Clinical Academic (Research) Careers Scheme for Nurses, Midwives and Allied Health Professionals in NHS Lothian

Annual Report 2012
Summary

This is a summary of the second Annual Report of the Clinical Academic (Research) Careers Scheme (CARC) for Nurses, Midwives and Allied Health Professionals (NMAHP) in NHS Lothian. The Scheme has been ‘live’ since January 2011 when the first of three demonstration sites (a collaboration between the Critical Care Directorate of NHS Lothian and the University of Edinburgh) became operational. A successful bid by the Substance Misuse Directorate, Edinburgh Napier University, and the University of Edinburgh established the second demonstration site in December 2011. Four nurses have been employed in 0.5 wte posts via internal secondment arrangements across the two sites - an Advanced Practitioner (post-doctoral level) at Agenda for Change Band 7 and a Senior Practitioner (PhD study) at Agenda for Change Band 6 in each case.

The small number of doctorally-qualified NMAHPs within NHS Lothian has been a challenge and resulted in the funding partners negotiating an amendment to the Scheme. This amendment sanctions the establishment of the third demonstration site on the basis of two Senior Practitioner posts (i.e. two part-time PhDs). This amendment was signed by all parties in December 2011. A subsequent call for applications resulted in conditional funding being allocated in July 2012 to a bid from the Weight Management Service/Queen Margaret University/NHS24/Edinburgh Napier University entitled ‘Development and Evaluation of a Self Management Platform for Weight Management’. This demonstration site will be funded once a satisfactory re-submission comprising minor clarifications is received (expected early September 2012).

The Management Group has monitored the progress of demonstration sites by establishing representation of the Group within the management structure of each site and instituting a system of 6-monthly Progress Reports. The progress of both the Critical Care and Substance Misuse sites has been good. The post-holders in the Critical Care site have developed their research networks both nationally and internationally, presented at conferences, achieved journal publications, and been awarded modest grants to further develop their research programme. The Substance Misuse site is younger but the post-holders have made progress in reviewing the literature in order to refine their research questions and methodologies with a view to preparing grant applications and establishing the basis of the PhD. Postholders in both sites are preparing further grant applications and journal submissions. The four post-holders have accessed learning opportunities appropriate to their development to further their research skills and knowledge. All post-holders have engaged in activities to ensure that their work is embedded within the service setting.

The Management Group has distributed ‘Criteria for Extension of Secondment Agreements Beyond 3 years’ for the two CARC Advanced Practitioners. Available funding allows for the extension of each of the two Advanced Practitioners’ secondment agreements by at least a year if justified.

The Management Group has proposed an evaluation framework with a view to commencement of an independent, phased evaluation of the Scheme no later than January 2013. This will be considered by the Steering Group in September 2012.

The Scheme remains financially robust. All scheduled income has been received and expenditure is lower than anticipated by this stage of the Scheme, even after taking account of the staggered start of demonstration sites.

The objectives over the next year are to fund a final demonstration site, recruit to the posts in this site, support and monitor the progress of all sites including plans for patient and public involvement, review progress of the Advanced Practitioner in the Critical Care site vis-à-vis secondment extension, commission independent researchers to carry out Phase 1 of the Evaluation, and produce a discussion paper regarding the sustainability of clinical academic research careers for NMAHPs in Lothian.
1. Scope of Report
This is the second annual report of the Clinical Academic (Research) Careers Scheme (CARC) for Nurses, Midwives and Allied Health Professionals (NMAHP) in NHS Lothian. It describes the progress and management of the Scheme since the last Steering Group meeting in June 2011 to present. Milestones for the Scheme during this period are summarised in Appendix A.

2. Achievements and Challenges
2.1. Performance against 2011/12 Objectives
The past year’s objectives have been partly achieved (see Table). The most significant challenge has been a more protracted selection process to fund a third demonstration site than was anticipated a year ago (see Section 2.4.1.) Nonetheless it looks highly likely that all of these objectives will be achieved by the end of 2012.

<table>
<thead>
<tr>
<th>2011/12 Objective</th>
<th>Progress</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>To recruit to the two posts in the Substance Misuse/Edinburgh Napier University demonstration site by August 2011 with a view to post-holders commencing by the start of the Autumn 2011 university semester.</td>
<td>Achieved beyond planned timeframe</td>
<td>Achieved December 2011</td>
</tr>
<tr>
<td>To issue a further call for applications leading to the funding of the third and final demonstration site comprising a collaboration between NHS Lothian and Queen Margaret University. The aim is to achieve this by October 2011 with a view to recruitment to the available posts by the beginning of the Winter 2012 university semester.</td>
<td>Partly achieved</td>
<td>Call for applications issued October 2011. Collaborative bid from Weight Management/QMU/NHS24/Edinburgh Napier University conditionally funded July 2012.</td>
</tr>
<tr>
<td>To continue to provide support to all CARC post-holders and demonstration sites.</td>
<td>Achieved</td>
<td>Via support group for post-holders and Management Group representation within sites.</td>
</tr>
<tr>
<td>To monitor the progress of demonstration sites.</td>
<td>Achieved</td>
<td>Via 6-monthly Progress Reports and Management Group representation within sites.</td>
</tr>
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</table>

