

## **Portfolio GP Research Fellow post, CRN Wessex - Guidance November 2022**

### **Background**

Funding has been identified for up to 5 pilot posts, for 12 months, to fill the gap between GP vocational training for research and higher academic research training. The post is intended to support GPs who have completed GP vocational training, are confident in their clinical care of patients and looking to develop their interest in research. They can be at any stage in their GP career. The applicant would be working as a GP (locum, salaried, GP partner). They may have a portfolio career across several sites or may be established in a particular healthcare location.

The days worked and the start and finish times can be adapted to suit the individual GP. This is to allow for other family or work commitments. Once established the working times and days would be set, with some flexibility in the case of carer's responsibilities or clinical work issues. Funding is sessional and should cover at least three sessions a week with a maximum of five sessions a week. At least two consecutive sessions each week will be based in the same research delivery setting, often the nearest research hub. The third session is to ensure research supervision time is allocated. A session is a morning or afternoon of four hours.

The prime aim of this post is to increase research delivery in the community and primary care setting. This improves the care of patients, the healthcare of the individual patient involved and our collective knowledge.

It is intended that the appointee will experience being part of an active research team and start to consider a longer term commitment to a research role in primary care. This post is expected to develop research delivery skills and provide access to education resources with help to develop ongoing research supervision and mentorship.

The appointee may then choose to maintain a long term research portfolio embedded firmly in the GP clinical setting or move into an academic career pathway alongside their GP clinical work. The intention is to encourage the clinically active GP in a life-long research active career, which fits with their long term personal and clinical career plans, as they evolve.

The post holder is expected to be based in, or closely attached to a GP practice. This practice is most likely to be research active. The post holder will also work in the nearest Wessex research hub (Southampton, Bournemouth, or Portsmouth), with links to a hospital trust and an academic research centre

## Outcome measures

- To increase clinical research delivery in primary care and community care across the Wessex region
- To encourage and provide the necessary skills and motivation for a GP to maintain a portfolio of research throughout their future careers (outside or as part of a formal academic programme)
- To support and encourage the development of future Chief and Principal Investigators and the future creation of new research studies in the Wessex region
- To support local research delivery and to be of strategic importance to development of research in the organisation and locality

## Post design

- Part of a research team with mentorship and support
- A named Academic Research supervisor
- Protected time – at least three sessions a week including time for research delivery and meeting research supervisors
- A named GP with research interest as a primary care research supervisor. This is in addition to an academic research supervisor
- A personalised Research Education Plan (REP) tailored to the individual as agreed with Supervisor on 6 monthly basis
- A peer group of researchers of similar standard should be enabled within the same trust, locality or region
- Attainment of Good Clinical Practice (GCP) in Research certification within first month of post
- Completion of Valid Informed Consent (VIC) training within three months of start date
- Career advice on combined clinical and research career or academic career options
- Experience of delivering research with patients – recruitment, consent, intervention, review, measurement of impact, monitoring of side effects
- An introduction to research design with a focus on ideas, and framing a research question. Awareness of processes such as IRAS application (Health Research Authority - HRA), ethics application, outlining a research protocol and research planning using Gantt charts or equivalent
- To experience delivery to a high-quality commercial and non-commercial portfolio of research

## Research opportunities for GPs in Wessex

| GP vocational training  | → | New and established GPs              | → | Established GPs  |
|---|---|--------------------------------------|---|--|
| "Integrated Training posts in Research and Clinical General Practice" |   | "Portfolio GP Research Fellow posts" |   | Specific research study grants<br>Academic research posts<br>Higher academic training posts for Masters or PhD |

This Portfolio GP Research Fellow post is part of an overall scheme of research opportunities, extending from GP vocational training through to and occasionally beyond a GP's retirement from their clinical work in primary care.

It covers the geographic area of the Clinical Research Network Wessex (CRN Wessex) which is evolving and currently extends from Hampshire, Isle of Wight, Dorset and South Wiltshire.

### Portfolio GP Research Fellow Posts

The posts are based in the primary care setting and post-holders will usually hold a contract for pay with a GP surgery that is research active.

At least two consecutive research sessions will be based in the same research setting. This could be one of the research hubs based in Southampton, Bournemouth or Portsmouth. Alternative sites for these two minimum sessions are a research active general practice or a research active academic research centre at a hospital trust or university.

