

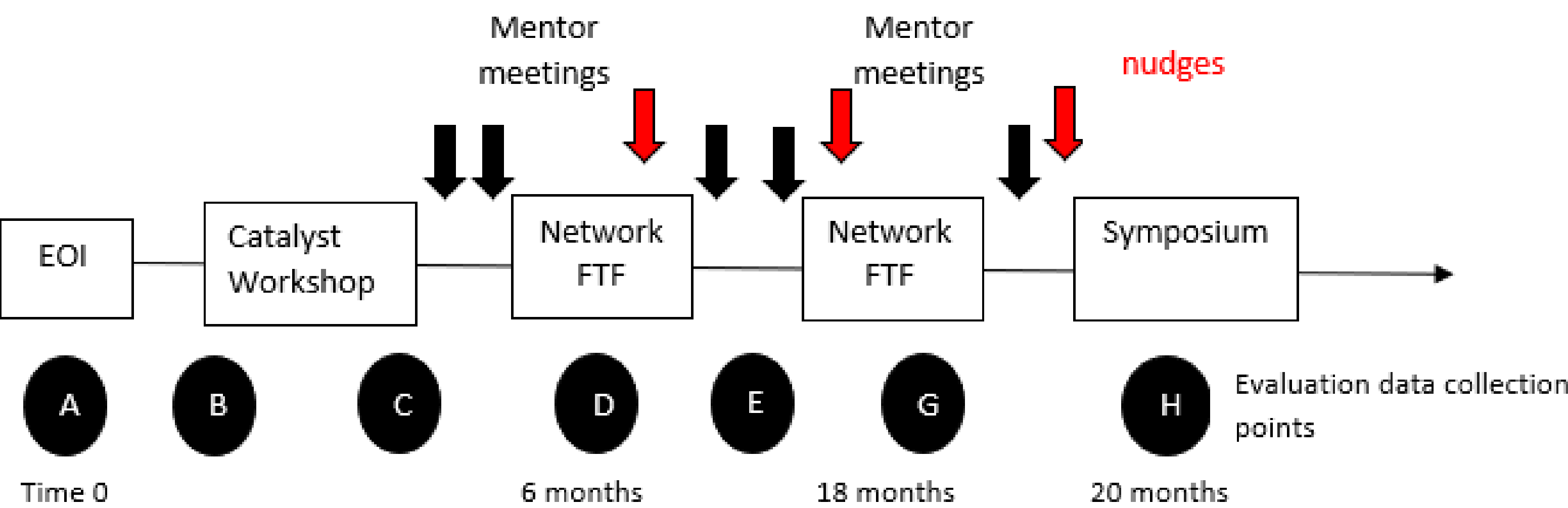
Building Research Capacity in Health Professionals for Improving the Quality of Care

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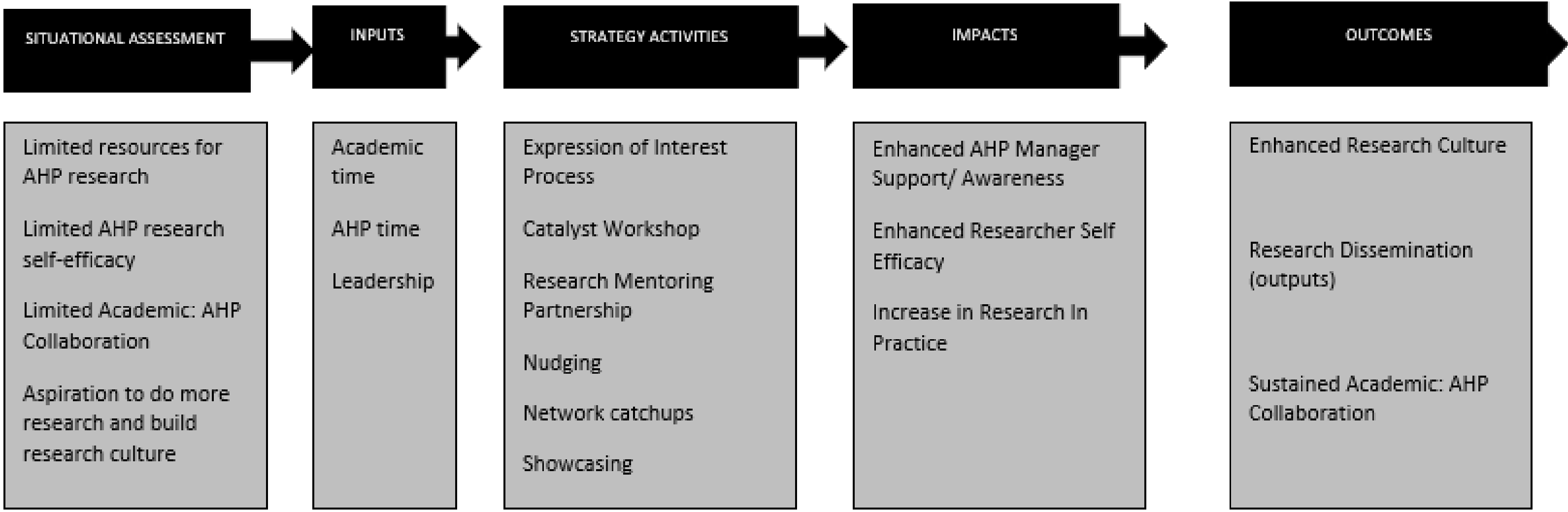
Introduction

Building research capacity is a critical strategic component for healthcare workforce development, helping to ensure the quality and currency of evidence-based health care. An important goal of research capacity development is the generation and application of new knowledge to improve health services. The Festival of Ideas is an Australian, Tasmanian intervention and is delivered in partnership between the Tasmanian Health Service and the University of Tasmania. The Program commenced in 2018 starting with a focus on Allied Health professionals but has grown into a multidisciplinary Program. It includes strategic components such as management support, protected time for research, research competency development via experiential learning, research partnership development and regular peer-support. Participants undertake a research project under the guidance of an academic mentor. Most projects involve health service improvement interventions and evaluations, but all are clinician-initiated ideas based on their practice observation and experience.



