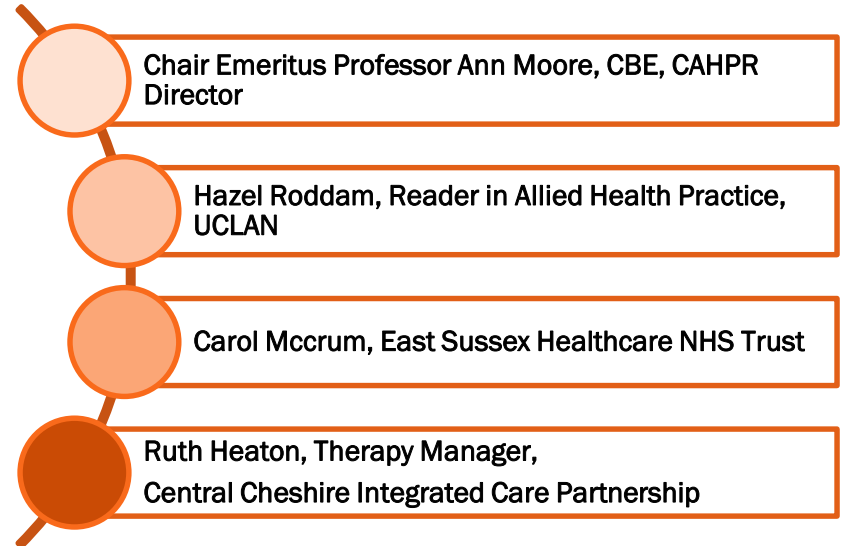


MAKING THE CASE FOR RESEARCH IN SERVICE DELIVERY



Visit us at stand 64



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#Physio17



MAKING THE CASE FOR RESEARCH IN SERVICE DELIVERY

DR HAZEL RODDAM

READER IN ALLIED HEALTH PRACTICE

UNIVERSITY OF CENTRAL LANCASHIRE

VICE CHAIR OF CAHPR STRATEGY COMMITTEE

FRAMING THE CONTEXT

Where are the relevant evidence sources?

How could we support and share best practice?

Caution against making assumptions ...

- *What do we know about the patients' perspectives?*
- *What do we know about the practitioners' perspectives?*
- *What do we know about the managers' perspectives?*

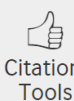




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Citation
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Responses



Article

Health services research
Research



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

[Annette Boaz¹](#), [Stephen Hanney²](#), [Teresa Jones²](#), [Bryony Soper²](#)

[Author affiliations +](#)

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?

Methods An hourglass-shaped review was developed, consisting of three stages: (1) a planning and mapping stage; (2) a focused review concentrating on the core question of whether or not research engagement improves healthcare performance; and (3) a wider (but less systematic) review of papers identified during the two earlier stages, focusing on mechanisms.

<http://bmjopen.bmj.com/content/5/12/e009415>

HEADLINE FINDINGS ...

CONCLUSION

Systematic analysis of the data related to the engagement by clinicians and healthcare organisations in research is in its infancy, despite widely held assumptions about the benefits of this engagement. The focused review reported above concluded that there *is* some positive evidence (albeit limited) that engagement by clinicians and

healthcare
performance,
also identified
engagement
research
ance, and
remains u

Positive papers: A majority of the papers (28) were positive with regard to whether research engagement improved healthcare performance. However, only a minority of the positive cases (7 out of 28) reported improved health outcomes, the remainder reported improved (usually more evidence-based) processes of care. Among the papers reporting improved health out-



Transforming healthcare through clinical academic roles in nursing, midwifery and allied health professions

A practical resource for healthcare provider organisations

AUKUH Clinical Academic Roles Development Group

NHS
National Institute for
Health Research

ICA

HEE/NIHR Integrated Clinical Academic Programme
for non-medical healthcare professionals

NHS

FREE workshops about the HEE/NIHR Integrated Clinical Academic (ICA) Programme

- Are you a non-medical healthcare professional looking to pursue a clinical academic career but not sure where to start?
- Perhaps you've been approached by a team member wishing to pursue a clinical academic career and unsure what this means or how you can support them?
- Do you have a view about any factors that act as barriers to people accessing this programme?

We are holding two workshops in each of the four HEE regions:

- One for prospective ICA applicants to hear more about the programme, give your perspectives on research careers and make new connections across your own region
- The other is for managers and clinical team leads to come together and discover what a research career is all about, as well as how and why you could support them.

The workshops are an opportunity to gather attendees' views and perspectives on the HEE/NIHR ICA Programme - please join us to share your experiences and opinions.

