Culture

What is culture?
Much of the discussion was focused on how to define ‘culture’. A trust’s research culture can be examined by considering the following indicators:

- Targets – research or otherwise
- Perception of research in the trust – as separate to care or embedded in it
- Long or short-term thinking
- How day-to-day pressures are managed
- The way things are done, and how easy it is to do new things
- Financial infrastructure for research

What does a good research culture look like?
Delegates outlined some examples of what they considered as a good research culture.

1. **No separation of research and care**
   Research is seen as integral to care and not as intimidating or an ‘extra’. Involvement of all staff, for example receptionists, in research. No silos or fragmentation – between researchers and non-researchers, researchers and patients. Do staff have time to think about and do research; does it have the same status as clinical services?

2. **Involving patients as partners, not guinea pigs**
   Some specialisms appear to be much better at involving patients – in oncology and HIV for example, patients often proactively ask clinicians what studies they can be part of. A good research culture will encourage patients and clinicians to work together as partners in all aspects of research.

3. **Encouraging all staff to be involved in research**
   Forward-thinking trusts realise they can use research to reduce reliance on locums and improve care standards. They will encourage all staff to be involved in research, not focus on one or two ‘rock star’ researchers.