

NATIONAL INSTITUTE FOR HEALTH RESEARCH
SCHOOL FOR PRIMARY CARE RESEARCH

Academic Research Capacity Development Programme

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APPLICANTS

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1. Background

The National Institute for Health Research School for Primary Care Research (NIHR SPCR) is a unique collaboration between leading academic centres in England. This provides a setting where fellows can benefit from the leadership of researchers at the top of their field and where supplementary training, networking, mentoring and guidance is part of the added value that the School environment brings. The School aims to build research capacity in primary care by providing a range of multidisciplinary training and development opportunities. Its goal is to nurture future research leaders from a range of professional groups who can contribute to primary care research.

By funding a range of training and development awards, the School aspires to provide complementary rather than duplicate training pathways to the ones provided by the NIHR Academy and other funding agencies such as the MRC and Wellcome trust. The aim is to ensure that a range of training opportunities are available to maximise primary care research capacity – irrespective of professional background.

Over 280 individuals have received funding since 2010. A list of the award holders can be found in appendix one. Their key achievements have been reported in annual reports submitted to the Academy. These include first author papers in high impact factor journals, presentations at international conferences and successful bids for further research funding. A list of publications is listed in appendix two. Appendix 3 contains a range of case studies past SPCR Fellows, highlighting the added value of our capacity building programme.

Distinctive to this new phase of the school, is the explicit aim to strengthen the primary care research sector more broadly, with a requirement for members of the school to share their expertise with non-member institutions. There will be a strong emphasis on engaging, collaborating and partnering with institutions beyond the school membership and in supporting a broader definition of primary care that supports professional groups beyond general practice. Our past success in developing multi-professional academic careers puts us

in the unique position to use our expertise, infrastructure and vision to expand, supporting a broader group of primary care professionals.

The School's research capacity development Business Plan 2021-2026 together with the Research Business Plan for the same period will be used as the strategic plan for the School. They will be referred to in the overarching Partnership Agreement between the nine partners and will be used as reference documents when reviewing the School's performance. The School's performance will be reviewed regularly by its Board against the key deliverables contained within the Business Plan. Key deliverables will include:

- Developing research capacity activity as per the School's business plan
- Research that impacts on patient care and health policy
- Publications in relevant journals that reach the target audience
- Innovative dissemination of relevant research findings
- Leveraging funding for further research grants and personal fellowships
- Development of an expanded and highly trained research capacity across multiple primary care disciplines (including by not limited to nursing, pharmacy, physiotherapy, podiatry)
- Working with partners who are not members of the School for Primary Care Research
- Robust Patient and Public Involvement throughout the School's activities

2. Mission

The main mission of the School remains:

- To increase the evidence base for primary care practice
- To increase research capacity in primary care

The School has helped create a 'critical mass' of research expertise and funding through coordinated and collaborative working across England. It will continue the strategy, successfully delivered in the past iterations of the School, to commission high quality

research to inform the development of better clinical practice in primary care focusing on the key NIHR priority areas

The School will increase and improve research awareness in the sector. It will provide strategic leadership to support the development of primary care research and contribute to ongoing efforts to build research capacity amongst partners and among the wider primary care research community.

The School's research capacity development programme is central to the overall mission of the NIHR SPCR. The School offers a number of highly competitive fellowships that are designed to complement existing fellowship schemes by targeting known 'pinch points' in capacity building and with additional support will work collaboratively with departments outside of the School to support developing research in NIHR priority area. This is intended to be complementary to existing NIHR Fellowships and takes account of the recent NIHR Academy rebalancing document which highlights particular gaps in the career progression pathway. Our complementary approach is evidenced by prioritising early career graduates from all professional backgrounds who may yet not be competitive for NIHR DTF but are committed to academic careers (PhD Studentship), short duration (2-year) early career launching fellowships ensuring multi-professional talent remain working in primary care and GP Career Progression Fellowships which allow primary care medical graduates to complete otherwise unfunded doctorates. Seed corn and bridging funded was highlighted in the NIHR Review of Training as an example of innovative practice.

