

Health Research Authority: Comments on 'What research can the NHS support'

Response by the Wellcome Trust

April 2014

INTRODUCTION

1. The Wellcome Trust is pleased to have the opportunity to provide comment on the Health Research Authority's report 'What research can the NHS support'. This response summarises and collates comments from a selection of the heads of the clinical PhD programmes and Clinical Research Facilities supported by the Trust, who we surveyed for their views.
2. The Trust's clinical PhD programmes¹ support the most promising medically qualified clinicians who wish to undertake rigorous research training. There are ten programmes in centres of excellence throughout the UK, which provide research opportunities for clinicians drawn from across the range of specialities within a structured and mentored training environment.
3. The Clinical Research Facilities² are a network of UK centres for experimental medicine, intended to speed up the translation of scientific advances into real benefits for patients. The centres provide significant opportunities for scientists to work more closely with clinical researchers, enabling the development of new therapies and treatments.

SUMMARY OF FEEDBACK

4. Overall, respondents were positive about the tone of the report and its conclusions and recommendations, which they considered to be broadly sensible, proportionate and helpful. In particular, those recommendations directed at improving efficiency and the education of research supervisors and students were well received. However, respondents identified several concerns about specific aspects of the report and its recommendations, set out below.
5. Respondents expressed significant concern with the recommendation that undergraduate students should be discouraged from undertaking research which interfaces directly with patients, believing this to go against current practice and aspirations to involve students with direct experience of such research at the earliest stages of their careers and to develop the next generation of clinical researchers. The proposal that Masters students should not undertake research that requires full ethical review also met with concern.

¹ <http://www.wellcome.ac.uk/Funding/Biomedical-science/Funding-schemes/PhD-funding-and-undergraduate-opportunities/WTD037337.htm>

² <http://www.wellcome.ac.uk/Funding/Biomedical-science/Funded-projects/Major-initiatives/Clinical-Research-Facilities/index.htm>

6. Concerns were raised around the report's assertion that student research is of variable quality. It was felt that the quantitative evidence presented does not support this claim, as it focuses on ethical review of research applications which is not itself a judgement of the scientific quality of research. It was felt that the report does not make sufficient distinction between quality of research applications and quality of the research itself.
7. Recommendations 3 and 4 are welcomed. In particular the proposal for a 'batch' approval for a number of different projects was well supported as a way of improving efficiency.
8. Recommendation 5 is considered challenging, partly because it fails to define the scope either of what a 'health related' course might be, or consider that health professionals might be taking 'non-health related' course, or define the scope of 'patients or their data'.
9. The desire to have research directed by Trusts and Clinical Commissioning Groups (CCGs) was questioned. Although the Trusts and CCGs may identify areas where research is needed they often do not have the skills necessary to form appropriate research questions that are answerable.
10. Regarding PhD students, it was felt that the report doesn't distinguish between experienced clinicians who are employed as members of University staff in order to conduct their PhD and less experienced students enrolled as full-time postgraduates. The former group are usually more than capable of acting as Chief Investigators when appropriate.

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