

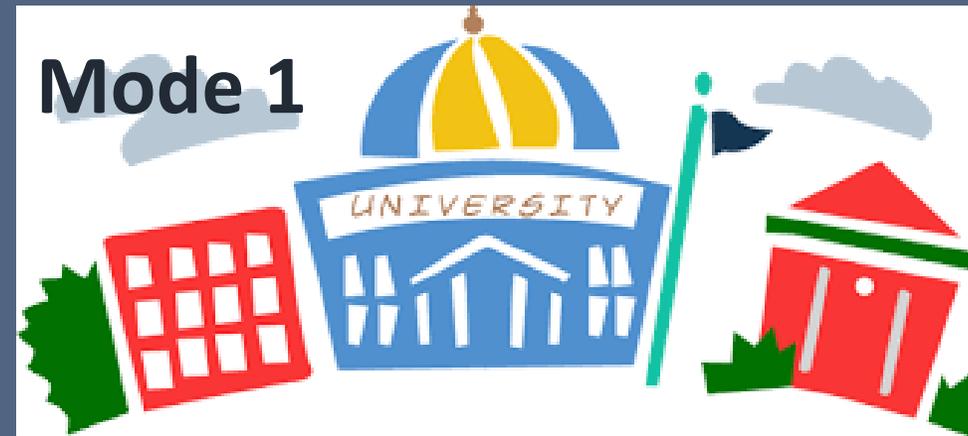


Nikki Daniels
PhD Researcher

**The Concept and Culture of
'Researcher Practitioner Engagement'
in the Context of Healthcare Research in the UK**

Supervisors: Dr Patricia Gillen, Dr. Karen Casson

How do we produce the knowledge that underpins clinical practice?



Practitioner engagement by academic researchers: a scoping review of nursing, midwifery and therapy professions literature

Daniels, N., Gillen, P., Casson, K.

ABSTRACT

Background: Engagement of frontline practitioners by academic researchers in the research process is believed to afford benefits towards closing the research-practice gap. However, little is known about if and how academic researchers engage nurses, midwives or therapists in research activities or if evidence supports these claims of positive impact. **Method:** A scoping review was undertaken using the Arksey and O'Malley (2005) framework to identify the extent to which this phenomenon has been considered in the literature. **Results:** An iterative search carried out in CINAHL, PubMed, Medline and Embase retrieved 32 relevant papers published 2000 to 2017, with the majority from the last two years. Retained papers described or evaluated active engagement of a practitioner from nursing, midwifery and therapy disciplines in at least one stage of a research project other than as a study participant. Engagement most often took place in one research activity with few examples of engagement throughout the research process. Limited use of theory and variations in terms used to describe practitioner engagement by researchers was observed. Subjective perspectives of practitioners' experiences and a focus on challenges and benefits were the most prominently reported outcomes. Few attempts were found to establish effects which could support claims that practitioner engagement can enhance the use of findings or impact health outcomes. **Conclusion:** It is recommended that a culture of practitioner engagement is cultivated by developing guiding theory, establishing consistent terminology and building an evidence base through empirical evaluations which provide objective data to support claims that this activity can positively influence the research-practice gap.

Key words: research, practitioner, engagement, research-practice gap, scoping review

BACKGROUND

Knowledge derived from research is a cornerstone of healthcare and evidence-based practice. Globally, there is a clear commitment and expectation that healthcare practices will be informed by the best available research evidence with the belief that this will result in optimal patient and health outcomes (Leach & Tucker, 2018). Integration of research findings into practice is therefore embedded in the professional standards of nurses, midwives and therapists who deliver direct care worldwide. However, a plethora of literature documents the consistent and longstanding challenges that practitioners across these professions face in utilising research within their practice. In 1991, challenges were categorised as relating to the adopter, the organisation, the quality of the research, its presentation and accessibility (Funk, Champagne, Wiese, & Tornquist, 1991). Nearly 30 years on, these challenges remain as recent literature continues to report barriers consistent with these themes (Mäkeläinen, 2017; Soutzak-Evans, Upton & Upton, 2014; Rights, Plummer, Harvey, & Pain, 2013). Universally, the term 'research-practice gap' signifies this national rift between the knowledge generated from research and that which is used in practice. As this void is predicted to lead to substandard patient outcomes and inefficient use of healthcare resources (Leach & Tucker, 2018; Graham et al., 2006), health professions have a social, fiscal and ethical responsibility to address the gap between research and practice (Leach & Tucker, 2018).

