THE PATH FROM CONSULTANT TO RESEARCH

Julie Fox
Guys and St Thomas’ NHS Trust
Plan

- Why consider doing research as a consultant
- How to get started
- Funding opportunities
- Career pathways to becoming a Consultant who does research

no rule book to becoming a researcher:
- My thoughts
- Very interested to hear other peoples thoughts & experiences
Why do research as a consultant

- Up to date
- All jobs can become mundane, this brings something different
  - If goes well allows to develop niche (e.g. ADR, AW, FP)
  - New projects all the time
- Contributing to research can be rewarding
  - You can only treat the patient in front of you but research may influence the treatment of thousands E.g. START, PROUD
- Highs .......(and lows)
  - So only do it if you enjoy it
Why NOT do research as a Consultant

- Hard work: Overtime, not covered in PAs
  - Limited support in smaller hospitals
  - Complicated approval processes
  - Funding difficult to get: many applications fail

- Established-
  - No short cuts
  - Recruitment: Encouraging colleagues to REFER
Is it difficult to do?

- NO

- Just takes time:
  - get funding 6 months
  - Study set up/regulatory 6 months
  - Recruitment 6 months
  - Study duration 1 year
  - Analysis and write up 6 months

- Seeing projects through to the end difficult and must be done:
  - Junior staff less time to help & leave department before projects finished

1 year study takes 3 years in total
Getting started.. Learning the ropes

1. Talk to someone who has done it

2. Sub-investigator for studies in own department

3. PIC site for study elsewhere
   - Starts reputation for recruiting
   - Consider asking CRN for research nurse support

4. Get linked with an academic unit
Ready to be a Principal investigator (PI)

PI for multicentre studies:
- Not leading whole study but are site lead
- Commercial studies good for this
- Join a research network
  - HYPnet: adolescents
  - UK CHIC: outcomes cohort
  - London HIV perinatal research group
  - EUROSIDA

Chief investigator (CI): lead applicant on a grant

BUT

Now you have to get funding on your own…….
Funding

• Funding hugely important
  • Some trust R&Ds reluctant to process any studies not funded
    ❖ Exception observational studies e.g. pregnancy register

• Getting funding is
  • Highly competitive
  • Applications time consuming
Types of funding: non commercial

1. Charities
   a. Wellcome Trust: Fellowships, programme grants
   b. Medical organizations: BHIVA, BASSH, BIS, Dunhill medical trust
   c. Association of Medical Research Charities (AMRC) >100 UK charities listed on AMRC website

2. Medical Research Council (MRC): fellowships, project grants

3. Internal schemes: Biomedical Research Centres (BRC), University/Trust grants


5. European Union (EU): Horizon 2020, EDCTP

6. International: National Institutes of Health, USA (NIH), Bill and Melinda Gates
Types of funding: commercial

Industry and private companies

a. IST
   - In line with company interests eg MVC PreP, CogUK
   - Host owns data

b. Non IST
   - Company owns data
   - Patients get access to new treatments
   - Short recruitment window periods
   - Only cost effective if >5 patients
   - Lots of company oversight - good if inexperienced
Funding for staff: CRN support

- Each trust different
- Allocation based on previous year activity
- Recruitment based (not ongoing follow up)
  - Intervention 4 : 1 observational

- Can be a useful approach to get started-
  - Contingency funding
  - E.g Melanie
Career paths to become a consultant who does research
Academic or non academic

**Academic consultant**
- High pressure:
- Outcomes (grants/publications)
- 5 yearly appraisal
- Teaching +++
- Not part of clinical team
- ?job security

**Non academic consultant**
- Less pressure
- Less academic support
- Less help with grant applications
- More clinical commitments
1. Recognised academic pathway:

- ACF (NIHR)
- Clinical Lecturer (NIHR) • 50% research, 50% finish SpR training
- Senior Lecturer
- Reader/ Professor

Wellcome fellow (JT) MRC fellow NIHR fellow (LH) Stand alone funding (G)

2. Cobbled together NHS consultant +/- Research PA

- PAs funded by either directorate, CRN, own research

Intermediate fellowship
- MRC, Wellcome
- 5 years to become independent researcher
Other roles to contribute to research

- R&D Lead
  - Own speciality
  - Trust (SK)

- CRN Lead
  - “In it to win it”
  - S London research network

- Ethics committees (GT, AJ)
  - Learn about wider governance issues in research
  - Learn about research in all aspects of medicine
  - Appreciate that ethics committees are a nice bunch of people!
Conclusion

• Research is interesting and can be fun and rewarding
• Meet brilliant people
• Interesting questions

• HAVE a Go!
Margaret Johnson RCP 2016

• “From involvement in academic medicine to participation in quality improvement, research brings dynamism to any medical career.”
Acknowledgments

- Graham Taylor
- Sarah Fidler
- Jamie Vera
- Annemeik de Ruiter
- Stephen Kegg

- participants