



## Integrated Academic Training

UCL School of Life and Medical Sciences, Academic Careers Office

# IATGUIDE

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## Foreword

“UCL is one of the world’s leading academic institutions and provides an unrivalled environment for outstanding clinical academic training. As part of our commitment to supporting the brightest and best trainees, we have established an Academic Careers Office whose job it is to provide help, support and advice to those embarking upon or already pursuing a clinical academic career.

This handbook provides an introduction to our Integrated Academic Training (IAT) Scheme and practical advice for those thinking of applying or who have just secured one of our prestigious NIHR Academic Clinical Fellow or Clinical Lecturer posts.”

**Professor Geraint Rees FRCP FMedSci**

Director, UCL SLMS Academic Careers Office

## Introduction

Welcome to the Integrated Academic Training (IAT) Guide from the UCL School of Life and Medical Sciences Academic Careers Office. Training in clinical academic medicine provides unique opportunities to develop academic skills, undertake original research and develop an academic career. All of this can be achieved whilst maintaining and excelling at clinical training and gaining full accreditation as a clinician.



# IAT

## This guide is aimed at

### **a) Those considering applying for an academic training post:**

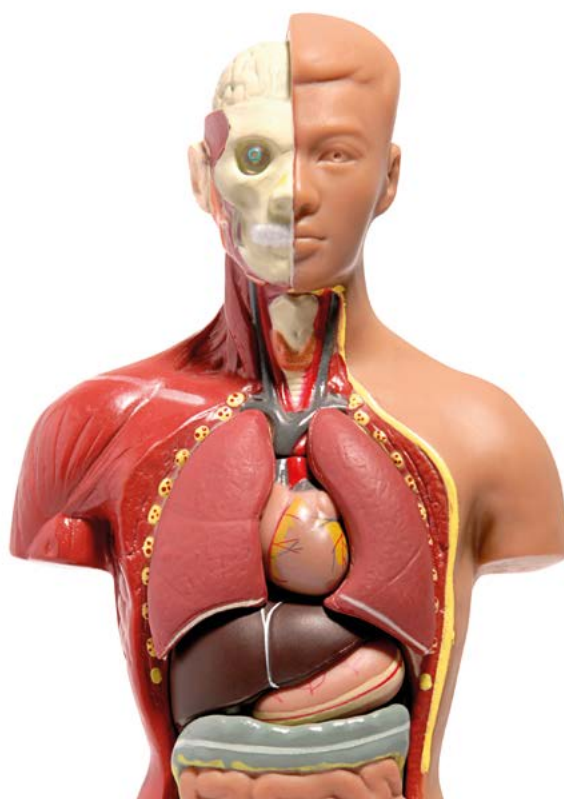
Are you an enthusiastic, able clinician-in-the-making? Would you like to contribute to an understanding of why, as well as how, we practice as we do? Would you like to learn academic skills, complementing those provided by your clinical training? Would you like to develop your career at the cutting edge of clinical research or laboratory science? Then a career in academic medicine may be for you. This guide provides information on UCL's Integrated Academic Training programme; from what is involved in academic training posts, to how to apply for one and how to prepare for interviews.

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The three years I have spent at UCL during the ACF have been superb.

**Dr Rob Aldridge**

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### **b) Trainees on academic training pathways:**

Academic training pathways provide exciting opportunities which complement those provided by standard clinical training. This guide will help you navigate through the administrative, research and clinical issues relating to academic training. It will help you organise and get the most out of your academic placements, enable you to make sure you are paid on time, and, perhaps most importantly, identify whom to contact when you need further guidance. This guide is primarily aimed at those early in their academic training as, from our experience; this is when the most guidance is needed.

### **c) Trainers (College Tutors, Educational and Academic Supervisors):**

Supervising a clinical academic trainee is a new experience for some trainers and supervisors. This guide provides relevant information for you, as a trainer, to help academic trainees benefit fully from their experience and ensure that both their clinical and academic training runs smoothly.

We hope that you find this guide useful and informative. If you have any comments about things that should be included in future editions, or anything that needs to be reviewed or corrected, please let the Academic Careers Office know!

# IAT Guide

## **Section 1**



## Integrated Academic Training (IAT) at UCL

### a. How was the NIHR programme established?

In 2005, a sub-committee of the UK Clinical Research Collaboration (UKCRC) and the NHS Modernising Medical Careers (MMC) recommended initiatives to integrate the development of academic and clinical skills, starting at medical school, continuing throughout the career pathway of a trainee doctor, and intended to culminate in joint clinical-academic senior appointments. This led to the development of funding, from NIHR, to support around 250 pre-doctoral Academic Clinical Fellows (ACF) and a smaller number of postdoctoral Academic Clinical Lecturers (ACL) posts in England. Wales and Scotland developed their own, similar, schemes. The posts link together to form a training pathway with multiple entry (and exit) points, following on from academic Foundation posts.

Importantly, these new posts did not (and do not) form an exclusive pathway through which clinical academic trainees must train. Rather, they form a framework that may prove useful to some trainees in some specialties. Other more traditional approaches to combining full-time clinical training with research posts remain both possible and widely used. For example, while UCL has a large cohort of NIHR Academic Clinical Fellows and Clinical Lecturers, the majority of Clinical Research Training Fellows at UCL do not come from NIHR pathways. UCL supports all forms of clinical academic training, but this guide is predominantly focused on these NIHR ACF and CL posts.

### b. What is the NIHR programme?

The National Institute for Health Research has established an integrated academic and clinical training pathway for core and specialty trainees. This consists of dedicated academic training programmes in host academic institutions (an academic institution is a university such as UCL), in partnership with local NHS organisations and Trusts. At UCL, the NHS partners in our academic training are mainly the NHS Trusts that form part of UCL Partners ([www.uclpartners.com](http://www.uclpartners.com)). The academic training programmes offer, at each stage of training, a percentage of protected time within the post or rotation for academic training. For junior posts (Academic Clinical Fellowships, usually entering at ST1 to ST3), this is 25%, while for more senior posts (Academic Clinical Lectureships, usually entering at ST4 and upwards) this rises to 50%. The key difference from previous academic training schemes is that these are integrated with clinical posts, which facilitates academic and clinical training in parallel.

### c. When can I join?

The pathway allows entry at several levels. Figure 1 (illustrated overleaf) shows the current academic career pathway. Some trainees will have completed an Academic Foundation post prior to entry, while others will not. It does not matter if you have not done the specialty that you are applying for during your Foundation programme. Most trainees will apply to enter the programme as an Academic Clinical Fellow (ACF) at ST1, but others may enter at later stages of training (ST2-4) or after completing a PhD, as an Academic Clinical Lecturer (ACL). Some specialties recruit into the academic career pathway at specialty training (ST3 and above) while others recruit into core (ST1) and run through into a particular specialty.

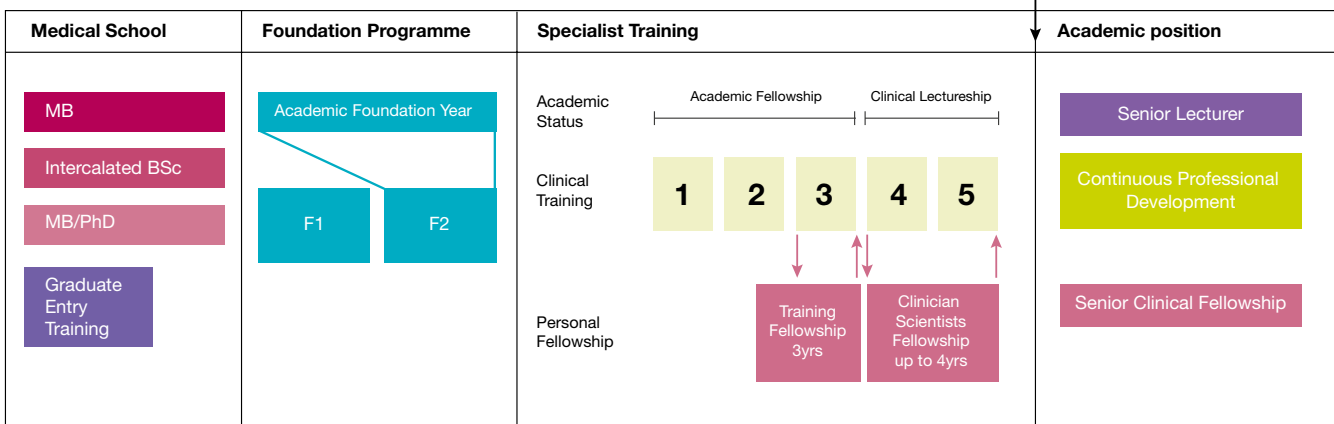
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“One of the major advantages of the NIHR scheme is the bench to bedside philosophy which I have been able to witness firsthand.”

Dr John Whittle

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## INTEGRATED ACADEMIC TRAINING PATH → CCT



**Figure 1 (above): Academic Career Pathways**

At UCL many ACFs recruit into core (CT1) specialties and ‘run through’ into particular ST3+ specialties. This ‘run through’ promise is unique to such ACF posts but is dependent on continued satisfactory academic progress. Other ACFs recruit into ST3 and above and ‘run through’ to CCT just like conventional clinical programmes.

