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**AUKUH Clinical Academic Careers Group for
Nursing and Midwifery**

**The Nurse and Midwife Research Clinical Academic:
Development, Progress and Challenges**

Executive Summary

**Annual Report of Activity
May 2011 to June 2012**

Executive Summary

Introduction

Research activity improves the quality of patient care, experience and outcomes, and increases the effective use of available resource. It is acknowledged that Nurses, Midwives and Allied Health Professionals (NMAHPs) already provide a contribution to research, practice and education within the NHS and social care. They lead and contribute to the generation of new knowledge about care and treatment, and support the development of a dynamic, innovative world-class workforce that actively seeks out the best evidence to help improve outcomes and experiences for patients. The development of a world-class multi-professional clinical academic workforce promotes the accessibility and translation of high quality evidence to inform clinical decision making. Clinical academics are ideally placed to facilitate the adoption and spread of best practice, innovation and new technology. The medical clinical academic career pathway is well established and highly regarded by clinicians and academics. Substantial investment is on-going regarding NMAHP national and local Clinical Academic Training (CAT) schemes. Despite this valued investment, there is limited opportunity to share and agree systems, processes and outcomes in terms of maximising NMAHP clinical academic activity.

In response to local and national concern, a nursing and midwifery clinical academic workshop was chaired and hosted by Professor David Foster, Deputy Chief Nursing Officer for England in November 2010. The workshop confirmed there was a need to further understand the role of the clinical academic, identify gaps and maximise opportunities. A UK-wide task and finish group was developed under the umbrella of the AUKUH Directors of Nursing group initially to look specifically at clinical academic nursing and midwifery. Going forward the recommendations have been further extended include AHPs. The group, co-chaired by Professor Sarah Watson-Fisher and Dr Debbie Carrick-Sen, held its first meeting in May 2011 and developed four workstreams, which included a review of: a) The Finch report, b) nursing and midwifery clinical academic local training schemes, c) current clinical academic workforce, and d) development of a clinical academic pathway, principles and required population.

This executive report summarises details of activity undertaken by a UK expert reference group between May 2011 and June 2012. The group explored the background, initiatives, progress and future recommendations to further develop and sustain research activity, building on and maximising the NMAHP clinical academic research contribution to improved quality, safety and efficiency healthcare agenda within the UK.

Key messages

The key messages from the work undertaken by the AUKUH Clinical Academic Careers Group confirmed that the majority of the Finch report recommendations had been implemented, including the Department of Health/Chief Nursing Office National Clinical Academic Training (CAT) scheme. The scheme includes training opportunities from Masters to postdoctoral level. Although greatly valued by trainees, it is proposed that the National CAT scheme alone is insufficient to build genuine and meaningful capacity and capability within a reasonable timescale. An aspirational goal is that 1% (estimated to be 3,063) of the qualified nursing and midwifery workforce will be working within a clinical academic role by

2030. It was confirmed that a number of local CAT schemes exist, however local schemes have substantial variation between the number of places and partners involved, the level of training and the continuation of sustainable funding. Furthermore, findings confirm there is a lack of understanding regarding the role of the clinical academic, as well as organisation structures, and processes to facilitate and maximise the required growth. The expert reference group developed and proposed a viable and pragmatic clinical academic career pathway, suggested principles, and estimated the required population to create and sustain meaningful capacity and capability to maximise patient outcome and experience. The proposed pathway and definition of a clinical academic has been incorporated into the Department of Health (2012) *Developing the Role of the Clinical Academic Researcher in the Nursing, Midwifery and Allied Health Professions*.¹

Key recommendations

The importance to move from agreed conceptualisation and exploration to action-based activity is acknowledged. This is appropriate and timely, due to the implementation of current major NHS reforms, including the transformation and creation of Health Education England and NHS England. The group propose 20 recommendations (appendix 1), which can be broadly summarised under leadership, strategy and proposed activity:

