## Multi-professional practicebased research capabilities framework

Wednesday 21<sup>st</sup> May 2025 CAHPR South West





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

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

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

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

- clinical (or professional) practice;
- leadership;
- facilitation of learning, and
- evidence, research and development.

### Different Domains of Research Activity

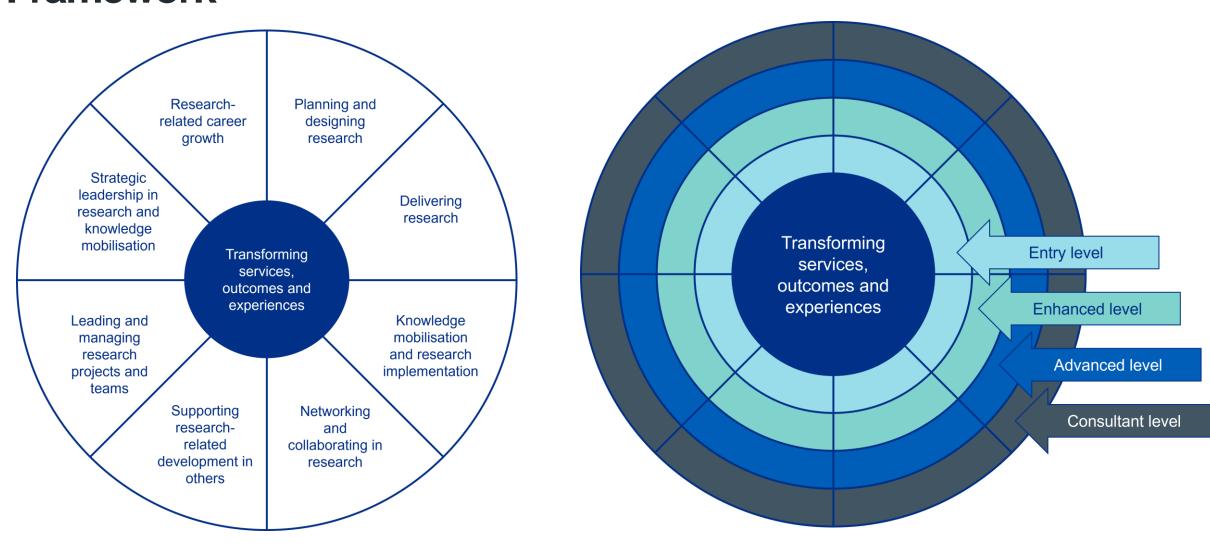
- Research is more than RCTs and statistics.
- Research understood as the research pillar of professional practice
- Each domain has different requirements for capability.
- Multi-professional Practice-based Research Capabilities Framework



