



Council of
Deans of Health

Twenty years of
leadership in education
and research

Nursing, midwifery and allied health clinical academic research careers in the UK

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1. Introduction

This paper summarises the development of clinical academic research careers for nurses, midwives and allied health professionals (NMAHPs) in Scotland, Wales, Northern Ireland and England. Key challenges and opportunities for actively promoting NMAHP clinical academic research careers in all four nations are outlined with the intention of making these careers more attractive and accessible, encouraging the creation of robust frameworks for clinical academic career pathways in all four nations, and ensuring that their contribution to the quality of health and social care is recognised and promoted.

2. NMAHP clinical academic research careers in the UK

There are two main ways in which NMAHPs combine research and clinical practice. **Clinical academics** work in higher education institutions (HEIs) while providing clinical expertise to health and social care services. Because they remain clinically active, their research is grounded in clinical practice and questions that matter to services. Their dual role also allows them to combine clinical and research activity as a career rather than having to choose between the two.¹ **Clinically active health researchers** work in health and social care as clinicians to improve, maintain or recover health while also researching ways of improving outcomes for patients whose care they are planning, coordinating, managing, commissioning and quality assuring in leading clinical roles. Whilst there are funding opportunities for NMAHP clinicians to take time out for research or undertake specific time-limited research projects (for example ad hoc charitable grants or as part of small scale research projects), these often do not constitute a sustainable clinical academic role.

Clinical lectureship positions at HEIs represent early post-doctoral opportunities where individuals are dividing their time equally between academic commitments at an HEI and clinical commitments at a healthcare organisation.² The posts are co-funded and provide an important step on the clinical academic career pathway for clinicians but are currently restricted to physicians and dentists, potentially disadvantaging NMAHPs. Opening clinical lectureship positions at HEIs to NMAHPs, for instance those who have been awarded lectureship opportunities funded by the National Institute for Health Research (NIHR), or creating an equivalent, would significantly strengthen the clinical academic career pathways for these professions.

Overall, the proportion of clinical academic NMAHPs is less than 0.1% of the workforce.³ By contrast, clinical academics make up around 4.6% of the medical consultant workforce of the UK.⁴ Research conducted by the Medical Research Council⁵ also shows that fellowships are concentrated in a small

¹ National Institute for Health Research (2016) Building a research career handbook

² Health Education England, [Clinical Academic Careers Framework: A framework for optimising clinical academic careers across healthcare professions](#)

³ Medical Research Council (2017) [2017 UK-Wide Survey of Clinical and Health Research Fellowships](#)

⁴ Medical Schools Council (2017) [Survey of Medical Clinical Academic Staffing Levels 2017](#)

⁵ Medical Research Council (2017) [2017 UK-Wide Survey of Clinical and Health Research Fellowships](#)

number of geographical clusters, particularly pre-doctoral and post-doctoral awards for nurses and midwives. Fellowships held by AHPs are spread over a wider range of geographical locations.

The development of NMAHP clinical academic research careers is important for both HEIs and the NHS. However, without appropriate funding, strategic support and commitment, and a clear career pathway from internship to senior clinical lectureship in all four nations, these career pathways are not likely to be sustainable or have significant impact.

2.1. NMAHP clinical academic research careers in Scotland

In 1971 Margaret Scott Wright, Head of the Nursing Department at the University of Edinburgh, set up the Nursing Research Unit to promote 'research mindedness'. This was the first Nursing Research Unit in the UK.

Nurses and other health professionals were first systematically included in research career frameworks in Scotland when the Nursing Research Initiative was established in 1994. This was followed by a strategy for research and development in nursing and midwifery in Scotland in 2002⁶ and the Allied Health Professions Research and Development Action Plan in 2004.⁷

Launched in 2003 with funding from NHS Education for Scotland (NES), the Scottish Executive Health Department (SEHD) and the Health Foundation, the NMAHP Research Training Scheme (NMAHP RTS) has supported six PhD studentships and six post-doctoral fellowships for NMAHPs.

The NMAHP RTS was succeeded by a Strategic Research Development Grant (SRDG), which awarded funding through three regional consortia to increased capability and capacity of NMAHP research. More than 35 FTE research posts have been funded through this grant supporting a range of health professionals, with about one third nurses or midwives, one third AHPs and one third professionals from other disciplines.⁸

NMAHPs can also access PhD studentships, post-doctoral and career scientist level schemes awarded through the Chief Scientist Office Personal Award Schemes and have contributed to the 2008 Research Assessment Exercise (RAE) and its successor, the Research Excellence Framework (REF).

