2018 Academic Clinical Fellowship in General Practice

Description of ACF Programme:

Title: General Practice

Duration: 4 years, with ST1 and 2 as other GP Programmes, ST3 takes place over 2 years with 3 days in GP in ST3.1 and 2 days in GP in ST3.2

Lead NHS Hospital/Trust and contact details:

Southampton General Hospital
Southampton University Hospitals NHS Trust
Southampton SO16 6YD
Tel: 023 8077 7222

Research Institution in which training will take place:

Primary Care Group,
Primary Care and Population Sciences
University of Southampton
Aldermoor Health Centre
Aldermoor Close
SO16 5ST

Arrangements for protected research time:

The Primary Care Group at the University of Southampton Faculty of Medicine, in association with the Health Education England Wessex GP training scheme, offers a four year training programme including two years comprising 18 months of hospital posts and 6 months in General Practice, followed by two years of integrated academic general practice, with time divided equally between academic work in the department and clinical training in a practice in the Wessex region.

Research Objectives:

1. To undertake the equivalent of 3 years full time specialist training in General Practice in an accredited post in the Wessex Rotation,
2. To undertake generic research methods training through the Postgraduate School/Clinical Academic Training Scheme (SoCATS).
3. To gain relevant training and experience in research design, methods and data interpretation.
4. To pilot a research project (clinical or laboratory-based) or perform a systematic review in order to generate preliminary data for development of a proposal for a doctoral fellowship
5. To submit a competitive application for a doctoral fellowship to the NIHR, MRC, Wellcome Trust, or other external funder.
Description of research component of programme:

The trainee will undertake generic research methods training. This will be through both the programmes run by the Postgraduate School/Clinical Academic Training Scheme or through training courses appropriate to their specific learning needs in Southampton or elsewhere, in both quantitative and qualitative research methods. This will normally lead to an MSc in research methods. The formal taught postgraduate research training programme includes epidemiology, statistics, research governance and study design. In addition transferable skills courses are available to Academic Clinical Fellows including Good Clinical Practice, time management, leadership, grant writing, and presentation skills. There is also the opportunity to attend the highly regarded annual Epidemiology for Clinicians course jointly run by the University of Southampton MRC Unit and the University of Cambridge. There is an annual conference for academic trainees in Southampton as well as dedicated funds for pilot work, training courses and attendance at scientific conferences.

The trainee will also conduct a systematic literature review or a pilot/exploratory research project to help inform and develop a proposal for an externally funded research training fellowship, and will be given opportunities to be involved in ongoing research in the group. The academic supervisor will be a senior academic in the University’s Primary Medical Care (PMC) Group.

Strengths of the programme including research track record and markers of esteem

The Primary Medical Care group has 5 professors, 2 associate professors, 2 lecturers, 12 post-docs, 2 ACFs, 10 doctoral students, and 38 research staff. We have particular strengths in acute infections, respiratory disorders; mental health problems and complementary medicine, and our excellent showing in the 2014 RAE was recognised by inclusion as one of only nine departments nationally in the NIHR School for Primary Care Research (SPCR).

We work in collaboration with other SPCR departments, particularly UCL, Oxford, Bristol and Keele. We lead the multicentre SPCR CANDID lung and colorectal cancer cohort, the ATAFUTI trial of alternative treatments for adult female UTIs, and REDUCE programme on withdrawal of inappropriate long-term antidepressants. We are key collaborators in the BARACK-D trial of aldosterone receptor antagonism in chronic kidney disease; DUTY cohort of diagnosis of UTI in children; TARGET cohort on childhood respiratory infection prognosis; and PANDA cohort and trial of predictors of antidepressant response.

Potential supervisors/mentors

Professor Michael Moore is a part-time general practitioner in Salisbury. He is active in the local Integrated Clinical Research Network, he was the RCGP National Clinical Champion for Antibiotic Stewardship 2012-15, and is a member of the government advisory board for antimicrobial stewardship (ARHAI) His research interests include minor illness with a focus on antibiotic sparing strategies, depression, obesity and chronic liver disease.