2.2. Management and Administrative Hosting of the Scheme
The Management Group comprising representatives of NHS Lothian and the three partner universities has continued to meet every two months to manage the Scheme. The Steering Group overseeing the general direction of the Scheme meets on an annual basis. Due to changes in personal circumstances there has been a small number of revisions to the membership of the Management and Steering Groups. The members of these groups are listed in Appendices B and C.
The Scheme funds continue to be managed by NHS Lothian’s Research and Development Office Accountant. See Section 3 below for a brief summary of the Scheme accounts.

Administrative support for the Scheme continues to be provided by the Health Services Research Unit (www.hsrue.ac.uk).

2.3. Scheme Amendment
We reported in last year’s Annual Report that the Review Panel for Cycle 3 of the application procedure for demonstration site funding had been unable to fund the only application which was led by Queen Margaret University because the application team had been unable to identify a potential candidate for the Advanced Practitioner (Clinical Research) post.

Subsequent discussions between the funding partners led to the regrettable conclusion that it was unlikely that sufficient numbers of candidates eligible to apply for this level of post (i.e. post-doctoral) would be forthcoming from within the AHP workforce of NHS Lothian, regardless of the content of any future collaborative bid involving Queen Margaret University. Hence, the funding partners negotiated an amendment to the Scheme Partnership Agreement sanctioning establishment of the third demonstration site on the basis of two Senior Practitioners (Clinical Research), both of whom would register for PhD study. This amendment was signed by all parties by December 2011.

2.4. Demonstration Sites and Appointments

2.4.1. Application Process: Cycle 4
Subsequent to the funders’ agreement to amend the Scheme a fourth cycle of application for demonstration site funding, limited to bids involving Queen Margaret University as the lead academic institution, was commenced in December 2011. One application was received from a collaboration of NHS Lothian Weight Management Service/Queen Margaret University/NHS24/Edinburgh Napier University titled ‘Development and Evaluation of a Self Management Platform for Weight Management’. The Review Panel (see Appendix D) did not fund the application but the collaborative team was invited to re-submit after amending their application in accord with a number of recommendations. In July 2012 this re-submitted bid was conditionally funded pending a small number of minor modifications. A final re-submission is anticipated early in September 2012.

2.4.2. Progress of Funded Sites

2.4.2.1. Critical Care/University of Edinburgh
This demonstration site is a collaboration between NHS Lothian Critical Care Directorate and the University of Edinburgh. The application was titled ‘Improving recovery from critical care - a clinical and academic collaboration’. The site is managed jointly by Jane McDonald, Clinical Nurse Manager for Critical Care and Dr. Sheila Rodgers, Senior Lecturer in Nursing, University of Edinburgh. 6-monthly Progress Reports have been received from this site and approved by the Management Group in July 2011 and Jan 2012.

i. Activity
Corrienne McCulloch, Senior Practitioner is largely focused on her PhD studies which relate to the use of patient diaries in critical care units. She successfully completed her first year review at University of Edinburgh.

Corrienne has undertaken a range of taught research modules at University of Edinburgh and has attended a research summer school. She has also participated in workshops lead by Nicola White, the University of Edinburgh Nursing Studies’ Leverhulme Writer in Residence. Examples of this work can be found at http://www.nursingwriter.blogspot.co.uk/ . She is also an active member of the
Corrienne co-presented a paper on the Lothian CARC Scheme ‘Reflections on the first year’ at the RCN International Research Conference in London (April 2012).

Pam Ramsay, Advanced Practitioner is near completion of recruitment to the study for which she is Principal Investigator: the RELINQUISH Study (a longitudinal qualitative study of informal support and perceived healthcare needs among ICU survivors following hospital discharge).

Pam has been involved in the submission of seven grant applications since July 2011. These collaborative bids have all been related to recovery from critical illness and were submitted to a range of funding bodies such as CSO, Sunnybrook Health Sciences, Foundation Nursing Studies, ESRC, General Nursing Council, British Association of Critical Care Nurses and Edinburgh and Lothian Health Foundation. Two of the seven were successful (see ‘Outputs and Achievements’).

Pam has presented her work at a number of conferences and meetings including:
- Scottish Intensive Care Society Meeting (Sept 2011)
- PhD Findings at Australia and New Zealand Intensive Care Society Meeting, Brisbane (October 2011) and at International ICU Recovery Workshop on the Gold Coast, Australia (October 2011).
- Presentations of RELINQUISH study in various seminars at University of Edinburgh and NHS Lothian (June 2012 onwards) and at UK Critical Care Research Forum, Belfast (June 2012)

Pam is supervising an MSc by Research student at University of Edinburgh.