The Clinical Academic Research Career (CARC) Framework was developed in 2009/10 as a national approach to developing NMAHP research leadership and a sustainable infrastructure to support early, mid and late clinical academic career pathways in Scotland.

⁶ Scottish Government, [Choices and challenges - The strategy for research and development in nursing and midwifery in Scotland](#)

⁷ Scottish Government, [Allied Health Professions Research and Development Action Plan](#)

⁸ NHS Education for Scotland (2011) [National Guidance for Clinical Academic Research Careers for Nursing, Midwifery and Allied Health Professions in Scotland](#)

The Chief Nursing Officer's 2014 education review 'Setting the direction for nursing and midwifery education in Scotland'⁹ identified the strengthening of clinical academic collaboration as a strategic aim to ensure that research and evidence underpins and drives quality improvements.

The Scottish Government's Nursing, Midwifery and Allied Health Research Unit recently commissioned a document¹⁰ showcasing the value of clinical academic research in nursing, midwifery and allied health to patient experience, staff morale and the health and care systems. A strategic framework for NMAHP clinical academic research careers in Scotland has been developed and is about to be published.

2.2. NMAHP clinical academic research careers in Wales

Clinical academic research careers for NMAHPs are probably underdeveloped in Wales compared with England and Scotland, although opportunities for research career development have been supported by Welsh Government (through Health and Care Research Wales), via Research Capacity Building Collaboration (RCBC) Wales.

RCBC was created in 2005 to drive an increase in research capacity and capability of nursing and allied health professional groups, and to contribute toward the development of clinical academic roles. In 2014, its scope was broadened to include pharmacists. The scheme involves six university nursing and allied health departments in Wales, providing shared infrastructure and support for research fellowships across the research trajectory. It has been successful over the years; however, funding is for short periods of a career and largely unsystematic. An adequately funded centrally coordinated strategy and further support for post-doctoral research funding is needed.

2.3. NMAHP clinical academic research careers in Northern Ireland

Northern Ireland has no systematic approach to NMAHP clinical academic research careers. NMAHP researchers can apply for research project funding from various sources, most significantly the Public Health Agency's Health and Social Care Research and Development (HSC R&D) Division,¹¹ the US-Ireland R&D Partnership Programme¹² and charities. NMAHP clinical academics can also apply for NIHR fellowship schemes, though they do have to obtain prior authorisation from the HSC R&D Division.¹³

2.4. NMAHP clinical academic careers in England

The 2007 report, Developing the Best Research Professionals¹⁴ (the Finch Report) highlighted the lack of a clinical academic research careers framework for midwives and nurses in England. The report recommended funding five stages of the clinical academic career pathway to support the development of

⁹ NHS Scotland (2014) [Setting the direction for nursing and midwifery education in Scotland – The strategic aims from the Chief Nursing Officer's Education Review](#)

¹⁰ NMAHP Research Unit (2017) [A clinical academic approach for nurses, midwives and allied health professionals – it's a no-brainer!](#)

¹¹ Public Health Agency HSC R&D Division Northern Ireland, [Funding Opportunities](#)

¹² US-Ireland R&D Partnership Programme (2018) [Guidance for RoI and NI applicants for Submission of Tri-Partite Proposals to the National Institutes of Health \(NIH\)](#)

¹³ Public Health Agency, [Fellow Award Scheme](#)

¹⁴ UK Clinical Research Collaboration (2007) [Developing the best research professionals](#)

nursing clinical academics in England: MRes/MClinRes training positions; PhD/Professional Doctorates; early career clinical academic appointments; postdoctoral career fellowships; and senior clinical academic fellowships.¹⁵

Whilst initially focussing on nursing and midwifery, the findings were felt to be both applicable and necessary for the development of clinical academic research careers for allied health professions as well. NIHR funded four levels of clinical academic career programmes for the allied health professions, nursing and midwifery from 2008 (see below).