These two sessions will include contact with research participants at all stages of research from recruitment and consent through to follow-up. This should lead to increased recruitment and achievement of research targets which will generate income.

After a structured interview, GP Research Fellow posts are awarded by the Primary Care Research Education team at CRN Wessex which includes the Associate Clinical Director for Primary Care and the Primary Care Education Lead. Wherever possible the team will take into consideration a trainee's previous research experience and preferred geographical location during the allocation process, based on research active GP practices which have agreed to host the posts. Where any conflicts of interest arise over placement or selection of a GP Research Fellow an independent panel will be appointed.

As well as ongoing GP clinical commitments, the post-holder will need to maintain a brief Educational Record of learning for each supervisor session, all research education sessions, and each week of research experience. This is for both personal reference and as a record of impact to help support future funding of similar posts. This should include a weekly succinct record of numbers of patients recruited, consented or followed up and which studies these related to.

The post-holder will also maintain an ongoing REP which is reviewed and updated at least three monthly. Both the Educational Record and REP are formative with no summative assessment

or marking of content for the individual. However, the existence of a full Educational Record, and up to date REP are essential for satisfactory completion of the post. They are also evidence of research delivery and development of research skills, which is a core requirement for ongoing funding of future Research Fellow posts. Supervisors are expected to help advise on the most concise and effective ways to contribute to the Educational Record and REP. There will be a GP Research Supervisor's focused report on the post, and progress of the post-holder, informed by feedback from the allocated Academic Research Supervisor and relevant sessional supervisors. This will contribute to a structured reference outline, shared with the Research Fellow and which may then contribute to a letter of reference, if requested.

For every GP Research Fellow post, the following people should be named, have regular contact with the GP Research Fellow and have shared their preferred contact details:

### **GP Research Supervisor**

An experienced GP who works in the clinical setting and is involved in primary care research. They oversee the primary care research education received in the Research Fellow post and should ensure there is a primary care clinical setting and research setting induction. They will provide at least three primary care research feedback review meetings at the start, middle and end of the post. They should have informal access with the post-holder each week, oversee a monthly GP supervision session and maintain links with the Academic Research supervisor.

### **Academic Research Supervisor**

An experienced researcher holding a research post in an academic department of primary care research. They oversee the academic research education received in the Research Fellow post and should ensure there is an academic department induction and at least three academic review or feedback meetings, at the start, middle and end of the post. They should have contact with the post-holder at least once a month for a supervisory session, and maintain links with the GP Research Supervisor.

### **Sessional Supervisor**

Available for the duration of each session for advice on research and research participant safety. There may be several people acting as sessional supervisors and a pattern of the same person each weekly session is ideally established with a back-up person if they are away. They have research experience and can be any professional workforce.

If overseeing a research session at the Research Hub on a regular basis the person seen most often will ensure a Hub site induction has taken place. This lead sessional supervisor should be able to provide feedback at the start, middle and end of the placement at the Research Hub. They should maintain links with the Academic Research supervisor and GP Research Supervisor.

## **Primary Care Research Education Lead**

Oversees the rotation and is also available for career advice and general support. Ensures a named Academic, GP Research and Sessional supervisor is in place and known to the GP Research Fellow.

The Health Education England (Wessex) [website](#) contains additional information that relates to the principles of GP Education with a focus on GPs in training.

## **Summary of post-holder experience**

GP Research Fellows will ensure a short CV and references from previous clinical or research posts are available for each supervisor if requested at the start of the post.

## **Educational Record of learning**

This provides a brief focused summary of educational experience in research and related learning. It should be on a "Word" document with the date, location and supervisor name at the start of each entry. It would be shared with supervisors on a regular basis and help update the REP held by each Research Fellow as a work document in a table format. Examples are available.

The Educational Record of learning should include a brief entry of learning for each supervisor session, all research education sessions, and each week of research experience. It should include a weekly succinct record of numbers of patients recruited, consented or followed up and which studies these related to.

## **GMC Registration**

This must be up to date at all times with a record of your GMC number provided in the short CV provided to each supervisor. The Research Fellow is responsible for keeping GMC registration in date and there is no funding for GMC registration through this post.