In general, the level to which you apply depends on the programme which you wish to join and the level(s) at which they recruit. This will differ for different programmes in the same institution and be different for the same programme in different institutions. So you should be alert to the opportunities and research them in advance.

It is important to realise that although the programme is designed as an integrated academic training pathway, there is no necessity to have completed earlier stages in order to apply for later stages in the pathway. For example, there is no need to have completed an Academic Foundation programme in order to apply for an ACF post; and there is no need to have completed an ACF to apply for a CL post. Having held a previous post in the academic training pathway will not give you an advantage in applying for a subsequent post; it is the achievements that you are able to demonstrate on your CV and at interview, rather than the titles of the previous posts you held, that will determine your competitiveness for a position.

#### d. What can I expect to achieve?

The ultimate aim of the academic training pathway for medical graduates is to provide structured training opportunities for doctors with the potential to become leaders in clinical or basic science research, education and training, and innovation, knowledge transfer and enterprise. At each stage of this training you can expect to achieve various research skills and competencies in addition to clinical competencies. The key goal of all ACF and CL programmes is for post-holders to secure peer-reviewed external research funding in order that they can rotate out-of-programme for a subsequent period of full-time doctoral or postdoctoral scientific training.

#### e. What is a clinical academic training pathway?

An ACF is the ideal way to gain early pre-doctoral research experience and to maximise your chances of long-term academic success, without compromising clinical training. All ACFs will have the opportunity to gain experience of conducting short research projects or ‘tasters’ of life in an academic research laboratory, and can

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“My time here is sadly soon to be ending, and I’ll be moving back to clinical duties. But this experience really has inspired me to follow a clinical academic career.”

Dr Thomas Day

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“Most importantly my ACF has allowed me to undertake a dedicated 6-month period in the laboratory...learning basic science techniques and gathering preliminary data.”

Dr James Fullerton

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undertake training in research methodology and academic skills. The ACF post allows you to work within an academic department at UCL to develop a research project suitable for a PhD. This project should lead to a proposal for submission to an external funding body for a research training fellowship. The ultimate aim of each three-year ACF programme (or four-year for GP trainees) is to secure this type of funding to undertake a PhD. It is important to realise that ACF posts are preparatory for such an application, and the research component of each post at UCL is designed to maximise your chances of success through identifying a supervisor and project, providing help in constructing a successful application and subsequently transitioning to a full-time PhD.

ACFs are flexible posts, and although the majority of candidates applying for such posts will be pre-doctoral, a minority will have a PhD already either in a related discipline (for example, through an MB-PhD programme) or in an unrelated specialist area. Such trainees are also eligible to apply for an Academic Clinical Lectureship under current NIHR regulations. A postdoctoral trainee in an ACF post will follow the same course as a predoctoral trainee, but instead of developing a research project to secure a research training fellowship they will be expected to secure an appropriate postdoctoral fellowship.

A CL post is held by a post-doctoral trainee (i.e. with a completed PhD which has been awarded), usually already established within a particular academic and/or clinical field. Clinical Lecturer posts can be held for a maximum of four years and allow development of independent research. They usually lead to an application for a Clinician Scientist post or a University-funded Senior Lectureship. A CL trainee has a greater percentage of time allocated to research (50%) and it is generally possible to conduct research in parallel with clinical training (unlike an ACF, where the research periods are preparatory and intended for collection of preliminary data). However, the posts do not provide funding for consumables or laboratory costs and so bespoke arrangements must be made for each Clinical Lecturer depending on their particular situation.

A Clinician Scientist post is a primarily research-orientated post held for a maximum of five years, either before or after CCT has been achieved. Clinical commitments pre-CCT are negotiable; after CCT two clinical sessions per week are permitted. Those who are successful at this level will usually ultimately seek joint academic and clinical substantive senior posts or Senior Fellowships from the major funding agencies.

### **f. What if I decide academic training is not for me?**

Although the majority of trainees entering an academic programme will choose to pursue academic clinical training, some trainees may decide after completing an ACF that a career in academic medicine is not for them. This is fine; it is possible to leave the academic programme at any time and return to full time clinical training. Of course, once you leave the academic programme then you have to relinquish any of the benefits of the programme, such as bursaries for conference travel, the academic training programme and any 'run through' promise you might have. Before making any decision you will need to consult carefully with your educational and academic supervisors. The majority of academic trainees who do complete the academic training programme will seek joint academic and clinical Consultant level posts, but completion of academic training does not preclude any trainee from returning to a full time clinical career if they choose to do so without penalty.

### **g. Can I train flexibly?**

The answer is most certainly yes! Fitting both academic and clinical training into a flexible training schedule can be challenging. It will often require some ingenuity and flexibility on the part of both the trainee and the School, and patience in arranging the post. However, UCL has several academic trainees who train on a less than full time (LTFT) basis.

Funding for part-time Academic Clinical Fellowships can be extended up to a maximum of 5 years (up to a maximum of 6 years for GP trainees), with a stipulation that the academic component remains at 25% of full time equivalent.

Part-time Clinical Lectureships can be extended up to a maximum of 6 years, with a stipulation that the academic component must not fall below 33% of full time equivalent. The trainee would have input into how he/she would arrange the balance between academic and clinical training.

### **h. How successful are the schemes at UCL?**

Health Education England (HEE) receives a large number of applications each year for ACF and CL schemes, and there are invariably many more applications for each post than for the corresponding clinical schemes. You can maximise your chances by highlighting your academic skills and experience on your structured application form, ensuring that your application and interview focuses on why you want a post at UCL (for example, because of a particular supervisor or research area). Your application will be judged relative to the opportunities and experience you have had to date. Our ACFs and CLs are highly motivated and have a high success rate at obtaining externally funded fellowships. Since 2005, over 90% of our trainees have continued in an academic pathway after leaving the NIHR schemes, a success rate which is considerably greater than those for NIHR ACF schemes nationally.

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“I really enjoy the combination of basic science research, teaching, and clinical work that make up my current role and I now have a much clearer idea of how I would like to develop my career in the future.”

Dr Catherine James

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# IAT Guide

## **Section 2**



## Applying for an Academic Clinical Fellowship (ACF) or an Academic Clinical Lectureship (CL)

### a. Where can I undertake an ACF/CL?

ACFs/CLs are available at many institutions in London, but this guide is specifically aimed at trainee doctors interested in UCL ([www.ucl.ac.uk](http://www.ucl.ac.uk)). UCL typically has the largest annual intake of the different academic institutions in London, and covers a broad range of clinical specialties. However, if the specialty you are seeking is not being recruited at UCL, then you should of course look at the other academic institutions in London (Imperial College London, Kings College London, Queen Mary University of London, London School of Hygiene & Tropical Medicine and Institute of Cancer Research all recruit NIHR ACFs and CL posts).

ACF and CL posts are joint clinical-academic posts associated with UCL. We therefore expect that trainees applying for UCL ACF and CL posts intend to conduct their academic research at UCL. If you want to conduct your research at another academic institution in the UK, you should apply to their schemes instead.

### b. In which specialties could I hold an ACF/CL?

Specifications of the ACF/CL posts are determined by each academic institution, in consultation with NIHR and with the relevant HEE. Some institutions identify posts within particular specialties which they wish to fill each year; others may offer posts in a choice of specialties or generic academic posts, allowing the trainee to choose their field of interest. It is therefore a good idea to identify several areas that you might be interested in and to approach the relevant supervisors well ahead of the application deadline to discuss potential projects.

### c. How many posts are there?

The NIHR fund approximately 250 ACFs and 100 CLs per year. The number of posts awarded to UCL will vary from year to year, but we are usually awarded around approx. 28 ACFs and 11 CL posts.

### d. What are the eligibility criteria?

ACFs are available for entry at different levels, depending on specialty. You therefore need to fit the eligibility criteria for the appropriate entry level in the specialty which you are interested in – details will be on the HEE website [www.hee.nhs.uk/our-work/clinical-academic-careers](http://www.hee.nhs.uk/our-work/clinical-academic-careers) and the specialty School websites. In general the person specifications are very similar to the corresponding specialty and entry level. You will then need to have a look at the person specification from the NIHR. Please note that although some applicants will have completed academic Foundation posts or Foundation posts with experience in a particular specialty, this is not a requirement.

If you are thinking about a clinical academic career, it is helpful to try to get involved with research opportunities as early as possible, especially if you do not complete a dedicated academic Foundation post. Becoming involved with any research projects ongoing in your hospital or local university is a great way to get a taste of what a career in research might entail and to demonstrate your academic interest.



“It was a great help being based in a supportive academic environment, with active research going on around me, whilst writing my application.”

Dr Kate Mandeville



CLs generally recruit into higher specialist training at ST3 and above, and again this varies according to specialty. The person specifications are very similar to the corresponding specialty and entry level, and are available on the HEE or NIHR websites. Although some applicants will have completed Academic Clinical Fellow posts, this is not a requirement.