HEE/NIHR Integrated Clinical Academic Programme for non-medical healthcare professions in England

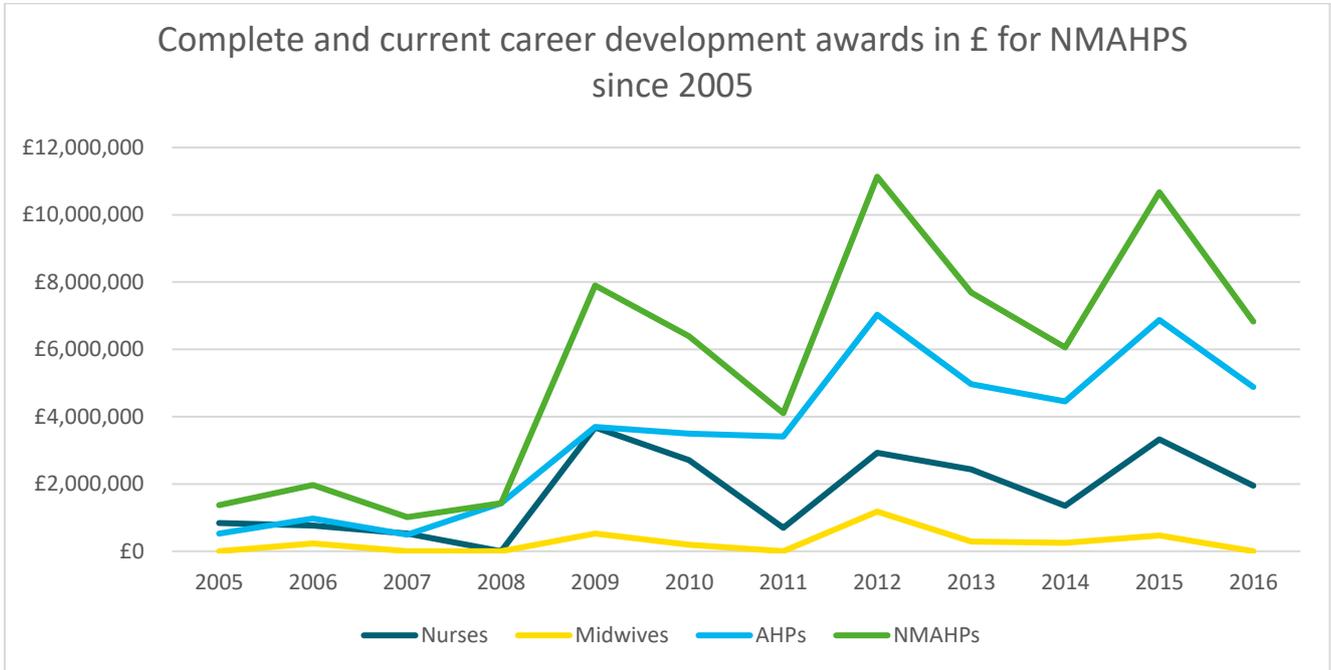
This programme aims to help develop a clinical academic workforce in England in all healthcare professions other than medicine and dentistry (see Annex 1 for the complete list of professions). It is not limited to the professions covered by the Council. It offers four different schemes to support clinical academics and clinically active health researchers at different stages of their careers:

- HEE Internships, offering exposure to research at pre-masters level.
- Clinical doctoral research fellowships (CDRF), funding healthcare professionals to undertake PhD study while potentially continuing to practice.
- Clinical lectureships (CL), helping healthcare professionals with a doctorate to become leaders in research and clinical practice.
- Senior clinical lectureships (SCL), enabling healthcare professionals with substantial research experience to undertake research alongside clinical leadership positions, thereby acting as clinical academic leaders.