The workshops are open to all non-medical healthcare professions including nursing, midwifery, allied health, health visitors and healthcare scientists.



HEE/NIHR ICA Programme workshops dates and locations (9.30am - 4.30pm):

28th Feb 2017	Preston	Managers and Clinical Team Leads
1st Mar 2017	Preston	Prospective applicants
8th Mar 2017	Birmingham	Managers and Clinical Team Leads
9th Mar 2017	Birmingham	Prospective applicants
8th Mar 2017	Bristol	Managers and Clinical Team Leads
9th Mar 2017	Bristol	Prospective applicants
14th Mar 2017	London	Managers and Clinical Team Leads
15th Mar 2017	London	Prospective applicants

Delegates will receive an attendance certificate for their own CPD records, as well as a resource pack at the end of the workshop.

Lunch and refreshments will be provided. Places are limited, please book early.



For further booking information please email ICAPWorkshops@uclan.ac.uk or contact Grete Smith/Lucy Cross on 01772 893608 / 01772 893650

WHAT ARE THE PRACTITIONERS' PRIORITIES?

Mapping of expertise and mentorship capacity is crucial at local and regional levels. More effective networking and signposting to relevant help and advice infrastructure could help to maximise relevant and appropriate support and to minimise duplication.

"building and developing a research culture within clinical practice is vital for developing best practice & evidence-based practice"

"research is still the cherry on the cake ... it should be the key ingredient"

"please promote the benefits of the programme to managers/stakeholders: what's in it for them!"

"take on the challenge if you believe clinical and research work should truly inform one another"

"start the research journey as early as possible in your career"

WHAT ARE THE MANAGERS' PRIORITIES?

Managers need to be able to access advice on how best to support practitioners, but also how to ensure effective positive impact for the clinical service. Powerful illustrative case examples are particularly needed.

"make sure that the outcomes it achieves are directly connected to clinical practice (& that this can be demonstrated!)"

"needs more promotion with middle managers in NHS so the value of research active clinicians can be appreciated more"

"don't forget that managers have to support staff – manage their expectations, manage the vacancy & the challenges of backfill. We need help & support to support our staff"

"we need more support operationalising clinical academic careers"

THE VALUE OF EVIDENCE SYNTHESSES BY CLINICAL PRACTITIONERS, TO CHANGE CLINICAL PRACTICE

International Journal of Language & Communication Disorders

Review

Rehabilitation or compensation: time for a fresh perspective on speech and language therapy for dysphagia and Parkinson's disease?

Sarah K. Smith¹, Hazel Roddam²
and Heulwen Sheldrick³

Article first published online: 11 APR 2012

DOI: 10.1111/j.1460-6984.2011.00093.x

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Issue

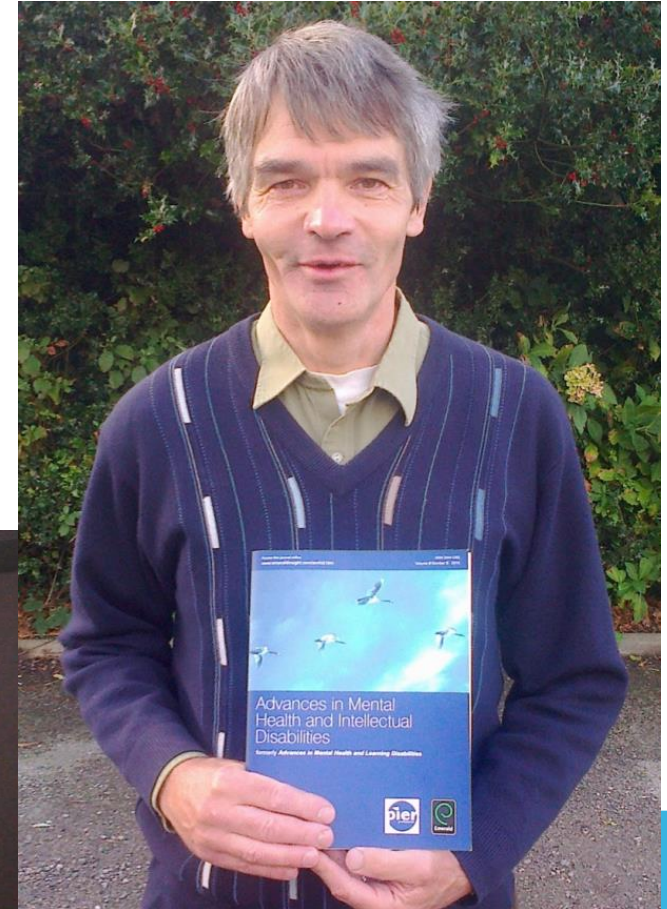
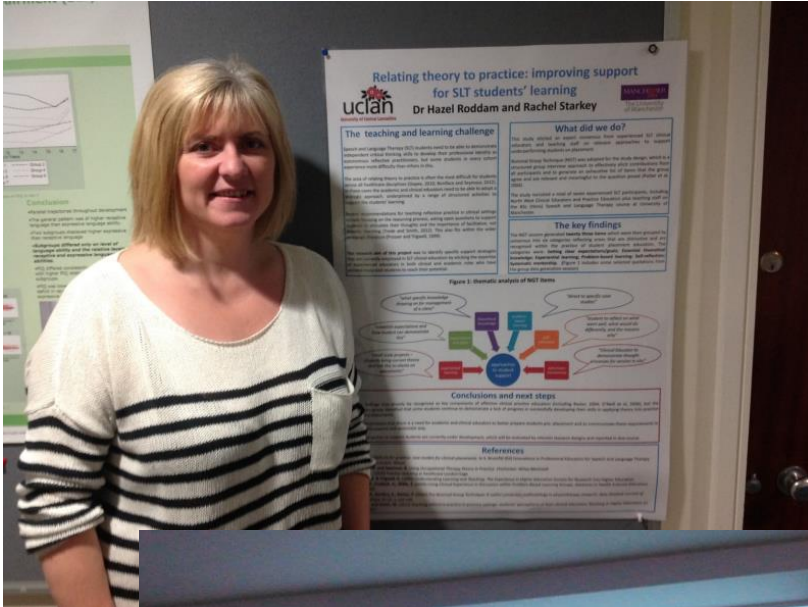