Scoping Review of the Literature

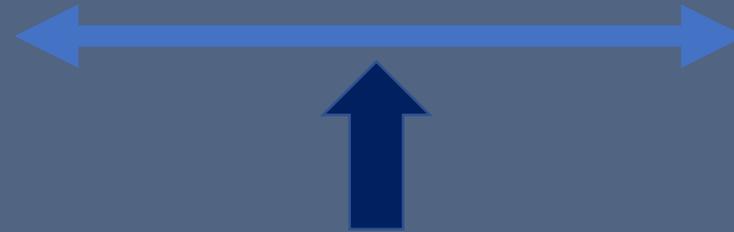
Aim

to map literature in the nursing, midwifery and therapy fields which reports on engagement of frontline practitioners in the research process by University based academic researchers

Reference: Daniels, N., Gillen, P. Casson, K. (2019) Practitioner engagement by academic researchers: a scoping review of nursing, midwifery and therapy professions literature, *Research and Theory in Nursing* In Press

Types of Engagement Observed

Practitioners as
co-producers



Practitioners as
Hired Hands

Unknown Type of Engagement

- Working together during all or almost all of the research process
- Equality; knowledge and experience being valued on a par
- Mutual benefit
- Power sharing
- Users regarded as active agents

- Hired by researcher to carry out tasks
- Working to someone else's plan
- Behaviours can negatively influence research process and study outcomes

Heaton, J., Day, J. and Britten, N. (2016) Collaborative research and the co-production of knowledge for practice: an illustrative case study. *Implementation Science*, 11(1), p.20.

Roth, J.A., (1966). Hired hand research. *The American Sociologist*, pp.190-196.

Phase 1: Qualitative

Aim: To develop the concept of Researcher Practitioner Engagement

**Hybrid
Model of
Concept
Development**

(Schwartz-
Barcott & Kim,
2000)

Theoretical stage



Fieldwork stage



Analytical stage



Outcomes

1. establish what constitutes the concept by identifying the attributes, antecedents and consequences in order to propose a definition and a preliminary conceptual model
2. establish if there is a necessity for this concept
3. identify challenges to the concept in practice

Theoretical Stage

Attributes	Antecedents	Consequences
<p>Varies in level and type dependent on study need</p> <p>Values the contribution of researchers and practitioners' perspectives, skills and knowledge</p> <p>Reciprocal relationship</p> <p>Shared decision making in relation to study activities</p> <p>Two way, ongoing and responsive communication</p>	<p>Identify appropriate practitioner with positive attitude towards study, skills and knowledge relevant to the research topic and shared goals with the researcher</p> <p>Development of a collaborative relationship</p> <p>Organisational support (institutional, managerial, peer)</p> <p>Diagnose and address potential barriers to engagement</p> <p>Dedicated practitioner time</p>	<p>Influences the research process</p> <p>Integrates research and practice</p> <ul style="list-style-type: none">• positive changes to practice• practitioner contribution to production of knowledge• implementation of research evidence in practice <p>Practitioner professional development</p> <ul style="list-style-type: none">• gained knowledge• developed research skills• improved criticality and reflection in practice

Fieldwork Stage

Researchers (n=13)

Professor	9
Research Fellow	2
Lecturer	1
PhD researcher	1

Practitioners (n=8)

Occ Therapist	4
Physiotherapist	2
Speech Therapist	2



Researcher's Clinical Background

Nursing	6
Occ therapy	3
Physio	2
SALT	2
Midwifery	1
Other	3

	R	P
England	11	6
Scotland	1	1
Wales	0	1
N.Ireland	1	0

Fieldwork Stage

Researchers (n=13)