3. Governance and structure

Full details of the governance and structure of the NIHR SPCR are provided in the research business case. Here we describe specific details of the governance and structure of the academic capacity development programme.

Keele University will host the School, under the leadership of the Director, Professor Christian Mallen. The nascent School Board held a competitive process to appoint a new Academic Capacity Development Lead (ACDL (and Deputy ACDL). Professor Stephanie Taylor

(QMUL) and Professor Hazel Everitt were appointed to these roles in October 2020, respectively.

The NIHR SPCR Academic Capacity Development Programme is managed on a day to day basis by the ACDL (Taylor, QMUL) and their Deputy (Everitt, Southampton), the School Assistant Director (Georgina Fletcher) and the Director of the SPCR (Mallen, Keele). Funding decisions and priority areas for Fellowships are decided by the NIHR SPCR board and operationalised by individual training leads in each host department.

Each partner has been asked to appoint a Departmental ACDL to facilitate joint working across the NIHR SPCR Capacity and Development Programme. This person will join a cross School forum that is led by the School's ACDL with support from the deputy ACDL and the Assistant Director. All are members of the School's Board. The Academic Capacity Development Group will meet twice a year to discuss strategy for training and share areas of best practice. The group will invite interested parties to join them to discuss future strategy, e.g. the NIHR Academy Dean, Academy Programme Managers, NIHR Infrastructure leads and Fellows

The aims of the SPCR Academic Capacity Development Programme are:

- to disseminate and promote excellence in Training and Academic Capacity Development;
- to contribute to the development of bespoke training events, resources and materials;
- to provide a platform for sharing best practice and progress in training methods.

Specifically, the Departmental Academic Capacity Development Leads (and their deputies) will be:

- Expected to sit on the Academic Capacity Development Forum to represent their department;

- Known to NIHR SPCR Fellows in their department as the individual (in addition to formal supervision arrangements) from whom they can seek advice about their development needs and NIHR related opportunities. This activity should involve formal interaction with NIHR Fellows either individually or as a group;
- Prepared to assist the SPCR Assistant Director with the timely collection and reporting of information on Fellows;
- Proactive in sharing local good practice across the School; and contribute towards the training and development available within the School, and beyond;
- An active participant in the annual School Fellows' residential meeting.

The ACDL and the School Assistant Director are members of the NIHR Academy Academic Career Development Lead Forum. This provides an opportunity for the SPCR to link with ACDL leads in other parts of the NIHR and the ability to discuss common issues in respective training functions.

The NIHR SPCR has developed a system of recruitment procedures to our studentship/fellowship programme that supports host departments to identify talented individuals whilst maintaining a nationally competitive programme. We will move to a single stage recruitment process, using a standardised proforma (developed in conjunction with the NIHR Academy) and cover letter. Applicants are then shortlisted for interview by a multi-professional panel of 4- 6 senior primary care researchers and patient and public representatives using a SPCR standardised proforma. Interviews scrutinise not only the scientific content of the proposal, but also the clinical relevance, potential for patient benefit, methodological rigour, appropriateness of training plan and fit with the individual's career. PPIE panel members scrutinise all these areas in addition to considering PPIE specific activity. Independent references are also taken up and made available to the interview panels. Interview panels include mid-career researchers, senior faculty members and PPIE representation. Recommendations from the interviews are then approved by the full NIHR SPCR board. We will review this process after 2 rounds to ensure it is working as intended.

Standardised proforma have been developed (based on NIHR Academy proforma) to monitor and track the success of all Fellows. This data is collected annually by the directorate, analysed and discussed with both ACDL leads and board members. Data collected includes equal opportunity metrics, details of publications and other dissemination activity, grants applied for, promotion and training opportunities. This data forms the majority of the content of the annual report provided to the NIHR Academy. The School intends to develop further the tracking of Fellows (e.g. explore using ResearchFish) and so that the School's limited administrative resources are used effectively will discuss the methodology with NIHR Academy to explore potential synergies.