### e. How do I apply?

ACF and CL recruitment is managed by HEE and posts are advertised online via Oriel (<https://www.oriel.nhs.uk/Web/Account/LandingPage>). For ACFs, the applications open in October, for posts starting the following September, and remain open for about a month.

The application form can be accessed via Oriel. There will be guidance to help you complete this. You can apply for both clinical academic posts and clinical posts, but the ACF recruitment round runs ahead of clinical recruitment for most specialties. Applicants successful at ACF interviews, who do not hold an NTN/ Deanery Reference Number (DRN), will need to be assessed/interviewed subsequently through the relevant national process for the specialty. Applicants will be ranked on their performance at the ACF interview not the national clinical interview.

If successful at the ACF interview, the applicant will be offered either a non-conditional offer or a conditional offer. Conditional offers will be given to successful applicants that do not hold an NTN/ DRN and must reach the threshold of appointability at the national standard clinical interviews/assessments. Bear in mind that you will need to have at least one referee who can attest to your academic potential, in addition to clinical referees. Occasionally, some posts that remain vacant may be re-advertised at different points during the year.

For CLs, the recruitment process begins somewhat later with applications usually opening in March for the following September; but posts often continue to be advertised at different points during the year. Again, the HEE website will have up-to-date information on the specific timing.

### f. Will I be competitive for a post?

We get many questions about how competitive the ACF posts are and what aspects of a CV are important to maximise chances of success when applying. There is no simple answer to this, because different specialties have different requirements and eligibility criteria, and different numbers of applicants. However what is common to all specialties is that we are looking for academic potential and you need to be able to demonstrate this in your application through the way in which you can show how you have used the opportunities that have been available to you. It is acknowledged that at earlier career stages, there have often been fewer opportunities available to take part in academic projects and get experience of academic medicine. This will be taken account of in shortlisting (and interview) but what is crucial is that you can demonstrate how your achievements made the most of the opportunities available and went beyond what was expected. This expectation is reflected in the scoring system used nationally for shortlisting. While achievements like research papers, intercalated degrees and so on score more points this is all relative to career stage and opportunities that have been available. Shortlisting is a competitive process but you should not be deterred from applying if you are both interested and can demonstrate your potential. If in doubt, discuss with a close academic colleague, your local training programme director, or colleagues who have been successful in obtaining an ACF or CL post.



“The initial juggling process between clinical duties and research requirements has now become an easy balance, with definite growth and progress.”

Dr Liza Osagie



## g. Shortlisting and interviews

Short listing occurs soon after the application deadline and interviews may be within two weeks. There is usually only one interview day for each ACF/CL programme and there is unfortunately no flexibility around this. There may also be a fairly short interval between informing candidates they have been short-listed and the interview date. It is worth noting that some recent interviews for ACFs have been held just before Christmas that may affect holiday plans. If in doubt, consult as early as possible with HEE staff or the UCL Academic Careers Office.

### How to prepare for ACF interview

Each university has particular distinctive research strengths and so applying for an ACF is not like applying for a purely clinical post. You should visit the UCL website ([www.ucl.ac.uk](http://www.ucl.ac.uk)) and investigate the potential supervisors and departments associated with your clinical specialty and research interest; and you should visit the Academic Careers Office website ([www.ucl.ac.uk/slms/aco](http://www.ucl.ac.uk/slms/aco)) and make use of the information and advice presented there. At your interview you may be expected to show some knowledge of the research strengths associated with your specialty at UCL.

You should also consider approaching potential supervisors, through the programme leads (see appendix 2) well in advance of the application deadline. This is to find out more about their areas of interest and discuss potential research projects you could complete during your ACF time. Whilst it is important that you discuss potential projects with potential supervisors before the interview, please bear in mind that the details of your project are not set in stone at this stage. It is important that when you finally decide on a project and supervisor that both of these are right for you.

The interview process is similar to that for clinical posts – with the addition of an academic ‘station’ or academic set of questions. The interview will test your presentation and communication skills and explore why you are applying to the particular specialty; relevant clinical skills may also be tested and you may be asked about your clinical experience to date. For the academic station or questions, you should be prepared to talk about your previous research experience, reasons for applying for an ACF and your long-term academic potential. It is critical that you can talk about potential research projects or research strengths at UCL.

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“I would whole-heartedly recommend an ACF to anyone who is determined to pursue a clinical academic career path, and who is prepared to work hard to make sure they achieve that goal.”

Dr Ailbhe Burke

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## How to prepare for CL interview

Your approach for a CL interview should be very similar to that for an ACF interview, and the format will be similar. However, as CL applicants will generally have significantly more research experience, you should expect to be asked in greater detail about your research experience. Similarly you should be able to give a more detailed account of your career intentions and how they match with the research opportunities available at UCL.

## h. Useful contacts during the application process

For questions related to academic training, check the HEE website:

[www.lasepgmdsupport.hee.nhs.uk/support/home](http://www.lasepgmdsupport.hee.nhs.uk/support/home) or the UCL Academic Careers Office: [www.ucl.ac.uk/slms/aco](http://www.ucl.ac.uk/slms/aco)

You may also find it useful to check the relevant Royal College training website; most have sections related to academic training. It is also useful to have a look on the NIHR TCC integrated academic training website [www.nihr.ac.uk/funding-and-support/funding-for-training-and-career-development/training-programmes/integrated-academic-training-programme/](http://www.nihr.ac.uk/funding-and-support/funding-for-training-and-career-development/training-programmes/integrated-academic-training-programme/)

You may also wish to contact previous or current ACFs at the institution(s) where you wish to work. Again this can be done through the programme leads or the Academic Careers Office. (Please see Appendix 2: UCL Academic Programme Training Leads, for a list of specialties and academic leads).

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“The biggest benefit of committing to a clinical academic training pathway is that there is a very structured career path.”

Dr Alex Shortt

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# IAT Guide

## **Section 3**



## Once you are appointed

Congratulations! Remember that you are, first and foremost, a clinical trainee. Although your academic research time will be protected and specific to you, the rest of your rotation will be identical to that of your clinical peers. You will need to ensure that you obtain the relevant competencies at each level of training. Once you are appointed, make sure that you register with the relevant Royal College if necessary, check whether you need to complete an e-portfolio in order to do your workplace based assessments and keep an online portfolio. You should also register with Synapse ([www.synapse.nhs.uk](http://www.synapse.nhs.uk)). These are useful communication tools used by clinical academic trainees. You will have a clinical supervisor who will also be able to help you complete the necessary requirements.

### a. The Academic Careers Office (ACO)

UCL has established an Academic Careers Office within the School of Life and Medical Sciences to assist with many aspects of postgraduate academic training, including clinical academic training. While your academic training supervisor will be your first point of contact, the ACO will be very helpful in many aspects of your ACF including claiming your NIHR conference bursary (see appendix 4) and in arranging any bespoke generic skills training and/or chosen Masters course (see appendix 5). The Academic Careers Office is based in Maple House on Tottenham Court Road, but is easily contacted by phone or email. The ACO also has a comprehensive website ([www.ucl.ac.uk/slms/aco](http://www.ucl.ac.uk/slms/aco)) with practical information and advice that may prove helpful. In addition to organising some of the bureaucracy associated with the NIHR schemes, the ACO organises events and activities associated with clinical academic training at UCL in order to better manage our talent.

### b. Your academic training lead

Each NIHR ACF/CL specialty scheme has a dedicated academic training lead (see Appendix 2: UCL Academic Programme Training Leads), who you should introduce yourself to, if you have not already met when you joined the scheme. Your academic training lead will generally be your first point of contact for any organisational issues; for mentoring; and to help organise your research blocks. Your academic training lead is not necessarily your academic supervisor for your research project. Depending on your particular research interest you may have identified an academic supervisor different to your training lead, and your training lead will help you with that process. In addition to the academic training leads for each specialty, there is a UCL IAT Programme Lead, Dr Nikhil Sharma ([nikhil.sharma@ucl.ac.uk](mailto:nikhil.sharma@ucl.ac.uk)) and UCL IAT Programme Manager, Sarah Mackilligin ([s.mackilligin@ucl.ac.uk](mailto:s.mackilligin@ucl.ac.uk)) who you can contact for further help and advice.

### c. How to organise your research block

The importance of finding a department and supervisor which are right for you cannot be emphasised enough, sometimes even before the interview stage. Start by discussing ideas with group leaders in the department where you would like to work. Your academic supervisor does not necessarily need to be a clinician as there is full support throughout the programme for both supervisors and trainees.

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“With the support of my three supervisors I managed to produce enough pilot data during my academic block to write an application for a Research Training Fellowship.”

Dr Catherine James

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“My supervisor has been extremely supportive and provided excellent mentorship throughout this period.”

Dr Rob Aldridge

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For advice on how to choose a supervisor, see the Academic Careers Office website. In general, you should be seeking an individual whom you get on with, who has an international reputation in their research area and a successful track record (relative to their seniority) of supervising PhD students to successful completion. You should talk to people in their research group to get an idea of their supervisory style and take time in reaching a decision. There may be many potential supervisors at UCL and you should not necessarily settle on the first person you bump into. It is absolutely OK to approach potential supervisors through email, but you should do so in a professional manner with a clear statement of intent and an attached CV.

