Developing Clinician Research Skills to Improve Everyday Healthcare Through Knowledge Mobilisation: Critically Appraised Topic Groups

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The Global Health Network

URL: https://tghncollections.pubpub.org/pub/iue1pean
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One of the biggest challenges in healthcare is translating high quality research evidence into everyday clinical practice. Developing the capability and capacity of clinicians to regularly engage with available evidence remains challenging. Passive dissemination is largely ineffective, and numerous conditions are necessary for successful implementation of best evidence.

Critically Appraised Topic groups (CATs) form small, focused communities of practice and were first developed by Keele University. They are collaborations between clinical teams, academics, and librarians to identify a question based on clinical need, create a search strategy to find available evidence, and critically appraise evidence to determine “a clinical bottom line” that can be used to inform practice.

CATs work at speed and collectively engage clinicians in all parts of the research process. They adopt the structure of a systematised review, but remain focused on ‘so what’ for practice?

The approach generates a learning environment where interested clinicians form a community (group) and skills needed are addressed collectively, through learning and doing. The process generates evidence for clinical practice, informs clinical guidelines and clinical decision-making. Moreover, where sought CATs can help to develop ideas for future research.

Through initial training we sought to cascade CATs which encouraged clinical teams in cardiothoracic intensive care, acute medicine, nutrition support and workforce development across a large NHS trust to commence work.

The approach enthused participants, particularly those less familiar with search, retrieval, and critical appraisal techniques. Success of CATs is dependent on skilled facilitation by a facilitator with research expertise, good teamwork, team motivation, clinical leadership and experienced library knowledge facilitation. Further facilitation may be needed to balance group participation and learning. CATs members needed to commit to personal skill development and deliverables. Long term, a strategy to cultivate new facilitators may ensure spread and scale-up for new groups. The CAT group methodology appears to offer sustainable research capability amongst clinicians and acceleration of knowledge mobilization.

We will present a critical examination of the CAT approach to enable and embed research in everyday healthcare settings to answer clinical questions in a very large NHS Trust.