‘Developing the best research professionals’
Draft Report of the UKCRC Sub Committee for Nurses in Clinical Research (Workforce)

Consultation response form

Dates and further information:
The consultation period for this report is 12 weeks from Monday 8th January 2007 to Friday 30th March 2007

A report summarising responses to this consultation will be written and then made available to download from the UK Clinical Research Collaboration website (http://www.ukcrc.org)

If you have any queries please contact Philippa Yeeles at the UKCRC E: philippa.yeeles@ukcrc.org
T: 020 7670 5452

If this document is not accessible to you and you would prefer it in another format please contact Philippa Yeeles on 020 7670 5452.

Completing the form:

Please read through the document and enter your comments as prompted.

To fill in this form:

1. Please save the document onto your hard drive.
2. Use the tab key to move between questions.
3. Text boxes will automatically expand to take your response.
4. Tick boxes can be checked/unchecked using the space bar or mouse.

Please complete and return this form as a Word attachment to an email. Send it to consultation@ukcrc.org

THE DEADLINE FOR RESPONDING TO THIS CONSULTATION IS FRIDAY 30TH MARCH 2007
RESPONDER DETAILS:

Name of responder (person):

Name of organisation (if appropriate): Academy of Medical Sciences and Council of Heads of Medical Schools

Your health profession: Medicine

Nature of your response:

Organisational response (representing the views of the named group or organisation):

[ ] Yes [ ] No

Personal response (representing the views of one or more individuals):

Contact details in case of queries:

Telephone: 020 7969 5226
E-mail: suzanne.candy@acmedsci.ac.uk

☐ The Summary Consultation Report will be a public document made available on the UKCRC’s web site. If you would prefer your comments only to be reported anonymously then please tick this box.

☐ Please tick this box if you would like to be notified by email when the Summary Consultation Report becomes available on the UKCRC web site.

Structure of the Consultation Response Form:

Questions 1 & 2 invite you to comment on the report as a whole.

Questions 3 - 13 focus on the recommendations in the report. They are grouped into the following areas:
  A. Education and training [Q.3 – Q.8]
  B. Facilitating careers [Q.9 & Q.10]
  C. Better information on nursing researchers [Q.11 & Q.12]
  D. Implementation [Q.13]

You are asked to indicate to what extent you agree or disagree with each recommendation and invited to expand on your response.

Question 14 invites members of the Allied Health Professions to consider the recommendations and comment on their potential applicability to the academic research careers of the Allied Health Professions.

Question 15 invites you to comment on any other aspects of the report that are not included elsewhere in your response.
Q.1 To what extent do you think that the report accurately reflects present and future challenges in this area?

The box will expand to fit your text:

The Academy of Medical Sciences and Council of Heads of Medical Schools both welcome this timely report and the attention paid to improving the prospects for enhanced research capacity amongst qualified graduate nurses.

The report accurately reflects present and future challenges, but it could perhaps be emphasised more that increasing competition and selectivity will mean that only the very best clinical academic nurses will secure funding. In keeping with the recent investment in the medical career pathway, it is therefore essential that optimal standards are sought in terms of assessment and recruitment of candidates.

Costings and an identified source of funding for the proposed strategy would be welcomed. The age profile of doctoral students drawn from the nursing profession is identified and the financial challenge of funding people at clinical rates and of seniority should be acknowledged.

In general, the large financial discrepancies that exist in salaries between the mid to upper range academic positions and colleagues in the NHS requires careful consideration.

Q.2 To what extent do the recommendations create an appropriate and integrated pathway to develop a high quality and sustainable workforce of nurses in clinical research?

The box will expand to fit your text:

The recommendations represent an appropriate and integrated pathway for a research career. Consideration should be given to feeder mechanisms to encourage the undergraduate nurse to consider such a career path. This is perhaps easier to develop in medicine with programmes involving special study units and contact with active research groups. Given the relative dearth of existing nursing clinical academic expertise, maybe more thought should be given to exposing nursing students and young nurses to research activity being conducted within medicine or other non-health university departments.
A. Education & training

Recommendation 1
We recommend the establishment of a coordinated range of research training opportunities endorsed by all four countries of the UK. These training opportunities should be organised at four sequential levels (Award Schemes 1 – 4), as set out in the following recommendations.

Q.3 Do you agree or disagree with the above recommendation?
Please indicate your views using the grid below:

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Please use this box to help us better understand your response (the box will expand to fit your text):

We stress the importance of the Follett type appraisal mechanism, which recognises the complexity and inherent tensions in mixed roles such as this is. This approach is crucial if the aspiring clinical academic nurse is to be given the freedom to succeed in their academic role, and particularly important in the professional environment where there is less appreciation of the demands of a research career.