International Journal of
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**Volume 47, Issue 4, pages
351–364, July-August 2012**



AND DISSEMINATION IS THE KEY TO MAKING IMPACT





CAHPR

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Regional hubs and
contacts

Professoriate and strategy
committee

Public Health Awards

Hub activities

News

CAHPR develops
research, strengthens
evidence of value and
impact, and enhances
patient care



USER LOGIN

Username or e-mail: *

Password: *

☐ Keep me logged in

LOG IN

Create new account

Forgotten your password? Reset

LATEST NEWS

27 Oct 2017

[Catch up with CAHPR at Physiotherapy UK](#)

27 Oct 2017

[Free evening event in Sheffield 14 November](#)

19 Oct 2017

[CAHPR Session at Physiotherapy UK 2017](#)

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USER LOGIN

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CAHPR's top tips leaflets



4

Use the links below to access research guidance leaflets produced by CAHPR.

Download

- [01_cahpr_introduction.pdf](#)
- [02_getting_your_paper_published.pdf](#)
- [03_running_a_journal_club.pdf](#)
- [04_preparing_a_scientific_poster.pdf](#)
- [05_capturing_research_impact.pdf](#)
- [06_becoming_a_peer_reviewer.pdf](#)
- [07_engaging_with_your_ahsn.pdf](#)
- [08_social_media.pdf](#)
- [09_patient_public_involvement.pdf](#)
- [10_statistics.pdf](#)
- [11_seeking_ethical_approval.pdf](#)

ADDITIONAL INFORMATION

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CAHPR, Council for Allied
Health Professions
Research, research

