

Making money through primary care research grants

Dr David Mummery

GP in Kingston and the Northwest London NIHR CRN lead for primary and community care

Key points

- Primary care research can be interesting and provides opportunities for portfolio career development. It can be great for patients, and for practices, offering a much-needed new income stream.
- The National Institute for Health Research (NIHR) funds primary care clinical research via local clinical research networks (CRN).
- There are various study types, with differing payments level and work.
- To participate in a study contact your local CRN medical lead.

Clinical research has typically been overlooked in the past in terms of maximising practice income. People assume practices involved in research are doing academic work and that clinicians do so due to personal interest, rather than financial motivations.

But this is a myth. Grants of between £10-100,000 for a practice mean this is a lucrative activity which can be incorporated into day-to-day practice work relatively easily, with zero scholarly input.

Background

The NHS National Institute for Health Research (NIHR) funds around 5,000 clinical research studies, across 30 clinical specialities, every year through its Clinical Research Network (CRN).

All the studies in the CRN portfolio have been ethically approved by a committee and are ready for implementation. A participating practice will then promote the study, enrol patients and follow-up with any clinical intervention or testing, where necessary.

The NIHR CRN is divided into 15 local CRNs in England. Each CRN has a managerial and clinical leadership team responsible for coordinating practice participation and payments. A local CRN will typically have 15-20 active studies at any point, with varying practice involvement required. This could range from notifying high CVD risk patients about a study, to conducting salivary HIV tests during patient consultations, to filling out a questionnaire about NHS Health Checks perceptions.

Traditionally, funding was given to groups of individual practices, research 'hubs', but more commonly today this is done through 'at scale' studies via GP federations and primary care networks.

1. Types of studies

Patient Identification Centre (PIC) £500-£1,000 per study

These studies have specific inclusion and exclusion criteria, requiring practices to search for known codes, such as men with type 2 diabetes over the age of 50. This will return a list of potentially suitable patients.

GP federations or primary care networks conducting at scale research will run a centralised search of the area, and then contact practices to approve the research and contact the patients.

After the list has been checked by a clinician the practice can invite patients, typically by a letter sent via docmail, to take part in the study. Patients can also be informed opportunistically or by phone. They will be told it is voluntary and given the study team contact details. The research is then conducted away from the practice, with no more input required from the GP.

Recruitment studies £10,000-£20,000 per study

Here, patients are recruited in-practice and the clinical intervention or test is conducted during the consultation. This could involve conducting additional clinical tests, administering a new medicine or simply gathering information from the patient. Practices may also choose to proactively contact patients and invite them to take part in the study.

Commercial Studies £20,000-£100,000 per study

These are studies for pharmaceutical drugs companies. Practices can earn significantly more money through these but the pressures for recruits and results is also higher. Commercial studies tend to be more time-pressured and demanding, and a good research infrastructure is needed to enable this type of research.

Original research £10,000-£350,000 per study

For those with an aptitude for research and a good idea, there is the opportunity to create a study and conduct original research. This type of activity comes with a hefty workload, and the payment reflects this.

The Health Foundation gives grants of around £20,000 to successful bids for original research, the RCGP Scientific Foundation Board awards around £10,000-£15,000, and the NIHR grants can be up to £350,000. Competition for funding is high and applications can be complex, time-intensive, and likely to need academic support.

2. How to participate in a study

If you are interested in participating in a research study contact your local CRN. Each locality has a primary care lead, typically a GP and a managerial lead. They will be able to share information regarding current studies and payment and will organise a visit to the practice where they will explain exactly what is required, and appoint a study lead at the practice.

3. How payments are received

Payments are made by the NIHR CRN; it depends on the CRN how often this is done. If a GP federation or larger network is coordinating the research then payments go to this organisation, which would then be responsible for distributing the funds to practices.

4. The advantages

Primary care research can be interesting and provides opportunities for portfolio career development. It can be great for patients, and for practices, offering a much-needed new income stream. Those that establish themselves as centres for research will find they receive more and more offers for participation, with even greater financial rewards.

Guide URL:

<http://preview.pulse-intelligence.co.uk/guide/how-to-maximise-practice-income-with-primary-care-research-grants-2/>

PULSE Intelligence
Taking care of your business

 Cogora

© Cogora 2019