## **Indemnity**

The study sponsor is responsible for ensuring that indemnity is in place to cover the design or management of clinical research or clinical trials. However, the Clinical Negligence Scheme for General Practice (CNSGP) covers practices for clinical negligence in conducting research with NHS patients in England, by way of care, diagnosis or treatment under one of the standard NHS primary care contracts, on or after 1 April 2019. For example, if a clinician negligently misreads a dose in the trial documentation and administers too much of a drug which harms their NHS patient, cover will apply. Where research activities are undertaken in relation to a private patient, or in the course of any non-clinical contracted activity, CNSGP will not apply and separate indemnity arrangements are required.

## **Patient Safety**

The safety of patients is a priority during research and clinical care. Adherence to research protocols, reporting protocol deviations and careful records are part of ensuring a high standard of patient safety

## **Starting in Research Fellow Posts**

For each research setting the post-holder should have a local induction programme which should provide all of the relevant information to ensure a smooth start.

Each induction should take place over the first 1 to 2 weeks in post and will include areas such as:

- An orientation tour of the research setting and associated building
- Sitting in and observing relevant research sessions
- Meeting all the member of the local research teams and relevant clinical care team members

## **Education**

During this post you are expected to participate in monthly Research Fellow sessions, alongside secondary care research fellows. There will, be monthly supervision sessions with your academic and GP research supervisors. This effectively provides a supervision session every two weeks. These research orientated sessions provide an important update, as well as giving an opportunity to meet with the supervisors and other researchers in different specialties and a wide range of research experience.

When the post-holder is not attending these educational sessions they are expected to be actively participating in research in one of the centres they are usually based at. There should be a list of dates, venues and times for these education or supervision sessions shared with the post-holder and other supervisors on a regular basis. Wherever relevant GP Research Fellows will be encouraged to attend conference settings such as the Society for Academic Primary Care (SAPC) or Research RCGP.

## **Additional roles and work**

The GP Research Fellow is expected to be holding a work portfolio of other roles including clinical work as a General Practitioner. This should not exceed the maximum of ten sessions of work per week without specific written agreement of the post-holder's supervisors. In any event the post-holder should ensure that work done in other roles does not in any way limit or impact on the research work of the GP Research fellow post.

## **Locum GPs**

Those GPs working in a locum post need to consider the tax implications of also working in a salaried post. This post is not suitable for locum payment as it is continuous employment for more than 11 months. If the post holder is also working as a GP locum in the employing practice, advice on the tax and employment implications is advised for both the post holder and employing practice.

## **Research Curriculum**

National objectives for research fellows in the primary care setting are awaited. The Royal College of General Practitioners (RCGP) sets out basic research aims in its GP vocational training curriculum, and the GMC refers to research for all in its guidance for medical education. Documents are available to describe the skills and knowledge expertise the GP Research fellow should aim to acquire over the course of their post.

In particular the GP Research fellow should complete the Good Clinical Practice (GCP) in Research module early in post, followed by the Valid Informed Consent (VIC) training as outlined on the Learning for Health website. The Principal Investigator (PI) training is also relevant and the Chief Investigator (CI) training is a potential future aim.

## **Assessment Requirements**

To complete the post satisfactorily the GP Research fellow should be able to share their formative Educational Record of Learning and their Research Education Plan, which should include information on how objectives were completed.

An overall summary of the weekly record of numbers of patients recruited or consented or seen and which studies these related to must be provided. This is submitted to the Primary Care Research educational lead along with the final reports from the GP Research and Academic research supervisors

## **Annual leave**

A leave allowance of five weeks a year pro rata is included in the GP Research fellow post in addition to statutory bank holidays that fall on the usual days of work. In the event that other roles give a larger annual leave allowance application to the supervisors can be made to move around research session days to allow for this.

## **Study Leave**

An additional week of study leave, pro rata, is allowed. The content of the study leave has to be agreed by the supervisors with appeal to the Primary Care Research Educational lead in the event of any dispute. Study leave would normally be given for education related to the research work being undertaken and related skills that are being developed.

## **Parental Leave**

Please refer to guidance set by the employing GP practice or trust or university.

## **Sick Leave**

A record of sick leave should be maintained by the GP Research fellow including dates and any certified reason where appropriate. This should be copied to the supervisors after each period of absence. Any additional policy guidance set by the employing GP practice or trust or university should be followed.

Those who have been out of post for 3 months or more will need a return to work meeting with the Primary Care Research Education lead, as well as any HR requirements, such as Occupational Health referrals.