Professor Paul Little was a work package leader for the GRACE project (EU network of excellence for respiratory infection research linking basic laboratory science with clinical
practice), and Chief Investigator (CI) on the DESCARTE multi-centre cohort study of complications of upper respiratory infections in 14000 patients. He is also leads studies for the development and trial of web based behavioural interventions for obesity and hypertension and for a large multicentre project to develop clinical prediction rules for cancer (the CANDID study).

Professor Tony Kendrick has carried out research into mental health problems in primary care for 25 years, the results of which have influenced NICE guidelines and performance indicators in the GP contract QOF for depression and schizophrenia. He is a member of the NICE Clinical Indicators Advisory Committee (since 2009). He chaired the NICE guideline development group on identification and care pathways for common mental health disorders and is a member of the NICE depression guideline development group. His current research includes patient-reported outcome measures in depression, delineating distress from depression (led by Senior Research Fellow Adam Geraghty), and a six year programme grant on strategies to reduce antidepressant prescribing.

Professor Mike Thomas’s research interests centre on respiratory disease management in community settings. He has a particular interest in dysfunctional breathing and the effectiveness of breathing exercises in the treatment of asthma. He is an associate editor of the journals Thorax and the Primary Care Respiratory Journal, Chief Medical Officer of Asthma UK, the Research Chairman of the International Primary Care Respiratory Group, and an expert advisor on several NICE evaluations and to the MHRA.

Professor Geraldine Leydon is a medical sociologist with qualitative research expertise and special interests in communication in the consultation, cancer care and support, and mental health. She is an NIHR postdoctoral fellow and has a joint post with Health Sciences on communication in cancer. She is content and linguistic editor for the Qualitative Sociology Review.

Associate Professor Hazel Everitt is a former NIHR clinical lecturer (CL). She has research interests in the management of acute infections, irritable bowel (leading the HTA funded ACTIB trial with King’s), and insomnia, with Little, Moore, and Baldwin in psychiatry. She is co-supervising three PhD students and is co-author of the Oxford Handbook of General Practice.

Associate Professor Miriam Santer is also a former NIHR CL. She is particularly interested in self-management support for acute and chronic conditions, including childhood eczema, gout, and acute respiratory illnesses. She is evaluating the RiPB funded SPaCE (Supporting Parents and Carers of children with Eczema) web-based intervention with Little and Yardley, and leads the HTA funded BATHE (Bath Additives for the Treatment of childhood Eczema) trial with Bristol, Cardiff and Nottingham. She is co-supervising two postgraduate students, is also involved in GRACE, and collaborating with Nottingham on vitiligo research and with Keele, Oxford & Nottingham on gout.

**Description of clinical component of programme:**

The trainee’s clinical GP training will take place in a research active practice local to the School of Medicine, supervised by an experienced trainer. The ST3 year will be divided
over 2 years, the ACF spending 3 days per week in clinical training in year one and 2 days of clinical training in year 2. This has proved to be a successful format.

### Milestones and timing of achievement of academic and clinical competencies

The following milestones will be applied:

#### Year 1

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<th>No.</th>
<th>Milestone Description</th>
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<tr>
<td>1</td>
<td>Initial clinical training in General Practice will be assessed using the national measures (Directly Observed Procedural Skills, mini Clinical Evaluation Exercise, Multi-source Feedback, Case-Based Discussions, etc.) and by quarterly meetings with the educational supervisor</td>
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<tr>
<td>2</td>
<td>Attendance at relevant programmes run by the Postgraduate School/Clinical Academic Training Scheme</td>
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<td>3</td>
<td>Identification of research question to be addressed in pilot study or systematic review through an iterative process of discussion and planning with the academic supervisor(s)</td>
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<td>4</td>
<td>Identification of specific learning needs for the project and appropriate courses and identification of ongoing projects to be involved with</td>
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<td>5</td>
<td>Obtaining ethical committee and NHS Research &amp; Development approval for exploratory project as appropriate and initial generation of pilot data</td>
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<td>6</td>
<td>Attendance at relevant internal and external training courses and attendance at annual national/international conferences of relevance to the project</td>
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#### Year 2