Other non-fellowship training opportunities are open to all, irrespective of School membership. These have different recruitment approaches depending on the scheme that is proportionate to the level of the award (e.g. George Lewith award is through submission of an essay, TUTOR-PHC is through submission and independent assessment of a cover letter and CV).

The Directorate is supported by a small number of support posts that work across both the research and capacity building components of the School. These include:

- Each partner department will have funding for an administrator.
- Deputy to the assistant director
- Patient and Public Engagement Manager
- Programme Officer (monitoring, impact and communications)
- Finance/Contracts Officer
- PA (to support the Director, assistant director and the rest of the Directorate and Executive)

4. Building Research Capacity

The Academic Capacity Development Programme attracts £10 million to support core activity and fellowship programmes described below. The School awards aim to complement and not duplicate the opportunities offered by the NIHR Academy:

<https://www.nihr.ac.uk/explore-nihr/academy-programmes/fellowship-programme.htm>

Awards are distributed between member departments in two ways; a pro rata allocation and in open competition. The pro rata allocation, of PhD studentships supports capacity building in core developmental areas, whereas the open competition allows departments to attract and develop high calibre fellows from a range of clinical and methodological backgrounds.

Fellows will receive a salary commensurate with their experience and national pay scales and also a training allowance.

- SPCR PHD STUDENTSHIP AWARDS

These are available to those with limited primary care experience (e.g. Masters-level training) who want to develop their expertise in primary care research. Applicants must have a first degree in a discipline relevant to primary care research and will be expected to complete a PhD/DPhil during the award period. The precise academic qualifications required depend on the University and training offered. The awards offer traditional project-specific training in shortage-areas of particular importance to primary care. These awards attract a stipend rather than as salary and as such they typically focus on critical non-clinical disciplines (e.g. medical statistics, health economics, health psychology, medical sociology). We will encourage students to make connections with relevant NIHR Incubators, where appropriate (e.g. methodology, nursing and midwifery education) in addition to working with other parts of the NIHR Infrastructure (including but not restricted to NIHR ARC, BRC, Patients Safety Translational Centres). Students are encouraged to maintain links with their own disciplines through collaborative arrangements for co-supervision with established senior non-clinical primary care researchers.

Students receive fees and a tax free stipend based on UKRI recommendations. The host department will receive an allocation of funds to support the research. These awards usually commence in October. The level of the stipend has not been seen as a barrier to recruiting high quality candidates and is in line with other national funders.

-SPCR/NIHR ACADEMY GP ACF-PHD RUN THROUGH FELLOWSHIP

The NIHR Academy review identified the potential for innovative GP ACF-PhD run through posts. These will be piloted in Phase IV of the SPCR with the NIHR Academy supporting the ACF component and SPCR funding the post CCT component. These will help to develop needed capacity in academic general practice whilst exploring a new model to develop doctoral expertise that may be more cost effective. It is currently not uncommon for GP ACF's to apply for NIHR In-Practice Fellowships or SPCR Career Progression Fellowships (or both) prior to making a doctoral fellowship application. These new fellowships have the potential to reduce time to doctorate whilst also reducing unnecessary costs. We will work with HEE and the NIHR Academy to develop the framework for these posts which will need a different recruitment and interview process.

-SPCR GP CAREER PROGRESSION AWARDS

Supporting research active clinicians remains a priority for the SPCR. General practice continues to have the lowest academic base amongst medical specialties, with numbers of senior academic GPs remaining constant over the past decade. There is an increasing demand for part-time academic training for personal reasons and from clinicians who wish to establish a significant clinical career in the early days after qualification. In 2012 we introduced our highly popular part time GP Career Progression awards. These can be for a length of time from 12 (to develop a PhD Fellowship application) to 24 months (in some circumstances we will fund 24 months, for example to complete a PhD started as an ACF) usually starting in October.

