Research skills in practice: facilitating the conceptual leap for student midwives

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In clinical practice how often do midwives stop and think about the evidence behind the care provided? Do midwives routinely discuss research findings with colleagues, or challenge the validity of new recommendations? How do midwives ensure their practice is always contemporary and evidence-based, not founded on what practice has come before?

Healthcare is continually shifting in response to new knowledge and ways of understanding. The expectation is that clinicians will work within a contemporary research-base, with students developing evidence-based practice through theory and placement learning. For this to succeed students need to be supported by midwives who role model evidence-based practice and research (EBPR), and with learning that facilitates the conceptual leap towards embedding EBPR in their emerging midwifery practice (Reid et al. 2017).

Supporting EBPR learning – whose responsibility?

Whether in clinical or academic settings, all midwives are educators with a responsibility to nurture student confidence in EBPR, and partnership working between practice and Approved Education Institutions (AEI) is key (Holland and Lauder, 2012). However, the teaching of EBPR presents a challenge for students and educators alike. It is widely acknowledged that nursing and midwifery students find EBPR a challenging subject (Newton et al, 2010; Sidebotham et al, 2014). The NMC (2019) standards of proficiency for midwives, state that new registrants should be prepared to critically appraise and interpret research evidence to inform decision-making and develop practice, including being able to evaluate and discuss practice implications where there is conflicting or absent research evidence. This relationship with research evidence must begin during pre-registration training *and* be maintained in the years beyond qualification.

With evidence comprising a core component in assessment and learning activities, student midwives have a level platform to explore research and critically challenge their peers, without hierarchical concerns which may be present in clinical environments. Curricula that ensure student midwives view evidence as integral to midwifery practice are key to laying this analytical

foundation, while acknowledging that the degree of evidence-based learning in placement is often mixed and dependent on the practice witnessed (Spencer and Yuill, 2018). When students learn the theory of evidence-based practice and this contrasts to their clinical experiences there is potential tension with their ability to maintain evidence driven focus during their placement learning (Allen and Anderson, 2019). When evidence-based practice is marginalised in the context of other competing workplace demands a different mode of professional function emerges which could be termed “practice-based-practice": midwifery that becomes entrenched without criticality or questioning of care provision (Bayes et al., 2019; Toolhill et al., 2017). Translating evidence into practice is a complex process and often the best available evidence takes time to become common practice, creating a challenge for midwifery students and educators (De Leo et al, 2019). This tension between EBPR and practice-based practice increases at registration when the newly qualified midwife moves away from a learning environment which focuses on the teaching of EBPR, potentially finding themselves with less opportunity to engage meaningfully with the evidence-base (Kerr and Rainey, 2021).

The enquiry into maternity care at Shrewsbury and Telford NHS Trust revealed a lack of scrutiny, criticality and application of evidence alongside minimal professional challenge among clinicians in a teaching hospital environment (Ockenden, 2022). It cannot be assumed that students and newly qualified midwives learn within services where evidence-based practice is modelled. Even when reviewing the implementation of measures designed to avoid a repetition of these maternity care failings, a critical eye must be maintained, with maternity professionals adopting a thoughtful and considered view of the evidence underpinning proposed practice changes (Renfrew et al., 2022).

It seems that simply embedding elements of EBPR in undergraduate midwifery curricula may not be enough to ensure that midwives implement evidence-based practice (Corr, 2018., De Leo et al., 2019). Educators need to facilitate EBPR learning in such a way that newly qualified midwives continue with evidence-based practice post-registration, gaining confidence to implement best available evidence (Leach et al. 2015) and themselves becoming role models for EBPR.

Practice-based-practice versus Evidence-based practice

Aspiring student midwives may be drawn to the profession due to the practical nature of the core midwifery skills inherent in the role. In the authors' experiences, students will profess to be less skilled at aspects of their training such as academic writing and research related activities. These EBPR skills are also challenging to master, but why more so than abdominal palpation or active fetal heart auscultation? The skill of critiquing and challenging evidence should be approached with a commitment akin to these 'hands on' midwifery skills.

Practical and physically based skills appear more meaningful to students than the desire to learn research, with students seeing less value in taught research skills (McIntosh et al, 2013; Corr, 2018). There is a dissonance between what is taught in the classroom and the skills performed in the clinical setting which can cause frustration and confusion in students (McIntosh et al, 2013). Is this because ultimately seeing and enacting skills is favoured over understanding the foundation of practice through academic engagement with literature?

Learning environments impact the processes of knowledge acquisition, with students experiencing lower confidence and competence levels where there is a recognised theory-practice gap; where the skills taught in the classroom are not effectively applied in clinical situations (Ball, Peacock & Winters-Chang; 2022). It is widely acknowledged that research skills increase students' ability to analyse, evaluate and become effective autonomous practitioners (Power & Ridge, 2017), but students can fail to see the application of EBPR in their everyday experiences of clinical practice. The 'hands on' or overt skills of midwifery are emulated in clinical environments through the observation and duplication of practice supervisor's actions, whereas applying evidence into practice is something much more subtle, more abstract and students can struggle to grasp the application of this despite acknowledging its importance (Corr, 2018).

Students not seeing EBPR skills in action, alongside a perception that these midwifery skills are less accessible than others, presents educators with a challenge which needs to be addressed by clinical and academic midwives alike. Finding ways to support students to confidently develop EBPR skills and ultimately maintain them in the workplace requires alternative ways of working and collegial approaches, which will be explored in a forthcoming paper.

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