

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



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

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Introduction

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

Aim

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

Methods

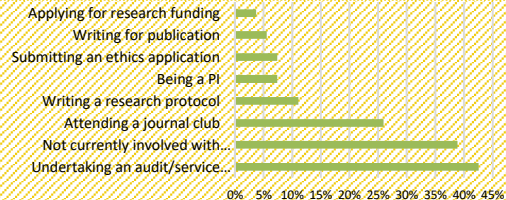
- Validated survey: The Research Capacity and Culture (RCC) tool (Holden et al., 2012)
- Individual interviews (n=1)

Results

- 25% survey response rate, n=104
- 8 different AHP groups (23% SLTs)
- Median 7 years working at the Trust (IQR 2-13 years)
- Median 19 years qualified (IQR 14-22)

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

Current research activities



Building AHP research: selected themes

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

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

“some teams have research success, it would be interesting to understand how they built that”

Conclusions

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

Implications for practice

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