-SPCR LAUNCHING FELLOWSHIP AWARDS

These are available to talented early postdoctoral researchers who show clear potential to develop a successful career in academic primary care. These 2 year awards will be open to all disciplines relevant to primary care research, clinical and non-clinical. Previous fellows have either concentrated on one particular project, or have developed a portfolio of work (e.g. placement in a CTU, working across host departments) to allow them the broadest

based training in academic primary care. Fellows will have already completed their doctoral training and will normally be within three years of this.

-SPCR Research Interns

The introduction of internships for medical students provided a new opportunity to engage those thinking about a career in academic primary care at the earliest stage of their careers. We will retain and expand this scheme, providing two places per year per institution. The scheme will be open to talented undergraduates from any professional background to support developing an interest in academic primary care. They will last for 4-6 weeks.

A key change in Phase IV of the NIHR SPCR is the requirement to increase capacity in wider clinical groups working in primary care, including (and not limited to) nurses, pharmacists, and allied health professionals. As such, 1 of these awards per year per department, will be ring-fenced for these groups.

Seed-corn funding and bridging funding

An early innovation in the SPCR was the use of seed-corn and bridging funding to support talented individuals to remain in academic primary care. This has now been adopted by the NIHR Academy.

As part of the pro rata allocation, School members will receive funds for seed corn and bridging awards. Approval has to be sought from the ACDL before the awards are made and a sound training and development plan for the person involved has to be developed. These funds can be used to support short-term seed corn appointments, usually up to 1-year duration, to support individuals while they develop applications for national training awards or external grant funding. For non-clinical disciplines these awards have tended to be full-time; for clinical fellows part-time and held in conjunction with an existing NHS or social care post. The posts have been advertised with applications made directly to individual Departments. The funding has been used flexibly and opportunistically by Departments to

attract high potential individuals into primary care research. We would like to continue to use funds in this way and will liaise closely with the NIHR Academy to ensure complementarity.

Bridging awards are another successful feature of Phase III funding and have been used to support individuals in the “funding gaps” between national awards. Most bridging awards have been made at the post-doctoral stage and we suspect this will continue. The key criteria for an award are: i) that an individual has been in receipt of a training award made in national competition; ii) that they have performed creditably and are considered likely to be successful in gaining either a further national training award or a substantive academic post within 2 years. As the individuals concerned have already been selected in national competition, these awards have been made locally by Universities and so we would like to continue.

All Fellows will have access to wider career support, including PPIE to help shape and deliver research, Masterclasses and fellows meeting where research careers are discussed and supported (e.g workshops on applying for fellowships, writing for publication, PPIE, developing effective collaboration). Past Fellows have a strong track record in securing follow-on fellowship funding (see past monitoring reports for details).

A new requirement of Phase IV of the SPCR is to more proactively work with NIHR priority groups to support the wider development of academic primary care, particularly in non-school departments and amongst progression groups without a strong tradition of primary care focused research. The SPCR members have extensive networks and a strong track record in supporting academic capacity in a range of clinical and methodological disciplines. Our outstanding infrastructure, including clinical trials used, established PPIE structures and strong methodological expertise are outstanding resources to support developing research and capacity in allied areas.

We are keen to use our expertise to develop academic capacity and capability across areas relevant to broader primary care. To do this in a way that will build a critical mass in a meaningful way we request an additional £3 million specifically ringfenced to support this

activity. This is important as we do not want to remove talented researchers from non-school departments by offering them existing School fellowship opportunities but rather we aim to work collaboratively with them (and their current academic department) to support growing capacity and capability. This would be particularly focused around current NIHR shortage specialties which the SPCR has a natural synergy. This includes, but is not limited to, pharmacy, nursing, midwifery, paramedic, physiotherapy, podiatry, optometry, dentistry and social work. Funding would be profiled to particularly support PhD Studentships, run through PhD programmes and Launching Fellows, supervised collaboratively across institutions. This model allows talented researchers the opportunity to fully benefit from SPCR infrastructure without removing them from their host departments. We have had early conversations with NHS E to explore leveraging additional funding to support pharmacy work and will continue to look for opportunities to lever additional funding.