Professor	9
Research Fellow	2
Lecturer	1
PhD researcher	1



Practitioners (n=8)

Occ Therapist	4
Physiotherapist	2
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England	11	6
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Researcher's Clinical Background

Nursing	6
Occ therapy	3
Physio	2
SALT	2
Midwifery	1
Other	3

Researchers (n=4)

Professor	Nursing	England
Research Fellow	Occ Therapy	Scotland
Research Fellow	Nursing	Scotland
Lecturer	Midwifery	N. Ireland



Attributes

Characteristics that make it possible to identify that a situation or instance can be categorized as the concept under consideration

Varies in level and type dependent on study need

Values the contribution of researchers and practitioners' perspectives, skills and knowledge

Reciprocal relationship

Shared decision making

Two way, ongoing and responsive communication

	Researchers (n=13)	Practitioners (n=8)
Agree	12	7
Silence	1	1
Agree	12	8
Silence	1	-
Agree	6	5
Partially agree	6	3
Silence	1	-
Agree	2	1
Partially agree	7	7
Disagree	1	-
Silence	3	-
Agree	5	5
Partially agree	3	3
Silence	5	-

Attributes	Antecedents	Consequences
<p>1. Varies in level and type dependent on study need</p> <p>2. Values the contribution of researchers and practitioners' perspectives, skills and knowledge</p> <p>From the formative stages</p> <p>3. Reciprocal relationship</p> <p>4. Shared decision making in relation to study activities</p> <p>5. Two way, ongoing and responsive communication</p>	<p>1. Identify appropriate practitioner with positive attitude towards study, skills and knowledge relevant to the research topic and shared goals with the researcher</p> <p>2. Development of a collaborative relationship</p> <p>3. Organisational support (institutional, managerial, peer)</p> <p>4. Diagnose and address potential barriers to engagement</p> <p>5. Dedicated practitioner time</p>	<p>1. Influences the research process</p> <p>2. Integrates research and practice</p> <ul style="list-style-type: none"> • positive changes to practice • practitioner contribution to production of knowledge • implementation of research evidence in practice <p>3. Practitioner professional development</p> <ul style="list-style-type: none"> • gained knowledge • developed research skills • improved criticality and reflection in practice <p>Clinically significant study and outcomes</p>



“the method that I had chosen wouldn’t have given us relevant results, but because I had taken on board what the practitioners had told me was their normal practice the findings were actually much more relevant, the data collection was much more robust”

“input from the clinicians definitely shaped the methodology....It definitely shaped the interpretation of findings.....You couldn’t have done it really without the clinician’s help, because as researchers, we just didn’t have that on the pulse, at the coal face, insight”

“what you end up with, is something that is significant from a research point-of view. So maybe statistically significant, but also has real significance for clinical practice as well “

Attributes	Antecedents	Consequences
<p>1. Varies in level and type dependent on study need</p> <p>2. Values the contribution of researchers and practitioners' perspectives, skills and knowledge Influences the research process</p> <p>3. Reciprocal relationship Mutual benefit</p> <p>4. Shared decision making in relation to study activities</p> <p>5. Two way, ongoing and responsive communication Open dialogue</p>	<p>1. Identify appropriate practitioner with positive attitude towards study, skills and knowledge relevant to the research topic and shared goals with the researcher Common vested interest in the study and its outcomes</p> <p>2. Development initiation of a collaborative relationship</p> <p>3. Organisational support culture (institutional, managerial, peer)</p> <p>4. Diagnose and address potential barriers to engagement</p> <p>5. Dedicated practitioner time Researcher's understanding of the</p>	<p>1. Influences the research process</p> <p>2. Integrates research and practice</p> <ul style="list-style-type: none"> • positive changes to practice • practitioner contribution to production of clinically significant knowledge • implementation of research evidence in practice <p>Builds research capacity</p> <p>3. Practitioner professional development</p> <ul style="list-style-type: none"> • gained knowledge • developed research skills awareness • improved criticality and reflection in practice • Researcher professional development • Long term relationships