Slide by King Tam, UWE Physio student, June 2024

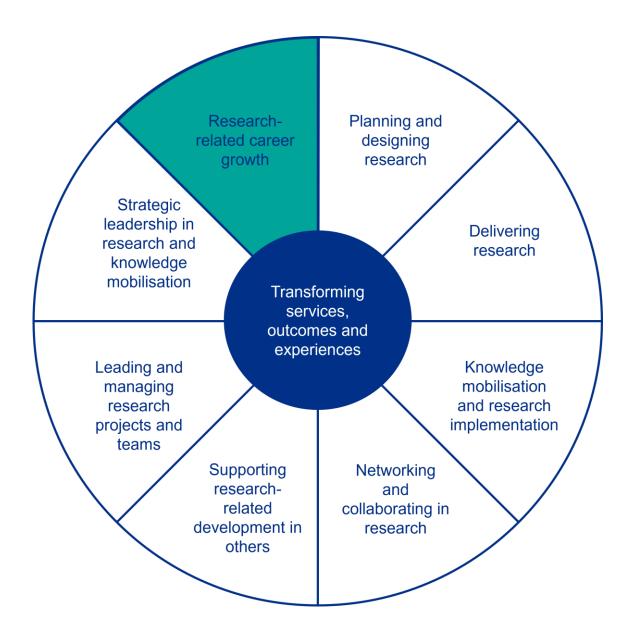


## Multi-professional Practice-based Research Capabilities Framework



## 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.



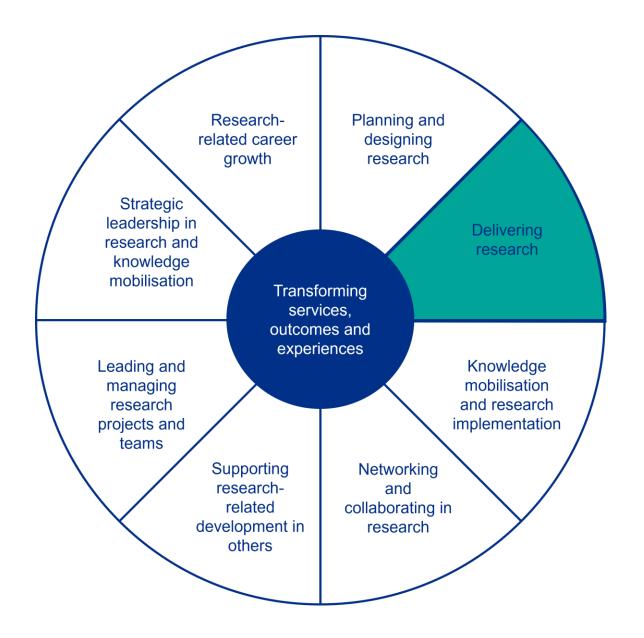
## Planning and designing research

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.



### 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.



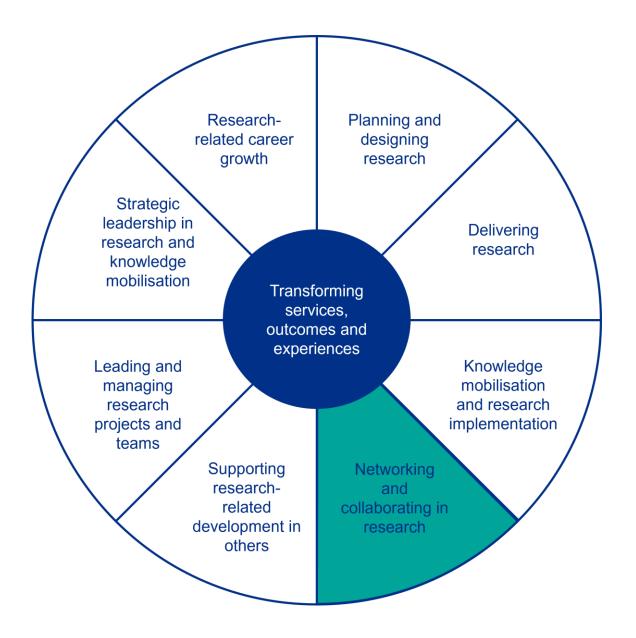
# Knowledge mobilisation and research implementation

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.



# 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.



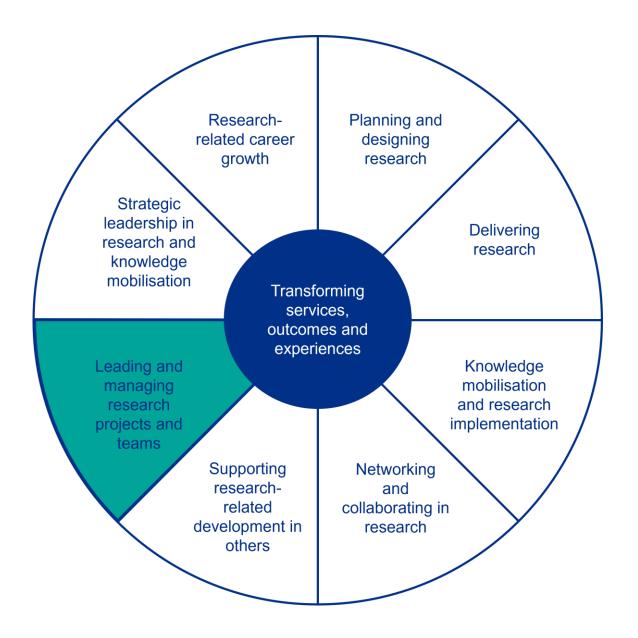
### Supporting researchrelated development in others

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.



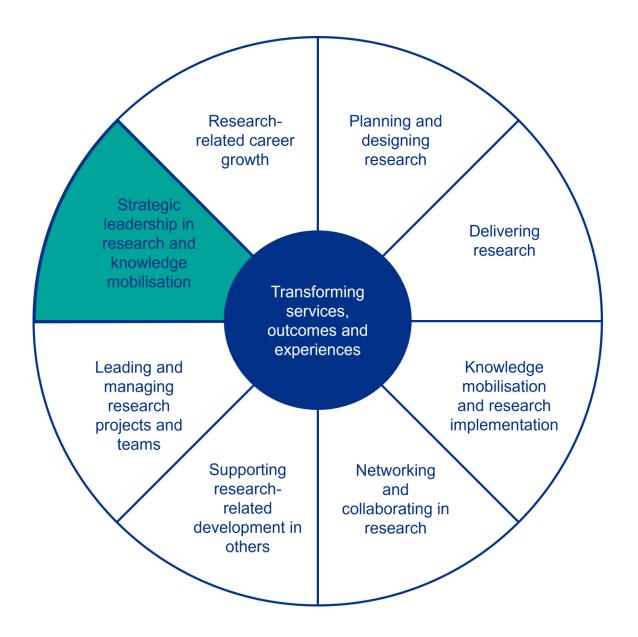
# Leading and managing research projects and teams

