

Involvement in primary care research

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Involvement in primary care research:

is your practice one of the 68% not benefiting?

A National Institute for Health Research (NIHR) report in 2018 found that, out of the 7840 general practices in England, only 32% are active in research. The same report found that 99% of NHS hospital trusts are actively engaged in research activity.¹

Other surveys have found that there is a willingness among both patients and doctors to become more involved in the research behind new treatments being developed within the NHS and industry. With the majority of patient contact occurring in primary care, it is an ideal setting for recruiting patients.

CPD

Clinical Research Network (CRN) is one part of the NIHR, responsible for supporting the delivery of research studies. The experience of patients recruited into primary care studies is often reflected very positively, with many commenting on such motivating factors as accessing novel treatments, tests, enhanced monitoring, and the 'altruism of giving something back to the NHS'. The experience of staff involved in running the studies is also very encouraging, with many reporting an increase in job satisfaction and overall quality in performance.²

The Care Quality Commission (CQC) has already identified research activity as a quality marker in secondary care, and some primary care CQC reports highlight the value of research to patients as a demonstrable commitment to quality improvement.

Doctors supporting research in their practice are able to acquire CPD for their annual appraisals, contributing to revalidation requirements.

PATIENT INVOLVEMENT

Involvement can vary from a simple 'search and mailout', where a search is run on the GP clinical system software, to identify relevant patients using the inclusion and exclusion criteria. Once a GP has screened

the list, letters are sent out to patients inviting them to contact the study team to express their interest. Payment is made to practices for work involved in any study activity, with higher payments made for studies requiring more activity, for example, if a study requires opportunistic recruitment and consent during a consultation.

There are a variety of clinical studies available, covering many disease areas, normally dependent on the output from the local universities who may have specific areas of focus, but some studies run across all parts of the country. Commercial studies are also supported by the CRN, and these tend to offer greater remuneration.

SUPPORT

Practical support for running the study is also available to practices, with each CRN having a team of support staff, often including research facilitators, administrators, and research nurses. Training is provided, and practices are encouraged to complete Good Clinical Practice (GCP), which is the international ethical, scientific, and practical standard to which all clinical research is conducted. This provides public assurance that the rights, safety, and wellbeing of research participants are protected, and is a requirement of the UK Policy Framework for Health and Social Care Research (2017), which covers all research in the NHS in the UK.³ The NIHR offers GCP training either as a face-to-face workshop, or as an online module.

Practices can also complete the Royal College of General Practitioners' (RCGP) Research Ready accreditation, a framework to ensure practices run research in accordance with correct clinical and legal frameworks.⁴

If your practice is interested in taking part in research, contact your local CRN — details can be found on the NIHR website: <https://www.nihr.ac.uk/crn>.

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