



‘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 web site (<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): Cheryll Adams

Name of organisation (if appropriate): Amicus-CPHVA. Community Practitioners' and Health Visitors' Association

Your health profession: CPHVA members are health visitors, school nurses and other community and nursery nurses but the response also applies to mental health nurses

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: 01243 430545

E-mail: Cheryll.Adams@amicustheunion.org

- 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:

Amicus is the UK's second largest trade union with 1.2 million members across the private and public sectors. Our members work in a range of industries including manufacturing, financial services, print, media, construction and not for profit sectors, local government, education and health. Amicus members have recently voted to merge with the T&G union which will make it the largest union in the UK.

This response is on behalf of the Amicus health sector and in particular members of the Community Practitioners' and Health Visitors' Association (CPHVA). It was constructed following a meeting of members of the research advisory group of Amicus-CPHVA.

We very much welcome the report and feel that it is long overdue as for too long there have been no formal structures to encourage or support research careers for the nursing professions. Our research advisory group hope that it will provide support to the many health visitors and community nurses struggling to gain recognition for their research careers

*Whilst we feel that the report has identified key issues there is little detail on how it will be operationised in the current climate where there are already intrinsic difficulties for nurses and health visitors wanting to develop research careers from community posts. These difficulties should be more formally acknowledged as they have been by the CPHVA/RCN/RCM research collaborative.

*Community nurses and health visitors are at a particular disadvantage when wanting to become research active as there are no structures to support them and a culture which makes it almost impossible to have a joint research-practice appointment. We have seen several of our members become very disillusioned when many years hard work obtaining a PhD have not been supported in the workplace and indeed they have had no acknowledgement of their success.

*The report needs to recognise that lots of nurses are based in non nursing or even clinical academic departments as there are insufficient academic opportunities available from their professional groups.

*Practitioners themselves don't recognise the role of research in practice and the report does need to recognise this and make recommendations for core training and influencing the service culture to be more accepting of the need to have research active members to drive quality improvement. It would also be helpful if research skills could provide advantage to the individual practitioner through the knowledge and skills framework and agenda for change.

* It would be helpful if a system for incentivising the NHS for supporting these proposals could be developed.

*There are problems in the operational definition of clinical research, interpreted by many as being medical research.

*There is a real problem for many in accessing core funding for Master's qualifications to get nurses to first base, this can be in part due to a lack of recognition of the importance of research relevant to family psycho/social health and some research methodologies particularly qualitative research

* Unless researching cancer or CHD it is particularly hard to get funding

- * There is no reference to the equality agenda in this document, this is a cinderella area and often one where there are more minority ethnic nurses
- * There are difficulties when people employed by 2 organisations ie eg NHS and Universities but this is not well addressed. For example lecturer practitioner posts go due to problems between employers
- * There is disparity between pay scales of nurse and medical researchers and between those nurses and health visitors working in practice and in academic posts.
- * This doesn't encourage the step to research for senior practitioners, it is also difficult to step back to practice
- * There are many difficulties with funding for joint appointments with the service side reluctant to fund although as acknowledged in the report such posts could be very useful in generating practice related research..
- * It is our belief that there needs to be a clear mandate from the top to take the recommendations of this report forward. Without such political support it is unlikely to be influential.
- * There is a need to indentify very able pre reg students to fast track into research careers. There is no mention of the need for support for this level in the report.
- * Another critical issue to ensuring success is supervision. What is the capacity for supervision for nurses and health visitors to make this happen? We feel it may be some years before there is a critical mass of supervisors, indeed this won't happen without the will to ensure it does.
- * There is a need to build in support and training for supervisors and mentors
- * We were unsure who the main audience is for the report?

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:

We support the recommendations but feel:

- * More emphasis is needed for standard setting in the curriculum across different types of qualifications and across locations where they can be undertaken.
- * Is the MRes considered superior to MNursing? What about the role of professional doctorates which are specifically designed to create nurse leaders and can have a very important role in supporting nurse consultant roles?
- * We believe there is a need for an academy of nursing, midwifery and health visiting research
- * The proposed awards are very unidisciplinary. It would be better if there were set in a multidisciplinary environment as this is the real life for most researchers.
- * Where will post docs be opportunities be based? The report seems to favour the Russell group despite some of the smaller universities being very strong on primary care research eg Sheffield v Sheffield Hallam
- * To focus post doc opportunities in just a few centres could be very risky.