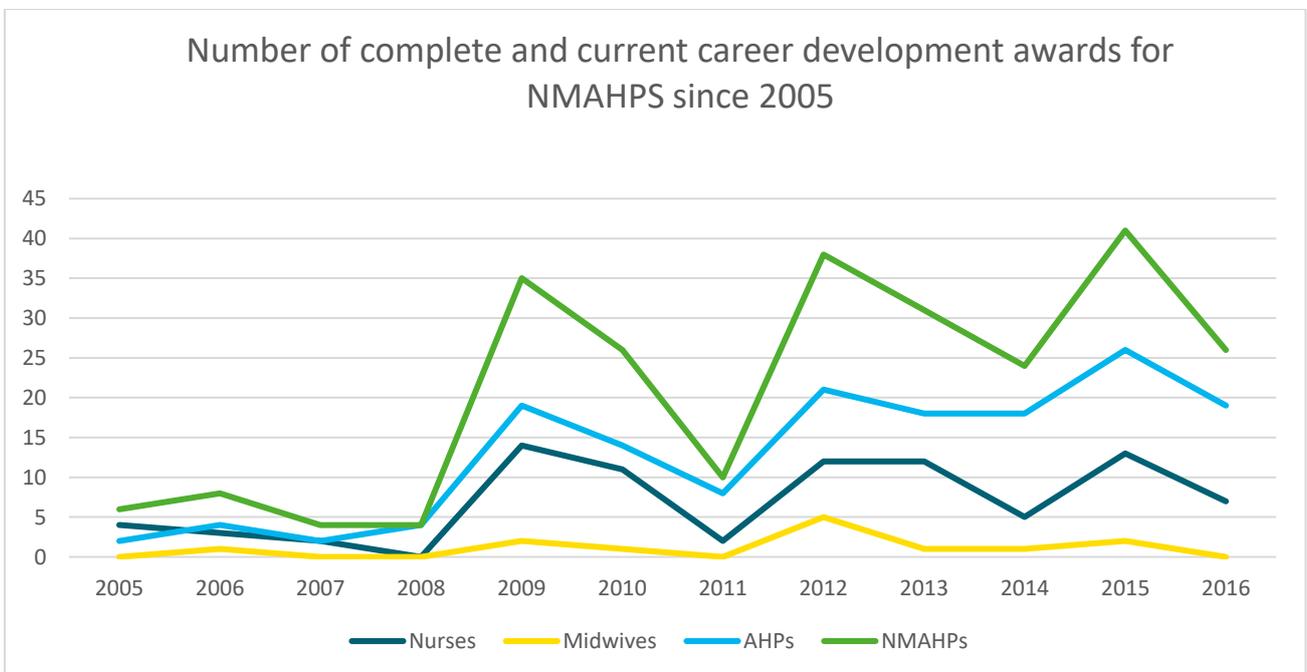
Full details of this programme can be found [on the NIHR website](#), and in the 'Guide to the HEE/NIHR ICA Programme'.

¹⁵ Some of these were already available before 2007.

Overview of NMAHPS having been awarded NIHR training/fellowship opportunities since 2005:



Source: [NIHR Career development awards](#)



Source: [NIHR Career development awards](#)

As the diagrams above shows, NIHR Personal Awards for NMAHPS have increased significantly in number and overall level of funding since 2005. In terms of the proportion of submitted applications, AHPs have

been particularly successful in securing NIHR funds compared to nurses, especially when considering that the total number of nurses in the NHS (285,720 FTE in February 2018) is larger than the number of AHPs in the NHS in England (65,646 FTE in February 2018).¹⁶ Midwives have also received less funding in comparison. A detailed breakdown by scheme and professional group can be found in Annex I.

As outlined in NIHR's recent review of its training support schemes¹⁷, NIHR is planning to implement some major changes over the coming years. Its training activities will be coordinated by a new entity call the NIHR Academy, which will replace the current Trainees Coordinating Centre. Personal awards will be simplified and have three tiers: pre-doctoral, doctoral and post-doctoral. NIHR is also developing a small number of 'NIHR Incubators', small networking structures to support capacity building and multidisciplinary career development in priority areas. The possibility of establishing a bridging scheme for those who fall between existing schemes is also being explored.

3. Challenges and opportunities

The following list of challenges and opportunities for clinical academic research careers for NMAHPs was developed in consultation with the Council of Deans of Health's Research Advisory Group and Research Leads Network representing HEIs engaged in NMAHP research across the four nations.

3.1. Current challenges facing clinical academic research careers in the UK

Lack of clear entry points

Undergraduate students and early career researchers often lack awareness of how to start a clinical academic research career. Clear and well-publicised routes of entry are often lacking.

Lack of clear model of career progression

Healthcare professionals have a clear idea of how they can progress in their clinical career. The same is often also true of those employed as full-time academic staff, although many academic staff are researchers on short-term contracts with a lack of career trajectories. There is a lack of career structure and clarity as to how to combine these elements in a career path. This is further hindered by scarce job opportunities and unclear guidance. Consequently, the potential of high-achieving graduates as clinical academics is underexploited.

Lack of flexibility in the ratio of clinical practice to research

Individuals will want to balance research and clinical practice differently. Predetermining this balance discourages recruitment into clinical academic careers. Equally discouraging is the belief that work life

¹⁶ NHS Digital, NHS Workforce Statistics, February 2018 Staff Group, Area and Level

¹⁷ NIHR Trainees Coordinating Centre (2017) [Ten years on: adapting and evolving to new challenges in developing tomorrow's health research leaders](#)

balance will suffer due to the perception that a clinical academic career is simply a doubling of the demands of a clinical or academic career.

