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# Commentary: Developing a clinical academic career pathway in a Community and Mental Health NHS Trust

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Through the development of a clinical academic (CA) career pathway for registered nurses and allied health professionals, a supportive environment for aspiring clinical academics is created. Traditionally, CAs have been almost exclusive to medical staff; however, having access to a CA pathway in health services also provides an opportunity for other health professionals to use their clinical knowledge and have this augmented by evidence-based research. Having the role of CAs in mental health provides the context for significant opportunities to attract and retain staff in these areas of health care.

This work used the dominant, accepted and understood model that medical staff generally have and are encouraged to have joint positions between academic institutions and their clinical work with this being an established model for this discipline.

Developing collaborative relationships between educational providers and clinical providers to investigate and research best practice models with the ultimate aim of achieving improved patient care is the basis for this collaboration. The added benefit is that it enables and supports health-care professionals with their academic career pathways. Developing and supporting the role of clinically active health researchers also demonstrates to the staff the importance of research for informing evidence-based practice. Breaking down barriers through supporting nurses and allied health professionals to gain the required confidence to consider not only CA roles but to also explore the benefits of research-based higher education is another requirement in order to progress these initiatives.

A key platform for making effective change is the importance of ensuring that health managers and senior clinicians are engaged early in the development in order for them to gain an understanding of the value of these roles. This pre-emptive approach opens dialogue pathways and assists to fill knowledge gaps that holders of these positions may have.

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Initially, a national approach was taken, however, the research suggests that there needs to be local responsiveness; this approach is not unique to research. The opportunities to engage locally is also another mechanism for reducing barriers.

In order to promote this model for other disciplines, that is, nurses and allied health professionals, apart from engaging with managers and senior clinicians early there is also operationalising a strategic approach that aims for small wins, ones that may be small but ones that could make a significant difference. Another factor is the importance of identifying authentic 'champions' that provide the required gravitas in order to overcome potential and actual barriers.

The importance of this study is that it provides the focus for changing the environment and providing aspirations for nurses and allied health professionals practising in mental health and to be recognised as providers of care that is evidence-based with that care being provided and supported by research-engaged health practitioners.

In order to make this happen, not only does there need to be collaboration between education and healthcare providers, there also needs to be funding to support staff to undertake and be part of research activities. Directors of Nursing are in a unique position to advocate and support these types of initiatives and consider ongoing budgets. Managers within the services also need to make a commitment to 'backfill' staff that take on the role of clinical academics.

The need to break down barriers that have been proven but still predominately held by medical staff provides the confidence that this approach is based on solid history in that it is an accepted pathway for medical staff and this can be effectively rolled out to nursing and allied health staff working in a mental health environment. Change in practice provides challenges and opportunities especially for service users in the health environment.

**Julia Hennessy** Education and Nursing Consultant, is a New Zealand-based registered nurse. Having initially practised in mental health and addictions, aged care and intellectual disabilities, she moved into nursing education and then into health management. Her PhD focused on mental health using an appreciative inquiry methodology. While actively involved in health research, she has also undertaken a number of clinical reviews including complex patient management and workforce issues.