SIMILAR CONTENT



SUPPORTING ENGAGEMENT IN RESEARCH USE AND RESEARCH ACTIVITY

DR CAROL MCCRUM

CONSULTANT PHYSIOTHERAPIST

AHP RESEARCH LEAD, EAST SUSSEX HEALTHCARE NHS TRUST

VISITING RESEARCH FELLOW, UNIVERSITY OF BRIGHTON

NICE FELLOW

DEVELOPING RESEARCH ABLE & RESEARCH ACTIVE CLINICIANS AT A LOCAL LEVEL

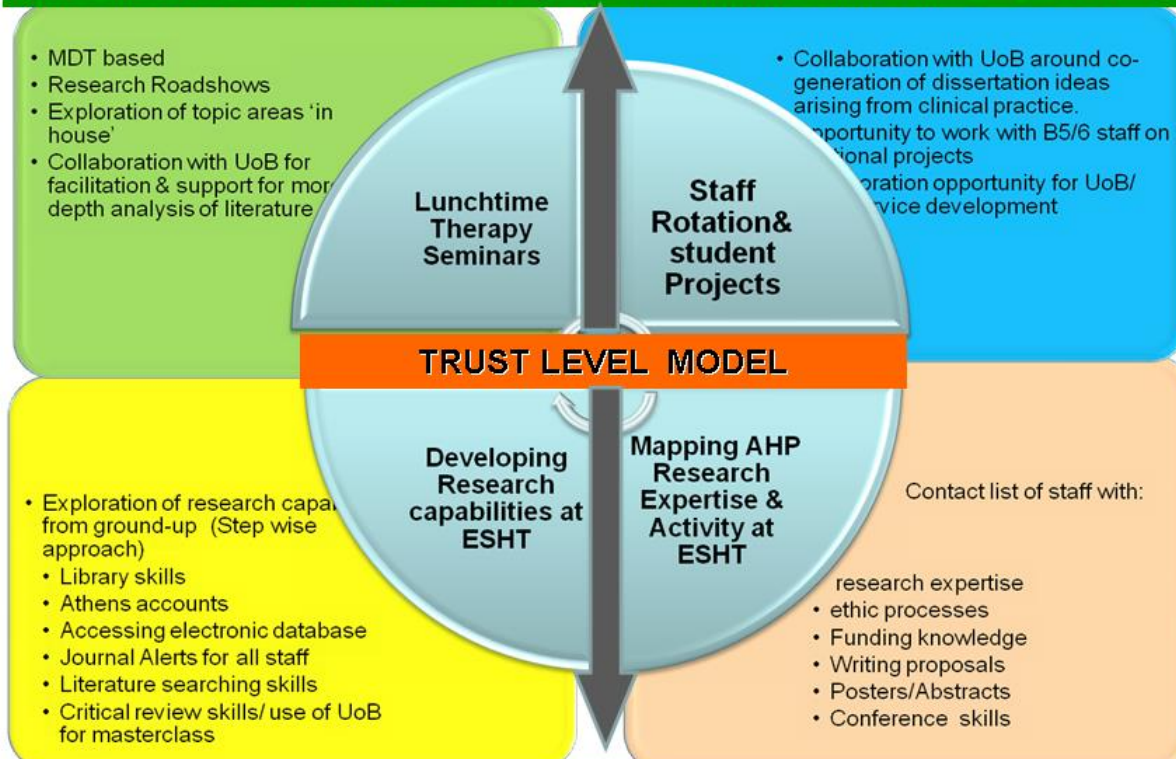
Multilevel strategies needed for success:

- Sign up at Trust Board- Exec Champion- enabler (IT, HR, R&D, L&D depts)
- Embedded into Trust R & D & Education Five Year Strategic Plan
- Trust Clinical Effectiveness mtgs- added research activity & quality outcomes
- Job Descriptions
 - Clinicians- include involvement in research activity as well as evidence informed practice
 - Service Manager JDs – include ability to support staff research skills & activity
- Focus groups, piloting process to develop
- Research Escalator - integrate into in Trust's ADR process of AHP staff



ESHT Framework for Research Activity ©

Increasing research ability & activity and its translation into clinical practice



Research practice/capability embedded in clinical staff ADR process

SUPPORTING ENGAGEMENT IN RESEARCH USE AND RESEARCH ACTIVITY

Research Escalator Tool

Aims

- designed to map, measure and provide resources related to research use and capability
- to ensure staff have the ability to utilise research in practice
- to facilitate staff research capability and activity.



East Sussex Research Escalator ©

Research awareness, utilisation and activity:
Everyone's Responsibility


KEY: RED ■ = NOT ACHIEVED
AMBER ■ = PLANNED ACTIVITY
GREEN ■ = ACHIEVED ✓
NO COLOUR ■ = NOT YET PLANNED

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Professions Research

Research awareness, utilisation and activity:

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			Strategic planning of Trust &/or Departmental Research Activities	Leading AHP Research Activities/Involvement in National Developments	LEVEL 4
		Active in Clinical Research/ Collaboration with other Active Researchers	Influencing Departmental Research Activity	Supporting Research Activity in Department &/or Trust	LEVEL 3
	Critiquing Literature within a Field of Practice	Influencing Departmental Practice	Implementing Evidence Based Practice	Evaluating Practice in relation to Evidence Base	LEVEL 2
Active Literature, Internet & Database Search Skills	Clinically Relevant Literature Searching	Critically Analysing Literature - Reading and Understanding Research	Clinical Application of Evidence Informed Practice	Awareness of national developments in practice <i>To be Achieved</i>	LEVEL 1 *All Qualified Staff to achieve this level
Achieved ✓	Achieved ✓	Achieved ✓	Achieved ✓		

East Sussex Research Escalator ©

Research awareness, utilisation and activity:
Everyone's Responsibility

KEY: RED = NOT ACHIEVED
AMBER = PLANNED ACTIVITY
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NO COLOUR = NOT YET PLANNED