Insufficient post-doctoral posts

The scarcity and highly competitive nature of funded NMAHP postdoctoral research positions in UK universities, and the comparative lack of research funding for healthcare professions other than medicine, makes a clinical academic research career trajectory potentially unstable and less attractive compared with the stability of a clinical appointment. This is a particular problem with mid-level and senior positions given the scarcity of post-doctoral positions as well as in academic research careers. Early career clinical academics face uncertain career paths and may choose the comparably stable worlds of clinical practice where their skills are in high demand, or a dedicated academic career.¹⁸

Administrative barriers to creating joint posts

Establishing joint posts can be difficult due to challenges around employment conditions (especially salaries and pensions). Instead, clinical academics often hold two part-time contracts, one with the HEI and one with an NHS provider. Maintaining a clinical academic role at professorial level is especially challenging in NMAHP professions.

3.2. Opportunities for promoting clinical academic research careers in the UK

Exposing undergraduates to research

Early awareness of the importance of research in healthcare, and experience of undertaking and understanding research, can encourage students to consider becoming clinical academics at an early point in their career and make the future workforce aware of the importance of NMAHP research. With clear career paths, more students may choose postgraduate study immediately after graduating. Exposure to research products and protocols and researchers, including through placements in clinical research settings, could be combined with improved career advice around clinical academic careers and publicising case studies.¹⁹ Once individuals have qualified and have been embedded in clinical practice, many find it difficult and/or lack information and support to engage with academic research and consider postgraduate study.

Reserving Masters and PhD places for practicing clinicians

Having postgraduate places reserved specifically for those who will be balancing their studies with clinical practice will result in a cohort of highly qualified individuals with both clinical and research skills. This requires support from the clinical side including agreed study time as well as part-time PhD places at HEIs.

¹⁸ Richardson, A., Avery, M. and Westwood, G. (2018) A cross funder survey of enablers and barriers to progressing a research-related academic career in the non-medical health professions

¹⁹ A positive example of a case study has been published by NIHR: <https://www.nihr.ac.uk/blogs/from-cardiac-nurse-to-professor-how-every-healthcare-worker-can-shape-clinical-care/6395>

Dedicated postdoctoral training programmes for clinical academics

Allocating funding and providing mentorship and learning opportunities tailored specifically for clinicians with doctorates to continue with research alongside their clinical career can allow them to continue developing both sets of skills. It is important to emphasise in this context that a PhD is the 'end of the beginning' of research training rather than an end in itself.

Balancing research and clinical practice on a case-by-case professional basis

In the absence of strict definitions of how much research and clinical practice one is expected to do to be called a 'clinical academic', a range of options should be developed that allow clinical academics the personal freedom to develop their careers according to their individual circumstances and preferences. Different models exist and could be explored further that allow NMAHP clinicians to move in and out of research, to be active in research as co-investigators, to obtain sessional appointments in academia, or to have a joint contract.

Mentoring schemes with senior clinical academics

Mentoring helps personal development and aspirations in early career clinical academics. Mentors provide pastoral support and help mentees deal with the demands of a clinical academic research career in addition to their role as coaches or advisors.

Large research projects with NMAHP researchers

Experienced NMAHP clinical academic could lead more large research projects that provide research and PhD opportunities for NMAHPs that go beyond data collection and would expose them to high-quality research projects from start to finish. The research project lead would also serve as a role model to aspiring NMAHP researchers.

Strong programmes for continuing professional development

To maintain existing skills and develop new ones, a strong programme of CPD specific to clinical academic research careers should be established and evaluated that complements other training offerings. This could also help with job satisfaction and retention of clinical academics.

A mixed economy of funding from universities, the NHS, central government and research funding bodies

To spread the financial burden of training and employing clinical academics, a range of funders should support these careers. Partnership between universities, the health sector, central government and research funding bodies (including third sector organisations such as the British Heart Foundation or the Stroke Association) could help to ensure clinical and academic needs are met at national and local levels.

Limited earmarking for specific disciplines and institutions

In order to develop emerging centres of research and to promote research in smaller disciplines as well as interdisciplinary research, there could be limited pre-allocation of training places and funding for specific disciplines and institutions. This could open up more opportunities for smaller disciplines.