Pam is a co-applicant on two knowledge exchange projects. One project is funded by the University of Edinburgh, Knowledge Exchange Office called ‘Nursing at the Extremes’ - an exploration of the emotions involved and the support required for nurses involved in intensive physical and mental health settings. The project runs from September 2012-January 2013. The second project is funded by the Economic and Social Research Council and is a half day interactive event at the University of Edinburgh on November 9th 2012 titled ‘Critical Care and the Body in Crisis’. This brings professionals, ICU survivors and carers together in the spirit of public engagement:


Both Pam Ramsay and Corrienne McCulloch are active participants in the Scottish Interdisciplinary Research and Liaison (SCIRRL) Group (a group of early career critical care researchers across Scotland - led by Universities of Edinburgh and Dundee). They have international collaborations with Brisbane, Australia and Toronto, Canada.

ii. Outputs and Achievements
Since the last annual report Pam Ramsay has had the following articles accepted/published:


• Ramsay P (due for publication) ICU Survivors and ward based-recovery and rehabilitation: lost in transition? *Journal of Clinical Nursing* (data drawn from PhD and invited as part of a special edition)

Pam Ramsay was awarded £4,300 to attend and present at international conferences in Brisbane, Australia in 2011. These were from the General Nursing Council (£3,280) and the British Association of Critical Care Nurses (£1,500). She was also awarded an Edinburgh Health Foundation Grant (£31,707) for the development and evaluation of a website to support patient/relative recovery from critical illness.

iii. Future research plans
Corrienne McCulloch is now in the process of identifying her study site. This will be outside NHS Lothian in order to investigate the impact of patient diaries in a locality where they are already established, a decision informed by literature reviews of her research question and potential methodologies. She intends to adopt a focused ethnographic approach.

Pam Ramsay will focus on the development of supported self-management for survivors of critical illness, building on the work from all the studies to date (PhD, RECOVER, RELINQUISH) and the development of the website. She is currently considering applying for an ESRC Leadership Development Award in 2013 to progress this work as well as continuing to apply for individual grants in line with the critical care research programme.

2.4.2.2. Substance Misuse/Edinburgh Napier University
This demonstration site is a collaboration between NHS Lothian Substance Misuse Directorate, Edinburgh Napier University and the University of Edinburgh. The successful application was titled ‘Understanding Recovery: Partnerships, Pathways, Relationships and Outcomes’. The site is managed jointly by Eunice Reed, Consultant Clinical Psychologist, Substance Misuse Directorate and Professor Lawrie Elliott, School of Nursing, Midwifery and Social Care, Edinburgh Napier University. The Scheme Management Group is awaiting receipt of a revised (more detail required) 6-monthly Progress Report from this site which was initially presented in July 2012.

In December 2011 Dr. Anne Whittaker and Jayne Reed commenced their part-time appointments as CARC Advanced Practitioner (Clinical Research) and Senior Practitioner (Clinical Research) respectively within this demonstration site.

Anne Whittaker is a very experienced mental health nurse who has worked in a variety of posts within substance misuse services in Lothian for over 20 years. She is also currently employed as a Primary Care Facilitator (Drugs/Alcohol/Blood Borne Viruses) within the Directorate. Anne was a successful candidate on the NMAHP Doctoral Training Scheme and as a result obtained her PhD from the University of Dundee in 2008 for a thesis titled ‘Constructing fatherhood within the context of problem drug use’.

Jayne Reed is a mental health nurse with a specialist interest and experience in substance misuse services for young people. She is currently employed as a
Specialist Community Mental Health Nurse within NHS Lothian’s Adolescent Substance Use Service (ASUS) alongside her CARC post. Jayne previously studied for, and was awarded, an MSc degree in Adolescent Addiction at Keele University.

The site conducts a monthly steering group meeting to oversee progress of the work. Andy Peters acts as representative of the Scheme Management Group on this group.

Both post-holders are established in suitable accommodation at Edinburgh Napier University which has facilitated access to university facilities and integration with the other doctoral and post-doctoral fellows within the School.

During the first six months or so the main activities carried out by the post-holders have been:

- Literature reviews in the areas of substance misuse and recovery, mental health and recovery, models of recovery and recovery-orientated systems of care, effective interventions to promote recovery, effective interventions involving family members, couples therapy and 5 step method, and recovery-orientated interventions for young people who misuse substances. This work is helping the collaboration to work towards refining the research questions at the heart of their programme of work. One of the ambitions is for Anne Whittaker to lead on a research grant application for a randomised controlled trial of a recovery-informed family-focused intervention.

- Jayne Reed has accessed a variety of formal and informal learning opportunities at Edinburgh Napier University to develop skills and knowledge in areas such as literature search and review skills, EndNote training, qualitative methods involving young people, ethics of research involving young people, as well as various research topics included in Edinburgh Napier’s seminar programme. Jayne will be formally accepted as a PhD student at Edinburgh Napier after her RD4 review in September. Anne Whittaker has formally taken on the role of joint supervisor for Jayne’s PhD studies in combination with Professor Elliott and Professor Sarah Cunningham-Burley at the University of Edinburgh.

