

## CORRESPONDENCE

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### Letter in response to 'The role of research for advanced practitioners'

Re: Sim J. Omission of research in the Conceptual model of advanced practice. *J Med Radiat Sci* 2015; **62**(3): 234.

The letter from Associate Professor Jenny Sim about our paper titled 'Conceptualisation of the characteristics of advanced practitioners in the medical radiation professions'<sup>1</sup> is welcome and raises important issues. Our decision not to foreground research but to integrate it into the concept model was done with purpose. Research has relevance to a number of the core roles of advanced practitioners, such as 'Scholarship and Teaching' and 'Evidence Based Practice'<sup>1</sup>, and we could not justify representing it as a separate characteristic. Rather we argue that advanced practitioners must acquire research skills and apply research evidence in clinical practice.

Further, the model, and advanced practice generally, is primarily about clinical practice and so *all* advanced practitioners will be *clinicians* in the first instance, providing health care services to individuals or patient populations in their pinnacle 'Clinical Leadership' role<sup>2</sup>. Of course, this does not preclude them doing research and we reason that they must have a sound understanding of research principles and methods. It should not be expected, however, that advanced practitioners must, by definition, perform research themselves.

Further justification for the above can be found in the CanMEDS framework<sup>3</sup>, which helped inform the conceptualisation of the advanced practitioner model. Even after several revisions since it was originally proposed, CanMEDS does not include 'research' as a core competency of medical specialists. Rather, under the characteristic of 'Scholar' it is suggested that they are 'consumers of research' in a primarily clinical role, as opposed to 'participants in research'<sup>3</sup>.

We thank Associate Professor Sim for giving us opportunity to explain our decision in greater depth. We did not blithely exclude research from the model but considered it very carefully. Research is not omitted from

the advanced practitioner model, as suggested, but it is a strong element, appropriately placed relative to all the core characteristics of advanced practitioners. We do not reject research as an important pursuit for any profession but, again, the fundamental role of advanced practitioners is a clinical one, as illustrated by nurse practitioner roles<sup>4</sup>, for example. Further, we disagree that the conceptual model diminishes the importance of research to advanced practice. Nor does it undermine the future success of advanced practice roles, but adds to the evidence of their importance.

### References

1. Smith T, Harris J, Woznita N, Maresse S, Sale C. Conceptualisation of the characteristics of advanced practitioners in the medical radiation professions. *J Med Radiat Sci* 2015; **62**: 204–11.
2. Shaw S. Leadership in advanced practice: challenging professional boundaries. In McGee P (ed). *Advanced Practice in Nursing and the Allied Health Professionals*, 3rd edn. Wiley-Blackwell, Oxford, 2009; 158–76.
3. Royal College of Physicians and Surgeons of Canada (RCPSC). CanMEDS 2015: Key Changes by Role. 2015; RCPSC, Ottawa. Available from <http://www.royalcollege.ca/portal/page/portal/rc/canmeds/canmeds2015/updates> [accessed 2 July 2015].
4. Carryer J, Gardner G, Dunn S, Gardner A. The core role of the nurse practitioner: practice, professionalism and clinical leadership. *J Clin Nurs* 2007; **16**: 1818–25.

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