expectations of ethical conduct, robust governance processes and Good Clinical Practice. The capabilities apply to research developed and lead by the individual, as well as research developed and lead by others.

### 4. Knowledge mobilisation and research implementation

This domain focuses on making best use of existing evidence, sharing new knowledge and adding to the evidence base. It promotes approaches that optimise uptake and support the transformation of services, outcomes and experiences.



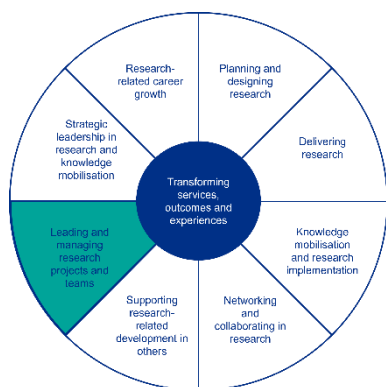
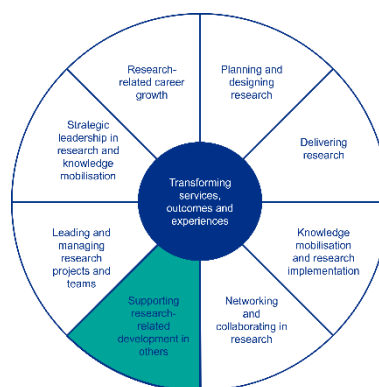


## 5. Networking and collaborating in research

Capabilities in this domain centre on realising the benefits of learning with and from others in research. They involve bringing together stakeholders, differing perspectives and expertise to enhance the quality, capability and capacity of research.

## 6. Supporting research-related development in others

Recognising the collective effort required to build research capability and capacity, is the focus of **Supporting research-related development in others**. It identifies capabilities associated with practitioners at any level supporting those with less experience to develop their own research-related capabilities.

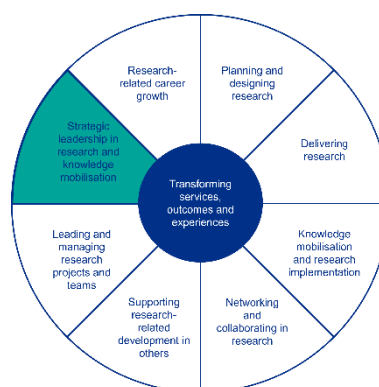


## 7. Leading and managing research projects and teams

These capabilities provide the foundation for effectively stepping into research leadership roles, managing associated staff and resources, and overseeing quality.

## 8. Strategic leadership in research and knowledge mobilisation

This domain focuses on the awareness of, influencing and leading research and knowledge mobilisation within broader organisational, national, or international contexts.



## The Capabilities

The expectation is that all practice-based health and care professionals develop these fundamental capabilities, relevant to their level of practice.

Organisation of the capabilities into eight non-hierarchical, inter-related domains, requires consideration of them as a whole, rather than of individual domains in isolation. The capabilities presented at each level incorporate and extend those that precede it. Progression to the next level requires first achieving the capabilities outlined at the previous level.

It is recognised that practitioners may possess or choose to develop capabilities beyond those outlined at a particular level of practice. This might relate to different entry level qualifications. It could apply to those in research delivery leadership roles or actively pursuing a clinical or practitioner academic development pathway.



## 1. Research-related career growth

The focus of the Research-related career growth domain is on a proactive approach to research-related capabilities development in practice. These capabilities are the foundation for consistently embedding research into the day-to-day practice of all health and care practitioners.

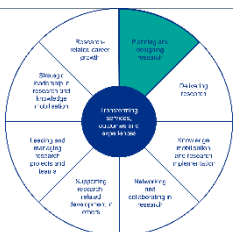
Entry level	Enhanced level	Advanced level	Consultant level
1. Demonstrate knowledge and understanding of the importance of practitioners' contributions to developing the knowledge base through active engagement at appropriate levels in audit, service evaluation, quality improvement and research.	1. Proactively discuss own research-related developmental needs with line manager, agreeing realistic objectives and plans to address them.	1. Identify and pursue realistic and achievable research-related career goals, giving specific thought to growing own contributions to the development and application of new knowledge.	1. Engage and lead others across the organisation to adopt a supportive culture of research and inquiry that drives service development and improvement.
2. Demonstrate insight into own knowledge creation and research capabilities and developmental needs and take action to address those needs.	2. Explore and develop plans for own career aspirations integrating practice and research-related activities, making proactive use of local and national resources and opportunities to access guidance and support.	2. Actively seek out and engage with research-related professional development opportunities, including master' level education, and other relevant credentials, certificates or qualifications.	2. Role model commitment to ongoing research-related learning and development in a variety of forms.





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3. Constructively question own and others' practice, identifying opportunities to generate new knowledge and enhance services.	3. Link with or build networks to support the development of the capabilities required to actively participate in knowledge creation and mobilisation activities within own role.	3. Effectively integrate developing and maturing practice skills and expertise with developing and maturing research skills.	3. Contribute to and lead research at organisational level and beyond.
4. Develop awareness of local research-related resources and opportunities and how they can be accessed.		4. Plan and pursue opportunities to develop and apply new knowledge to own and others' practice in structured ways that can be evaluated.	4. Proactively support others' critical understanding of differing research methods and analytical approaches.
		5. Contribute to development and delivery of research projects at service level.	5. Demonstrate the transferability of research-related knowledge, skills and experience between contexts.