- Both post-holders are engaging well with NHS colleagues in terms of sharing information on their research work and preparing the ground for collaborative research studies within the Directorate. They have contributed presentations at Directorate research seminars and are set to provide an update on their work at a SMD Core Management Team meeting in the near future.

2.5. Patient and Public Involvement

In accord with the decision taken at last year’s Steering Group meeting the Management Group requested plans to engage and involve patients and the public from each of the two established demonstration sites. These plans (see Appendix E) were approved by the Management Group in spring 2012. The Management Group intends to monitor the progress of these plans over the forthcoming years.

2.6. KSF Outlines

KSF outlines developed by the Management Group for both grades of post in the Scheme were ratified by NHS Lothian in December 2011.
2.7. Criteria for the Extension of Secondment Agreements
The Management Group has developed and distributed guidance on the ‘Criteria for Extension of Secondment Agreements Beyond 3 years’ for the two CARC Advanced Practitioners (Appendix F). The guidance aims to achieve a balance between encouraging the post-doctoral fellows to seek other sources of funding to support their future research career beyond their CARC secondments and allowing some scope for extension of these secondments if progress during their CARC secondment has been sufficiently productive and alternative funding has not been found. The criteria upon which applications for extension will be judged are clearly specified in the guidance, as are the time frame, process and procedures to be applied. The new NHS Research Scotland (NRS) Career Fellowships selection criteria and procedures have been a useful template for developing this guidance.

Over the 5 year lifetime of the Scheme there is budgetary flexibility amounting to approximately £75,000. This represents the difference between the funding available (£790,000) and the allocated budget of £714,406 (inclusive of £30,000 for the independent evaluation plus £10,000 general costs). This flexibility allows for the extension of the secondment agreements of both Advanced Practitioners by a further year (approximate cost £50,000-£55,000) should this be justified.

2.8. Equality and Diversity
A Rapid Impact Assessment was facilitated and approved in April 2012 by NHS Lothian’s Head of Equality and Diversity. Potential positive impacts of the Scheme in terms of equality and diversity were identified; for instance, patients who might be expected to have experienced health inequalities are likely to be involved in various ways in research studies which will inform the re-design of services. The recommendations of the assessment were:

- Scheme Management Group to acknowledge that the career pathway opportunities on offer (at Bands 6 and 7) may be less accessible to some groups of staff (i.e. part-time, female, ethnic minority staff) due to the inherent make-up of the workforce.

- Ensure that demonstration sites provide clear, meaningful and practical proposals regarding their plans for public/patient involvement in the development of their research questions/programme, and that these are acted on.

These recommendations are being addressed by the Management Group.

2.10. Evaluation Framework
A decision regarding commencement of the independent evaluation of the Scheme was deferred at last year’s Steering Group meeting because only one demonstration site was established at the time. An evaluation framework has been proposed by the Management Group for consideration at this year’s Steering Group meeting with a view to ratification and commencement of the evaluation within the next few months (Appendix G.)

2.11. Wider Impact of the Scheme
2.11.1. ‘Spin-off CARC Schemes’
Discussions have been ongoing for several months regarding the possibility of creating similar but not identical clinical academic research career opportunities for NMAHPs outwith the CARC Scheme itself. The exact configuration of posts, research training levels, management relationships, and funding arrangements have yet to be finalised but discussions in the areas of Reproductive Health and Dementia are progressing between various partners.
2.11.2. National recognition
Juliet MacArthur (representing the Management Group) and Corrienne McCulloch
(Senior Practitioner in the Critical Care site) presented ‘Reflections on the First
Year’ of the Lothian NMAHP CARC Model at the RCN International Research
Conference in London (April 2012). A by-product of this presentation was that
Juliet was invited to participate in a UK Working Group considering the various
models for the development of clinical academic research careers for nurses and
midwives.

3. Accounts
As of the end of the financial year 2011/12 all scheduled income (£340,000 as per the
Partnership Agreement) had been credited by the partners to the CARC Scheme account.
Expenditure for the financial year was £63,286 against an allocated budget of £164,410.
This 62% underspend was largely a function of the late start (Dec 2011) of the second
demonstration site and the absence of a third demonstration site during the period.
However, it is noteworthy that the Critical Care site was fully functioning throughout
this period and underspent by 23% against the allocated budget, principally because the
post-holders’ salaries were at lower increments within AfC bands than those used to
calculate budgetary allocation. A full financial statement has been prepared to
accompany this report.