Generally the project you choose is not set in stone and you can change it at later stages, but you should discuss this with your academic supervisor. Most projects will evolve during the course of the programme, (often changing substantially before submission for external funding). It is likely that you will use some of your research block(s) to collect preliminary data to support an external funding application, and this should be planned carefully with your academic supervisor. It may also be useful to get in touch with other ACFs or PhD students already working at the unit you are going to be joining.

### ACF posts

Your ACF post allows you to undertake a total of nine months of research over a period of 3 years (or 4 years for GP trainees). To ensure adequate clinical service provision, the timing of your academic blocks throughout the 3/4 years will be discussed with your academic and clinical supervisors. Different specialties have made slightly different arrangements but all posts offer 25% protected time over the duration of the post. Your time allocation may be dictated by HEE due to availability of clinical posts and cross cover when you leave them. However, they make every attempt to be as flexible as possible to fit in with your academic program.

This nine month period will usually be taken in block periods (rather than, for example, a single day a week throughout). It can sometimes be taken as one block but is more often split up into shorter periods. There is no single preferred way of doing this and there are pros and cons to either approach. A continuous block allows you to immerse yourself in a project which should increase the likelihood of generating meaningful results, but you will then be faced with long periods during your ACF when you are fully committed to clinical duties with no time for research. This can make it difficult to keep up to date with the research topic or to continue processes such as sample collection. Separate blocks may allow you to devote a portion of time each year to research, but the short blocks may make it harder to become fully involved in a project and within your research department.

You should confirm your initial project plans with your academic programme lead as soon as possible after appointment. You should also discuss your plans with your allocated Clinical Tutor at your Trust. HEE is very helpful in sorting out clinical slots to accommodate academic commitments, but you must give sufficient notice for them to get someone to cover your clinical commitments (minimum of 6 months' notice), as clinical service must take precedence over individual preference. Begin discussions early! Clinical attachments within your ACF will be organised by HEE. They may not specifically include a post in your area of academic interest.





## CL Posts

Your CL post allows you to undertake a total of twenty-four months of research over a period of 4 years. This is usually organised in blocks of six months clinical alternating with six months of research time, but may vary by specialty. As with ACF posts, the availability of particular clinical posts is not guaranteed but your clinical and academic supervisors will make every effort to tailor your training to your particular needs.

You should confirm your initial project plans with your academic programme lead as soon as possible after appointment. You should also discuss your plans with your allocated Clinical Tutor at your Trust as soon as possible.

### d. Clinical competencies

During your protected academic time, you will not be required to complete any workplace based assessments related to clinical competencies such as DOPs, CEX etc. However, for any clinical time that occurs within that training year, you need to complete the appropriate number of assessments. For example, for an ACF if you are taking a 9 month research block (i.e. 75% of the year), you will need to complete 25% of the workplace based assessments for that year and a separate trainer's report for your clinical placement. You will need to complete an ARCP (Annual Review of Competence Progression) each year.

The ARCP should, for the clinical academic trainee, involve review of both clinical and academic progress and therefore be undertaken by clinical and academic staff together. Although progress on both clinical and academic fronts should be documented, and future training needs for both identified, a single outcome should be determined, with patient safety a dominant consideration.

HEE will send you details of this. You should read these carefully as the requirements will differ for ACF/CL trainees from clinical trainees.

It is also important to consider relevant Royal College examinations such as MRCP. In general, it is advisable to get these exams out of the way as soon as practicable before starting your research as studying for exams and starting up a research project at the same time will be challenging. Normally, an ACF will not be allowed to proceed into ST3 without completing MRCP in a medical specialty, and there are similar requirements in many other specialties. Plan ahead as much as possible and make sure you are aware of the requirements for your specialty.

CL postholders will generally already be established in specialty training, but it is important to consider any specialty-specific exit exams and discuss the timing of these (if relevant) with your clinical and academic supervisors. A CL post is generally only tenable, except in exceptional circumstances, up to CCT, and so you need to take this into account in planning your career progression.

If your ACF or CL is held at ST3 level or above, you will be assigned an NTN or NTN(A) and will retain this subsequently as you progress through training. Progression towards CCT in both ACF posts (if at ST3 and above) and CL posts is generally very similar to that for clinical posts, and as the assessment of progression can reflect clinical competences rather than 'time served' it is best to keep a close eye on your progression, discussing your CCT date (however distant) with your clinical training lead and at ARCP. The ACO is very happy to advise on any particular issues as these can be complex and specialty-specific. Again, enquire early rather than at the last minute after a difficulty with CCT date has been encountered!

“

“One of the benefits of being based in such a world-renowned centre is that I can attend the fantastic teaching programmes led by experts in their field, and through that my skills have developed rapidly.”

Dr Thomas Day

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### e. Educational supervision/portfolio

Just as for your clinical work, you need to have an academic supervisor for your academic work; this will normally be your project/research supervisor. They should discuss how you are going to obtain the research skills that you need to acquire during your ACF/CL as well as your research project. If you need help in deciding which supervisor or project you should choose, you should discuss this with your UCL academic programme lead. You should also visit and learn about ProjectMatch – [www.projectmatch.org/](http://www.projectmatch.org/)

As a clinical academic you need to register with ResearchFish (<https://www.researchfish.com>), which is a research outcomes and evaluation system for Research Funders, Researchers and Research organisations.

This is strongly recommended. Trainees have to take responsibility for keeping this up to date, since this not only helps in setting goals for development of important skills and experience but can also provide a useful format for demonstrating evidence of your achievement at your annual progress review.

Publishing is an important part of your educational portfolio. It demonstrates academic ability and commitment, and establishes credibility when you are applying for future grant and fellowship funding. Anything that distinguishes your CV is a bonus, including extra qualifications such as MSc or Diplomas. It is definitely worth talking to your supervisor straight after appointment about small projects, such as case reports or data collection/analysis for existing studies, in which you can participate alongside your main project. This will develop your skills, interest, experience and portfolio.

### f. Support schemes and mentoring

Academic medicine can be quite different from clinical medicine and adjusting to a different way of working may be challenging. All academics have highs and lows and getting used to this is part of academic training. Having good support networks can therefore be particularly important in your early academic training. This support can come from various sources and it's important to find which works best for you.

Your supervisor is likely to be the main source of support for academic work. In addition to your educational supervisor, it can sometimes be useful to have a mentor from a different research area/ department/ institution with whom you can consider more general or long-term issues regarding a career in academic medicine. Your educational supervisor should be able to recommend someone to fulfill this role. In addition, HEE runs a highly successful coaching programme called The PSU Coaching Service - more details at <http://www.lpmde.ac.uk/professional-development/coaching-service>

In addition, your department at UCL may have an ACF or junior clinical academic forum which you can join. If there is no existing group, it can be just as useful to meet with other ACFs in your host institution informally from time to time to share experiences.

The Academy of Medical Sciences (AMS) also runs a mentoring and career development programme for postdoctoral clinical academic trainees including clinical lecturers (CLs) and clinician scientists– more details at <https://acmedsci.ac.uk/grants-and-schemes/mentoring-and-other-schemes/mentoring-scheme>

## g. Administrative requirements

Once you have secured your ACF/CL post, you should be contacted by UCL in order to complete administrative formalities prior to your ACF/CL start date. If, for some reason, you are not contacted, we suggest that you contact the Academic Careers Office, as getting honorary contracts/employment contracts, identity badges, building access and library/ e-journal privileges are all essential from the very start of your ACF/CL post. You are likely to need these even during your clinical blocks.

At UCL you will be assigned to a particular Department, depending on your specialty area. Your Department is responsible for organising your contract and university access. If you contact the ACO we will be able to help link you with your departmental administrator to ensure you have everything in place before your start date. UCL now has an online induction training that you can find at [www.ucl.ac.uk/human-resources/working-ucl/induction](http://www.ucl.ac.uk/human-resources/working-ucl/induction)

You may also have to apply for honorary contracts at relevant hospitals if you are conducting clinical research – this may also take time so, again, apply early.

