

RCP/Innovation Agency workshop - How to embed research in NHS Trusts to improve patient care 28 November 2019

Protected time

Is protected time needed?

There was consensus that clinicians need protected time for research. The need for “headspace” was mentioned by two separate groups, and both physician and nurse representatives indicated they lack the time to become involved in research. Delegates also outlined the need to fund different types of protected time, and the need to separate out research creation and research delivery.

The caveats to this view were that research PAs are sometimes misused for private work, and that the RCP and other royal colleges should highlight this is not a “one-size-fits-all” solution and PA time is not always the answer. The issue of “backfill” was also raised as something that NHS trusts need to consider when giving clinicians more time for research.

Discussions also touched upon the idea that clinicians can be “afraid” of research, and more needs to be done to address what can be an off-putting overly academic image for some.

Solutions to enabling protected time for research

Delegates were optimistic about the role the RCP and other royal colleges can play in enabling protected time for research, including:

- Reviewing job plans and influencing advisory appointment committees
- Highlighting best practice in RCP journals, including innovative models like “Hub and Spoke”
- Influencing its members’ attitude and enthusiasm towards research.

Other practical suggestions included:

- Making research activity mandatory in the job appraisals process. There was debate though about whether this could become a burden, or instead should be optional
- Ensuring CQC inspections visit R&D departments. Delegates suggested this was not happening at present
- Collating clinicians ideas about how to enable research time through an online portal
- Linking the benefits of more research-active roles for recruitment/retention to the wider workforce challenges in the NHS.