Careful thought should be given to how the infrastructure of research trainers will be developed. There are very few nursing academics that have trained at levels beyond PhD or who have received a reasonably advanced level of training in key areas, such as health economics, epidemiology and advanced statistics.

See reference to feeder opportunities outlined in the response to Question 2.
A. Education & training

Recommendation 2
We welcome the opportunities for nurses presented by the UK Clinical Research Networks and clinical research facilities. We recommend that the rapidly developing training programmes emerging within this infrastructure should be seen as one of the preparatory steps towards the new training path, for those who have experience of working as research nurses and who wish to develop their skills further. It will be important that this rapidly increasing cadre of research professionals has access to clear advice and mentoring to ensure that those that wish to move on to an MRes and beyond, can do so.

Q.4 Do you agree or disagree with the above recommendation?
Please indicate your views using the grid below:

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Please use this box to help us better understand your response (the box will expand to fit your text):

It is clearly important to offer opportunities for graduate nurses who have expressed interest in research through such roles. However, it should be acknowledged that not all individuals wish to pursue the principal investigator pathway, some may be more suited to working within a research team or developing along a more research managerial pathway. Recognised status should be attributed to these roles.
A. Education & training

**Recommendation 3**  
**MRes or MClinRes (Award Scheme 1)**  
We recommend that up to 100 career clinical academic training positions be funded annually for graduate nurses. These positions will be of two-year duration (or part time equivalence), and 50% clinical and 50% academic in composition. Such posts will have a clear academic postgraduate component resting within a well defined vocational training programme. A set of Core Modules should be developed nationally which would form part of the curriculum for all Award Scheme 1 holders.

Q.5 Do you agree or disagree with the above recommendation?  
Please indicate your views using the grid below:

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Please use this box to help us better understand your response (the box will expand to fit your text):

This recommendation is warmly welcomed, it will be important to define the key competencies that an MRes or MClinRes will assure. If, as is anticipated, there is a specific research element to the Masters Programme, it is essential that the supervision of that component is conducted by people with the relevant experience and skills. Given the relative dearth of qualified nursing supervisors, consideration should be given to supervision by clinical academics or non-clinical academics with relevant experience outside the profession. This would have the added advantage of bringing different perspectives to bear which can only benefit a skill base in nursing research and ultimately contribute to a better functioning multi-disciplinary research team.

An indication of the funding source for these positions would be welcomed.
A. Education & training

Recommendation 4
PhD/Professional Doctorate (Award Scheme 2)
We recommend that up to 50 early career clinical academic appointments are funded annually for a period of five years. These positions will be of three-year duration (or part time equivalence) and allow students to undertake a PhD or Professional Doctorate programme of study.

Q.6 Do you agree or disagree with the above recommendation?
Please indicate your views using the grid below:

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Please use this box to help us better understand your response
(the box will expand to fit your text):

Similar arguments to those expressed for Recommendation 3 pertain. There will be a gain from linking to other disciplines and experienced professional groups. Many of the more successful nurse academics began their research careers within a university or medical research environment, subsequently transferring their skills to the nursing environment.

There would be considerable value in placing significant numbers of these awards in a few centres, in order to obtain critical mass in training and a cohort of peer-supported nurses. Wider distribution might be ineffective at producing the desired cadre.
A. Education & training

Recommendation 5
Post-doctoral Career Fellowships (Award Scheme 3)
We recommend that up to 20 Post-doctoral Career Fellowships are funded annually. These positions will be of three-year duration (or part time equivalence) to allow appointees to undertake advanced research, clinical and education roles and develop their programme leadership potential.

Q.7 Do you agree or disagree with the above recommendation?
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Please use this box to help us better understand your response (the box will expand to fit your text):

This recommendation is welcomed. However, we strongly favour an increase in the duration of these fellowships. To allow a significant programme of work to be conducted, together with generation of funds and recruitment of doctoral students, post-doctoral career fellowship positions should be awarded for five years. We recommend that early career fellowships should be awarded for no less than 5 years, even if this means a reduction in the number of awards. (See 'The freedom to succeed - A review of non-clinical research fellowships in the biomedical sciences', a report from the Academy of Medical Sciences, July 2005).