## 2. Planning and designing research

The planning and designing research domain brings together capabilities that underpin the effective critique of research outputs, the evolving evidence base and wider sources of information / data, and the development of robust protocols for individual inquiry and research projects.

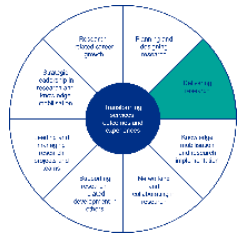
Entry level	Enhanced level	Advanced level	Consultant level
1. Demonstrate broad awareness of knowledge creation processes, including awareness of the basic, underlying principles, concepts and approaches to applied research.	1. Demonstrate understanding and application of a range of outcome and quality measures, critiquing and selecting them appropriately for use in inquiry-based projects.	1. Undertake advanced information searches using a range of software, databases, resources and techniques, recognising their individual advantages and limitations.	1. Critically appraise and supportively challenge current service provision, proposing and leading research or service improvement within complex and unpredictable contexts.
2. Appreciate the differences and relationships between audit, service evaluation, quality improvement and research.	2. Confidently undertake systematic information searches using appropriate tools / databases to identify information relevant to addressing practice-based inquiries.	2. Critically analyse the evidence base and other relevant information sources to develop and clearly articulate research questions that address the needs and priorities of practice.	2. Identify trends and changes in the health, wellbeing and needs of a population, including at a national level, to formulate critical questions that justify further research, audit or service evaluation.
3. Undertake basic systematic information searches using appropriate tools / databases to identify information and evidence relevant to answering practice-based enquiries.	3. Identify evidence gaps and contribute to developing practice-based question/s worthy of investigation, including those that could be explored by pre- and post-registration learners	3. Demonstrate understanding of a range of standard research and quality improvement methodologies and designs and their related ethical considerations.	3. Demonstrate sound understanding of project design, including philosophical underpinnings and theoretical perspectives, and methodological and analytical approaches when

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	undertaking formal academic studies.		planning and leading research and inquiry.
4. Evaluate intervention / treatment plans using recognised and appropriate outcome measures.	4. Develop appropriate aims and objectives for inquiry-based projects.	4. With support, design small scale research studies to address issues arising in practice using methodological and analytical approaches that appropriately consider environmental impact and sustainability.	4. Work collaboratively to realise the benefits of inter-disciplinary and cross-boundary working in relation to proposed research and inquiry.
5. Demonstrate knowledge and understanding of quality improvement systems, processes and methodologies relevant to own discipline, service, department and organisation.	5. Demonstrate understanding of the key features of a research protocol and the qualitative and quantitative methodologies commonly used in practice-based research in own discipline.	5. Work collaboratively with all relevant stakeholders, explicitly embracing and enabling meaningful Public and Patient Involvement / Engagement and co-production and ensuring a diverse and representative range of contributors and participants.	5. Design research protocols that take account of environmental and sustainability issues and impact at organisational level or beyond.
6. Recognise the value of, and actively participate in, the systematic gathering and use of qualitative and quantitative data to monitor, evaluate and improve the quality of practice.	6. Select and apply appropriate approaches to and tools of inquiry to answer practice-based questions, demonstrating understanding of the associated sustainability and ethical considerations.	6. Apply understanding of a range of analytical approaches to examine qualitative and quantitative data.	6. Manage complex, incomplete or contradictory data to ensure robust analysis.
7. Recognise the importance of working in partnership with people accessing services and	7. Understand and use appropriate technical language in the context of applied research	7. Make effective use of digital technologies and computing packages relevant to undertaking	7. Support and guide the development of research

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wider communities when planning, designing and carrying out research.	(e.g., research participant rather than patient/client/service user/etc.; data rather than information; statistical significance rather than clinical significance).	quality improvement or research projects and the analysis of data.	proposals led by others with less experience.
	8. Demonstrate understanding of how to interpret qualitative and quantitative research data and the limitations associated with this, including in relation to own knowledge creation activities.	8. Demonstrate insight and critical thinking by clearly identifying own assumptions, and by developing robust arguments that are clear, evidenced and concise.	8. Contribute to or lead the development and evaluation of the public contributor role in knowledge production.
	9. Critically analyse the strengths and limitations of quantitative and qualitative studies, including ethical considerations, study design, data analysis and interpretation.	9. Draw on practice and research expertise to contribute constructively to processes for peer review of publications.	
	10. Analyse and synthesise the findings from small-scale local audit, service evaluation or quality improvement projects, using computing packages and digital technologies as appropriate, and interpreting findings in the light of existing knowledge.	10. Contribute to the development and submission of research funding applications that reflect the requirements of the target funding body, data protection, information governance, ethical and research governance frameworks and processes.	



### 3. Delivering research

Capabilities within the **delivering research** domain centre on those related to promoting, supporting, contributing to and engaging in the delivery of research in accordance with the expectations of ethical conduct, robust governance processes and Good Clinical Practice. The capabilities apply to research developed and lead by the individual, as well as research developed and lead by others.