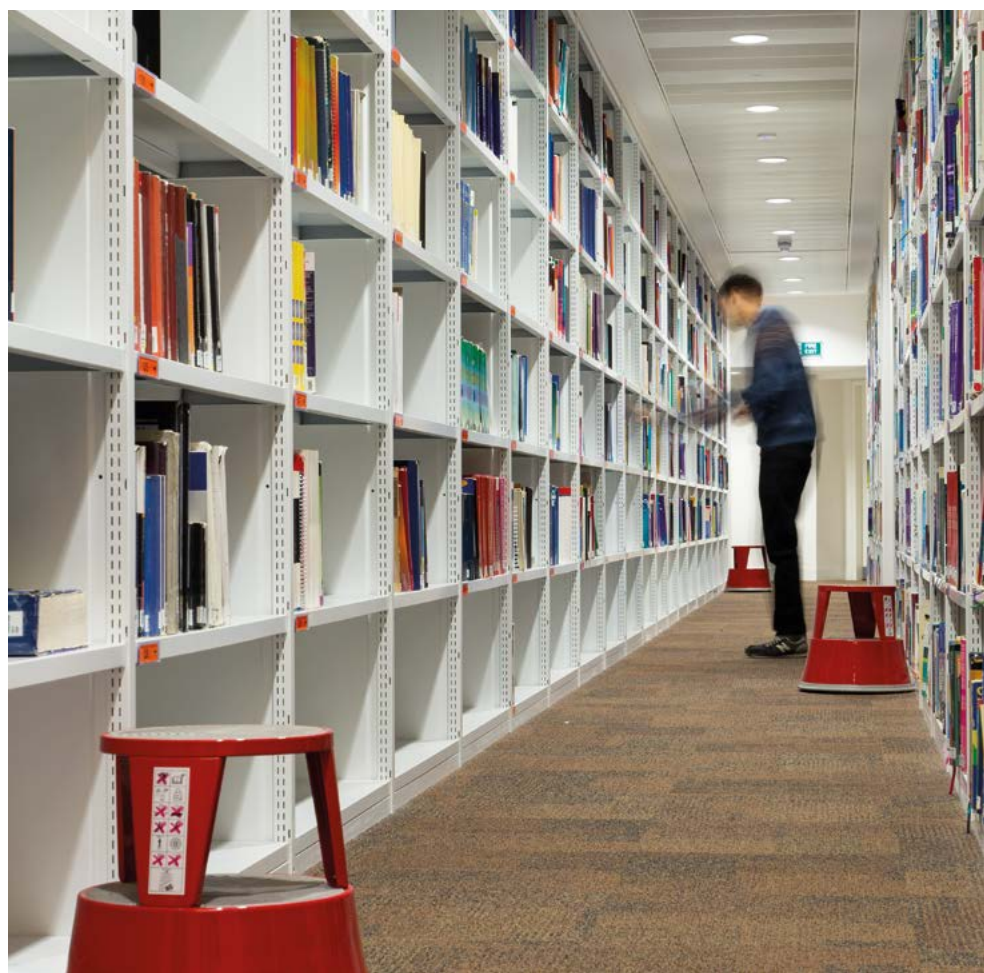
You may need to discuss with your supervisor which further induction courses, safety training and risk assessments need to be completed before you can start working in your host research facility. If you plan to split up your research time into shorter periods, it is worth arranging this ahead of time so you will not lose valuable time waiting for documentation or a place on a mandatory course. If your project requires patient or carer consent, the collection of patient data or the involvement of healthy human volunteers, you need to discuss ethics permission and Trust R&D governance issues well in advance of when you want to start. Gaining such ethical approval can often take months!

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“The bursary allows attendance and presentations at courses world wide; while the support given by both clinical and academic supervisors means you are privy to some of the best teaching and training in Europe.”

Dr Liza Osagie

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## h. Salary

### If you're an ACF:

The NIHR (through HEE) pays your NHS employer for your full basic (unbanded) salary costs (for both clinical and academic elements). The NIHR does not pay for banding, this has to be negotiated locally with the Trust.

Your salary during your research time will be paid by the Trust by which you were employed immediately before you started doing your research block. You will also hold an honorary contact with UCL. This can sometimes cause temporary problems: as many Trusts have either not employed an ACF before and/or may not be familiar with the system. Your ACF programme lead, supported where necessary by the Academic Careers Office, will be able to help if you encounter any difficulties. Remember to involve them as early as possible if you do have any problems.

All Trusts are contacted by HEE with details of the ACFs that they should be employing. Upon confirmation of these details, HEE will make extra payments to these Trusts to cover the ACF academic salary when you move into research blocks. The responsibility of your most recent employing Trust to pay your salary applies even if you were supposed to have changed Trust or will be returning to a different Trust. You must make sure that Payroll at your Trust is aware of this arrangement ahead of time to ensure that you are paid promptly. It is often worth reconfirming this with a phone call at the start of each new block. If they have further questions or queries it is best to put them in touch with HEE or Academic Careers Office for clarification.

### If you're a CL:

The NIHR (through HEE) pays the university employer for your full salary costs (for both clinical and academic elements), but does not pay for banding, this has to be negotiated locally with the Trust.

As a CL you will be employed by the University. Your salary during your clinical time will be paid by UCL who will also be paying your salary during your research block. You therefore will need an honorary contract with the Trust. This arrangement can sometimes cause temporary problems: many Trusts may not be familiar with the programme, so you should therefore ensure that the Trust is aware of your situation. Your CL programme lead, supported where necessary by the Academic Careers Office, will be able to help out with any problems you may encounter.

## i. Maternity and Paternity Leave

For ACFs, maternity leave is governed by the terms and conditions of service associated with your NHS contract as a trainee doctor. As with any employment, you have the right to return to the NIHR ACF post on the same terms and conditions after ordinary or supplemental maternity leave.

For CLs, maternity leave is governed by the terms and conditions of service associated with your employment contract. You have the right to return to the NIHR CL post on the same terms and conditions after ordinary or supplemental maternity leave. You should be aware, however, that as your substantive employer will now be a university your previous service in the NHS will not normally count towards your entitlement to maternity leave and pay. For UCL maternity and paternity policy, please visit; [www.ucl.ac.uk/hr/docs/maternity\\_links.php](http://www.ucl.ac.uk/hr/docs/maternity_links.php) or contact UCL HR at [hrpolicy@ucl.ac.uk](mailto:hrpolicy@ucl.ac.uk)

“

“The current system has been set up to support researchers and to ensure that they have the protected time and funding opportunities to focus on producing world-class research that can improve the health of patients and the wealth of the nation.”

Dr Alex Shortt

”





## j. Study leave and on-call

Your study leave budget is paid by the Trust you worked at when you left to start your research block (pro-rata). Application for this is as per individual Trust guidelines. Your pension/ NI contribution/ increments should be unaffected but please discuss this with the appropriate team at your employing Trust to confirm. See the link below for further information [www.bma.org.uk/advice/employment/leave/study-professional-and-special-leave](http://www.bma.org.uk/advice/employment/leave/study-professional-and-special-leave)

Academic blocks do not usually include regular on-call commitments; hence you will be paid only at your basic salary rate, unless you make an individual arrangement to do on calls at your previous (or other) Trust. It is worth remembering that a regular on call commitment may significantly compromise your research involvement (particularly if you are working evening or night shifts). We would suggest that you undertake a regular slot on a rota only with caution. Many ACFs/CLs have found that ad hoc locum shifts are more compatible with academic blocks.

## k. Research Funding

Your salary is paid as part of your ACF/CL. Consumables and other research costs are not provided by the NIHR or HEE and you will need to discuss with your supervisor to ensure they are aware of this. Grant funding should be discussed with your supervisor and it is highly recommended that you do apply for internal and external funds because they not only facilitate your studies but they also improve your CV which is important when applying for future academic posts.

Central funds of £1,000 per ACF/CL have been committed by the NIHR for travel to attend conferences, workshops and research visits. This bursary is administered by the UCL Academic Careers Office, for more details please see Appendix 4: NIHR Conference Bursary

## l. Postgraduate Courses

You may wish to discuss with your supervisor whether it would be beneficial for you to complete a postgraduate course during your ACF post. If you decide through agreement with your supervisor to undertake a Master's degree course or modules from a Masters or a PG Cert/Diploma you will need to notify the Academic Careers Office. The ACO will then organise your tuition fee payment (please see Appendix 5: NIHR MSc Training Bursary, for more details).

In addition, there are a number of short courses on offer at UCL (please see appendix 6 for more details) that provide generic skills training, training in teaching and supervision, and enterprise and entrepreneurship training as well as many other areas. You can find out about these from your academic supervisor. The Royal Society of Medicine also provides courses held in writing/presentation, research methods/critical appraisal. For further information see: [www.rsm.ac.uk](http://www.rsm.ac.uk)

## m. Meetings

Individual specialties hold research meetings and you should look out for these. Attending these meetings can be a useful way to network with other academic trainees in your specialty as well as meet supervisors and senior academics. The NIHR conference bursary will also allow you to attend international conferences in your research area and your academic supervisor will be able to provide advice and further details.

## NIHR trainees meeting

The National Institute for Health Research (NIHR) holds an annual two-day conference for academic trainees. This has proved invaluable for meeting other ACFs/CLs, discussing issues regarding training and acquiring useful advice on applications for grant funding. It is free and highly recommended. Meetings are usually in the autumn <https://www.nihr.ac.uk/news-and-events/events/>

## Academy of Medical Sciences

The Academy of Medical Sciences runs an annual one-day research meeting for clinical academic trainees, usually in central London. It is free and highly recommended for networking with other academics and senior clinicians and clinical academics. You can present your work as a poster (or talk if selected) although this is not compulsory; abstracts are published in the Lancet. The meeting is usually in the spring – [www.acmedsci.ac.uk/more/events/](http://www.acmedsci.ac.uk/more/events/)

## UCL ACO Events

The Academic Careers Office (ACO) also organises events. This includes a bi-annual UCL SLMS Clinical Academic Trainees Symposium; an annual ACF Welcome Session plus other social events throughout the year. Please contact the ACO for more information at [aco-enquiries@ucl.ac.uk](mailto:aco-enquiries@ucl.ac.uk)

## n. Applying for Out of Programme Research time (OOPR)

You do not need time out of programme to complete an ACF or ACL; the time allocated to academic training exists within the post itself, and therefore OOPR is not required. However, in order to undertake a research degree after the ACF, such as a PhD, which is a necessary stage in developing an academic career, time out of programme for research will be needed. Similar arrangements are needed for full-time postdoctoral research after a CL.