4. Objectives for 2012-2013
The main objectives for the CARC Scheme Management Group over the next year are:

- To fund a third demonstration site by September 2012.
- To establish the third site via recruitment to the two Senior Practitioner posts
  available (hopefully in a Weight Management/QMU/NHS24/Edinburgh Napier
  University demonstration site) with a view to post-holders commencing their
  appointment no later than January 2013.
- To monitor the progress of demonstration sites through representation of the
  Management Group within demonstration site management arrangements and
  through 6-monthly Progress Reports (annual reports after first year of operation).
- To ensure that the Patient and Public Involvement Plans received from the first
  two sites are acted upon, and to request a similar plan from the third
  demonstration site.
- To conduct a Performance Review of Pam Ramsay’s work in her CARC post and to
  advise her and the Critical Care demonstration site by December 2012 whether
  satisfactory progress is being made towards meeting the criteria to allow for
  extension of her secondment agreement in December 2013.
- To commission independent researchers to commence Phase 1 Evaluation of the
  Scheme by January 2013 following a competitive tendering process.
- To produce a discussion paper regarding the sustainability of clinical academic
  research careers for NMAHPs in Lothian.
5. Appendices

Appendix A. CARC Scheme Milestones: June 2011-September 2012

            First meeting of the Scheme Steering Group. Decision to defer start of the independent evaluation of the Scheme until Steering Group meeting 2012.

July 2011  First 6-monthly Progress Report received from Critical Care demo site.

Dec 2011  Ratification of KSF outlines for CARC posts

Dec 2011  All funders sign the amendment to the Scheme Partnership Agreement allowing third demonstration site comprising two Senior Practitioners (Clinical Research) studying for PhD over a five year period.

Dec 2011  Demonstration Site Applications Cycle 4. One application received from a collaboration of NHS Lothian/Queen Margaret University/NHS24/Edinburgh Napier University titled ‘Development and Evaluation of a Self Management Platform for Weight Management’. The application was not funded but the collaborative team was invited to re-submit with recommended changes.

Dec 2011  Appointment of Dr. Anne Whittaker and Jayne Reed to CARC Advanced Practitioner and Senior Practitioner posts by the Substance Misuse/Edinburgh Napier University demonstration site.

Jan 2012  Second 6-monthly Progress Report received from Critical Care demo site.

Feb 2012  Plans detailing how demonstration sites intend to engage with patients and the public in their research programmes received from both Critical Care and Substance Misuse sites and approved by Management Group.

April 2012  Rapid Impact Assessment of the Scheme completed and approved by NHS Lothian Head of Equality and Diversity.

May 2012  Management Group develops and distributes guidance on ‘Criteria for Extension of Secondments Beyond Three Years’ for CARC Advanced Practitioners.

Jul 2012  First 6-monthly Progress Report received from Substance Misuse demo site. Re-submission requested providing greater detail in certain areas.

Jul 2012  Re-submitted bid to become third demonstration site from NHS Lothian/Queen Margaret University/NHS24/Edinburgh Napier University conditionally funded pending minor clarifications. Further re-submission expected beginning of September 2012.

            Second meeting of the Scheme Steering Group.
Appendix B. Membership of Management Group

NHS Lothian
   Andy Peters, AHP Research & Development Facilitator (Chair)
   Juliet MacArthur, Lead Practitioner Research (Vice-Chair)
   Dr. Janet Hanley, Research Manager (Capacity and Capability)

School of Nursing, Midwifery & Social Care, Edinburgh Napier University
   Professor Thanos Karatzias

School of Health Sciences, Queen Margaret University Edinburgh
   Dr. Elaine Bannerman, Senior Lecturer

School of Health in Social Science, University of Edinburgh
   Professor Pam Smith, Professor of Nurse Education

Appendix C. Membership of Steering Group

NHS Lothian
   Professor David Newby, Director Research and Development Office (Chair)
   Melanie Hornett, Executive Nurse Director
   Lynne Douglas, AHP Director
   Dr. Michael Brown, Consultant Nurse, Learning Disabilities
   Geoff Hunter, Senior Personnel Manager
   Glen Merritt, Management Accountant Assistant, R&D Office

Edinburgh Napier University
   Dr Jayne Donaldson, Head of School of Nursing, Midwifery and Social Care

University of Edinburgh
   Professor Charlotte Clarke, Head of School of Health in Social Science

Queen Margaret University Edinburgh
   Dr. Fiona Coutts, Dean of School of Health Sciences

NHS Education for Scotland
   Dr. Lesley Whyte, Programme Director, Nursing and Midwifery

Appendix D. Membership of Applications Review Panel (Cycle 4)

NHS Lothian
   Dr. Christine Phillips, Deputy Director R & D Office (Chair)
   Juliet MacArthur, Lead Practitioner Research

NHS Education for Scotland
   Dr. Lesley Whyte, Programme Director, Nursing and Midwifery

Edinburgh Napier University
   Professor Catriona Kennedy, Director of Research, School of Nursing, Midwifery and Social Care

University of Edinburgh
   Professor Charlotte Clarke, Head of School of Health in Social Science
   Dr. Chris Weir, Associate Director (Statistics), MRC Hub for Trials Methodology

Queen Margaret University
   Professor Tom Mercer

NMAHP Research Unit, University of Stirling
   Dr. Helen Cheyne, Reader
Appendix E. Approved demonstration site plans for patient and public involvement