Everyone's Responsibility

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					Strategic planning of Trust &/or Departmental Research Activities	Leading Research Activities/Involvement in National Developments	LEVEL 4		
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Active Literature, Internet & Database Search Skills	Clinically Relevant Literature Searching	Critically Analysing Literature - Reading and Understanding Research	Clinical Application of Evidence Informed Practice	Awareness of national developments in practice	LEVEL 1			* All Qualified Staff should achieve this level	
Achieved ✓	Achieved ✓	Achieved ✓	Achieved ✓	To be achieved -					

IMPACTS & SUCCESSES

- Local site for national research studies eg NHIR PROVE
- Links with local HEIs (research projects & ideas)
- AHP on Trust R & D committee
- CAHPR hub involvement
- Training for evidence use and searching: Library, journal alerts, Athens A/cs,
- NHIR clinical academic pathways - internships, MRes, PhDs
- NICE Guidance & Qly Stds – developed AHP services evaluation & implementation strategy & NICE champion
- Responding to NICE consultations
- Small project funding (R & D dept., Prof Networks/CSP/Charities
- Submitting abstracts to conferences & supporting publications
- Funded physiotherapy research staff – job share






THE BENEFITS OF RESEARCH ENGAGEMENT IN SERVICE DELIVERY – MANAGERS PERSPECTIVE

RUTH HEATON

**DIVISIONAL HEAD OF NURSING AND
HEALTHCARE PROFESSIONS**

**MID CHESHIRE HOSPITALS NHS FOUNDATION
TRUST**

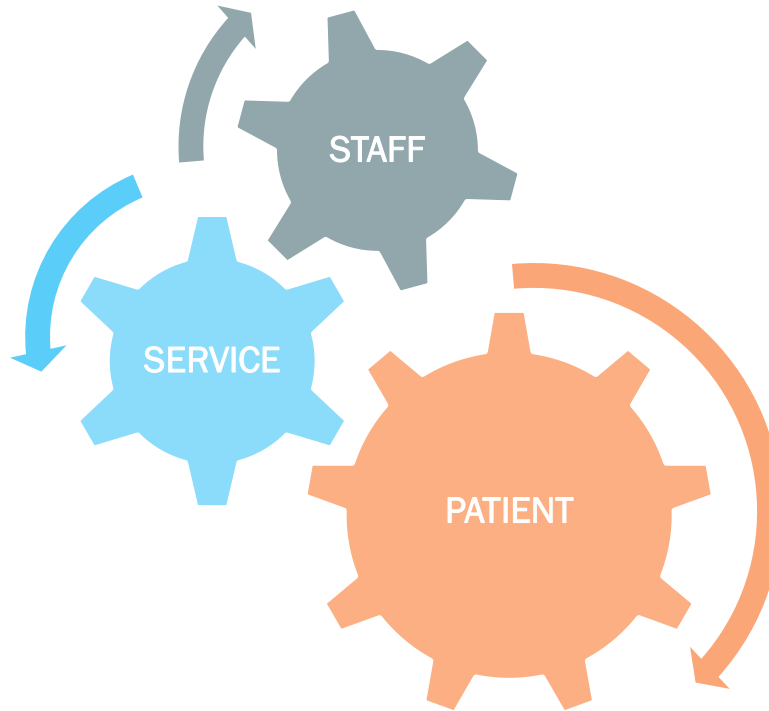


**HOW DID THE RESEARCH
JOURNEY BEGIN?**

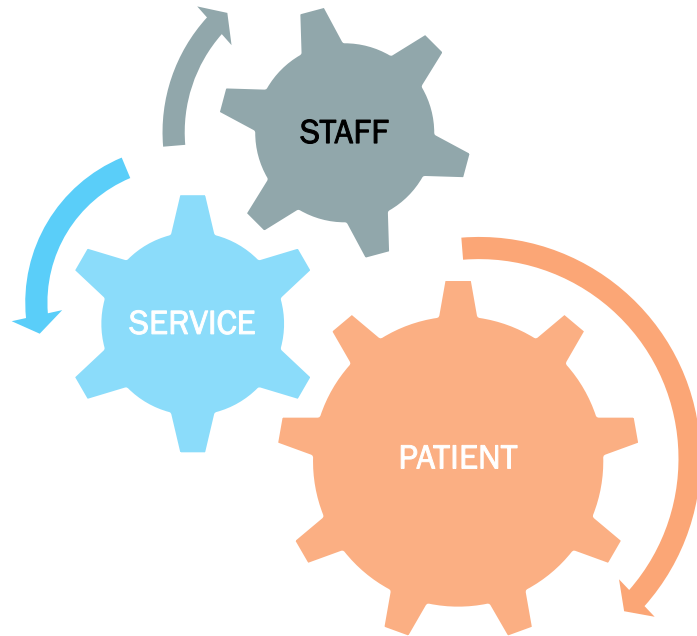
OVERVIEW OF STUDIES COMPLETED IN CHESHIRE