More and better data on clinical academic research careers

There needs to be a co-ordinated system of data collection, analysis and dissemination across the UK so that the present situation can be properly analysed and understood. Changes that are implemented should be evaluated rigorously to evaluate their impact.

Support from clinical practice

The engagement and commitment of key senior clinical staff is essential to the success of any clinical academic pathway, however their support for doctoral fellowships in particular is often perceived to be lacking. Clinical Chairs who promote research in practice, and practice in HEIs, can bring the two together, break down fears, encourage a common language and make research accessible in practice.

4. Further reading

Association of UK University Hospitals (2017) [Transforming healthcare through clinical academic roles in nursing, midwifery and allied health professions](#)

Florence Nightingale Foundation (2018) [Review of research nursing and midwifery across the UK and Ireland in 2017: Structures, strategies and sharing](#)

Medical Research Council (2017) [2017 UK-wide survey of clinical and health research fellowships](#)

NIHR Trainees Coordinating Centre (2017) [Ten years on: adapting and evolving to new challenges in developing tomorrow's health research leaders](#)

The results of a survey on clinical academic careers in the UK that was commissioned by HEE in conjunction with NIHR and conducted by Professor Alison Richardson and colleagues will be published later this year.

Annex I

Breakdown of completed and current NIHR TCC Personal Awards for NMAHPs by profession and scheme name

Year Awarded	Number of individuals	Profession	Total funding	Scheme Name and Level
2016	4	Nurses	£1,190,859	HEE/ NIHR ICA Programme Clinical Doctoral Research Fellowship
2016	1	Nurse	£368,214	NIHR Doctoral Research Fellowship
2016	1	Nurse	£339,529	NIHR Post Doctoral Fellowship
2016	1	Nurse	£47,132	NIHR Clinical Trials Fellowship
2016	10	AHPs: Physiotherapists (4x); Speech and Language Therapists (2x); Dieticians (2x); Orthoptist; Occupational Therapist	£2,324,452	HEE/ NIHR ICA Programme Clinical Doctoral Research Fellowship
2016	1	AHP: Physiotherapist	£925,465	NIHR Career Development Fellowship
2016	2	AHPs: Physiotherapists	£923,723	NIHR Post Doctoral Fellowship
2016	2	AHPs: Dietician; Physiotherapist	£352,134	HEE/ NIHR ICA Programme Clinical Lectureship
2016	1	AHP: Physiotherapist	£219,517	NIHR Doctoral Research Fellowship
2016	3	AHPs: Optometrist; Art Therapist; Clinical Academic Podiatrist	£133,603	NIHR Clinical Trials Fellowship

2015	4	Nurses	£975,066	HEE/ NIHR ICA Programme Clinical Doctoral Research Fellowship
2015	2	Nurses	£843,834	NIHR Post Doctoral Fellowship
2015	3	Nurses	£635,873	NIHR Knowledge Mobilisation Research Fellowship
2015	2	Nurses	£275,742	HEE/ NIHR ICA Programme Clinical Lectureship
2015	2	Nurses	£597,138	HEE/ NIHR ICA Programme Senior Clinical Lectureship
2015	1	Midwife	£286,271	NIHR Knowledge Mobilisation Research Fellowship
2015	1	Midwife	£183,909	HEE/ NIHR ICA Programme Clinical Doctoral Research Fellowship
2015	15	AHPs: Physiotherapists (6x); Podiatrists (3x); Dieticians (2x); Speech and Language Therapists (2x); Occupational Therapist; Orthoptist	£3,907,909	HEE/ NIHR ICA Programme Clinical Doctoral Research Fellowship
2015	2	AHPs: Chiropodist/Podiatrist; Dietician	£965,017	NIHR Career Development Fellowship
2015	3	AHPs: Physiotherapists (2x); Speech and Language Therapist	£866,419	NIHR Doctoral Research Fellowship
2015	1	AHP: Occupational Therapist	£449,240	HEE/ NIHR ICA Programme Senior Clinical Lectureship