Full guidance on OOPR application procedures is available on Synapse or contact HEE for further advice. You must not leave applying for OOPR to the last minute.

Note that all trainees requesting OOPR must apply at least 6 months prior to the projected start date. There are sometimes set deadlines for particular programmes so please check these. You should also discuss the request with your Educational Supervisors/ Training Programme Director. More information can be found on the HEE website: [www.lpmde.ac.uk/training-programme/training-matters/out-of-programme](http://www.lpmde.ac.uk/training-programme/training-matters/out-of-programme)

Further guidance can be found in the Gold Guide. This can be downloaded from: [www.copmed.org.uk/gold-guide-7th-edition/the-gold-guide-7th-edition](http://www.copmed.org.uk/gold-guide-7th-edition/the-gold-guide-7th-edition)

## o. Useful contacts at HEE

HEE IAT Team can be contacted at [academictraining.lase@hee.nhs.uk](mailto:academictraining.lase@hee.nhs.uk)

# IAT Guide

# **Appendices**

## Appendix 1 – Useful Links

National Institute of Health Research (NIHR):

[www.nihr.ac.uk](http://www.nihr.ac.uk)

National Institute for Health Research Trainees Coordinating Centre  
(NIHRTCC/NIHR Academy):

<https://www.nihr.ac.uk/our-research-community/NIHR-academy/>

London and South East Postgraduate Medical and Dental Education:

[www.lpmde.ac.uk/](http://www.lpmde.ac.uk/)

HEE Integrated Academic Training:

[www.hee.nhs.uk/our-work/clinical-academic-careers](http://www.hee.nhs.uk/our-work/clinical-academic-careers)

Academic Careers Office (ACO):

[www.ucl.ac.uk/slms/aco](http://www.ucl.ac.uk/slms/aco)

UCL Clinical Academic Training (UCAT)

[www.ucl.ac.uk/slms/aco/ucat](http://www.ucl.ac.uk/slms/aco/ucat)

UCL Partners:

[www.uclpartners.com](http://www.uclpartners.com)

NHS, Specialty Training:

<http://specialtytraining.hee.nhs.uk>

The Academy of Medical Sciences:

<http://www.acmedsci.ac.uk>

### Useful Documents:

The Gold Guide

[www.copmed.org.uk/gold-guide-7th-edition/the-gold-guide-7th-edition](http://www.copmed.org.uk/gold-guide-7th-edition/the-gold-guide-7th-edition)

Guidelines for monitoring academic training & progress:

<https://acmedsci.ac.uk/policy/policy-projects/guidelines-for-monitoring-academic-training-and-progress>

The Tooke Report

[http://www.asit.org/assets/documents/MMC\\_FINAL\\_REPORT\\_REVD\\_4jan.pdf](http://www.asit.org/assets/documents/MMC_FINAL_REPORT_REVD_4jan.pdf)

## Appendix 2 – UCL Academic Programme Training Leads and Contacts

<b>UCL IAT Lead</b>	Dr Nikhil Sharma	<a href="mailto:nikhil.sharma@ucl.ac.uk">nikhil.sharma@ucl.ac.uk</a>
<b>UCL IAT Manager</b>	Sarah Mackilligin	<a href="mailto:s.mackilligin@ucl.ac.uk">s.mackilligin@ucl.ac.uk</a>
<b>Anaesthesia, Critical Care &amp; Pain Management</b>	Dr Daniel Martin	<a href="mailto:daniel.martin@ucl.ac.uk">daniel.martin@ucl.ac.uk</a>
<b>Cardiology</b>	Prof Pier Lambiase	<a href="mailto:d.lambiase@ucl.ac.uk">d.lambiase@ucl.ac.uk</a>
<b>Child &amp; Adolescent Psychiatry</b>	Prof David Skuse	<a href="mailto:d.skuse@ucl.ac.uk">d.skuse@ucl.ac.uk</a>
<b>Clinical Pharmacology &amp; Therapeutics</b>	Prof Aroon Hingorani	<a href="mailto:a.hingorani@ucl.ac.uk">a.hingorani@ucl.ac.uk</a>
<b>Clinical Radiology</b>	Prof Stuart Taylor	<a href="mailto:stuart.taylor@ucl.ac.uk">stuart.taylor@ucl.ac.uk</a>
<b>Community Sexual &amp; Reproductive Health</b>	Prof Judith Stephenson	<a href="mailto:judith.stephenson@ucl.ac.uk">judith.stephenson@ucl.ac.uk</a>
<b>Endocrinology &amp; Diabetes Mellitus</b>	Prof Rachel Batterham	<a href="mailto:r.batterham@ucl.ac.uk">r.batterham@ucl.ac.uk</a>
<b>General (Vascular) Surgery</b>	Prof George Hamilton	<a href="mailto:g.hamilton@ucl.ac.uk">g.hamilton@ucl.ac.uk</a>
<b>General Adult Psychiatry</b>	Prof David Osborn	<a href="mailto:d.osborn@ucl.ac.uk">d.osborn@ucl.ac.uk</a>
<b>General Practice / Primary Care</b>	Dr Joe Rosenthal	<a href="mailto:j.rosenthal@ucl.ac.uk">j.rosenthal@ucl.ac.uk</a>
<b>General Surgery</b>	Prof Mark Emberton	<a href="mailto:m.emberton@ucl.ac.uk">m.emberton@ucl.ac.uk</a>
<b>Genito-Urinary Medicine</b>	Dr Richard Gilson	<a href="mailto:RGilson@gum.ucl.ac.uk">RGilson@gum.ucl.ac.uk</a>
<b>Haematology</b>	Prof Kwee Yong	<a href="mailto:kwee.yong@ucl.ac.uk">kwee.yong@ucl.ac.uk</a>
<b>Hepatology</b>	Dr Emmanouil Tsochatzis	<a href="mailto:e.tsochatzis@ucl.ac.uk">e.tsochatzis@ucl.ac.uk</a>
<b>Histopathology (Oncology)</b>	Prof Adrienne Flanagan	<a href="mailto:a.flanagan@ucl.ac.uk">a.flanagan@ucl.ac.uk</a>
<b>Histopathology (Paediatric &amp; Perinatal Pathology)</b>	Prof Neil Sebire	<a href="mailto:n.sebire@ucl.ac.uk">n.sebire@ucl.ac.uk</a>
<b>Infectious Diseases / Medical Virology / Immunology</b>	Dr Mahdad Noursadeghi	<a href="mailto:m.noursadeghi@ucl.ac.uk">m.noursadeghi@ucl.ac.uk</a>
<b>Intensive Care Medicine</b>	Prof Mervyn Singer	<a href="mailto:m.singer@ucl.ac.uk">m.singer@ucl.ac.uk</a>
<b>Medical Oncology</b>	Dr Chrissie Thirlwell	<a href="mailto:christina.thirlwell@ucl.ac.uk">christina.thirlwell@ucl.ac.uk</a>
<b>Neurology</b>	Prof Simon Mead	<a href="mailto:s.mead@ucl.ac.uk">s.mead@ucl.ac.uk</a>
<b>Neurosurgery</b>	Prof Rob Brownstone	<a href="mailto:r.brownstone@ucl.ac.uk">r.brownstone@ucl.ac.uk</a>
<b>Obstetrics &amp; Gynaecology</b>	Prof Martin Widschwendter	<a href="mailto:m.widschwendter@ucl.ac.uk">m.widschwendter@ucl.ac.uk</a>
<b>Old Age Psychiatry</b>	Prof David Osborn	<a href="mailto:d.osborn@ucl.ac.uk">d.osborn@ucl.ac.uk</a>
<b>Ophthalmology</b>	Prof Sir Peng Khaw	<a href="mailto:p.khaw@ucl.ac.uk">p.khaw@ucl.ac.uk</a>
<b>Oral Medicine</b>	Prof Stephen Porter	<a href="mailto:s.porter@ucl.ac.uk">s.porter@ucl.ac.uk</a>
<b>Otolaryngology</b>	Prof Anne Schilder	<a href="mailto:a.schilder@ucl.ac.uk">a.schilder@ucl.ac.uk</a>
<b>Otolaryngology</b>	Prof Martin Birchall	<a href="mailto:m.birchall@ucl.ac.uk">m.birchall@ucl.ac.uk</a>
<b>Paediatric Surgery</b>	Prof Paolo De Coppi	<a href="mailto:p.decoppi@ucl.ac.uk">p.decoppi@ucl.ac.uk</a>
<b>Paediatrics</b>	Dr Despina Eleftheriou	<a href="mailto:d.eleftheriou@ucl.ac.uk">d.eleftheriou@ucl.ac.uk</a>
<b>Plastic Surgery</b>	Prof Ash Mosahebi	<a href="mailto:a.mosahebi@ucl.ac.uk">a.mosahebi@ucl.ac.uk</a>
<b>Psychiatry with Learning Disabilities</b>	Prof David Osborn	<a href="mailto:d.osborn@ucl.ac.uk">d.osborn@ucl.ac.uk</a>
<b>Public Health (PHE posts)</b>	Prof Ibrahim Abubakar	<a href="mailto:i.abubakar@ucl.ac.uk">i.abubakar@ucl.ac.uk</a>
<b>Public Health Medicine</b>	Dr Nora Pashayan	<a href="mailto:n.pashayan@ucl.ac.uk">n.pashayan@ucl.ac.uk</a>
<b>Renal Medicine / Nephrology</b>	Prof Alan Salama	<a href="mailto:a.salama@ucl.ac.uk">a.salama@ucl.ac.uk</a>
<b>Respiratory Medicine</b>	Prof Jeremy Brown	<a href="mailto:jeremy.brown@ucl.ac.uk">jeremy.brown@ucl.ac.uk</a>
<b>Trauma and Orthopaedic Surgery</b>	Prof Alister Hart	<a href="mailto:a.hart@ucl.ac.uk">a.hart@ucl.ac.uk</a>
<b>Urology</b>	Dr Caroline Moore	<a href="mailto:caroline.moore@ucl.ac.uk">caroline.moore@ucl.ac.uk</a>