Attributes	Antecedents	Consequences
Practitioners' perspectives, skills and knowledge influences the research process from the formative stages	Vested common interest in a study topic and its outcomes	Research capacity building
Mutually beneficial	Initiation and forming of a collaborative relationship	Practice development
Open dialogue which facilitates clinically informed problem solving and decision making in relation to relevant study activities	Organisational culture of integrated research	Improved clinical significance of a study and its outcomes
	Realising and addressing challenges within clinical context that could impact on researcher practitioner engagement	

Definition

Researcher practitioner engagement is a mutually beneficial process through which practitioners influence research which is meaningful to their practice thereby positively affecting the clinical significance of a study and its outcomes.

Practitioner's clinical knowledge and perspectives are reflected in the formative stages of a study. Open dialogue facilitates problem solving and decision making between researchers and practitioners in subsequent study activities as necessitated by the study design.



A necessary concept?

“how it ought to work and what we should be aiming for”

“there’s a need for it is because it is so easy to not have this collaboration”

“you can then pinpoint the bits that are missing and say “but actually, it’s not real until we’ve done this, this and this”

“helps you to articulate that sometimes it’s difficult to do it. Not just assume that actually, this just happens naturally”

“you need a way of talking about it”

“offers it legitimacy”

“build towards that supportive culture for research”

“help have it more recognised as an integral part of the research”



Implications for practice

Practitioners as co-producers

- Working together during all or almost all of the research process
- Equality; knowledge and experience being valued on a par
- Mutual benefit
- Power sharing
- Users regarded as active agents



Practitioners as Hired Hands

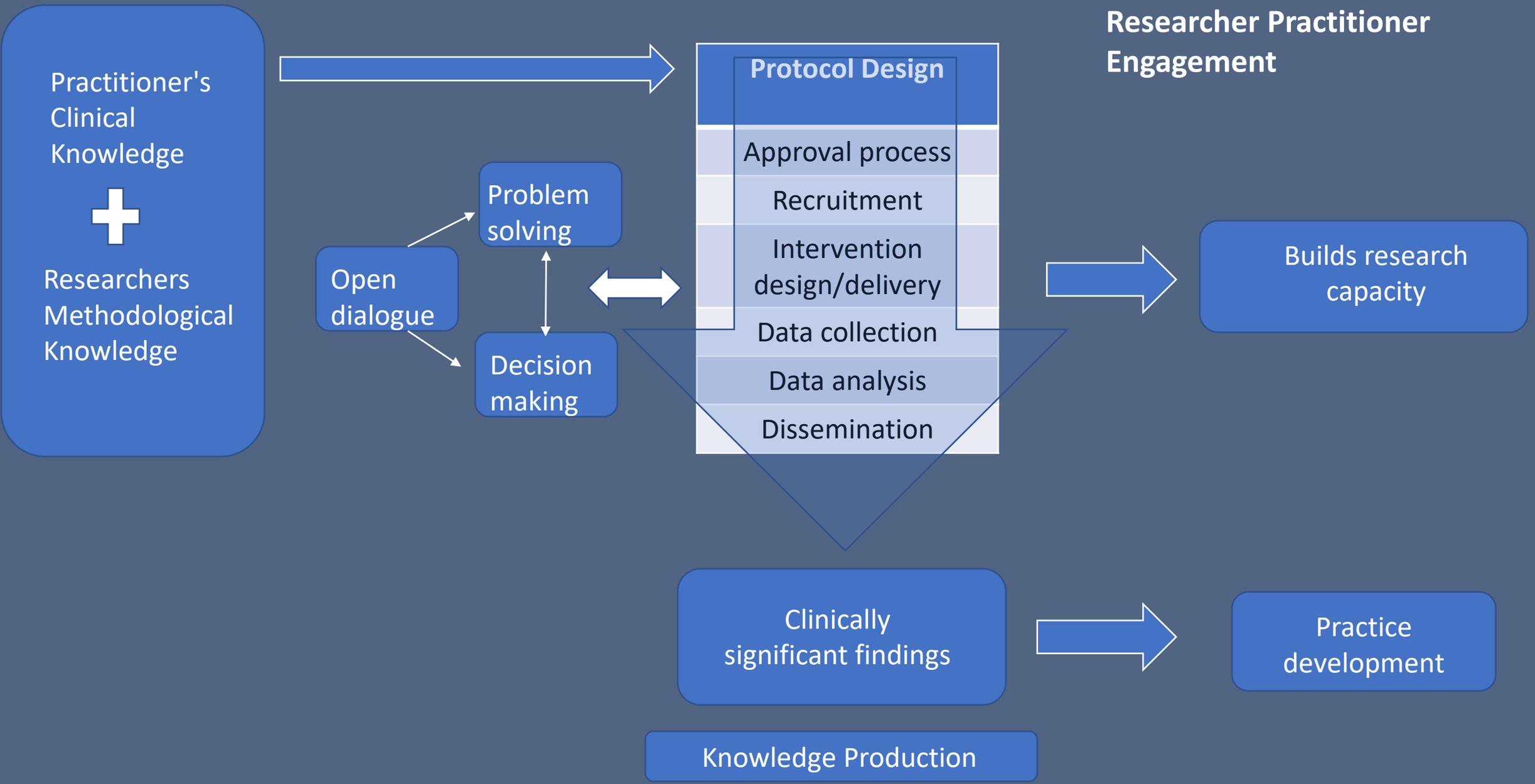
- Hired by researcher to carry out tasks
- Working to someone else's plan
- Behaviours can negatively influence research process and study outcomes

