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Challenges and opportunities in delivering multi-institution and multi-professional research placements.

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Dr Robyn Lotto is a senior lecturer and active member of BANCC. In this editorial, she writes about the positive impact and need for alternative placement models, in particular research placements. Bert Ashley, a physiotherapy student, reflects on his learning during one of these placements.

The ability for nurses and Allied Health Professionals (ALPs) to design, conduct, interpret, disseminate and implement the results of clinical research is fundamental to patient care (Westwood, Richardson et al. 2018). Currently, nursing and AHP culture places a large

emphasis on direct patient care (van Oostveen, Goedhart et al. 2017), often to the detriment of more academic pursuits. Yet, combining clinical and academic work through engagement with research leads to benefits in terms of quality, safety and efficacy of patient care (Aiken, Cimiotti et al. 2012, Midwifery 2013) AUKUH

Early engagement in research activities as a student will provide opportunities to consolidate and apply clinical aspects of learning such as pathology and pathophysiology, and new learning including leadership, multidisciplinary teamwork, finances, strategic planning and time management. This activity can serve to normalise and demystify research. and provide opportunities for alternative role modelling (Felstead and Springett 2016). In turn, this supports the generation of healthcare professionals who are flexible, and able to adapt to changing environments and non-routine situations. This is particularly pertinent for student nurses who often come into nursing with preconceived ideas (Chow and Suen 2001).

Over the past decade, the increasing demand for qualified nurses and AHP's has seen a significant rise in the need to identify placement experiences (Williamson, Kane et al. 2020). COVID-19 has extenuated the problem, with re-deployment of educators, social distancing requirements and service cancellations resulting in an international placement capacity crisis. Worldwide, this crisis has resulted in delayed graduation for around a third of students (Almeida P. 2020) ² Alternate Placement Models (APMs) using remote patient contact (for example telehealth) or non-patient contact (for example research placements) have been encouraged by both the Royal College of Nursing³ and the Chartered Society of Physiotherapy⁴ to meet demand. APMs offer an opportunity to advance the skills and development of the modern workforce, embracing the positive developments of the digital

transformation of care, (Castle-Clarke 2018)^{5,6} in addition to meeting the demand associated with the ongoing pandemic.⁷

However, there is little evidence available exploring the content or impact of AMPs, including research placements. Formal evaluation of these initiatives are limited but highlight :

- Nursing and AHP research is crucial to guide practice
- Research requires planning and organization
- Patients benefit by research participation (Hall, Skelly et al. 2019)

In order to meet urgent need, in June 2021, a research placement consortium was operationalised across Higher Educational Institutions (HEIs) and disciplines in the Midland and North region. The importance of multidisciplinary working is well evidenced, and creates additional opportunities for the student, as well as improving patient care. (Allen and More 2004, Murphy, Curtis et al. 2016) In addition, peer learning provides important elements of professional and personally learning (Abdullah and Chan 2018, Stenberg, Bengtsson et al. 2020). Finally, cross institution working provides a stimulus for both local improvement and research efforts to grow across a region. Participating centres share similar problems, and this model allowed us to capitalise on sharing work and implementation plans.

Recommendations published by the NHS Confederation in 2019 (NHS employers),⁸ suggest that traditional expectations on who can supervise students may be relaxed. For this placement, Albert was supervised by nurses and physiotherapists. A research setting was used for the placement, and a 'coaching' or 'hybrid' model was drawn on by adding time to do self-directed research alongside guided practice.

Alongside engagement in a number of existing research and clinical activities, including attending a research ethics committee, a conference, and working alongside PhD students, Albert undertook two independent research activities: a review of the literature to support co-creation of APMs; and a small qualitative research study investigating perspectives of APMs.

While we found much support for the provision of APMs, little literature on mechanisms used to improve the quality of these experiences for students was identified.

The small scale research project involved interview of five stakeholders from across the staff and student populations. Attitudes to APMs and potential models of delivery were explored. The importance of “co-creation” of placements was widely highlighted, with participants suggesting co-creation should involve *“collaboration between staff and students to establish a service satisfactory for both designers”* so that *“current students would have a greater understanding regarding what is needed of the placement and the expectations”* and future students *“would potentially have a better experience - because the views from the previous group can help shape the placement.”* The importance of ensuring equality of opportunity was also clearly communicated – a desire to ensure all students were able to develop similar skill sets. Finally, respondents wanted to ensure that student experience is captured and measured, and to ensure that APMs develop transferrable skills that relate to the future of healthcare provision.

The learning opportunities created by research placements are key to inspiring clinical academics of the future, and as Hall and colleagues¹¹ identified, students on APM’s may begin to recognize the value that a different skill set could bring to their career.

Reflecting on his experience, Albert wrote a series of reflective accounts. Areas identified included:

- opportunities that were varied and challenging. For example, participation in a virtual nurse led conference enabling him to learn more about networking and current research challenges. It was the first time he had attended a conference and the first time he was able to network with other professionals not previously known to him.
- working with a variety of staff who could offer unique experiences and insight.
- time management and working independently, where the placement timetable required piecing together opportunities from multiple sites
- Presenting to peers was a valuable alternate skill to develop and it was well suited to this placement type.
- Research skills included: refining a research question; developing and operationalising PPI; designing and conducting a literature review and a survey, and gaining some understanding of the grant application process.

Similarly, reflection by the educators highlighted a number of learning points. These included:

- a screening process to ensure that students who were selected for this placement type could work well independently and manage their own workload to maximise learning opportunities, and not be overwhelmed by volume of content available
- Working within a network or consortium. This would expand the diversity of the experiences on offer and overcome timing issues where delays in research approvals or recruitment would not impact on student experiences.

This approach to placements provides a flexible approach to ensuring the future of the workforce at a time when it is needed most and develops a new generation of health care practitioners who have research at the core of their work. This is an exciting new development and has the potential to be translated across professions and facilitate multi-disciplinary working for the future.

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