## Appendix 3 – Departmental Administrators

<b>Division / Institute</b>	<b>Faculty</b>	<b>Administrator</b>	<b>Email</b>
<b>Cancer Institute</b>	Medical Sciences	Manuela Rossini	<a href="mailto:m.rossini@ucl.ac.uk">m.rossini@ucl.ac.uk</a>
<b>Department of Epidemiology &amp; Public Health (Part of IEHC)</b>	Population Health Sciences	Richard Marsh	<a href="mailto:r.marsh@ucl.ac.uk">r.marsh@ucl.ac.uk</a>
<b>Department of Primary Care &amp; Population Health (Part of IEHC)</b>	Population Health Sciences	Orla O'Donnell	<a href="mailto:o.o'donnell@ucl.ac.uk">o.o'donnell@ucl.ac.uk</a>
<b>Division of Infection &amp; Immunity</b>	Medical Sciences	Isabel Lubeiro	<a href="mailto:i.lubeiro@ucl.ac.uk">i.lubeiro@ucl.ac.uk</a>
<b>Division of Medicine</b>	Medical Sciences	Aisha Carroll	<a href="mailto:a.carroll@ucl.ac.uk">a.carroll@ucl.ac.uk</a>
<b>Division of Medicine (Bloomsbury Campus)</b>	Medical Sciences	Aisha Carroll	<a href="mailto:a.carroll@ucl.ac.uk">a.carroll@ucl.ac.uk</a>
<b>Division of Medicine (Royal Free Campus)</b>	Medical Sciences	Adrian Machinn	<a href="mailto:a.machinn@ucl.ac.uk">a.machinn@ucl.ac.uk</a>
<b>Division of Psychiatry</b>	Brain Sciences	Jacques Gianni	<a href="mailto:j.gianni@ucl.ac.uk">j.gianni@ucl.ac.uk</a>
<b>Division of Surgery &amp; Interventional Science</b>	Medical Sciences	Daniel Henniker	<a href="mailto:daniel.henniker@ucl.ac.uk">daniel.henniker@ucl.ac.uk</a>
<b>Eastman Dental</b>	Medical Sciences	Linda Lam	<a href="mailto:linda.lam@ucl.ac.uk">linda.lam@ucl.ac.uk</a>
<b>Ear Institute</b>	Brain Sciences	Steven Wallace	<a href="mailto:steven.wallace@ucl.ac.uk">steven.wallace@ucl.ac.uk</a>
<b>Institute of Cardiovascular Science</b>	Population Health Sciences	Simon Galloway	<a href="mailto:s.galloway@ucl.ac.uk">s.galloway@ucl.ac.uk</a>
<b>Institute of Child Health</b>	Population Health Sciences	Katie White	<a href="mailto:k.white@ucl.ac.uk">k.white@ucl.ac.uk</a>
<b>Institute of Epidemiology &amp; Health Care</b>	Population Health Sciences	Richard Marsh	<a href="mailto:r.marsh@ucl.ac.uk">r.marsh@ucl.ac.uk</a>
<b>Institute of Global Health</b>	Population Health Sciences	Pam Clarke	<a href="mailto:pam.clarke@ucl.ac.uk">pam.clarke@ucl.ac.uk</a>
<b>Institute of Hepatology</b>	Medical Sciences	Aisha Carroll	<a href="mailto:a.carroll@ucl.ac.uk">a.carroll@ucl.ac.uk</a>
<b>Institute of Neurology</b>	Brain Sciences	Libby Bertram	<a href="mailto:e.bertram@ucl.ac.uk">e.bertram@ucl.ac.uk</a>
<b>Institute of Ophthalmology</b>	Brain Sciences	Liz Hurst	<a href="mailto:k.hurst@ucl.ac.uk">k.hurst@ucl.ac.uk</a>
<b>Institute for Women's Health</b>	Population Health Sciences	Sarah Mayhew	<a href="mailto:s.mayhew@ucl.ac.uk">s.mayhew@ucl.ac.uk</a>

## Appendix 4 – NIHR Conference Bursary

### What is an NIHR Conference Bursary?

- All NIHR Academic Clinical Fellows and Clinical Lecturers at University College London (UCL) have been awarded a £1,000 per annum bursary by NIHR.
- The annual bursary is intended to allow the trainee to ‘attend conferences, workshops and research visits which might enhance their research awareness’
- This bursary is held by UCL and can be claimed against expenses incurred during their academic training at UCL.

### What is the claim procedure for NIHR Bursaries?

#### If you are an ACF:

- Claims are reimbursed after the expenditure has occurred. You must complete a UCL Expenses Payment form (which can be requested from the ACO).
- You must attach receipts or proof of payment to the expenses claim form, plus documentation of any currency conversion for any overseas expenditures and documentation of invitation for any travel e.g. conferences.
- You must sign the form and return it to Sarah Mackilligin (email: [s.mackilligin@ucl.ac.uk](mailto:s.mackilligin@ucl.ac.uk) or send by post to ACO, details below).
- The ACO will check that the expenditure is allowable and that you have sufficient funds remaining in your bursary. Claims cannot be set against future bursaries.
- The form will then be signed by the ACO authorised signatory and sent to Finance who will reimburse you by BACS payment once the claim is processed.

If you do not make any claims in a year, your bursary will ‘roll over’ to the following year. However it will not be claimable after you leave your ACF post.

#### If you are an ACL:

- Claims are reimbursed after the expenditure has occurred. You must make a claim directly on UCL MyFinance – <https://www.ucl.ac.uk/finance/myfinance>
- You will need to keep your receipts or proofs of payment, as Accounts Payable will request these once you have made a claim.
- The ACO will provide the account codes which you will need when submitting a claim on MyFinance and booking flights/accommodation via Keytravel.

You will need to print the final screen in MyFinance once the claim is submitted and with the proof of payments send to Accounts Payable (address on next page).

## Appendix 4 (cont'd)

**Address:**

Accounts Payable  
Gower Street  
London  
WC1E 6BT

If you do not make any claims in a year, your bursary will 'roll over' to the following year. However it will not be claimable after you leave your CL post.

### What can be claimed?

- Conferences, workshops and research visits that is associated with your academic training as an ACF or CL.
- Travel to conferences, registration costs, hotel costs and subsistence at UCL rates.
- Please ensure you read UCL Expense policy – <https://www.ucl.ac.uk/finance/policies-procedures/expenses-policy>
- Workshop registration fees, travel for research collaboration and accommodation/ subsistence during such visits is also allowable.
- Allowable expenditure does not include books, laboratory consumables, UCL student fees or similar. Travel costs will be reimbursed for standard class travel only, or at UCL mileage rates.
- Allowable expenditure does not include that incurred as part of standard clinical training such as GMC registration fees, fees for higher professional examinations, fees for attending courses associated with purely clinical training. The expenditure must be demonstrably associated with enhancing research awareness.



## Appendix 5 – NIHR MSc Training Bursary

### What is an NIHR MSc Training Bursary?

1. Eligibility – you must be a NIHR funded ACF
2. Funds are available for home/EU fees for an MSc or component thereof.
3. You will need to agree this with your supervisor and then email the Academic Careers Office (ACO) [aco-enquiries@ucl.ac.uk](mailto:aco-enquiries@ucl.ac.uk)
4. You will need to include the following information
  - i) which MSc
  - ii) from when
  - iii) mode of study
  - iiii) what the fees are.
5. Once this has been confirmed and authorised by the ACO, we will arrange payment of the tuition fees through Portico.
6. Alternatively you can pay the fees yourself and claim these back as described above. You will need to request the account code from the ACO.