Critical Care
Pam Ramsay’s research, which is predominantly qualitative, invites patient/user perspectives by its very nature. Pam has facilitated the involvement of a former patient on the RELINQUISH Steering Committee and is working with her and ICUSTeps (an ICU patient support group) to set up a patient support group(s) in Edinburgh/Scotland. Pam has also made an application to the Edinburgh and Lothian Health Foundation (which has gone to the next round of reviews) which actively incorporates former patients and relatives as part of an "expert" multidisciplinary group to (i) improve practice/develop patient-centred "quality indicators" and (ii) inform a patient and relative-focused website (attached). Two other grant applications are currently under review by the ESRC and CSO, both of which invite patient perspectives and will incorporate a former patient on the Steering Committee. We have also done some work with the James Lind Alliance (pre-CARC), which the site hopes to take forward. There are also plans to ask a former patient to join the CARC Management Group (for critical care) - probably by approaching one of Pam Ramsay’s research participants to ask if they’d like to be involved.

Substance Misuse
The Substance Misuse Directorate (SMD) is committed to developing and supporting the empowerment of service users to play an active role in the design, planning and delivery of NHS Lothian Substance Misuse services.

The Directorate has a Service User Involvement Strategy (June 2011 – June 2014) which outlines the aims, strategic objectives, principles and methods of service user involvement, as well as an action plan for realising the key objectives over a 3 year period. This work is currently overseen by the SMD Service User Involvement Steering Group, which is chaired by James Shanley. The group meets once every 2 months and includes staff representatives as well as service user representatives and reports to the SMD Core Senior Management Team.

Currently the Directorate actively supports a number of service user groups, involving current, former and potential users of the service as well as relatives and carers. Staff within the Directorate have experience of involving service users in a range of audit, evaluation and research activities, and in collaboration with Lothian’s Alcohol and Drug Partnerships, the Directorate is involved in planning and assisting in service user involvement initiatives throughout Lothian. The Directorate has established links with organisations, such as Scottish Drugs Forum, who provide training and support for service users so that they are equipped to take part in strategic working groups, consultation events, training, and peer research.

Although the work of the SMD CARC Scheme is in its early stages of development, our plans for engaging service users in our work include the following:

• Discuss the requirement for service user involvement in the CARC scheme with the SMD Service User Involvement Steering Group, and seek their support, where appropriate, to involve service users in research design, planning and delivery activities. Action by July 2012.
• Via the SMD Service User Involvement Steering Group, consult with service users regarding the key research questions to be addressed. Action by December 2012.
• Consider service user representation on the SMD CARC Steering Group, once a programme of research has been identified. Action by December 2012.
• Involve service users in the design of research projects and research grant proposals, where appropriate, once a research plan has been agreed. Action by January 2013.
• Involve service users in research project advisory groups, where appropriate, when research grants have been awarded. Anticipated by June 2013.
• Where appropriate, consult or involve a range of service user groups, including carers and family members of patients (e.g. Voices of Carers Across Lothian), to assist in research activity. For example, by assisting with recruitment, study design and dissemination of findings. Anticipated in year 2 and year 3 of the scheme.
• Invite service users or service user groups to attend organised events e.g. seminars, where research findings are presented and discussed with clinical teams, and involve them in presentations where appropriate. Anticipated year 3 onwards.
Appendix F. Criteria for the Extension of Secondment Agreements

Clinical Academic (Research) Careers Scheme for Nurses, Midwives and Allied Health Professionals in NHS Lothian

Advanced Practitioner (Clinical Research) Posts
Criteria for Extension of Secondments Beyond Three Years

Scope
1. This document specifies the process, timescales and criteria by which decisions about the extension of Advanced Practitioner (Clinical Research) secondment agreements within the NHS Lothian NMAHP Clinical Academic Research Careers (CARC) Scheme will be made.

Background
2. The CARC Scheme post-doctoral Advanced Practitioner positions were funded for 3 years (with the possibility of extension) to provide a platform for successful fellows to become independent lead researchers. The post-holders have been employed via 3 years secondment agreements from their usual post to their CARC Scheme posts.

The very recent introduction of the NHS Research Scotland (NRS) Career Research Fellowship scheme has transformed the landscape for NHS-based researchers in providing a missing link between the immediate post-doctoral training phase supported by CARC and other schemes, and higher level research lead posts. NRS Fellowships are embedded in the clinical service which is in line with the CARC approach. At the end of an NRS Fellowship the fellow should be bringing substantial funding into NHS Lothian through the investigator support and recruitment channels and be in a position to negotiate continued support for research time through the job planning process/Lothian NMAHP Research Framework 2011-2015.

The NRS Fellowships scheme is an important addition to the other fellowship opportunities from different sources which post-holders might wish to consider as a means of progression from their CARC Scheme posts. Further, where post-holders are applying for research grant funding during their 3 year CARC secondment they should consider inclusion of costings for their own time as researchers in these submissions as another possible means of supporting their research careers in the short to medium term.