Researcher Practitioner Engagement



- Practitioners' perspectives, skills and knowledge influences the research process from the formative stages
- Mutually beneficial
- Open dialogue which facilitates clinically informed problem solving and decision making in relation to relevant study activities
- Results in a clinically significant study and outcome

Conceptual Model of Researcher Practitioner Engagement



What next?

Phase 1: Qualitative

Aim: To develop the concept of Researcher Practitioner Engagement

Phase 1: Findings



Phase 2: Quantitative

Aim: To investigate the culture of Researcher Practitioner Engagement in the UK

Online survey

Academic Researchers		Frontline Practitioners	
Content Validation	Pilot	Content Validation	Pilot

Survey distributed to academic researchers and frontline practitioners in the UK

Phase 2: Findings



**Are you a healthcare researcher based in a
UK University?**

**Have you engaged a frontline practitioner in a role
other than as participant in your study?**

**To share your experiences please complete our
online survey on Researcher Practitioner
Engagement**

Email: Daniels-n@ulster.ac.uk

Twitter: [@NikkiDresearch](https://twitter.com/NikkiDresearch)

This study has been approved by the Institute of Nursing
and Health Research filter committee, Ulster University.

If you have any queries, please contact:
Nikki Daniels daniels-n@ulster.ac.uk
PhD Researcher

ulster.ac.uk



**Calling nurses, midwives,
occupational therapists, physiotherapists and speech
and language therapists**

**Have you been engaged by an academic researcher in a
research project in a role other than as participant?**

**To share your experiences complete our online survey on
Researcher Practitioner Engagement**

Email: Daniels-n@ulster.ac.uk

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Questions?

Triangulation (Focus Group R5)

Requirements <i>(attributes)</i>	Necessary pre-conditions <i>(antecedents)</i>	Outcomes <i>(consequences)</i>
Shared purpose	Sufficient time to build a relationship	Longer term relationships
Recognition of skill gaps	Communication	Researchers observe study impact in practice
Research question relevant to practice	Researchers understanding of the clinical context	Improved method and data
Joint working a study protocol	Organisational culture that supports engagement	Findings relevant to practice
Soliciting agreement throughout the process		Building research capacity