We would also ask the NIHR Academy to extend the SPARC scheme, allowing those currently not working within NIHR Infrastructure to apply for funded placements to work with School member departments. This could help support existing research and be a catalyst to support future fellowship applications.

5. Additional opportunities

In addition to the unique training opportunities offered by the NIHR SPCR, added value is offered to the SPCR experience as fellows are also be able to access the range of opportunities provided by the NIHR. These include the Annual Academy Members' Meeting, the NIHR Doctoral Research Training Camp and the Short Placement Awards for Research Collaboration (SPARC).

Leadership Programme

Access to leadership programmes can be especially challenging for primary care academics, especially for women and academics from BAME groups. We will fund 2 places per year for early career/emerging leaders allowing participation with a leadership programme, such as the NIHR Future Focused Leaders programme or the Oxford International Primary Care Leadership Programme. 1 place per year will be ringfenced for women/BAME applicants

Transdisciplinary Understanding and Training on Research - Primary Health Care

TUTOR-PHC is a one-year, national interdisciplinary research training program funded by the Canadian Institutes of Health Research (CIHR) and the Canadian Health Services Research Foundation (CHSRF) with representation from the disciplines of: Family Medicine, Nursing, Psychology, Epidemiology, Social Work, Sociology, Education and many others. The SPCR has been fortunate to have been allocated one place on the programme each year. The School holds a competition to select the candidate. To date 12 fellows have taken part.

Working with the Society for Academic Primary Care

One of the other key networks outside the NIHR is the Society for Academic Primary Care (SAPC). The School has developed a mentoring scheme with SAPC for non-clinical fellows which also supports fellows from outside the SPCR. The School recently supported the SAPC-RCGP WISE GP internships and will work with SAPC to support other national initiatives. This initiative champions professional scholarship at the heart of modern general practice. We recommend the Academy of Medical Sciences mentoring programme to our clinical fellows (many of our senior faculty act as mentors on this programme). We will also investigate opportunities to work with Association for the Study of Medical Education (ASME) and the NIHR Medical Education Incubator to build capacity and capability in this area.

In the primary care sector, we will build on current relationships with the Wales Centre for Primary and Emergency (including unscheduled) Care Research (PRIME), the Scottish School of Primary Care, the National Centre for Primary Care Research in Ireland and also beyond the UK, e.g. the Netherlands, Canada, Australia and the US (NAPCRG, WONCA, AAAPC). We also plan closer collaboration with other components of the NIHR Infrastructure, including the School for Public Health Research, School for Social Care Research, Applied Research Collaboration and Patient Safety Translational Research Centres. We will ring fence funds to allow cross-school networking events for fellows and support pan-NIHR training events.

We will also be working with a range of national bodies to lever additional resource for the capacity building programme. We have had conversations with NHS E (Dr Anne Joshua) with respect to funding research and capacity development opportunities across pharmacy and optometry and have had discussion with the NIHR assistant director of global health (Dr Mike Rogers) about opportunities to lever additional funding in an area that is very popular with health and care graduates. Whilst these discussions are at an early stage it is hoped we can lever additional resource into the SPCR.

Opportunities will also be available to those working in non-SPCR departments supporting with capacity and capability development. We are appointing board members with specific responsibility for this activity who will report to the board. A number of our programmes will be open to all, irrespective of geography or institution. This includes the chance to participate in TUOR -PHC, the George Lewith Award and student internships. We are also developing a Masterclass programme which will be open to all. We have piloted this at the end of Phase III with great success. The SPCR will continue to provide financial and administrative support to the UK-wide GP ACF group annual meeting which has been extended to include In-Practice Fellows.