Process and Timescales
3. Secondment Month 24: The CARC Scheme Management Group will conduct a Performance Review of the Advanced Practitioner’s work to date by consideration of the Demonstration Site Progress Reports and discussion with Demonstration Site Leads. This review will focus on performance in relation to the criteria specified in 9. below. Post-holders will be informed of the findings of the Performance Review and advised on whether they are making satisfactory progress towards meeting the criteria to allow extension of their secondment agreement.

4. Secondment Months 30-33: By this stage successful CARC Advanced Practitioners should be in a position to consider making a competitive application for other fellowship awards, for example an NRS Fellowship and, where eligible, are strongly encouraged to do so.

5. Where CARC Advanced Practitioners are ineligible or choose not to apply for other fellowships such as the NRS scheme, yet seek an extension to their CARC secondment agreement, they will be required to complete a written application for extension to the Scheme Management Group. The application form will be based very closely on the NRS
Fellowship template. The application, review and decision-making processes will be very similar to the NRS Fellowship processes with the exception of no interview stage. Applicants should contact the Chair of the CARC Scheme Management Group for advice on the procedure for applying for a secondment extension.

6. Secondment Month 33: The CARC Scheme Management Group will advise the Advanced Practitioner and their Demonstration Site Leads of their decision regarding secondment extension.

Extension Criteria

7. Post-holders who are successful in acquiring funding to sustain their clinical research career beyond their 3 year CARC secondment in the form of, for example, an alternative fellowship or as part of a successful research grant submission may if necessary be provided with bridging or top-up funding in the form of an extension of their CARC secondment agreement for a few months (up to a maximum of 1 year) until their alternative funding commences and/or as a supplement to this alternative funding.

8. Post-holders who are shortlisted for interview for an NRS Fellowship but are ultimately unsuccessful may be offered funding in the form of a one year CARC secondment extension to allow them to re-apply for an NRS Fellowship or apply for alternative funding during the subsequent year.

9. To make a competitive application for a CARC Scheme secondment extension post-holders will need to reach a standard similar to being shortlisted for interview for one of the NRS Fellowships. On the rating scale used for review of NRS Fellowship applications this equates to an overall rating of at least 3 out of 5.

In particular, applicants for CARC secondment extension will need to demonstrate evidence of:

- At least one research grant application made during their CARC Scheme secondment period (NB: a successful submission to an eligible\(^1\) funder during this period will be assessed especially favourably)
- At least one peer-reviewed journal publication secured during their CARC Scheme secondment period
- A realistic plan for research which will be of national/international importance
- The potential for translation of their research and integration of this into clinical service and practice.
- Clinical and academic support for their research and career development plans

10. Depending on individual circumstances and notwithstanding the guidance in 9. above CARC Scheme secondment extensions may be granted at the discretion of the CARC Scheme Management Group.

Extension limits

11. Post-holders may be granted extensions to their CARC Scheme secondment agreement up to a maximum of 1 additional year in total (if based on identical working hours to those stated in the original secondment agreement).

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Appendix G. Proposed Evaluation Framework

This paper describes the proposed framework for the independent evaluation of the Clinical Academic (Research) Careers (CARC) Scheme for Nurses, Midwives and Allied Health Professionals (NMAHPs) in NHS Lothian.

1.0 Progress of the Scheme
As of September 2012 the full compliment of three demonstration sites are highly likely to have been awarded funding through the Scheme. The successful collaborations are:

A. Critical Care/University of Edinburgh
B. Substance Misuse/Edinburgh Napier University/University of Edinburgh
C. Weight Management/Queen Margaret University/NHS24/Edinburgh Napier University (conditionally funded as of 4.9.12)

The selection process for demonstration sites has proved more protracted than anticipated, resulting in staggered starts for the three sites. Sites A and B have been able to appoint two NMAHPs on a 0.5 wte basis - one each at Advanced Practitioner (post-doctoral fellow) and Senior Practitioner (doctoral fellow) levels. Site C has yet to commence the selection process but intends to appoint two NMAHPs on the same part-time basis but both at Senior Practitioner (doctoral fellow) level (latest anticipated time of commencement of secondments Jan 2013). The Table illustrates the timelines for the three sites in terms of the start and end points of the secondment agreements for the associated posts.

Table. Timelines for the three funded CARC sites and proposed evaluation phases

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<td>Substance Misuse</td>
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2.0 Importance of the Evaluation
Total funding amounting to £790,000 over the lifetime of the Scheme has been committed by NHS Lothian Research & Development Office, NHS Education for Scotland, University of Edinburgh, Edinburgh Napier University, and Queen Margaret University. The Scheme has attracted national attention and is regarded as an innovative pilot affording opportunities for learning which can inform the development of NMAHP clinical academic research career.

² Conditionally funded
initiatives elsewhere. This level of joint investment and the national profile are the principal reasons why it is imperative that the Scheme is evaluated robustly and comprehensively.