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<th>No.</th>
<th>Milestone Description</th>
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<tr>
<td>1</td>
<td>Continuing clinical training in General Practice, with the relevant competency based assessments (CEPS and miniCEX) and the knowledge-based assessments</td>
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<td>2</td>
<td>Continued work to identify project and data collection for pilot study as appropriate</td>
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<tr>
<td>3</td>
<td>Attendance at relevant internal and external training courses and attendance/presentation of data at annual national/international conferences of relevance to the project</td>
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<td>4</td>
<td>Preparation and submission of clinical research fellowship application to external funding agencies</td>
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#### Years 3 and 4

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<th>No.</th>
<th>Milestone Description</th>
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<tr>
<td>1</td>
<td>Continuation of General Practice component of clinical training</td>
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<tr>
<td>2</td>
<td>Data collection and presentation at national/international conference(s)</td>
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<tr>
<td>3</td>
<td>Writing up and submission of pilot research project, and/or other research for publication as appropriate</td>
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<td>4</td>
<td>Preparation for research training fellowship interview</td>
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### How post links in to the NIHR approved Research Training Programme at your locality:

It is envisaged that a successful fellowship application will lead to a further three years in full-time clinical research, culminating in a PhD. There would then be a natural progression to a clinical lecturer position within the Medical School.
Trainee centredness:

The training will be centred on the trainee’s own learning needs, identified early during the first year, and by dedicated supervision during the post. Mentorship is provided through the Faculty of Medicine which has set up a programme currently directed by a Reader within the Faculty of Medicine and which actively engages trainees to select and regularly meet with a mentor from a list of senior clinical academics who have mentoring experience. The fellowship will be tailored towards achievement of successful external funding to enable progression to a PhD.

Quality assurance of the programme:

The research methods training will be provided through the established Postgraduate School/Clinical Academic Training Scheme at the University of Southampton Faculty of Medicine. The academic supervisors have completed the postgraduate research supervision training provided by the University.

Mentoring arrangements:

Mentorship will be provided by the academic and clinical supervisors to the fellow. This will be co-ordinated by Assoc Prof Everitt (academic lead). Further mentorship and supervision can be undertaken through the normal governance arrangements for postgraduate research at the University of Southampton’s Faculty of Medicine. This will include mentorship through supervision of the emerging PhD programme and of research fellowship applications to major funding agencies.

Academic Lead (University) for the IAT Programme:

Professor Eugene Healy  
Professor of Dermatology  
University of Southampton  
Southampton General Hospital  
Southampton SO16 6YD  
023 8077 7222  
E.Healy@soton.ac.uk

Academic Supervisor (University) Details:

Prof. Tony Kendrick  
Professor of Primary Care  
Aldermoor Health Centre, Aldermoor close  
Southampton, SO16 5ST

Point of contact:  
Dr Hazel Everitt  
Associate Professor in General Practice  
02380 591788  
H.A.Everitt@soton.ac.uk

Education Supervisor (Trust) Details:
| **Prof Johnny Lyon-Maris**  
GP Associate Dean  
Southern House, Otterbourne, Winchester. Hampshire  
SO21 2RU  
02380 796751  
johnny.lyon-maris@nhs.net |

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<th><strong>Clinical Supervisor(s) Details:</strong></th>
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<td>This will be confirmed once the appointee is in post</td>
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<th><strong>Health Education England - Wessex Training Programme Director Details:</strong></th>
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| Dr Peter Haig  
GP Training Programme Director  
Education Centre, Mailpoint 10 Level C, Southampton General Hospital, Tremona Road, Southampton SO16 6YD  
02380 796751  
peter.haig@nhs.net |

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<th><strong>Health Education England - Wessex Programme Manager Details:</strong></th>
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| Mrs Ysabel Hensford  
Programme Manager for General Practice  
Health Education England - Wessex  
Southern House  
Otterbourne, Winchester, SO21 2RU  
Tel: 01962 718421  
Fax: 01962 718401  
Email: ysabel.hensford@hee.nhs.uk |

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<th><strong>Confirmation that ACF posts attract an NTN(A):</strong></th>
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<td>This post will attract a National Training Number with the suffix A.</td>
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