It is important that the capacity building contract is not viewed in isolation. Outreach activity is also integral to our research contract (which will impact on capacity building). Following discussion with CCF, institutions who are not members of the SPCR will not be eligible to apply for SPCR research funding as lead applicants but will for the first be able to have costs allocated as co-applicants. This will provide a new network, not limited by geography, that will benefit from wider access to the SPCR. For example, co-applicants will be invited to networking events, will be aware of SPCR initiatives and be supported to develop new collaborative grants. Research co-applicants are particularly welcomed from non-SPCR departments and for wider primary care professionals with limited SPCR representation (e.g. nursing, pharmacist).

6. Patient and Public Involvement and Engagement

Meaningful involvement and engagement of patients and the public is central to the School, ensuring its work draws on their lived expertise, incorporates their perspectives and responds to their challenge. The School will build on the significant existing body of involvement and engagement activities within its research projects and beyond.

Patients and the public will be involved and able to participate in all stages of research and governance. Existing expertise and structures will be used wherever possible. Work will be coordinated with other key organisations.

We will appoint a PPI and Engagement Officer to work across the School. In addition a member of the Board will be asked to take a strategic lead on PPI. The School International Advisory Group and Funding Boards will also have lay representation. The Advisory Group will be convened during 2021. Lay members of the School's funding board will offer a lay review of research proposals and take part in the funding decision process.

Researchers will be asked to consult INVOLVE's definitions of involvement, engagement and participation. Funding applications must contain a robust PPI approach and a satisfactory Plain English Summary or they will not be eligible for funding. Updates on PPI must be provided at all points during project monitoring. The School has provided training sessions for its fellows on aspects of PPI/E and will repeat this in the future.

7. Dissemination/ Communication

Communications about the research capacity development programme and impact will be generated centrally by the Directorate and locally by member departments. All research progress reports have to include a description of dissemination strategies and likely impacts. Fellows are encouraged to think about their research's contribution to national guidelines from the project inception and to ensure that it is within the NIHR remit. Funding will be made available to researchers to enable their research to be disseminated appropriately. This will follow the NIHR's Open Access policy.

Fellows will be encouraged to produce at least one open access peer reviewed publication in a peer-reviewed journal and these will be captured in annual reports and linked to the School's website.

The School will continue to invest in its website and in a full time Communications Officer post. Fellows are asked to write blogs, tweet and provide articles about particular aspects of their training so that good practice and experiences are shared. Examples of these outputs can be found here <https://www.spcr.nihr.ac.uk/news> and @NIHRSPCR. The SPCR Communications Officer will work with colleagues in the Academy and the wider NIHR and share relevant aspects of their respective communication plans.

All Fellows are expected to attend the School's annual fellows' event where they are required to produce a poster about their work. These are presented to their peers and to senior academic staff in the School.

8. Performance Indicators

The School collates data on the number of applications received, and the success rate of those applying to all Fellowships awarded by the SPCR. These have previously been comparable to other major funding schemes, including the NIHR.

Equal opportunity data is collected from fellows at the start of their awards and this includes gender, ethnicity, professional background data etc.

All School Fellows complete an annual progress report that is based on those used by the NIHR Academy which collect data on a range of performance indicators that are indicative of success. These include publications, grant income, training and career progression. The monitoring results are presented and discussed at an annual School board meeting. This allows a high-level examination of performance and the opportunity for the Board to support Fellows who might need further input. The directorate also monitors career

progression and research related impact, publicising this through our website, newsletter and wider dissemination activity (e.g. showcase meeting, annual fellows meeting).

The breadth and depth of capacity building activity within the School is designed to ensure capacity building at a number of key strategic initiatives, with a particular focus on early entry to academic primary care and on making the difficult transition towards independent researcher status. These have been identified by external organisations, including the Society for Academic Primary Care as pivotal to developing a sustainable future workforce.