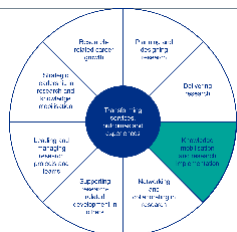
Entry level	Enhanced level	Advanced level	Consultant level
1. Demonstrate a broad understanding of research ethics and governance processes.	1. Understand and comply with research ethics and governance processes, data protection and confidentiality requirements in line with Good Clinical Practice, and support less experienced colleagues to do so.	1. Undertake Good Clinical Practice (GCP) training and maintain its currency, effectively applying its principles to safeguard participants and ensure research quality.	1. Conduct thorough risk analyses for self, team and others in the context of research and service improvement initiatives, quickly identifying and confidently managing risks.
2. Understand and apply the principles of information governance, data governance and cyber security to ensure safe and effective use of health, care and other relevant information.	2. Promote opportunities for people who access services, their families and carers and wider communities to participate in research being undertaken within own organisation.	2. Develop, implement or comply with local research governance processes, demonstrating ethical conduct throughout all aspects of own research and supporting others to do so.	2. Actively engage in and lead delivery of research at or beyond organisational levels to generate new knowledge to inform service design and delivery and enhance the outcomes and experiences of individuals and communities.
3. Understand and apply the requirements for confidentiality regarding research data and	3. Contribute to the delivery of research projects or clinical trials	3. Apply knowledge and understanding of legal requirements of research (e.g.,	3. Contribute to delivery of national and international research to generate new

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patient identifiable data, including the <a href="#">Caldicott principles</a> .	being undertaken in own service, department or organisation.	data protection, mental capacity, safeguarding and human tissue acts, etc.), demonstrating the highest regard for participant's rights and safety, and data integrity.	knowledge to inform wider system benefits.
4. Demonstrate competent use of relevant digital technologies and devices, including using digital record-keeping tools and changing practice to accommodate new developments, technologies and contexts.	4. Demonstrate communication skills and strategies that are adapted to meet the needs of different individuals and groups to optimise their engagement in research.	4. Demonstrate awareness of procedures for reporting concerns about research conduct when breaches of protocol are identified or when fraud / misconduct is suspected.	4. Where relevant to own role and context, demonstrate awareness of licensing authorities and their requirements regarding investigational products and devices.
5. Engage in research and knowledge creation activities in ways that demonstrate understanding of the impact of environmental sustainability on health and wellbeing.	5. Participate in audit, service evaluation, quality improvement or projects related to own practice, embracing digital technologies as appropriate.	5. Design and deliver audit, service evaluation and quality improvement activity, working with others to develop or benefit from their skills in these areas.	
6. Maintain awareness of studies being undertaken in own service, department and organisation, and how to refer people to research delivery teams to discuss possible recruitment to studies.	6. Reflect on own experiences of knowledge creation activities and use this information to appraise the work completed and inform future projects and practice.	6. Contribute to and support the delivery of research designed by others to address issues arising in practice.	

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		7. Contribute to the development of study documentation (e.g., participant information leaflet, consent forms, case report forms, data collection, etc.) and related management systems.	
		8. Effectively and sensitively communicate complex information to stakeholders and participants in the context of conducting applied research.	
		9. Critically reflecting on research, evaluation and improvement processes, carrying learning forward to inform how projects are undertaken and managed in future.	



## 4. Knowledge mobilisation and research implementation

The **knowledge mobilisation and research implementation** domain focuses on capabilities required to make best use of existing evidence, share new knowledge and add to the evidence base in ways that optimise uptake and support the transformation of services, outcomes and experiences.

Entry level	Enhanced level	Advanced level	Consultant level
1. Engage in evidence-based practice in all aspects of service delivery and provide evidence-based information to enable those accessing services to make informed choices.	1. Use critically appraised evidence to address problems and questions arising in practice, using own judgement and seeking guidance from more experienced colleagues where appropriate.	1. Actively champion the central role of evidence-based practice, knowledge mobilisation and implementation science in service developments to improve the outcomes and experiences of individuals and communities.	1. Demonstrate in-depth understanding of the latest evidence within own scope of practice, using and promoting it alongside implementation science frameworks, strategies and tools to improve standards of practice and develop services, organisations and systems.
2. Apply a fundamental understanding of qualitative and quantitative research methods, ethics and governance processes to critically appraise, safely apply and share research findings to inform and promote best practice.	2. Promote a culture of evidence-based practice using a range of evidence sources including research, scholarship and continuing professional development to inform practice.	2. Demonstrate critical understanding of the latest evidence relevant to own practice and related fields, appraising and synthesising the outcomes of research, evaluations and audits, effectively integrating it into practice and supporting others to do so.	2. Role-model the integration of research and learning to inform practice, including identifying evidence gaps and synthesising knowledge from multiple sources, and support others to do so.



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3. Demonstrate awareness of the limitations of available evidence, applying appropriate caution regarding how it is used.	3. Collaborate with more experienced colleagues to analyse the outcomes of knowledge creation activities, benchmark them against local or regional data where possible, and implement improvements as appropriate.	3. Analyse the latest evidence relevant to own practice and related fields to identify any further work required to strengthen evidence for best practice.	3. Lead the development and evaluation of service delivery, informed by research evidence and innovations identified elsewhere and implementation science, sharing the outcomes to improve service delivery beyond the organisation.
4. Demonstrate skilful reasoning, problem-solving and critical thinking when applying evidence, drawing on own experience and seeking guidance from more experienced colleagues where appropriate.	4. Use research evidence to constructively challenge practice that undermines the quality of services or the delivery of expected outcomes for individuals and communities.	4. Effectively communicate the relevance of research findings and best practice to colleagues, advocacy groups and the wider community.	4. Make identifiable contributions to changes and developments within a profession, organisation or beyond that are informed by research findings.
5. Analyse and reflect on research evidence and other information relevant to own practice to optimise the outcomes and experiences of individuals and communities.	5. Contribute to the development of local evidence-based guidance.	5. Make identifiable contributions to changes and developments in practice at service level that are informed by research findings.	5. Contribute to the development or revision of national or international evidence-based guidance, strategy or policy and their application in practice.
	6. Demonstrate understanding of the concepts of authorship and intellectual property, and awareness of the processes involved in peer-reviewed publication.	6. Contribute to the development of evidence-based guidelines and policy at service, organisational or national levels.	6. Generate new knowledge and understanding through research and inquiry, communicating findings to the widest possible audience to benefit service development and delivery and improve the experiences and

