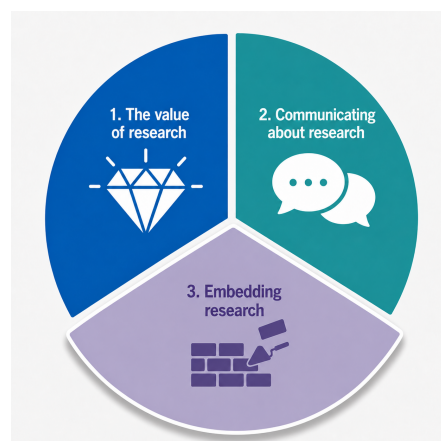


Features of a research-embedded service



Embedding research

This document provides information for health leaders regarding the key components of a health service that has embedded and operationalised research within routine activities.

The benefits of embedding research

Embedding and operationalising research into everyday clinical practice has many benefits, including building research capacity and capability, creating a self-sustaining research culture, developing a skilled and passionate workforce, and supporting high-quality, innovative healthcare.

Services with strong research maturity identify and address service issues early, and question gaps in clinical or health service knowledge through research. Research activities closely align with clinical practice and service needs.

Staff are motivated and empowered to confidently evaluate services and use research to improve patient care. Clinical services are regularly reviewed and improved to increase efficiency and effectiveness, with streamlined processes, proactive use of resources, and flexibility to meet growing service demands.

Key components of a research-embedded health service

Regular Research Communication	Research is a visible and permanent item of discussion. <i>Examples:</i> Clinicians receive regular updates on local studies via standard newsletters and emails. Journal clubs and research meetings are part of the clinical calendar. Team attendance at conferences is standard professional development rather than an exception.
Operational Alignment	Research is viewed as a core clinical activity that supports and solves operational problems. <i>Examples:</i> Research projects are mapped to service priorities. Staff use data to clearly articulate change/improvements in service delivery.
Continual Quality and Service Improvement	Research and Quality Improvement are viewed as core business for all staff. <i>Example:</i> All team members' PDPs include participation in a research or Quality Improvement activity; the activity aligns with their level of experience, ranging from using existing evidence in clinical practice through to leading research (e.g., assisting with data collection for a project, leading an ethics application).
High Quality Data	The service generates high-quality routine clinical data, improving visibility and understanding of the value and impact of service development initiatives. <i>Example:</i> Patient reported outcomes are routinely collected in an outpatient clinic using a standardised measure; data is used meaningfully in a research project.
Active Impact Monitoring	The service measures the real-world impact of research-informed changes so that clinical teams and leaders see how research contributes to improved services and patient outcomes. <i>Example:</i> A team records and celebrates how a research project reduced length of stay for a targeted patient cohort. This encourages ongoing innovation.
Sustainable Resourcing and Protected Time	Research is formally supported through service budgets and staff roles. Targeted funding is used to backfill clinical positions and provide staff with protected research time. This flexible approach allows multiple staff members to build research skills and recognise research as part of routine clinical practice. <i>Example:</i> A team allocates 0.1FTE of a clinical role as protected offline research time to progress a project for a defined period. Team members can apply for this protected research time by expression of interest.

Embedded Expertise and Mentorship	Dedicated research positions provide local support within the team. <i>Examples:</i> Clinical teams have a dedicated research coordinator position to support research capacity building within the team. Recurrent structures ensure research capacity is shared across teams rather than relying on individual champions. Research mentorship is a standard part of the department's culture; aspiring or current clinician-researchers can access formal mentorship within their own department.
Staff Empowerment and Career Pathways	Engaging in research is an expected and supported part of a clinician's professional identity. <i>Examples:</i> Staff are supported to engage in research as a tool to improve delivery of care. Clinician-Researcher career pathways are established, providing the service with a high-performing, innovative workforce.
Integrated Consumer Engagement	Patients and staff are active partners in the research process, not just subjects or participants. <i>Examples:</i> Clinical research projects have a consumer advisory group from inception to ensure the project explores a genuine clinical need. Consumer engagement and co-design are standard parts of all research and service development activities. Services are regularly evaluated through a patient-centred lens, ensuring research is informed by staff and patient experiences and perspectives.
Robust Support Networks and Partnerships	The health service works closely with academic and industry research partners. Clinicians have access to statistical, ethics, and governance support, helping reduce administrative barriers to research. Strong partnerships improve access to funding opportunities and create more opportunities for collaboration. <i>Example:</i> Clinical teams partner with local universities to support conjoint research fellow positions that help build research capability and drive research within the team.
Proactive Research Translation	Clinical staff are upskilled in implementation science, so that research findings are immediately and systematically integrated into routine practice. <i>Example:</i> Staff engage with the QH-TRIP site when planning research translation activities.