3.0 Focus of the Evaluation

The evaluation will reflect the primary aims of the Scheme as articulated in the original CARC Scheme proposal:

i. To build on the gains already achieved by establishing an NHS-embedded focus for the further development of NMAHP clinical research capacity and capability in NHS Lothian.

ii. To improve the quantity and quality of service-relevant NMAHP research outputs in NHS Lothian.

iii. To articulate a set of ideas which can contribute to the emerging discussions in NHS Scotland as a whole regarding the development of an NMAHP clinical academic (research) career framework which addresses the issue of succession planning.

Specifically the evaluation will assess progress and achievement in the following domains:

3.01 Research career development of the post-holders since taking up their CARC posts:
   a. Research-related knowledge and skills, including research leadership, developed both formally and informally
   b. Specific learning attainments e.g. postgraduate degrees, training certificates
   c. Progress in relation to post-holders’ baseline hopes and expectations of the CARC Scheme regarding their educational and developmental needs
   d. Research networking and collaborative activities.

3.02 Research study process and outputs e.g. systematic literature reviews, patients recruited to studies, studies completed, new study protocols written, applications for research grants and fellowships, presentations at conferences, journal publications.

3.03 Service impact of research activities and outputs e.g. re-configuration of services, changes in service provision, improvements in clinical and patient-reported outcomes, influence on the salience of research activity and evidence for service culture and practice, improvement in services as experienced by service users and their relatives.

3.04 Progress made against the specific aims articulated in each of the three successful demonstration site applications for funding.

3.05 Sustainability of the Scheme beyond the current funding period. Is there the justification, scope, and desire to roll out the Scheme to other clinical areas? Are revisions to the current configuration of the Scheme recommended for future initiatives? Are different solutions preferred for the future support of NMAHP clinical academic research career pathways?

3.06 Visibility and influence of the Scheme outwith NHS Lothian.

3.07 Scheme Management processes e.g. leadership, partnership working, governance, documentation, employee relations aspects, financial management, patient and public involvement.

3.08 Unforeseen benefits, side-effects and ‘spin-offs’ of the Scheme.

3 http://www.hsru.ed.ac.uk/LinkClick.aspx?fileticket=OkwJESlulzE%3d&tabid=78

Clinical Academic (Research) Careers Scheme for NMAHPs in NHS Lothian: Annual Report September 2012
Authors: NHS Lothian CARC Scheme Management Group
4.0 Evaluation Methods
The evaluation will comprise methods which adequately assess both the process and outcome features of the Scheme. Both the experiences/opinions of a broad range of stakeholders¹ and information on concrete outputs such as postgraduate research degrees awarded, and submissions for research grants and peer-reviewed journal publication will be accessed and evaluated.

It is anticipated that the evaluation will require a mixed methods approach, utilising both quantitative and qualitative methods. The latter may involve a variety of methods such as individual face-to-face interviews, telephone interviews, and interrogation of relevant documentation such as demonstration site Progress Reports, and annual progress reviews of the PhD students. Where possible the anonymity of those giving opinions will be preserved.

5.0 Timeframe of the Evaluation
It is proposed that evaluation will commence as soon as practicable after endorsement of the evaluation framework by the Scheme Steering Group on 6 September 2012.

The evaluation will be longitudinal and phased. It will comprise three discrete phases of largely repeated measures commencing in Q1 2013, Q4 2015, and Q4 2017 respectively (see Table 1).

6.0 Commissioning and Management of the Evaluation
The evaluation phases will be commissioned by three separate tendering processes in the months prior to each phase. The commissions will be advertised nationally and eligible contractors will be independent of, and have no formal affiliations with, the five funders of the Scheme.

The value of each evaluation phase contract will be capped at a maximum of £10,000. Hence the total cost of the evaluation of the Scheme will not exceed £30,000.

Applications will be assessed by the Scheme Management Group and a representative of NHS Education for Scotland. Shortlisted applicants will be asked to attend an interview with a panel of representatives of these two bodies.

Contracts for the evaluative research between the Scheme and the independent contractors will be established with the assistance of the expertise available within NHS Lothian’s Research & Development Office and Procurement Office.

The Scheme Management Group will facilitate the process of access to information for the successful contractors such as relevant documentation and the contact details of stakeholders.

7.0 Evaluation Outputs
The successful contractors will be required to provide a verbal progress report to the Scheme Management Group on at least a monthly basis. Each evaluation phase will result in a full written report and summary report. Phases 1 and 2 will effectively generate Interim Evaluation Reports and Phase 3 the Final Evaluation Report.

The Scheme Management and Steering Groups will consider the findings of the Evaluation Reports for the future management of the Scheme. Where possible, if the evaluation identifies areas for improvement, the Management Group will instigate changes to the functional structure and processes of the Scheme.

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¹ E.g. CARC post-holders, demonstration site collaborative team partners, NHS staff such as Charge Nurses and Consultant Physicians in the relevant services, CARC Management and Steering Group members (includes funders), accounts managers.