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



# 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.



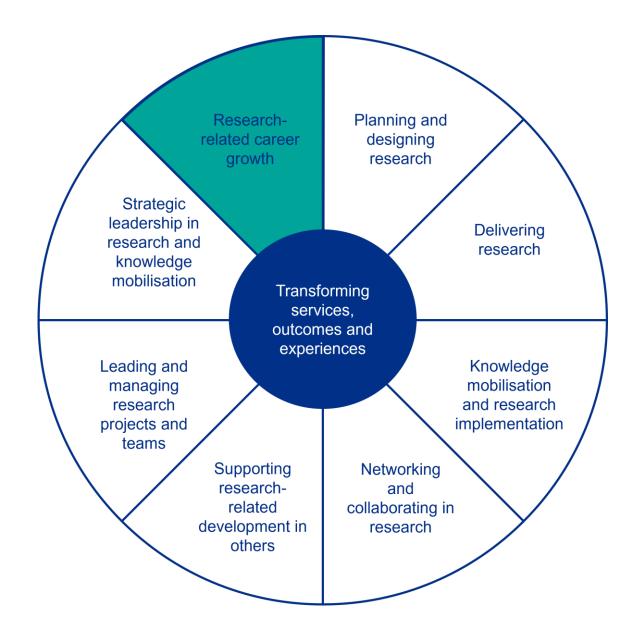
## Research-related career growth

#### Research capabilities

#### **Entry level**

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.

Constructively question own and others' practice, identifying opportunities to generate new knowledge and enhance services.

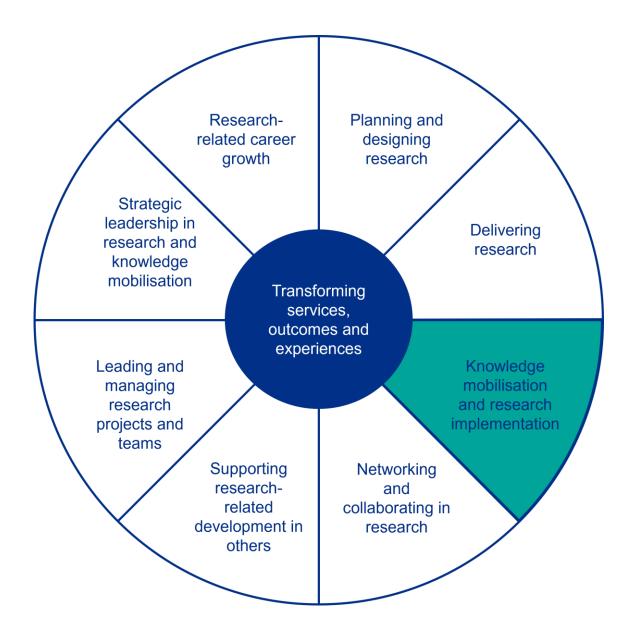


# Knowledge mobilisation and research implementation

#### Research capabilities

#### Consultant level

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.



