

Council for AHP Research

Response to the Implementation Plan for the new HSC R&D Strategy, 'Research for Better Health & Social Care'

Introduction

The Council for Allied Health Professions Research (CAHPR) is the representative voice of the 12 AHP professions on research matters. Our member organisations include:

- British and Irish Orthoptic Society
- British Association of Art Therapists
- British Association of Drama Therapists
- British Association for Music Therapy
- British Association of Prosthetists and Orthotists
- British Dietetic Association
- College of Paramedics
- College of Podiatry
- College of Occupational Therapists
- Chartered Society of Physiotherapy
- Royal College of Speech & Language Therapists
- Society and College of Radiographers

More information about CAHPR can be found here: www.csp.org.uk/cahpr

CAHPR welcomes the opportunity to input into this discussion and the following response has been made by leaders of the [CAHPR Northern Ireland Hub](#)

Topic One: What do you think our implementation priorities should be?

Review of the R&D infrastructure is required in the first instance. This infrastructure should have established links with professional research networks (such as CAHPR). These networks can prove effective in communicating information on funding opportunities, research training needs and research priorities for Allied Health Professions as well as the specific clinical roles of each profession that relate to the overarching research priorities set out by the HSC R&D implementation plan.

It would be very valuable to specifically support those who have had fellowship training at PhD level to build capacity within the Trusts by developing a clinical academic pathway, similar to that available in England.

When communicating and engaging with researchers/potential researchers we recommend providing clarity on the status of the existing NIHR funding stream in Northern Ireland.

Topic Two: What will help us to get furthest, fastest?

• Part A - What works well and what could be done better?

We would recommend more focus on a bottom-up approach through identifying those who deliver research in clinical practice. These individuals can be used to promote research to their peers and evolve a culture of research within their immediate team. Looking at strategies that could be employed to support these individuals in driving forward a culture of research, and keeping R&D on the agenda at staff meetings etc.

Many researchers in clinical practice may not have an awareness of who their peers are across the region who also engage in research as clinicians. Networks such as CAHPR can help establish a forum for AHPs that helps researchers (or potential researchers) to identify their AHP peers, creating an environment of support, sharing of ideas and multi-professional working.

To facilitate engagement of clinicians in research – provide some sort of CPD incentive for engaging in/planning/performing research.

• **Part B - Opportunities for and threats to success?**

The recent re-establishment of the Northern Ireland CAHPR Hub is timely in helping to drive forward the implementation of the HSC R&D Strategy.

Threats to success – changing views of those who do not see the value of R&D i.e. time required to invest in research takes away from day to day demands of clinical practice. This is particularly difficult if this is a view held at managerial level.

Topic Three: **What do you see as your role in helping us deliver these priorities?**

The Northern Ireland CAHPR Hub is there to support AHPs involved or interested in partaking in research.

One of the first aims of the Northern Ireland CAHPR Hub is to conduct a needs assessment survey amongst Northern Irish AHPs to gather information about what research support members would find of benefit.

The following statement is made on behalf of CAHPR as a whole:

As an organisation which represents all 12 Allied Health Professions CAHPR would be keen to support enhancing the research infrastructure. As a cross profession UK wide network CAHPR is well placed to assist with partnership building, sharing learning as well as increasing research capacity and capability.

CAHPR would also support dissemination of research opportunities to AHPs which meet member organisations research priorities and are relevant to the local population. For instance the British and Irish Orthoptic Society would support multi-professional projects where low vision is considered as this can be a limiting and confounding factor for many patients needing care, but is rarely considered as a whole.