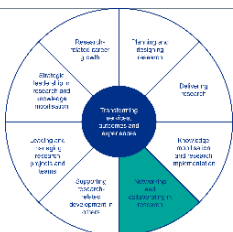
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			outcomes of individuals and communities beyond the organisation.
	7. Disseminate the findings of knowledge creation activities at a level appropriate to the nature of the work and its outcomes, including through conference presentations.	7. Develop outputs from research and quality improvement initiatives that reflect the preferred style and communication method of the target audience/s, working with stakeholders as required to achieve this.	7. Lead activities that support knowledge mobilisation, optimising access to new research evidence and innovations, through high-quality publications, professional and public engagement activities and via appropriate media.
		8. Disseminates findings from research and quality improvement initiatives through appropriate media and forums, including through publication, to optimise the sharing of knowledge and translation into practice.	8. Demonstrate sound understanding of what research impact is, pathways to impact and how impact can be measured and demonstrated.
		9. Proactively contribute to knowledge mobilisation practices such as in-service training, communities of practice, and service improvement initiatives, to optimise the timely translation of findings into practice.	



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		10. Make effective use of interactive technologies to build a digital presence to support the dissemination of new evidence and own research development and engagement.	
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## 5. Networking and collaborating in research

The capabilities in the **networking and collaborating in research** domain centre on realising the benefits of learning with and from others in research and bringing together stakeholders and differing perspectives and expertise to enhance the quality of research and the building of research capability and capacity.

Entry level	Enhanced level	Advanced level	Consultant level
1. Recognise the impact of culture and the principles of equality and diversity on practice and knowledge creation activities, and demonstrate anti-racist, anti-discriminatory, inclusive behaviour, responding sensitively to the needs of different individuals and groups.	1. Role-model an anti-racist, anti-discriminatory approach in all research-related interactions, identifying and appropriately challenging discriminatory behaviours and inequities.	1. Role model meaningful allyship, supporting less experienced colleagues from marginalised and under-represented groups in their research-related development.	1. Promote anti-racist and anti-discriminatory practices and allyship, the importance of diversity in all its forms, and equity in access to research-related opportunities and career progression.
2. Share and extend knowledge and understanding by engaging with peers regarding the outcome of problem solving, audit, service evaluation, quality improvement, research and other developmental activities.	2. Demonstrate knowledge of and engagement with local strategies, groups and activities focused on the active involvement and engagement of people who access services and wider communities in research.	2. Proactively collaborate with others to develop and deliver research and quality improvement projects, simultaneously learning from them and providing the opportunity for others to learn and develop at levels appropriate to them.	2. Sustain collaborative relationships with research teams working in related fields of practice to identify and address practice-based research priorities.

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3. Engage in and discuss critical appraisals of local data and recently published research findings to support evidence-informed decision making and service development or improvement planning.	3. Demonstrate broad and growing awareness of local and national forums and conferences related to practice-based research.	3. Develop and nurture collaborative multi-disciplinary links between practice and research through networking with other practitioners, academics, university research departments / teams, clinical trials units, industry, practice-based and other researchers.	3. Sustain collaborative, multi-disciplinary and multi-sector partnerships at organisational or national level or beyond, to generate and advance the implementation of new knowledge.
4. Develop and nurture collaborative partnerships with people accessing services and wider communities to evaluate the effectiveness, and inform the development, of interventions and services.	4. Facilitate the involvement of people who access services, their families and carers and wider communities in the co-design and co-production of quality improvement and research projects.	4. Actively encourage and facilitate the equitable participation of people who access services, their families and their carers and wider communities in quality improvement and research initiatives, including through networks to help inform and design projects.	4. Encourage, inspire and work with others to actively build research capacity and capability, including amongst public contributors, through collaborations and external relationships that reach beyond the organisation.
5. Collaborate with interdisciplinary and multi-agency colleagues, service user groups and other stakeholders to promote continuous quality improvement.		5. Plan and ensure effective communication between partners, stakeholders and research teams, using communication approaches, tools and channels that meet the needs of particular audiences and individuals.	



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		6. Proactively participate in and grow research networks to engage with colleagues, support own career development, respond to opportunities, and facilitate the engagement of less experienced colleagues.	
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## 6. Supporting research-related development in others

Recognising the collective effort required to build research capability and capacity, the **supporting research-related development in others** identifies capabilities associated with practitioners at any level supporting those with less experience to develop their own research-related capabilities.