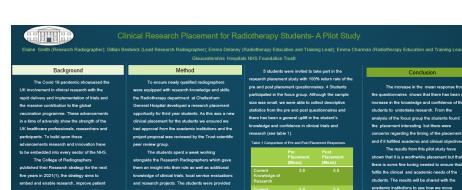


## Radiotherapy Research Radiographer

**Elaine Smith** 



## Multi-Professional Practice-based Research Capabilities Framewerk



part in a focus group to expand on any themes

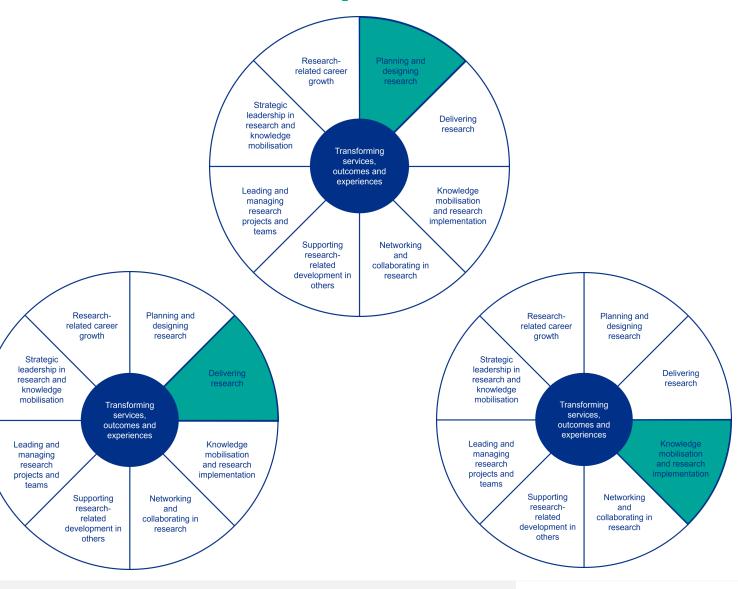


University of the West of England

the questionnaires shows that there has been an

clinical or academic, and where it sits within the

esearch-informed teaching of future cohorts of and confidence of our future cohorts of students





Multi-Professional Practice-based Research Capabilities Framework



- A recent systematic review of the literature<sup>1</sup> recommended the use of photo biomodulation (PBM) for patients receiving radiotherapy

This study aimed to evaluate the effectiveness of PBM in managing oral mucositis.

· 20 patients used the PBM unit at each radiotherapy fraction.



 Patients were seen on a weekly basis by the head and neck clinical nurse specialist and their OM grade was noted

- · Patients were also asked to self-score their OM.
- · On a weekly survey patients were asked to comment on their experience of using the PBM unit.

Photo 1- the photo

- · A retrospective control group of 20 patients with similar diagnosis and treatment regimes.
- · This control cohort followed the departmental OM management pathway

who had an RTOG 4, a level not seen in the control group. Patients were able to self administer the PBM treatment after initial demonstration, this meant that there was no negative effect on staffing. From the survey responses the patients found it easy to administer until radiotherapy side effects took hold and then it became painful.

Our findings are very similar to the recently closed Liteform clinical trial, this trial was closed early due to under recruitment. The trial's limited results were non definitive regarding the clinical effectiveness of PBM and there needs to be further research to assess its effectiveness.

The overall aim was to evaluate the use of PBM in the effective management of OM in patients receiving radiotherapy. In the acute setting PBM has not shown to be significantly more effective than the department's current management pathway, therefore, it was not adopted in the department. PBM may hold some benefit in the management of other radiotherapy side effects and late effects.

With thanks to the radiotherapy team at Cheltenham Oncology and for the patients who made this possible.

References. Blad S, Cheng KKF, Lalla RV, Yarom N, Hong C, Logan RM, Bowen Gibson R, Saunders DP, Zadik Y, Ariyawardana A, Correa ME, Ranna V, of Supportive Care in Cancer and International Society of or supportive care in cancer and international society or Oral Oncology (MASCC/ISOO). MASCC/ISOO clinical practice guidelines for the nanagement of mucositis secondary to cancer therapy. Cancer 2020 Oct 1:126/19/:4423-4431. doi: 10.1002/cncr.33100. Epub 2020 kd 28. Erratum in Cancer, 2021 Oct 1:127/19/:3700, PMID: 32785044

#### pathway for the management of OM.

required Gelclair

addition of Gelclair- this is part of the departmental Survey Responses 95 surveys were returned from an expected 120 giving a

Week 1 Week 2 Week 3 Week 4 Week 5 Week 6

No of Weeks

■ Grade 0 ■ Grade 1 ■ Grade 2 ■ Grade 3 ■ Grade 4

35% of the PBM cohort required Caphosol and 60%

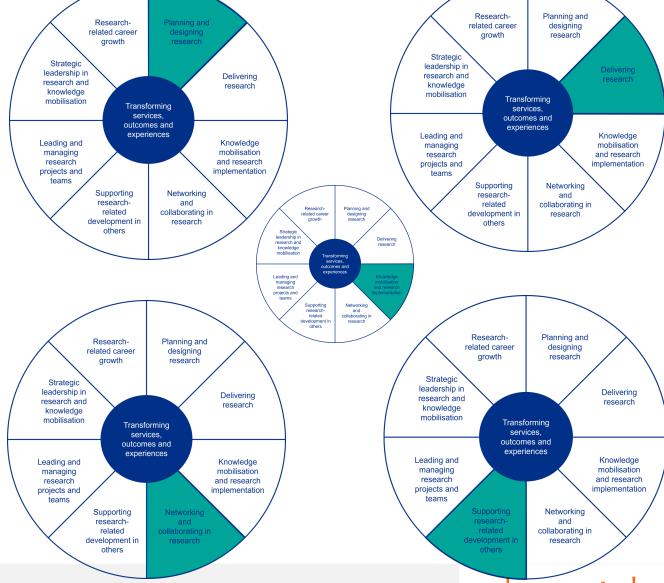
In the control cohort 50% of the patients required the

Chart 1. Combined chart showing RTOG scoring of OM

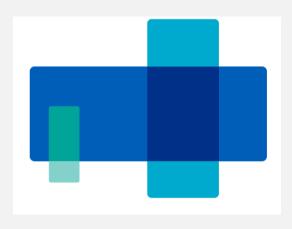
- return rate of 79.2% Themes from the surveys
  - Fase of use
  - Uncertainty of benefits

  - Size of applicator- painful as treatment Side effects take hold.