Methods

A mixed-methods realist evaluation was used to test Context, Mechanism, Outcome hypothesis informed by the literature on determinants of Allied Health research performance and an intervention logic model. Questionnaires and focus groups were used at intervention commencement, 6 month and 18 month follow-up timepoints. A focus group amongst Allied Health managers was conducted 18 months after the intervention commenced. Progress and research products (project plans, ethics submissions, data sets, publications) have been used to assist the evaluation. The data collection methods were designed to assess process, impact and outcome measures.



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Results

The first cohort of participants carried out 10 research projects with 6 projects successfully completed. Participants had a varied demographic profile (80% female, 70% less than 45 years, practice experience ranging from 2.5-25 years (mean 14 years) and distributed across 5 Allied Health professions (Occupational Therapy, Dietetics, Podiatry, Physiotherapy, Social Work). All have presented their findings at a variety of forums. The second cohort was cancelled due to COVID and the third cohort has 2 projects still active 18 months into the intervention period, with evidence of good project implementation progress. Management and peer support proved to be crucial in project progression. The outcomes of participants' projects demonstrate the benefits of practice-based research embedded as core health business. Many reported outcomes included increased organisational efficiency, staff satisfaction, improved patient satisfaction and hospital avoidance. Cohort four, commenced recently and has recorded the largest intake in the Program to date.

Stage	Strategy activity	Research determinant targeted	Evaluation method	Evaluation type/stage	Timeframe from T ⁰
Expressions of Interest (EOI)	Festival of Ideas participants were recruited via a written expressions of interest (EOI) process that required applicants to demonstrate manager support, a commitment to 2 hrs /wk protected time and to outline initial research questions. This process invited EOI, to identify AHPs who were at the contemplator/action stage of change [38], to ensure organisational support and commitment and to identify projects aligned to organisational priorities and feasibility.	Protected time for Research	Written EOI /survey.	Formative [A]	- 1 month
Catalyst Workshop	A face-to-face full-day workshop was conducted that focused on researcher awareness/expectations, fine-tuning research questions, building rapport and academic: AHP collaboration. The workshop served to catalyse considerations of research methods, study feasibility and build collaborations.	Collaboration Research competencies	Pre-post workshop surveys, including self-reports of research self-efficacy	Formative Process [B, C]	Time 0
Nudging	Requests for formal progress reports by the Health Service AHP Research lead (EH) served a nudge function that included encouragement, a mechanism for progress updates and promoted a sense of accountability amongst participants.	Management support	Email progress reports	Process Impact	Regular
Mentor meetings	Mentor meetings between academics and AHPs followed the catalyst workshop at times and frequencies determined by the AHP researchers. This unstructured approach was designed to ensure collaboration was natural and genuine (as needed and as useful), reflecting attributes of good research collaboration relationships	Collaboration	Observational notes and academic debriefing was used to monitor mentoring activities.	Process [E]	Various
Network Meetings	Meetings of the TARGIT cohort were conducted at 6 months and 18 months into the intervention period to regroup, energise, monitor progress and support the TARGIT cohort. Discussion focused on increasing access to tools, facilities, software that assist research processes (e.g. referencing software, statistical analysis software, reference data-bases, Librarian support etc).	Encouragement Culture	Observational notes	Process, Impact [D, G]	+ 6 month +18 months
Managers Focus Group	A formal conversation with AHP Managers was conducted via a semi-structured focus group discussion process investigating Managers awareness, attitudes regarding research, managers role, barriers to AHP research, changes in participating staff, improvements re UTAS Collaboration.	Management support	Focus group was conducted amongst 8 Allied Health Managers in the THS facilitated by the Project Lead (RH). Thematic analysis.	Process, Impact [G]	+18 month
Participant Debrief	Debriefing with participants after ~15 months was conducted to assess participants experience, progress, strategy utilisation and resilience. An academic unconnected to earlier mentoring and support (LC) conducted interviews to enable open discussion about their experience separate to the TARGIT intervention team academics.	Collaboration	Interviews with participants by a previously uninvolved academic staff member (LC). Verbatim transcripts, Thematic analysis.	Process, Impact [E]	+18 month
Research Symposium	A research symposium was developed and implemented to raise the profile of the TARGIT cohort's research projects/activities and build the esteem of AHPs who had participated in the TARGIT intervention. TARGIT participants debriefed following the symposium.	Research culture	Qualitative thematic analysis Observation: participant behaviours	Impact [H]	+20 months

Conclusion

Organisational investment in health service research in partnership with a university contributes to building capacity for evidence-based care providing better patient and organisational outcomes. The combination of sustained manager and peer support, partnerships with academics can build a research culture that drives quality of care.

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