Entry level	Enhanced level	Advanced level	Consultant level
1. Role model the consistent use of evidence-based, person-centred best practice.	1. Support colleagues with less experience to access, understand, appraise and translate evidence into practice.	1. Effectively use a range of approaches and techniques to support learning and development, showcasing up-to-date data and findings from research and service development projects.	1. Facilitate collaborative links that support the effective and coherent integration of practice, research and education.
2. Role model a proactive approach to addressing own identified learning and development needs, supporting and collaborating with others to do the same.	2. Support the development of less experienced colleagues' awareness and appreciation of the roles of audit, service evaluation, quality improvement and research activities in service delivery and development.	2. Foster the development of critical appraisal skills to facilitate understanding of what good research looks like and how to implement findings effectively and safely.	2. Guide and enable the evidence-based learning of others through approaches that reflect contemporary issues and thinking, research evidence, and the opportunity to learn from errors.
	3. Contribute to the support and supervision of pre-registration learners on practice placements, role modelling a commitment to evidence-based practice and	3. Support, organise and promote professional development and educational events / activities to equitably build the capability of colleagues to engage in audit,	3. Educate and guide those with less experience, including public contributors, in the appropriate selection and use of research design, methods and techniques,

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	linking them with local active trials / studies and the like.	service evaluation, quality improvement and research.	data collection, management and analysis, and relevant supporting digital technologies.
	4. Explicitly draw on up-to-date research relevant to the discipline when contributing to education, training and professional development activities.	4. Support awareness of the availability of local and national research-related resources and opportunities amongst those with less experience.	4. Educate specialist and non-specialist audiences about complex research-related ideas and theories.
		5. Engage in peer support, mentorship and supervision of less experienced colleagues, including those undertaking academic qualifications, to support development and nurture talent.	5. Supervise research projects undertaken by pre- or post-registration learners.
		6. Provide learners and practitioners with opportunities to experience undertaking or contributing to research.	6. Proactively and equitably support and facilitate the research-related career development of others.
		7. Support learners and less experienced practitioners to publish, disseminate, promote and implement the outcomes / findings of their quality improvement and research projects.	





## 7. Leading and managing research projects and teams

Capabilities within the **Leading and managing research projects and team's** domain are those that provide the foundation for effectively stepping into research project leadership roles, managing associated staff and resources, and overseeing quality.

Entry level	Enhanced level	Advanced level	Consultant level
1. Actively contribute (at a level appropriate to own knowledge, skills and experience) to developing, embedding, expanding or sustaining a culture of research engagement within own service or department.	1. Act as a local champion to encourage and inspire colleagues to engage in, and with, inquiry and research.	1. Promote a culture in which practice is continuously measured, evaluated, reviewed and improved through quality improvement and research initiatives.	1. Formulate research questions that respond to current and future population and national trends and digital technology and challenge the status quo.
	2. Demonstrate critical thinking to identify problems and research questions relevant to practice and policy.	2. Support colleagues to obtain, collate, measure, analyse and evaluate data through audit, service evaluation and quality improvement projects and to translate their findings into practice.	2. Facilitate the accessing of relevant data from a range of systems to contribute to research and quality improvement, tracking and benchmarking progress, and fostering accountability.
	3. Prioritise the needs and priorities of the local population when planning quality improvement or research projects.	3. Act as a service level research champion, articulating the benefits of engaging in, and with, research, motivating,	3. Cultivate the embedding of a commitment to consider environmental impact and wider issues of sustainability in all

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		encouraging and inspiring others to do so.	research and quality improvement activity.
	4. Take the lead on small-scale service improvement projects.	4. Generate and recognise viable ideas and opportunities for research and quality improvement projects and acknowledging the contribution of others, work collaboratively with more experienced colleagues to shape research questions and contribute to funding applications.	4. Contribute to or lead high-quality research projects at organisational or national level to address recognised practice-based research priorities.
	5. Apply for small-scale research-focused developmental opportunities and funding, with the support of, or in partnership with, more experienced colleagues.	5. Recognise relevant organisational and national policy drivers and priorities when planning and reporting on quality improvement or research activities.	5. Contribute to large scale national or international audit, service evaluation, quality improvement or other inquiry.
		6. Effectively consider the environmental impact of research and the methods by which it can be measured.	6. Maintain oversight of the research of those with less experience across organisational departments and services in own area of practice.
		7. Demonstrate understanding of ethics related to applied research, advising and guiding	7. Develop a national profile as an innovative critical thinker and role model, leading research and quality improvement that contributes to understanding,

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		those with less experience accordingly.	evidence-based change and development within the profession or service.
		8. Contribute to the development of competitive grant funding applications.	8. Draw on experience and expertise to provide constructive expert reviews of publishable material.
		9. Demonstrate awareness of research team roles and responsibilities, contributing to the development of supporting infrastructure and effective lines of communication.	



## 8. Strategic leadership in research and knowledge mobilisation

The focus of the **strategic leadership in research and knowledge mobilisation** domain is on capabilities associated with awareness of, influencing and leading research and knowledge mobilisation within broader organisational, national or international contexts.

Entry level	Enhanced level	Advanced level	Consultant level
	1. Demonstrate understanding of the strategic vision for research within own profession and work setting.	1. Demonstrate knowledge of advances and knowledge-gaps in own and related areas of practice and research, and how they relate to organisational and national policies and priorities.	1. Demonstrate thorough understanding of the strategic direction of and developments in own and inter-related fields, using this knowledge to enrich research and practice.
		2. Champion the role of applied health and care research to transform service design and delivery and the outcomes and experiences of individuals and communities.	2. Contribute to or lead the embedding of an organisational culture that values and enables equitable engagement in, and with, research and quality improvement initiatives.
		3. Demonstrate commitment to stakeholder involvement in the identification and selection of research priorities and throughout the research process.	3. Inspire curiosity and build enthusiasm across a range of stakeholders to engage positively with evidence-based practice, quality improvement, research activity and improvement science to optimise the quality of services