1. The group to continue to provide National **Leadership** and have expanded its membership to include Allied Health Professionals (AHPs). The group has a UK-wide remit with a main focus on sharing experiences and learning across the four UK countries. The group will continue as an expert reference group under the auspice of the AUKUH Directors of Nursing group and it will continue to work in close collaboration with Health Education England, NHS England and the National Institute of Health Research. It is proposed that the recommendations be piped into Health Education England's advisory structures and NHS England's commissioning intent. The group will produce an annual report.
2. The group to develop a five year **strategic plan** to support the development and implementation of the NMAHPs clinical academic across England. This will include the development of sustainable clinical academic posts within the healthcare provider setting.
3. The group to focus **future activity** around three workstreams addressing structures, processes and outcomes. The workstreams will have the following objectives:
 - a) Structures: to increase understanding of the clinical academic role, to advise on the development of a sustainable clinical academic pathway, measure and articulate the current, short and medium term estimates of the clinical academic workforce, and to advise on current organisation arrangements to develop and sustain the clinical academic workforce within the healthcare provider setting to achieve the 1% goal by 2030.
 - b) Processes: to maximise opportunities and support for clinical academics on local and national training schemes. To increase the synergy between national and local schemes.
 - c) Outcomes: to measure and articulate the NMAHP contribution to the quality and efficiency agenda, with a particular focus on improved patient outcomes and experiences through research activity.

Acknowledgements

The group (appendix 2) would like to acknowledge and thank the AUKUH Directors of Nursing, lead nurses and clinical academics who completed the questionnaires, as well as Jocelyne Aldridge and Siobhan Fitzpatrick, AUKUH Senior Policy Officers, for their on-going support, valuable advice and active contribution.

Dr Debbie Carrick-Sen and Professor Sarah Watson-Fisher
on behalf of the AUKUH Clinical Academic Group for Nursing and Midwifery

December 2012

Reference

1. Department of Health (2012) Developing the Role of the Clinical Academic Researcher in the Nursing, Midwifery and Allied Health Professions. DH, London. Available from <http://www.dh.gov.uk/health/2012/03/developing-clinical-researcher> (Accessed 19 March 2013).

Appendix 1 Recommendations

Strategic

- 1) The [National AUKUH Clinical Academic Careers Development Group](#) should continue to meet and expand membership to include Allied Health Professionals. It will continue as an **expert reference group** under the auspice of the AUKUH Directors of Nursing and will continue to work in close collaboration with Health Education England, NHS England and NIHR. The group will include representatives from the devolved administrations.
- 2) The group to produce an [annual report](#).
- 3) The group to develop in collaboration with Department of Health and Health Education England, [a five year strategic plan](#) to develop, build, support and sustain clinical academic capacity and capability for Nurses, Midwives and AHPs across England. The strategy should underpin the Department of Health strategy (2012).¹⁰

Organisation Requirements (Structures)

- 4) [Funding](#) for the NIHR CAT scheme should continue. In addition there is a need to collate and articulate funding opportunities at local and national level.
- 5) A [systematic modelling exercise](#) based on an aspirational goal for critical mass of clinical academic posts by 2030 should be carried out, and used to inform the incremental level of investment and resource required over the next 5, 10, 15 and 20 years.
- 6) Local, and if appropriate national, [networks](#) of Trust and HEI research leads should be created, to reduce potential duplication and assist in growth of quality applications.
- 7) The two [workforce](#) questionnaires are appropriate and acceptable to collect important outcome data and should be considered to collect future [data](#). Minor amendments are recommended. Future scoping should consider the collection of [denominator](#) data to further inform future work.
- 8) The national strategy for CAT career and training pathways for NMAHPs should clearly outline the steps for development of [critical mass](#) and enhance the synergy of these posts within NHS and HEI department in order to ensure the greatest opportunity for influence over excellence in nursing and midwifery practice.
- 9) The national strategy for CAT career pathways for NMAHPs should have [clear timelines](#) for achievement of steps and ensure resource/ initiatives and developments support this.
- 10) There should be a [review of salary scales](#) and [terms and conditions](#) across the HEI and NHS interface, to identify barriers and opportunities for establishing a coherent infrastructure for clinical academic pathways and roles with the desired outcome to improve the patient experience, quality and effectiveness of care, diagnosis and treatment. Appropriate contractual arrangements should be developed to maximise the success of the clinical academic role.
- 11) It is recommended that all University Hospitals nominate a [named person](#) within the organisation who has [strategic responsibility](#) for the development of clinical academic careers.
- 12) It is recommended that each University Hospital consider the appointment of one or more [Clinical Professor](#) to influence, capacity build and act as a role model for Clinical Academic Careers, maximising impact on patient experience, safety and care.