Name of study	Type of study	Patients Recruited (2599)	Physios involved (138)
Stratified Care for Low Back Pain (IMPaCT Back) 2007 – 2010*	Implementation	922	26
Telephone assessment (PhysioDirect)	Multicentre RCT	527 (2249)	8
Exercises for OA knee (BEEP)	Multicentre RCT	141 (526)	10
Patient reported outcome measure (PROMS)	Feasibility	58 (428)	7
Patient self-referral (STEMS)	Pilot Cluster RCT	951	17
Hip OA survey (ABC Hip)	National Physio survey	N/A	70 posted

BENEFITS OF SERVICE INCLUSION IN RESEARCH ACTIVITY

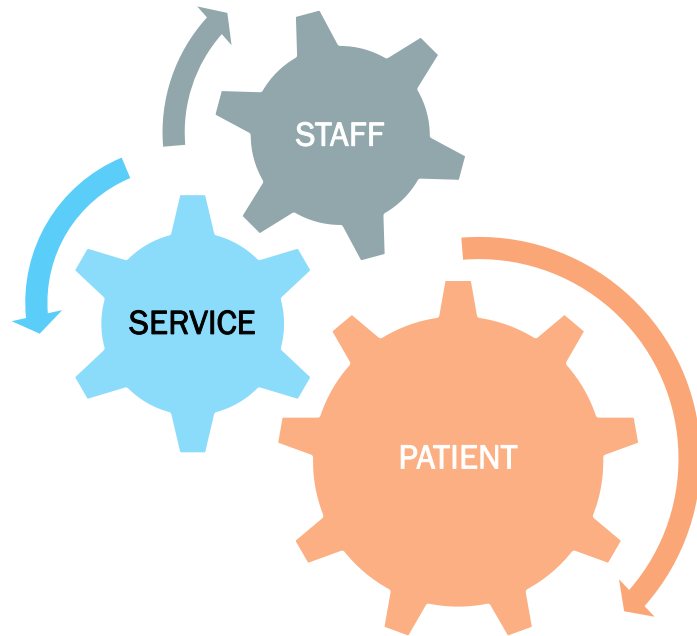


STAFF



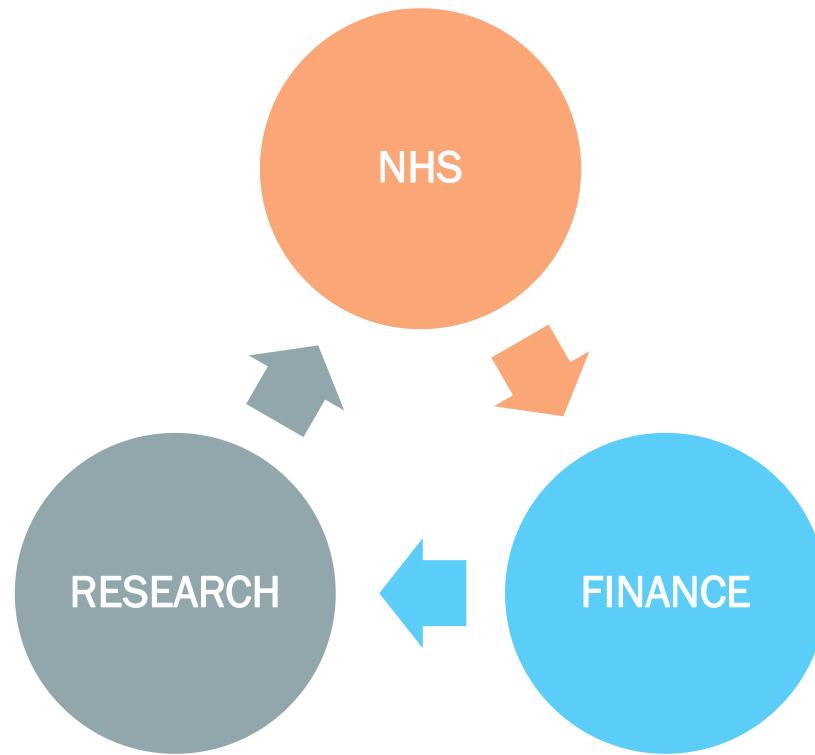
- Staff Engagement
- CPD
- Role Development
- Recruitment and Retention