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			and the experiences and outcomes of individuals and communities.
		4. Contribute to the development, implementation or review of service or organisational strategic plans for research.	4. Contribute to or lead practice-based research capability and capacity building and the development of related local career development structures.
		5. Demonstrate appropriate application of regulatory and legal frameworks to applied research in practice settings.	5. Contribute to or lead the development, implementation or review of research strategies at organisational level or beyond.
		6. Demonstrate understanding of a variety of research-related funding sources and how to access them.	6. Ensure strategic processes are in place and regularly reviewed to facilitate the equitable participation of people who access services, their families and carers, wider communities, staff and learners in research, and in the co-design and co-production of research and quality improvement initiatives.
		7. Report to or hold membership of research-related committees or boards, internal or external to employing organisation.	7. Actively contribute to the development, embedding and regular review of research governance policies and procedures, supporting



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			adherence across the organisation.
			8. Be an active member of senior level research-related committees or boards, research organisations or working groups, internal or external to employing organisation.

# Appendices

## Appendix 1 – Strategic alignment with existing strategies and frameworks

The **Multi-professional Practice-based Research Capabilities Framework** is specifically aligned to and compatible with:

- the Chief Nursing Officer for England (2021) Strategic Plan for Research,
- the Chief Midwifery Officer for England (2023) Strategic Plan for Research,
- the Allied Health Professions Strategy for England 2022-2027: AHPs Deliver,
- the Health Education England (2022) Allied Health Professions' Research and Innovation Strategy for England,
- the Department of Health and Social Care (2022) The Future of Research Delivery: 2022-2025 Implementation Plan,
- the Nursing and Midwifery Council Standards of Proficiency for Registered Nurses,
- the Nursing and Midwifery Council Standards of Proficiency for Midwives,
- the General Osteopathic Council Practice Standards,
- the General Pharmaceutical Council Standards for Pharmacy Professionals, and
- the Health and Care Professions Council Standards of Proficiency for in-scope disciplines,
- the NHS England (2023) NHS Equality, Diversity and Inclusion Improvement Plan,
- NHS England Delivering a Net Zero NHS – July 2022,
- the Health Education England (2020) Digital Competency Framework for UK Allied Health Professionals,
- the Health Education England (2021) Digital Capabilities for the Pharmacy Workforce,
- the Psychological Professions Digital Competence Framework,
- the All-Ireland Nursing and Midwifery Digital Health Capability Framework,
- the Nursing and Midwifery Council (2020) Principles of Preceptorship,
- the NHS England (2022) National Preceptorship Framework for Nursing,
- the NHS England (2023) National Preceptorship Framework for Midwifery,
- the Royal Pharmaceutical Society (2019) Foundation Pharmacist Framework,
- the National Allied Health Professionals Preceptorship and Foundation Support Programme,
- the Institute for Apprenticeships and Technology Enhanced Clinical Practitioner Apprenticeship Standard, V1.1, approved 27May2021,
- the Health Education England (2017) Multi-professional Framework for Advanced Practice in England,
- the Health Education England (2020) Multi-professional Consultant Level Practice Capability and Impact Framework and self-assessment tool,
- the Academy of Healthcare Sciences (2021) Good scientific Practice,

- the [Academy for Healthcare Sciences \(2015\) Standards for Proficiency for Higher Specialist Scientists](#),
- the [Council of Deans of Health \(2023\) Allied Health Professions Educator Career Framework](#),
- the research strategies published by individual professional bodies and associations,
- the multi- and uni-professional source material informing the development of the Framework, as outlined in Appendix 3, and
- the forthcoming NHS England growth-based career planning concept and resources.



## **Appendix 2 – Guidance relevant to support workers, technicians, assistants, associate practitioners<sup>5</sup> and pre-registration learners.**

Research-related capabilities relevant to health and care support workers, technicians, assistants and associate practitioners and pre-registration learners can be located in guidance such as:

- the Health Education England (2021) Allied Health Professions' Support Worker Competency, Education and Career Development Framework (see Domain 6, p.29),
- Health Education England's (2021) Maternity Support Worker Level 3 Curriculum (see Domain 4, Competency 13, p.61),
- the Institute for Apprenticeships and Technical Education (2023) Assistant Practitioner (Health) Apprenticeship Standard (see Duty 3 and 10),
- the Institute for Apprenticeships and Technical Education (2022) Healthcare Science Assistant Apprenticeship Standard,
- the NMC (2018) Standards of Proficiency for Registered Nursing Associates,
- the General Pharmaceutical Council's (2020) Requirements for the Education and Training of Pharmacy Support Staff, and
- pre-registration learning and development standards and curricula

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<sup>5</sup> Support workers, senior support workers, technicians, assistants, assistant practitioners and associate practitioners work with and alongside the health and care professionals and in those disciplinary areas, playing an important and growing role in delivering of safe and effective care for people accessing health and care services and wider communities.

## Appendix 3 - Source material informing the Framework.

Alongside the reference points defining and describing the four levels of practice and the expectations associated with them, a range of uni-and multi-professional frameworks (and similar) contributed to / informed drafting and development of the **Multi-professional Practice-based Research Capabilities Framework**.