NB: The 'standard' MSc programme we offer which is generic to all ACFs is the [www.ucl.ac.uk/prospective-students/graduate/taught-degrees/clinical-drug-development-msc](http://www.ucl.ac.uk/prospective-students/graduate/taught-degrees/clinical-drug-development-msc)

#### Includes:

MEDCG003 Drug Discovery I  
MEDCG001 Statistical Methods in Research  
MEDCG005 Ethics and Regulation of Research  
MEDCG004 Drug Discovery II 30  
MEDCG017 Clinical Pharmacology and Therapeutics  
MEDCG018 Advanced Clinical Pharmacology and Therapeutics  
MEDCG099 Research Project

### If you have any questions, please contact the ACO:

#### UCL Academic Careers Office

School of Life & Medical Sciences  
University College London  
1st Floor Maple House  
149 Tottenham Court Road  
London W1T 7NF

Tel: **020 7679 6655 (Ext 46655)**

Email: [aco-enquiries@ucl.ac.uk](mailto:aco-enquiries@ucl.ac.uk)

Website: [www.ucl.ac.uk/slms/aco](http://www.ucl.ac.uk/slms/aco)

## Appendix 6 – Generic Skills Training

<b>Continuing professional development (JRO)</b>	Website: <a href="http://www.ucl.ac.uk/jro/training-education/training-courses">www.ucl.ac.uk/jro/training-education/training-courses</a>
	Contact to register: <a href="mailto:jro-courses@ucl.ac.uk">jro-courses@ucl.ac.uk</a> or contact <a href="mailto:sarah.edwards@ucl.ac.uk">sarah.edwards@ucl.ac.uk</a>
<b>Research Governance</b>	One day event
<b>Good Clinical Practice</b>	One day event
<b>Doctoral School Skills Development Programme (on-line booking)</b>	Website: <a href="http://courses.grad.ucl.ac.uk/">http://courses.grad.ucl.ac.uk/</a>

If you decided, you only wanted to undertake a module from an MSc, the ACO have identified a set of modules. Please see overleaf for further information and a list of relevant modules for the Integrated Academic Training Programme.

## Appendix 7 – Generic MSc Modules

<b>Statistics and Research Methods: an Introduction</b>		
<b>Module MEDCG016</b>		To register contact: <a href="mailto:g.ambler@ucl.ac.uk">g.ambler@ucl.ac.uk</a> (module lead)
<b>Included is:</b>		
<b>1</b>	Finding a Research Question: Introduction to Research Methodology	
<b>2</b>	Basics of Study Design: Design of Randomised Trials	
<b>3</b>	Observational Studies & Workshop	
<b>4</b>	Measures of Disease & Workshop	
<b>5</b>	Sample Size & Workshop	
<b>6</b>	Confounding and Effect Modifiers & Workshop	
<b>7</b>	Cross-over trials & Computer Practical	
<b>8</b>	Early Phase Trials	
<b>9</b>	Safety in clinical trials / DMSC	
<b>10</b>	Critical Appraisal	

<b>Statistical Methods in Research (15 credits)</b>		
<b>Module MEDCG001</b>		To register contact: <a href="mailto:g.ambler@ucl.ac.uk">g.ambler@ucl.ac.uk</a> (module lead)
<b>Included is:</b>		
<b>1</b>	Introduction to Data Analysis & Computer Practical	
<b>2</b>	Estimation & Hypothesis Testing & Computer Practical	
<b>3</b>	Groups of Categorical Data & Computer Practical	
<b>4</b>	Groups of Continuous Data 1 & Computer Practical	
<b>5</b>	Groups of Continuous Data 2 & Computer Practical	
<b>6</b>	Linear Regression & Computer Practical	
<b>7</b>	Further Regression & Computer Practical	
<b>8</b>	Logistic Regression & Computer Practical	
<b>9</b>	Survival Analysis & Computer Practical	
<b>10</b>	Analysis of Trials & Computer Practical	

If you decide to take one or more modules you will need to contact the programme lead or course administrator for agreement. You will also need to confirm if the modules are credit-bearing as you may only be able to attend the lectures and tutorials.

NB: At the end of the course participants will have acquired the essential skills for performing basic methodological aspects of health care research and understanding, reviewing and using published research. In particular participants will have gained an understanding of the types of data generated in research studies.

- the most common methods of analysis for categorical, continuous and survival data, including regression methods
- when particular methods are appropriate and how to interpret their results
- issues related to analysis and interpretation of randomised trials
- the use of statistical software

## Appendix 7 – Generic MSc Modules (cont'd)

<b>Ethics and Regulation of Research (15 credits)</b>	
<b>MEDCG005</b>	To register contact: <a href="mailto:sarah.edwards@ucl.ac.uk">sarah.edwards@ucl.ac.uk</a> (module lead)
<b>Included is:</b>	
<b>1</b>	Rationale for restrictive regulation of IMPs and rights of access to IMPs
<b>2</b>	Conflicting interests, regulation, ethics review
<b>3</b>	Legal and moral basis of consent
<b>4</b>	Limits to consent and risk
<b>5</b>	Intellectual property

NB: At the end of the course participants will be able to:

- Rehearse regulation of early phase trials in clinical medicine
- Critically appraise regulatory framework for new medicines
- Articulate limits to common law of consent – explain moral rationale for restricting access to new medicines as well as the limits to consent and paternalistic review

<b>Selection of modules from MSc modules</b>		These are relevant modules offered by UCL to be discussed your supervisor	
Module code	Module Name	Credits	Division
<b>EPIDGS32</b>	Basic Statistics for Medical Sciences	15	Epidemiology & Health Care
<b>AUDLGS07</b>	Clinical and Professional Practice Including Research	15	Ear Institute
<b>PSBSGP07</b>	Development of Clinical Trial Protocol	15	Faculty of Brain Sciences
<b>HCSCR505</b>	Developing a Research Methodology	30	UCL Psychology and Language Services
<b>PHAYG105</b>	Education, Training and Development	20	Pharmacy
<b>HPSYG007</b>	Effective Research Practice (focuses on critical appraisal, grant writing, research ethics, doing interviews, and making presentations)	15	Epidemiology & Health Care
<b>MEDCG005</b>	Ethics & Regulation of Research	15	Medicine

## Appendix 8 – List of MSc Modules

<b>Selection of modules from MSc modules</b>		These are relevant modules offered by UCL to be discussed with your supervisor	
Module code	Module Name	Credits	Division
<b>PSYCGR01</b>	Generic Research Skills (Statistics)	15	Division of Psychology and Language Sciences
<b>CIHDG014</b>	Health Management: Planning and Programme Design (This module centres on a simulation exercise of a health programme mission in a resource-poor setting.)	15	Institute of child health
<b>CIHDG007</b>	Key Principles of Health Economics	15	Institute of child health
<b>ACMEG012</b>	Leadership Skills for the Healthcare Professional	15	Medical School
<b>PHAYG106</b>	Management and Leadership	20	Pharmacy
<b>STATG015</b>	Medical Statistics 1	15	Statistics
<b>STATG016</b>	Medical Statistics 2	15	Statistics
<b>ANATGS10</b>	Practice of Science (aims to improve skills in written and verbal communication in science.)	30	Biosciences
<b>HPSYG005</b>	Quantitive and Qualitative Research Methods 1	15	Epidemiology & Health Care
<b>HPSYG006</b>	Quantitive and Qualitative Research Methods 2	15	Epidemiology & Health Care
<b>EPIDGS43</b>	Regression Modelling	15	Epidemiology & Health Care
<b>PHAYG104</b>	Research and Evaluation	20	Pharmacy
<b>CIHDG020</b>	Research in Action: the Qualitative Approach	15	Institute of child health
<b>CIHDG019</b>	Collecting and using data – Essentials of quantitative survey research	15	Institute of child health
<b>CHLDGS10</b>	Research Methodology and Statistics	15	Institute of child health
<b>CLNEG023</b>	Research Methods and Introduction to Statistics (This covers basic aspects of research methodology and statistics)	15	Institute of Neurology

## Appendix 8 (cont'd)

<b>Selection of modules from MSc modules</b>		These are relevant modules offered by UCL to be discussed your supervisor	
Module code	Module Name	Credits	Division
<b>ACMEG007</b>	Research Methods in Medical Education	15	Medical School
<b>STATG001</b>	Statistical Models and Data Analysis	15	Statistics
<b>ACMEG011</b>	Teaching and Learning in Medical Education	15	Medical School
<b>BIOSG001</b>	The Scientific Literature (students develop skills at an advanced research level, in reading and analysing the scientific literature, and in presenting)	15	Biosciences
<b>BIOLM019</b>	Topics in Current Research (Masters Level) (based around Department of Genetics, Evolution and Environment seminars).	0.5	Biosciences



# IAT GUIDE

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“The current system has been set up to support researchers and to ensure that they have the protected time and funding opportunities to focus on producing world-class research that can improve the health of patients and the wealth of the nation.”

Dr Alex Shortt

“The initial juggling process between clinical duties and research requirements has now become an easy balance, with definite growth and progress.”

Dr Liza Osagie

”



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