SERVICE

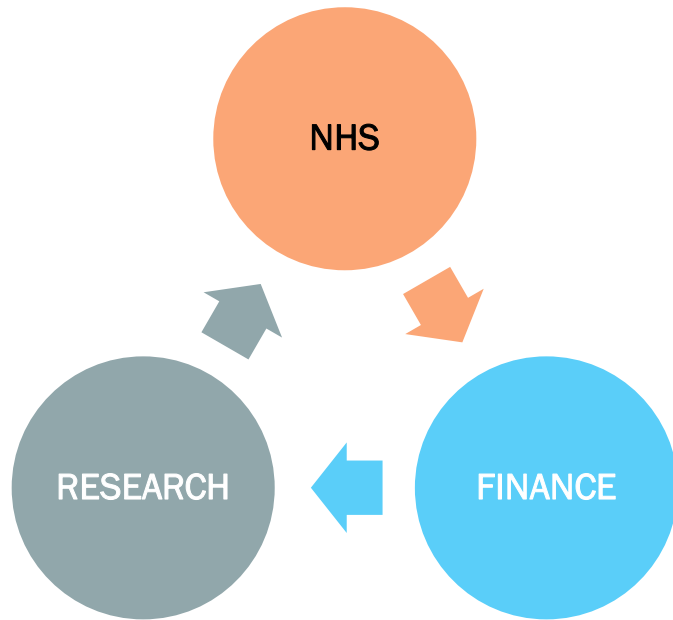


- Service Improvements
- Evidence Base for Service Delivery
- Development of Quality Indicators
- Service Profile

BARRIERS

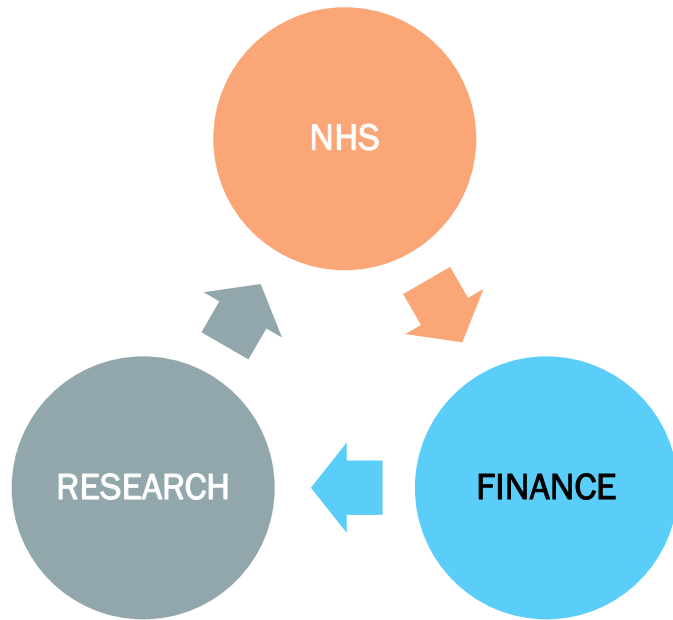


NHS



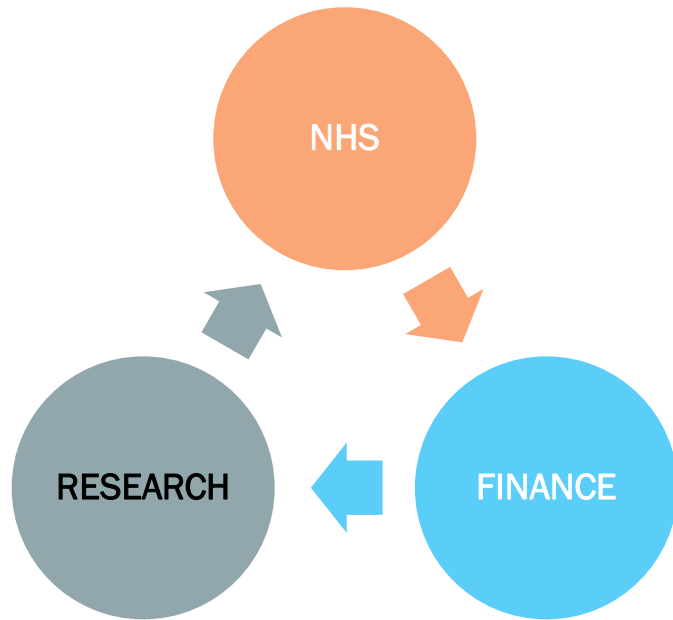
- **Service Stability**
- **Service Model**
- **Culture**
- **Management Focus**
- **Service versus Personal Research**