2015	2	AHPs: Physiotherapists (2x)	£322,396	HEE/ NIHR ICA Programme Clinical Lectureship
2015	1	AHPs: Physiotherapist	£266,439	NIHR Post Doctoral Fellowship
2015	2	AHPs: Physiotherapist; Podiatrist	£97,997	NIHR Clinical Trials Fellowship
2014	5	Nurses	£1,349,536	NIHR/HEE CAT Clinical Doctoral Research Fellowship
2014	1	Midwife	£247,769	NIHR Post Doctoral Fellowship
2014	11	AHPs: Physiotherapists (7x); Occupational Therapists (2x); Dietician; Speech and Language Therapist	£2,786,121	NIHR Doctoral Research Fellowship
2014	4	AHPs: Music Therapist; Art Therapist; Dietician; Podiatrist	£720,701	NIHR/HEE CAT Clinical Lectureship
2014	1	AHP: Physiotherapist	£566,237	NIHR Career Development Fellowship
2014	1	AHP: Physiotherapist	£345,764	NIHR Knowledge Mobilisation Research Fellowship
2014	1	AHP: Occupational Therapist	£37,510	NIHR Clinical Trials Fellowship
2013	9	Nurses	£2,041,213	NIHR/HEE CAT Clinical Doctoral Research Fellowship
2013	2	Nurses	£352,896	NIHR/HEE CAT Clinical Lectureship
2013	1	Nurse	£41,620	NIHR Clinical Trials Fellowship

2013	1	Midwife	£287,229	NIHR/HEE CAT Clinical Doctoral Research Fellowship
2013	10	AHP: Occupational Therapists (2x); Speech and Language Therapists (3x); Physiotherapists (3x); Chiropodist/Podiatrist; Diagnostic Radiographer	£3,179,927	NIHR/HEE CAT Clinical Doctoral Research Fellowship
2013	4	AHPs: Physiotherapists (3x); Dietician	£756,848	NIHR/HEE CAT Clinical Lectureship
2013	2	AHP: Chiropodist/Podiatrist; Orthoptist	£712,298	NIHR Post Doctoral Fellowship
2013	1	AHP: Physiotherapist	£275,068	NIHR/HEE CAT Senior Clinical Lectureship
2013	1	AHP: Physiotherapist	£43,006	NIHR Clinical Trials Fellowship
2012	7	Nurses	£1,494,244	NIHR/HEE CAT Clinical Doctoral Research Fellowship
2012	2	Nurses	£513,653	NIHR Doctoral Research Fellowship
2012	1	Nurse	£601,925	NIHR Career Development Fellowship
2012	1	Nurse	£281,380	NIHR Post Doctoral Fellowship
2012	1	Nurse	£34,704	NIHR Patient Safety and Service Quality Research Fellowship
2012	2	Midwives	£529,221	NIHR/HEE CAT Clinical Doctoral Research Fellowship

2012	2	Midwives	£535,097	NIHR Doctoral Research Fellowship
2012	1	Midwife	£112,956	NIHR Knowledge Mobilisation Research Fellowship
2012	2	AHPs: Occupational Therapist; Physiotherapist	£1,372,877	NIHR Senior Research Fellowship
2012	5	AHPs: Physiotherapists (2x); Diagnostic Radiographer; Dietician; Occupational Therapist	£1,219,317	NIHR Doctoral Research Fellowship
2012	1	Dietician	£1,217,470	NIHR Research Professorship
2012	2	AHPs: Physiotherapist; Orthoptist	£1,013,537	NIHR Career Development Fellowship
2012	6	AHPs: Physiotherapists (2x); Chiropodist/Podiatrist; Dietician; Occupational Therapist; Speech and Language Therapist	£893,075	NIHR/HEE CAT Clinical Lectureship
2012	3	AHPs: Dieticians (2x); Paramedic	£813,087	NIHR/HEE CAT Clinical Doctoral Research Fellowship
2012	1	AHP: Speech and Language Therapist	£344,445	NIHR Post Doctoral Fellowship
2012	1	AHP: Physiotherapist	£155,506	NIHR Knowledge Mobilisation Research Fellowship
2011	2	Nurses	£692,991	NIHR Doctoral Research Fellowship
2011	1	AHP: Physiotherapist	£1,172,534	NIHR Research Professorship