They include:

1. Academy of Healthcare Sciences Career Framework for Healthcare Scientists
2. British Dietetics Association (2021) Post-registration Professional Development Framework
3. Chartered Society of Physiotherapy (2020) Physiotherapy Framework (condensed version)
4. Cody, Goolgoly, Darke, Prosser and Phimister (no date) Orthotists Career and Competencies Development Toolkit
5. College of Paramedics (2018) Post-registration Paramedic Career Framework, 4th Ed.
6. College of Paramedics (2020) Interactive Paramedic Career Framework
7. Harris, Cooke and Grafton (2019) Shaping Better Practice Through Research: A Practitioner Framework
8. Health Education England (2020) Multi-professional Consultant Level Practice Capability and Impact Framework
9. Health Education England (2017) Multi-professional Framework for Advanced Clinical Practice
10. Imperial College Clinical Academic Training Office (2022) Clinical Research Training Framework
11. Institute for Apprenticeships and Technology Enhanced Clinical Practitioner Apprenticeship Standard, V1, approved 27May2021
12. NHS Consultant Pharmacist Guidance 2020
13. Nichol (no date) Career Framework Guide Prosthetics and Orthotics
14. National Institute for Health and Care Research / Academy of Medical Royal Colleges Clinical Researcher Credentials Framework
15. National Institute for Health and Care Research Clinical Research Network East Midlands (2019) Competency Framework for Research Delivery Staff
16. Royal College of Nursing (2018) Standards for Advanced Level Nursing Practice
17. Royal College of Nursing (2018) Advanced Level Nursing Practice: Introduction

18. Royal College of Nursing (2018) Advanced level nursing practice - Section 2 - ALNP competencies
19. Royal College of Occupational Therapists (2021) Career Development Framework, 2<sup>nd</sup> Ed.
20. Royal College of Podiatry (2021) Podiatry Career Framework
21. Royal Pharmaceutical Society (2019) Foundation Pharmacist Framework
22. Royal Pharmaceutical Society (2020) Consultant Pharmacist Curriculum
23. Royal Pharmaceutical Society (2021) Post-registration Foundation Pharmacist Curriculum
24. Royal Pharmaceutical Society (2022) Core Advanced Pharmacist Curriculum
25. Society and College of Radiography (2022) Education and Career Framework for the Radiography Workforce, 4th Ed
26. UK Clinical Research Facility Network (2021) Induction Framework for Clinical Research Staff (V5.2)
27. Vitae (2011) Researcher Development Framework

## Appendix 4 – Engagement contributors

Responses to engagement opportunities during the development of the Framework include those received from:

Mary Alvarez - Senior Research Midwife, Senior Research Leader programme, North Bristol Trust

Claire Arditto - Programme Lead for Enhanced Practice, Health Education England \*

Dorothy Bean - Regional Chief Nursing Information Officer, NHS England

Cate Bell - Programme Lead for Research Careers and NMAHP Research, University Hospitals Sussex NHS Foundation Trust

Suzanne Bench - Director of Nursing (Research), Guys and St Thomas' NHS Trust

Carrie Biddle - South-West Regional Head of Allied Health Professions, Health Education England \*

Ann Bowrin-Soyer - Matron, Guys and St Thomas' NHS Foundation Trust

Jane Brown - Pharmacy Dean, Health Education England \*

Camille Carroll - Professor of Clinical Neuroscience, Newcastle University

Chief Nursing Officer for England's Strategic Plan for Research Advisory Group members

Gemma Clunie - Senior Clinical Academic Speech and Language Therapist, Imperial College Healthcare NHS Trust

Joy Conway - Professor of Respiratory Physiotherapy; Subject Matter Expert in Research for Advanced Clinical Practice, Health Education England \* / NHSE Workforce Training and Education Directorate

Joanne Cooper - Head of Nursing Research - Research Transformation, NHS England

Council of Deans of Health

Rob Crouch - Honorary Professor of Emergency Medicine; Subject Matter Expert for Consultant Practice, Health Education England \*

Angela Douglas - Deputy Chief Scientific Officer, NHS England

Owen Driskell - Deputy Training Programme Director Higher Specialist Scientist Training (HSST) Programme, National School of Healthcare Science

Ruth Endacott - Professor of Clinical Nursing; Director of Nursing and Midwifery, National Institute of Health and Care Research

Carol Fawkes - Institute of Osteopathy and the National Council for Osteopathic Research

Liz Fenton - Deputy Chief Nurse, Health Education England \*

Andrew Finney - Senior Lecturer and Researcher, School of Nursing and Midwifery and School of Medicine, Keele University

Julia Gamston - Consultant Nurse in Urgent and Emergency Care, Imperial College Healthcare NHS Trust

Fiona Gibb - Director Professional Midwifery, Royal College of Midwives

Annette Hand - Clinical Academic Professor of Nursing, Newcastle upon Tyne Hospitals NHS Foundation Trust and Northumbria University

Helen Hurst - Professor of Nursing and Consultant Nurse, University of Salford and Northern Care Alliance NHS Foundation Trust

Imperial College Healthcare NHS Trust consultant nurses

Helen Janiszewski - Clinical Lead for Nursing and Midwifery Research and Innovation, Nottingham University Hospitals NHS Trust

Amit Kulkarni - Head of Research and Outcomes, Royal College of Speech and Language Therapists

Tony Lavender - Emeritus Professor; member of the Practice Board, British Psychological Society

Judy Lawrence - Research Officer, British Dietetic Association

Alison Leary - Professor of Healthcare and Workforce Modelling, London South Bank University

Pip Logan - Professor of Rehabilitation Research, Nottingham City Care Partnership and University of Nottingham

Lynn MacDiarmid - Advanced Nurse Practitioner, Leicestershire Partnership NHS Trust

Laura McEwen-Smith - National Programme Lead Medical Associate Professions, NHS England

Fiona Maxton - Research Lead, Nursing Research Team, Chief Nursing Officer for England's office, NHS England