FINANCE



- Understanding and accessing funding at a service level
- Annual funding cycles

RESEARCH



- Research Timeframes
- Academic versus Clinical World

SOLUTIONS



STAFF VIEW

“The interaction with Keele and the research facilitators has enabled me to enhance my skills and knowledge in research, the research facilitators have been key in making trials work seamlessly in clinical practice”

Physiotherapist

MANAGER'S VIEW

“Supports active engagement of staff in research in clinical setting, which raises standards of service delivery and effectiveness. Also supports a wide range of staff training and development opportunities to support ongoing CPD. Raises the service profile and provides a USP for service promotion in business cases and tenders – supports the development of quality indicators that drive service improvement”

Physiotherapy Manager

RESEARCH STUDIES

<https://keele.ac.uk/pchs>

Contact:

ruth.heaton@mcht.nhs.uk



Clinical Research Network
North West Coast

NHS
*National Institute for
Health Research*



Any questions?

STRUCTURED WORKSHOP ACTIVITY ...

What do you think are the main benefits for clinicians in becoming research active?

- 8 minutes
- Record answers on flipcharts

What top tips for enabling research activity within the work place would you give to managers and clinicians?

- 8 minutes
- (aim for 1 to 3 tips)
- Record answers on flipcharts

Feedback

- 15 minutes
- Each group to feedback one key point

TOP TIPS

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Seeking ethical approval

Obtaining necessary ethical approvals for research is essential, regardless of how large or small the project.

Ethical considerations are an important principle in research to ensure patients and participants are cared for appropriately. Research involving NHS patients or carers requires NHS ethics committee, Health Research Authority (in England) and organisational approval. Research involving NHS staff or other participants also requires organisational approvals.

This leaflet provides top ten tips about ethical approval to help plan and conduct research.

TOP TIPS

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Preparing a Scientific Poster

Why a poster? Posters have become valuable tools for professional meetings, teaching and assessment.

Posters are effective visual communication tools, able to engage people in a conversation, convey main points to large crowds and advertise one's work (research/clinical project). Posters can be less stressful than oral presentations and can be displayed in your department. This leaflet provides a handy top ten tips to developing an effective scientific poster.

TOP TIPS

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Running a Journal Club

Basing our practice on evidence is a fundamental part of being an allied health professional. It is important that we are able to critically appraise and analyse evidence and apply findings to our everyday practice.

A journal club can be a useful way to join a group of like-minded professionals together to consider evidence formally or informally and it is great CPD. This leaflet provides a handy 'Top 10 Tips' to help you to set up and run a journal club in your work area.

THANKYOU EVERYONE!

Please keep following CAHPR news ... <http://cahpr.csp.org.uk/>

@AnnMooreEmProf

@KatiePwork

@SoRRachelHarris

@HazelRoddam1

@FranFitch

A screenshot of a Twitter profile for Ann Moore CBE (@AnnMooreEmProf). The profile header shows a circular profile picture of a woman with short white hair and glasses. Below the picture, the name "Ann Moore CBE" is displayed, followed by the handle "@AnnMooreEmProf" and the text "Follows you". It also shows "Joined March 2013" and "Born on May 31". There are two buttons: "Tweet to" and "Message". Below these, it says "27 Followers you know" and shows a row of eight circular profile pictures of other users. To the right of the profile, statistics are shown: "Tweets 255", "Following 238", "Followers 372", and "Likes 189". Below the profile information, there are two tabs: "Tweets" and "Tweets & replies". The "Tweets & replies" tab is selected, showing a tweet from Katie Prangle (@KatiePwork) retweeted by Ann Moore CBE. The tweet text is: "Come and catch up with #CAHPR at #physio17 stand 64. We will be having an informal networking session at 17.30 on 10 November." Below the tweet is a promotional banner for "CATCH UP WITH CAHPR AT PHYSIOTHERAPY UK 2017". The banner features the CAHPR logo (orange text "cahpr" with "Council for Allied Health Professions Research" below it) and the text "Visit us at stand 64 10 November 17.30". It also lists names: "Come along and chat about CAHPR with: Dr Lisa Roberts, CAHPR Strategy Committee Consultant Rep Dr Harriet Shannon, CAHPR London Hub Co-Leader and Regional Hub Forum Vice Chair". At the bottom of the banner, the website "cahpr.csp.org.uk" and the hashtags "#CAHPR" and "#Physio17" are displayed. Below the banner, the text "CAHPR_London and Harriet Shannon" is visible, followed by icons for replies, retweets (11), likes (11), and a share icon.