The issue of supervision should be addressed. The numbers of nurses who have obtained postdoctoral training and who are in a position to provide the supervisory infrastructure is most probably not large enough to be adequate. There is therefore a need to consider how supervisory arrangements may work, bearing in mind the need for supervisors to have considerable insight into nursing perspectives.

We reiterate the importance for joint appraisal.
A. Education & training

Recommendation 6
Senior Clinical Academic Fellowships (Award Scheme 4)
We recommend that up to 10 Senior Clinical Academic Fellowships for nurses are funded annually. These positions will be of three to five year duration (or part time equivalence) and allow appointees to develop more advanced research, clinical work and education skills and develop their role as leaders.

Q.8 Do you agree or disagree with the above recommendation?
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Please use this box to help us better understand your response (the box will expand to fit your text):

It is essential to develop a greater senior cadre of nurse academics to contribute to the leadership of such developments.
B. Facilitating careers

Recommendation 7
We recommend that career flexibility, specifically the ease of combining research and clinical practice throughout a career, must be enabled through the introduction of sessionally based contracts of employment that allow nurses to work as clinicians while also undertaking other roles as researchers and/or educators.

Q.9 Do you agree or disagree with the above recommendation? Please indicate your views using the grid below:

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Please use this box to help us better understand your response (the box will expand to fit your text):

Such sessionally based contracts must be supported by Follett type annual appraisal.

As noted above (Question 1), the financial barrier to a career in research and education requires consideration.
B. Facilitating careers

Recommendation 8
We recommend that in discussion with key partners, a well articulated system of mentoring is developed for nurse researchers and educators, including emerging researchers.

Q.10 Do you agree or disagree with the above recommendation?
Please indicate your views using the grid below:

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Please use this box to help us better understand your response (the box will expand to fit your text):

Mentorship has been one of the strongest aspects of the Academy of Medical Sciences' support for emerging clinical academics and a review by the Department of Health has highly commended such activity. Given the relative dearth of established nurse clinical academics, consideration should be given to providing non-nurse mentorship as well as professional mentorship.
C. Better information on nursing researchers

Recommendation 9
We recommend that NHS Careers Advisors must be made aware of and promote the full range of career opportunities that are possible for qualified nurses. Careers advice must include opportunities for developing excellence in clinical research, education and leadership.

Q.11 Do you agree or disagree with the above recommendation?
Please indicate your views using the grid below:

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Please use this box to help us better understand your response (the box will expand to fit your text):

Such career advice should begin at the undergraduate level. The Academy of Medical Sciences has recently begun a pilot programme of visiting lectures to ensure that medical students in new medical schools are exposed to the stimulus of cutting edge science. CHMS has worked with MMC to ensure better dissemination of advice about the variety of medical careers available to young doctors. Similar schemes might be considered in schools of nursing to help generate interest at a formative point in the students' career.
C. Better information on nursing research

Recommendation 10
We recommend that a single data source be developed to provide information on labour market intelligence that relates to nurses engaged in training to be researchers and educators.

Q.12 Do you agree or disagree with the above recommendation?
Please indicate your views using the grid below:

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Please use this box to help us better understand your response (the box will expand to fit your text):

To track the impact of this initiative, such a data source, with clear definitions applied, is essential. It would also be worth documenting periodically the views of nurses on barriers to such a career, rather than relying on the views of an expert committee. Conducting exit interviews for those that try the proposed pathway but decide against continuing would be useful.
D. Implementation

Recommendation 11
We recommend that the implementation and delivery of these recommendations and their associated actions should commence without delay, with a view to achieving the recommendations outlined in this report within 5 years.

Q.13 Do you agree or disagree with the above recommendation?
Please indicate your views using the grid below:

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Please use this box to help us better understand your response (the box will expand to fit your text):

Details of funding source and structure would be welcomed.
Q.14 ‘Developing the best research professionals’ focuses on the training needs of the nursing workforce in clinical research. However, the UKCRC also wishes to consider to what extent the recommendations in the report could be considered a blueprint that could also be applied to the research workforce of the Allied Health Professions?

If you are a member of the Allied Health Professions, it would be helpful if you could indicate:

a) Which of the recommendations could be suitable for your profession?
b) Are there any issues specific to your profession that would not be addressed through these recommendations?

This approach could be used as a template for other allied health professions. As with nursing, the pathway should offer the individual the opportunities to learn and develop their research skills in more mature research environments, where appropriate. This is particularly so for professions such as podiatry which impinge more closely on medical practice.
Q.15 Any further comments?

Please use this box to provide any other comments you wish to make:

No further comments.