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A Facilitated and Structured Program Empowering Health Professionals to Integrate Research Evidence Into Clinical Care

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Objective: The aim of this program is to build the capability of our organization's health professionals to produce, integrate and implement research evidence into clinical care.

Background: Health care organizations are continually faced with building pressure to deliver safe, low-variability, evidence-based care that meets the needs of patients and their families (Begley, et al., 2014). Although all health systems grapple with these imperatives, integrating research, education and clinical care presents particular challenges for large teaching hospitals (Grumbach, et al. 2014). The role these large institutions play as drivers of interprofessional research and conduits for translating research into practice has been greatly emphasised over many years (Brooks, 2009, Debourgh, 2012, Rycroft-Malone et al., 2011). In the current professional climate, research activities are highly valued and health professionals in all sectors are actively encouraged to produce, implement and participate in research. However, working environments for many clinicians are such that it can be difficult to allocate time to research activities in any sustained way. A number of organizational challenges combine to impede participation in research, including limited resources, lack of skills, knowledge, opportunities, and a culture of individualism. Our Clinical Fellowship Program was initiated as a model for increasing the knowledge, skills and capability of clinical staff to conduct and incorporate research into clinical care as well as provide a pathway for integration and partnerships between health, education and research staff.

Methods: The program is designed to facilitate health professionals' knowledge and skills in research and evidence-based practice by supporting participants to conduct a research or clinical audit/evaluation project within their work area. The stages of the program include: developing a plan for the project, applying for ethics and governance approval, data collection, data analysis, report preparation and dissemination of findings through a final presentation to the wider organizational community. The program has grown considerably from its initial format and the demand for entry into this program is high. Applicants are selected according to feasibility of their project, available support from their work area and alignment of their project to the organisations values and goals. The program provides mentor support and educational workshops throughout its 10-month duration.

Results: The success of this program has contributed greatly to the organization's capacity for research and best practice and many participants have developed new career and academic opportunities following completion of their projects. To date, over 50 conference papers have been presented at national and international conferences, multiple journal papers have been published and a number of completing Fellows have gone on to enroll in higher research degrees. Additionally, several projects have led to the conduct of further primary research. Participants have a high rate of completion of projects, with only minimal attrition occurring each year. In addition, fellowship projects are frequently highly aligned with clinical policies, either ensuring their implementation or in developing and refining new policies.

Conclusion: The Clinical Fellowship program is an innovative approach to research and evidence-based practice education. Strong, effective research leadership is essential to the success of this program through empowering clinical environments to support the use of evidence in practice as well as furthering research capacity and capability. Engaging staff from all levels creates a synergistic partnership which positively impacts the organization and patients. This program has demonstrated successful integration of research into practice, transcending the boundaries of knowledge and theory into clinical care.

Title:

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Keywords:

evidence translation, evidence-based practice and research capability

References:

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Abstract Summary:

This presentation will provide an overview of a facilitated and structured program that was designed and implemented to build the capability of our organization's health professionals to produce, integrate and implement research evidence into clinical care.

Content Outline: A facilitated and structured program empowering health professionals to integrate research evidence into clinical care

1. Introduction

2. Background to include the following points:

- Importance of developing a research culture;
- Challenges faced by health care organizations that impede the integration and implementation of research into practice;
- Reasons that precipitated the development of this specific program.

3. Present aim of the program - to build the capability of our organization's health professionals to produce, integrate and implement research evidence into clinical care.

4. Body

- Main Point #1 - Discuss origins of the programs and subsequent changes to the program to meet the needs of a consistently changing health environment.
- Main Point #2 - Briefly outline each stage of the program and provide an overview of the program.
- Main point #3 - Provide examples of where clinicians have gone on to further post-graduate study or research as a result of participation in this program. Provide some examples of projects that have been conducted and the impacts of these projects on clinical care.

5. Conclusion

- Strong, effective research leadership is essential to help mediate some of the negative aspects of organisational life, and promote creative environments to facilitate the development of research capacity within the clinical healthcare setting.
- This program has demonstrated successful integration of research into practice and has transcended the boundaries of knowledge and theory into clinical care.

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