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:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Recommendation 1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please use this box to help us better understand your response

(the box will expand to fit your text):

We support in principle the framework but:

- * However alongside there is a need to consider research supervision needs and resource
- * There may be a need to think more about the numbers in each group as the range and configuration will change over years as first group progresses on.
- * As this is a 5 year document there will be a need for more senior posts early on to provide supervision.
- * There will be a real issue with where to site the very small number of most senior posts

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:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Recommendation 2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please use this box to help us better understand your response

(the box will expand to fit your text):

We agree with the recommendation but:

- * We question whether the balance is right in terms of numbers at each level
- * We would suggest there is a need for more lower awards to allow individuals to 'dip their toes' into research. Many will chose not to continue so there is a need for an adequate pool at this level.
- * As stated earlier there is also the need for more more highly qualified researchers to provide supervision
- * There is a need to recognise that the top pool may be stretched as some of this very small number of individuals move on.
- * There is a need to hang onto people who enter research so the environment must be right
- * There is a need to have more consideration of the nature of awards, eg part time or full time otherwise they will be no different from other awards

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:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Recommendation 3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please use this box to help us better understand your response

(the box will expand to fit your text):

* We strongly support the need for core modules and standard setting so the quality of these awards is maintained

*It is essential that there is a geographical spread in the distribution of the awards and across the different practice settings and specialisms

* Provision should be provided for the award holders to network with one another.

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:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Recommendation 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please use this box to help us better understand your response

(the box will expand to fit your text):

We welcome this recommendation however:

- * If clinical (PD) should be part time if academic (PhD) should be full time
- * This is a very small number when spread over 5 years. We are concerned by how it will affect the age profile of the existing workforce who will be retiring soon leaving a big gap
- * We welcome this number but don't believe it will be enough in the longer term
- * 'Early career' needs to be more explicit and should apply to early in research rather than specifically to novice practitioners
- * It is important to sort out issues around joint appointments, pay etc
- * Where will these award holders be located? E.g. more in clinical domain or more in academic domain, this needs to be thought through carefully according to the award
- * There needs to be consideration of the lack of an academic culture in the clinical domain as this will influence the individual's potential success
- * There may be valuable lessons to be learnt from other professions regarding how they cope.
- * GPs have academic units but maintain a clinical salary and hence are prepared to do research, this opportunity should also be available to the nursing and health visiting perhaps though nurse consultant appointments

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?

Please indicate your views using the grid below:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Recommendation 5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please use this box to help us better understand your response

(the box will expand to fit your text):

We very much welcome this proposal but:

- * It is hard to maintain all three roles, consider what has happened with consultant nurses, research tends to be to activity which drops off.
- * There is a need to focus on reseach otherwise the professions won't get the required capacity. If anything drops off it should be education otherwise it will be necessary to extend the time.
- * Once again how will clinical areas fit in with universities? Post holders need both financial support and the guarantee of work at the end of their fellowship period.
- * There needs to be explicit safeguards for anyone taking this on and a guarentee that Trusts will support the posts
- * This is a very small number. What will have happened to the others who have dropped off? They should be supported to make use of their research training in clinical practice
- * There needs to be a link to a specific career pathway to endorse the achievement of of their training

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?

Please indicate your views using the grid below:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Recommendation 6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please use this box to help us better understand your response

(the box will expand to fit your text):

Whilst we warmly welcome this proposal:

* Is there an economic dimension to this number? Otherwise this is a very small number, nursing and health visiting need more opportunities at this level.

* How does this equate to medically funded SCAFs?

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:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Recommendation 7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please use this box to help us better understand your response

(the box will expand to fit your text):

- * Strongly agree as will facilitate the nurse or health visitor to maintain her research capacity and extend her research career
- * How will this affect patients? There may be a lose of continuity of care if it is not properly managed.
- * On the other hand it could bring highly specialised knowledge to patients in some clinical contexts
- * Has sufficient thought been given to how this would be implemented in practice? There are real challenges in joint posts as outlined above.

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:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Recommendation 8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please use this box to help us better understand your response

(the box will expand to fit your text):

- * The challenge here is capacity
- * Mentoring is in place in some nursing academic departments where it already works well
- * Where should this mentoring come from, we suggest someone in the subject area but separate to the line management of the individual and not directly linked to the project so that their input is objective

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:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Recommendation 9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please use this box to help us better understand your response

(the box will expand to fit your text):

- * NHS Careers Advisors will need good training to be able to promote research pathways
- * In principle this would be huge step forward but pathways must be in place, as must incentives to support these or participate in them
- * At present this seems like 'blue sky' thinking in relation to the current status of nurse careers but we are encouraged that it is included.

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:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Recommendation 10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please use this box to help us better understand your response

(the box will expand to fit your text):

* This is very important as at present there isn't just one source

* This would be useful not just for labour market but also for other researchers

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:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Recommendation 11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Please use this box to help us better understand your response

(the box will expand to fit your text):

- * Must have the infrastructure for it to be effective first so may need to spend time developing this and monitoring actions
- * Don't support rapid implementation, require these critical changes to be carefully implemented with all the necessary support structures and political backing in place
- * How sustainable is the funding as this is an important issue for those whose research careers are being developed? Those coming through with great expectations of a research career could find they are in a closed alley!

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?**

The box will expand to fit your text:

Certainly could apply to allied health professions

Q.15 Any further comments?

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

- * Primary care must be fairly represented unlike in the present situation
- * There is a need for a clear definition of clinical research. Does it really apply to hospital based research?
- * Practice nursing is, alongside health visiting and district nursing, very under researched