Process - Clinical Academics (People)

- 13) A [mentorship scheme](#) should be rolled out to all NIHR awardees, and training offered to leads of local schemes.
- 14) Local and national [support](#) should be scoped and evaluated in order to maximise quality applications and funding opportunity. This should include the development of templates to inform optimal joint appraisal and job planning. The role of, and NHS organisation [support](#) for, the aspiring or actual clinical academic within the NHS setting should be further understood and articulated.
- 15) The reasons for [success](#) noted by AHP applicants to the NIHR CAT scheme should be further [explored and understood](#), and the lessons applied to nursing and midwifery.
- 16) The AUKUH Clinical Academic Careers Group should work with the DH/NHS England to explore the relative [contribution of local](#) and national CAT [schemes](#), and to identify how schemes can best achieve synergy and contribute to building capacity and capability.
- 17) The expected and potential [clinical activity](#) of the clinical academic role should be agreed and articulated. The [nature of best practice](#) for the clinical training aspects of the awards at different stages of the career pathway should be debated.
- 18) Development of research and clinical [leadership](#) are key skills required for success. These will empower the clinical academic to challenge and lead change with confidence. Future CAT training schemes should consider incorporating leadership skills training as a core element.

Outcome/Impact/Influence

- 19) There is a need to ensure that other [stakeholders interested](#) in developing similar schemes have access to the [learning](#) accumulated thus far, and that the findings are made available to NHS England and HEE to cascade to LETBs.
- 20) Future work should be undertaken to explore and articulate the [outcome and impact](#) of clinical academic activity, with particular reference to the contribution to and improvements in the quality of patient experience, care, diagnosis and treatment. This should include the development and use of [case studies and pen portraits](#).

Appendix 2

Group Membership (as of April 2012)

Representatives of key stakeholder organisations

Professor Sarah Watson-Fisher	AUKUH
Professor Dame Jill Macleod-Clark	Council of Deans of Health
Professor Rona McCandlish	Department of Health
Dr Ann McMahon	Royal College of Nursing
Dr Fiona O'Neill	NIHR Clinical Research Network
Professor Louise Silverton	Royal College of Midwives

Independent members with relevant expertise and post title

Dr Sheila Adam	Nursing Acute, Lead for Nursing Education and Research)
Dr Debbie Carrick-Sen (Co-Chair)	Nursing/ Midwifery Clinical Academia, Head of Research for Nursing & Midwifery/Senior Lecturer
Dr Rosemary Chable	Nursing Acute, Associate Director of Nursing and AHP
Dr Gillian Chumbley	Nursing Clinical Academia, Consultant Nurse
Professor Alison Crombie	Nursing/ Midwifery Clinical Academia, joint post for education and research
Professor Christi Deaton	Nursing Clinical Academia, Chair of Nursing, joint University and Trust post
Professor Sue Latter	Nursing Clinical Academia, Professor of Nursing
<i>Professor Christine Norton</i>	<i>Nursing Clinical Academia, Professor of Clinical Nursing Innovation</i>
Professor Alison Richardson	Nursing Clinical Academia, Clinical Professor of Cancer Nursing and Trust Lead for Nursing Midwifery and AHP Research

Members reporting to and from a Devolved Administration, geographical area and organisation

Professor Joyce Kenkre Wales	University of Glamorgan
Professor Tanya McCance	Northern Ireland, DHSSPS
Dr Lesley Whyte	Scotland, NHS Education for Scotland

Non-members also attending meetings

Jocelyne Aldridge	Senior Policy Officer, AUKUH
Lizzie Jelfs	Director of Policy, Council of Deans of Health

Corresponding members

Professor Tony Butterworth	Representative Fellow of the Academy of Medical Sciences (formerly NHS Institute)
Dr David Foster	CATP (RO and Chair of the CATP Board)