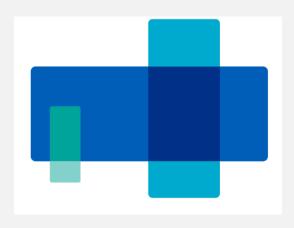






## Speech and Language Therapist

Laura Ball



## Therapy Research Assistant

Leanne Raybould

### The role of support workers in research



## All research starts with a question. My question is- Why can't Support Workers be research active?

- The support workforce is a highly skilled group of people. Some of which have years of experience and a wealth of knowledge in their specialist areas.
- If tasks such as specialist assessments are delegated in day to day work why not in a research capacity?
- Giving breadth to SW roles keeps the work interesting and aids retention.
- Professionally under-recognised in research (Williams et al., 2024)





## Multi-Professional Practice-based Research Capabilities Framew statement on the support workforce

'Support workers, technicians, assistants, associate practitioners 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.' pg 6.





## Allied Health Professions' Support Worker Competency, Education, and Career Development Framework

Domain 6: research and service improvement Participation and undertaking of research, audit, evaluation and service-improvement projects.

projects.			
Competence	Entry stage	Intermediate stage	Assistant practitioner stage
6.1 Service improvement	Participates in service evaluation and quality improvement activities relevant to own work.	Contributes to audit, service evaluation and quality improvement activities, such as service user feedback and benchmarking.	Participates in, contributes to, and may lead, audits, service evaluation and quality improvement projects relevant to own work.
6.2 Research activity	Able to understand and comply with research governance, ethics, protocols and guidelines.	Understands and complies with research governance, ethics, protocols and research, and may carry out routine research activities under guidance of more experienced staff.  Disseminates research findings.	Applies research governance, ethics, protocols and guidelines and may undertake more complex research activities including data collection and analysis. Disseminates research findings.





### How to include Support Workers in research



### As a supervisor/manager

- Know the skills & experience of your Support Workers
- Involve and encourage SW in Quality
   Improvement, Service Evaluation & Development
- Include research in development conversations
- Use both the Support Worker Framework and Multi-professional Research Capabilities Framework for guidance
- Highlight Support Workers at feasibility stage

## Consider not saying no

#### As a researcher

- Investigate practices outside of your Trust e.g. integrated or non-integrated departments
- Be aware of the changing nature of the NHS workforce
- Support research capability development
- Consider Support Workers capabilities in protocol design
- Look for people who already have the skills

## Quality research does not need to be exclusionary



## Preparing for an annual appraisal

4 pillars = 4 objectives

Choose 1 for the research pillar

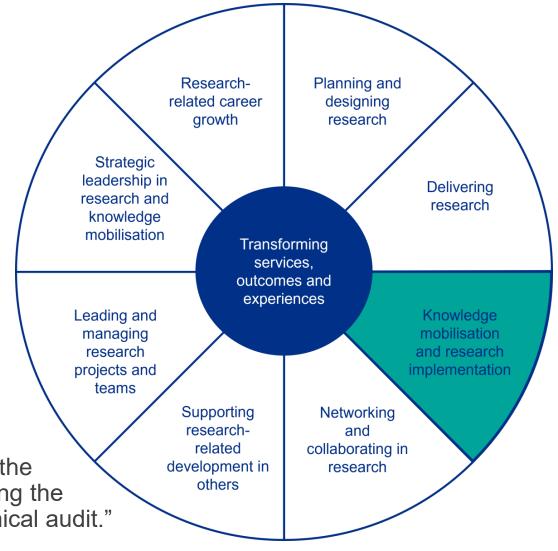
Then, choose one domain

Then, one research capability

So, for example,

"I will demonstrate knowledge and understanding of the importance of practitioners' contributions to developing the knowledge base through active engagement in a clinical audit."

(Domain 4, Knowledge mobilization and research implementation, RC 1)



## Any questions?

## Thank you

Ralph Hammond Sharn Hooper Leanne Raybould Elaine Smith Laura Ball Jessica Coggins