Anne McLoughlin - Lead Clinical Nurse Specialist Breast Care, University College London Hospitals NHS Foundation Trust

Sarah O'Brien - Chief Nursing Officer, NHS Lancashire and South Cumbria Integrated Care Board

Office of the Chief Scientific Officer, NHS England

Claire Pegg - Regional Chief Research Lead, National Institute for Health and Care Research

Alison Richardson - Professor of Cancer Nursing and End of Life Care; Head of Nursing Research – Academic Leadership and Strategy, NHS England

Hazel Roddam - Subject Matter Expert for Allied Health Research, Health Education England \* / NHSE Workforce Training and Education Directorate

Denise Ross - Head of Health and Care Professions Academic Development, Leeds Teaching Hospitals NHS Trust

Jane Sandall - Professor of Social Science and Women's Health; Head of Midwifery and Maternity Research, NHS England

Jacqui Scrace - Assistant Director of Nursing for Children and Young People, NHS England, South West Region

Rachel Taylor - Director of the Centre for Nursing, Midwifery and Allied Health Professional-led Research, University College London Hospitals NHS Foundation Trust

Peter Thompson - Director of NIHR Academy Programmes, National Institute for Health and Care Research

Lee Tomlinson - Head of Research, Kent Community Health NHS Trust

Helen Walthall - Director of Nursing and Midwifery Research and Innovation, Oxford University Hospitals NHS Foundation Trust

Gillian Ward - Head of Research and Innovation, Royal College of Occupational Therapists

Amanda Weaver - AHP Preceptorship Workforce Lead, Allied Health Professions Preceptorship and Foundation Support, NHS England

Adrian Whittington - National Clinical Lead for Psychological Professions, NHS England

Julia Williams - Professor of Paramedic Science, College of Paramedics

\* Health Education England merged with NHS England in April 2023 and became the Workforce, Training and Education Directorate.

## Appendix 5 – Glossary

### Audit

The NHS Health Research Authority [accessed 06.01.2023] defines clinical [practice] audit as ‘a quality improvement process that seeks to improve patient care and outcomes through systematic review of care against explicit criteria and the implementation of change.’

### Clinical or Practitioner Academic

Clinical and practitioner academics work concurrently in practice (in health or social care) and academic environments. They provide practice and research leadership to underpin excellent evidence-based service provision, with a focus on improving effectiveness, quality and safety (AUKUH, 2016; Carrick-Sen et al, 2019; DoH, 2012). A range of training and developmental pathways exist (see, for example, NIHR), commencing at the level of internships and extending to Senior Investigator schemes and beyond.

### Digital literacy

Health Education England [accessed 04.01.2023] define digital literacy as ‘those capabilities that fit someone for living, learning, working, participating and thriving in a digital society.’

### Implementation science

‘Implementation science is the study of ‘methods to promote the systematic uptake of research findings and other evidence-based practices into routine practice ... to improve the quality and effectiveness of health services.’ (Eccles and Mittman, 2006). It considers how to design and evaluate activities to support the adoption of interventions, what might be influencing behaviour or preventing change, and how well-engaged audiences and communities might be (Knowledge mobilisation and implementation - ARC (nihr.ac.uk) [accessed 20.01.2023]).

### Knowledge creation

Knowledge creation is the process of making knowledge generated by individuals / groups available, amplifying it and connecting it to existing knowledge (Nonaka & von Krogh, 2009). It’s the continuous combination, transfer and conversion of different kinds of knowledge, including practice-based experience, expert opinion, audits and service evaluation outputs, quality improvement projects, research findings, systematic reviews and best practice guidelines.

### Knowledge mobilisation (or translation)

‘Knowledge mobilisation is about sharing knowledge between different communities to support change and create impact. Blending and acting on knowledge from different communities leads to new ideas, innovations, and new ways of working. Sharing knowledge alone is dissemination. Knowledge mobilisation generates impact.’ (Knowledge mobilisation and implementation - ARC (nihr.ac.uk) [accessed 20.01.2023])

## **Quality improvement**

The Health Foundation (2021) identify that quality improvement is centred on ‘giving the people closest to issues affecting care quality the time, permission, skills and resources they need to solve them. It involves a systematic and coordinated approach to solving a problem using specific methods and tools with the aim of bringing about a measurable improvement.’

## **Research**

The UK Policy Framework for Health and Social Care Research (2017) defines research as ‘...the attempt to derive generalisable or transferable new knowledge to answer or refine relevant questions with scientifically sound methods. This excludes audits of practice and service evaluations.’

## **Research delivery**

Research delivery encompasses the initiation, or setting up, of a funded and fully approved study, and undertaking the ‘active’ phase during which the study protocol is implemented, participants are recruited, and data is collected. (Clinical Research Network | NIHR [accessed 03/08/2023]; Bradford Institute for Health Research [accessed 18.01.2023])

## **Research impact**

The Research Excellence Framework 2021 [accessed 18.01.2023] defines research impact as: ‘an effect on, change or benefit to the economy, society, culture, public policy or services, health, the environment or quality of life, beyond academia.’

## **Service evaluation**

The NHS Health Research Authority [accessed 04.07.2023] defines service evaluation as ‘a set of procedures used to judge a pilot’s [or service’s] merit by providing a systematic assessment of its aims, objectives, activities, outputs, outcomes, and costs.’ Robust evaluation identifies not only whether an intervention worked, but also why and how, allowing lessons to be learned and shared (The Health Foundation, 2015).