2011	3	AHPs: Physiotherapists (2x); Occupational Therapist	£925,057	NIHR Post Doctoral Fellowship
2011	3	AHPs: Dieticians (2x); Physiotherapist	£821,099	NIHR Doctoral Research Fellowship
2011	1	AHP: Dietician	£491,184	NIHR Career Development Fellowship
2010	6	Nurses	£1,496,702	NIHR/HEE CAT Clinical Doctoral Research Fellowship
2010	2	Nurses	£741,834	NIHR Doctoral Research Fellowship
2010	3	Nurses	£468,006	NIHR/HEE CAT Clinical Lectureship
2010	1	Midwife	£191,180	NIHR Doctoral Research Fellowship
2010	10	AHPs: Physiotherapists (4x); Dieticians (2x); Diagnostic Radiographer; Music Therapist; Occupational Therapist; Orthoptist	£2,824,609	NIHR/HEE CAT Clinical Doctoral Research Fellowship
2010	3	AHPs: Physiotherapists (2x); Chiropodist/Podiatrist	£362,837	NIHR/HEE CAT Clinical Lectureship
2010	1	AHP: Diagnostic Radiographer	£303,097	NIHR Doctoral Research Fellowship
2009	3	Nurses	£1,177,321	NIHR/HEE CAT Clinical Doctoral Research Fellowship
2009	6	Nurses	£931,460	NIHR/HEE CAT Clinical Lectureship

2009	3	Nurses	£809,487	NIHR Doctoral Research Fellowship
2009	1	Nurse	£488,989	NIHR Career Development Fellowship
2009	1	Nurse	£270,279	NIHR Post Doctoral Fellowship
2009	2	Midwives	£529,112	NIHR/HEE CAT Clinical Doctoral Research Fellowship
2009	10	AHPs: Chiropodists (3x); Speech and Language Therapists (2x); Physiotherapists (2x); Diagnostic Radiographer; Art Therapist; Dietician	£2,912,095	NIHR/HEE CAT Clinical Doctoral Research Fellowship
2009	4	AHPs: Physiotherapists (3x); Orthoptist	£556,239	NIHR/HEE CAT Clinical Lectureship
2009	1	AHP: Speech and Language Therapist	£226,291	NIHR Doctoral Research Fellowship
2008	2	AHPs: Occupational Therapist; Speech and Language Therapist	£763,973	NIHR Career Development Fellowship
2008	2	AHPs: Speech and Language Therapist; Dietician	£665,338	NIHR Post Doctoral Fellowship
2007	1	Nurse	£274,040	NIHR PAS Post Doctoral Award
2007	1	Nurse	£247,718	NIHR PAS Doctoral Award
2007	2	AHPs: Chiropodist/Podiatrist; Dietician	£491,624	NIHR PAS Post Doctoral Award

2006	2	Nurses	£517,783	NIHR PAS Post Doctoral Award
2006	1	Nurse	£242,288	NIHR PAS Doctoral Award
2006	1	Midwife	£231,160	NIHR PAS Doctoral Award
2006	3	AHPs: Orthoptists (2x); Physiotherapist	£705,571	NIHR PAS Doctoral Award
2006	1	AHP: Orthoptist	£266,121	Personal Award Scheme
2005	4	Nurses	£841,028	Personal Award Scheme
2005	2	AHPs: Orthoptist; Speech and Language Therapist	£527,855	Personal Award Scheme

Annex II

List of professionals and required registrations applicants must hold by the proposed fellowship uptake date to be eligible for the NIHR Clinical Doctoral Research Fellowship Scheme

Profession	Regulator with which applicants must hold registration/register
AHP Professions: Art therapist Podiatrist Dietitian Occupational therapist Orthoptist Orthotist and Prosthetist Paramedic Physiotherapist Radiographer (diagnostic and therapeutic) Speech and language therapist Drama therapist Music therapist	Health and Care Professions Council
Chiropractor	General Chiropractic Council
Practitioner Psychologist	Health and Care Professions Council
Healthcare Scientists: Professionals that work in one of the following broad areas of practice, which together cover over 45 different professional specialisms: Life Sciences/Clinical Laboratory Sciences; Physiological Sciences; Clinical Bioinformatics; Physical Sciences (incorporating Medical Physics) and Clinical Engineering. These include clinical scientists, biomedical scientists, clinical physiologists and clinical technologists.	Health and Care Professions Council, or the Academy for Healthcare Science register: www.ahcs.ac.uk
Non-Medical Public Health Specialty Trainees, Specialists and Consultants	Specialty Trainees: Faculty of Public Health Specialists and Consultants: The UK Public Health Register
Nurse and Midwife:	Nursing and Midwifery Council

Nurse Midwife Health visitor	
Operating Department Practitioner	Health and Care Professions Council
Optometrist and Dispensing Optician	General Optical Council
Osteopath	General Osteopathic Council
Pharmacy Professions: Pharmacist Pharmacy technician	General Pharmaceutical Council
Wider Dental Team Professions: Dental hygienist Dental nurse Dental therapist	General Dental Council