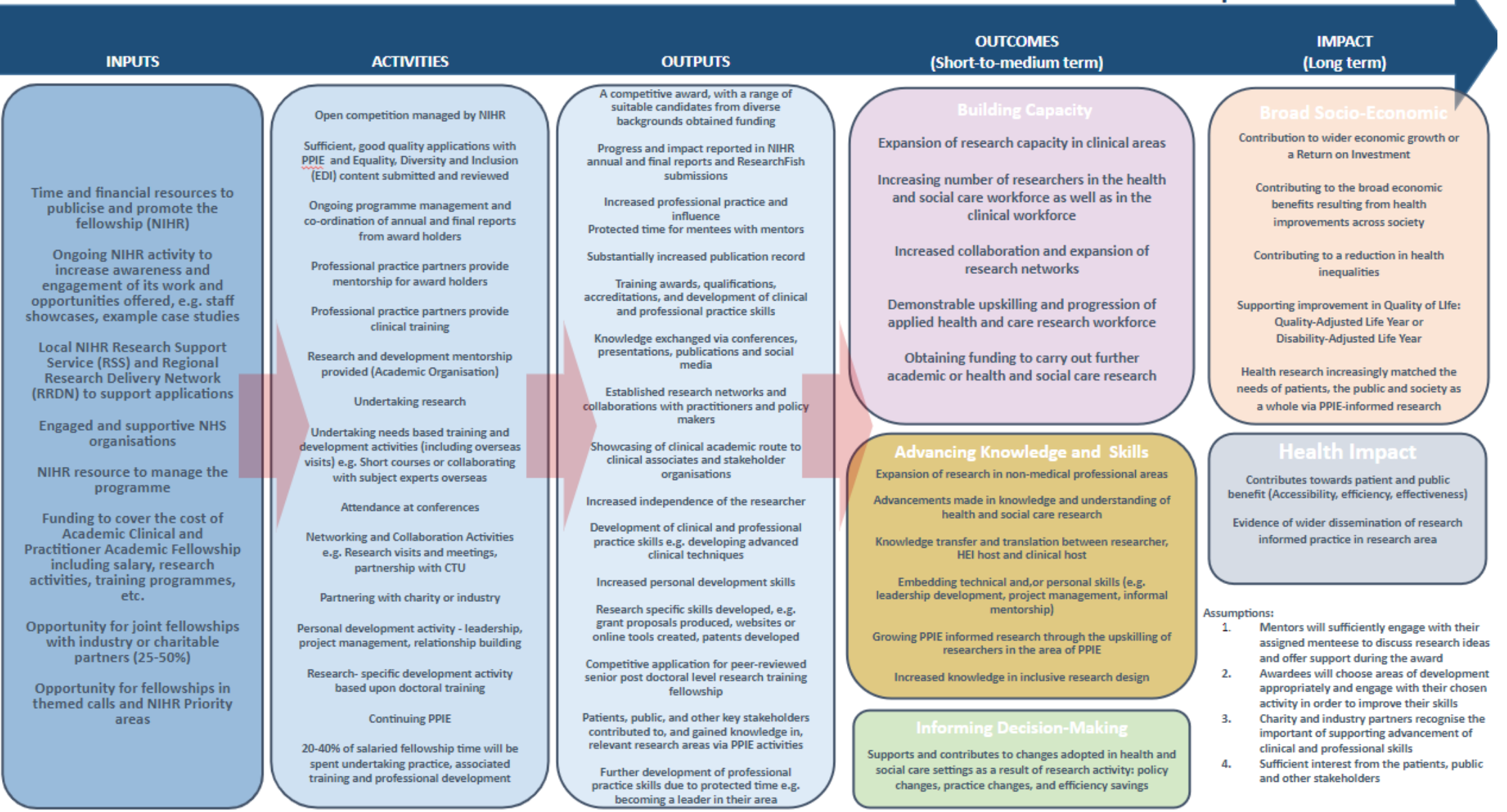


NIHR Advanced Clinical and Practitioner Academic Fellowship



- Assumptions:
1. Mentors will sufficiently engage with their assigned mentee to discuss research ideas and offer support during the award
 2. Awardees will choose areas of development appropriately and engage with their chosen activity in order to improve their skills
 3. Charity and industry partners recognise the important of supporting advancement of clinical and professional skills
 4. Sufficient interest from the patients, public and other stakeholders

NIHR Advanced Clinical and Practitioner Academic Fellowship Logic Model

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Introduction

The NIHR Advanced Clinical and Practitioner Academic Fellowship (ACAF) is part of the Integrated Clinical Academic (ICA) Programme, and supports postdoctoral researchers to develop their academic career whilst simultaneously developing their health or care career. As a career development award, it supports the core workstream 'Attracting, training and supporting the best researchers... to tackle complex health and social care challenges' from Best Research for Best Health: The Next Chapter. In turn, this will contribute to the overarching mission of the NIHR which is to improve the health and wealth of the nation.

The NIHR uses logic models to visually represent how a programme or research award is expected to achieve the outcomes, and resultant impact, that are defined during the development process of a programme or research award. A logic model then becomes an important tool in the process of evaluating a programme or award, which in turn guides a learning process of how a programme can be altered to better achieve its aims. The logic model is a linear flow diagram that reads from left to right, and is divided into the following sections: inputs, activities, outputs, and outcomes and impact.

Inputs

The first section in the logic model for the NIHR ACAF model is the 'inputs'. The inputs are the resources that are made available so that the programme can operate and achieve its defined goals. The inputs in this logic model are:

- Time and financial resources to publicise and promote the fellowship (NIHR)
- Ongoing NIHR activity to increase awareness and engagement of its work and opportunities offered, e.g. staff showcases, example case studies

- Local NIHR Research Support Services (RSS) and Regional Research Delivery Network (RRDN) to support applications
- Engaged and supportive NHS organisations
- NIHR resources to manage the programme
- Funding to cover the cost of Advanced Clinical and Practitioner Academic Fellowship, including salary, research activities, training programmes, etc.
- Opportunity for joint fellowships with industry or charitable partners (25-50%)
- Opportunity for fellowships in themed calls and NIHR priority areas

Activities

Following the logic model from left to right, the next part of this logic model is the activities section. These are the activities of the NIHR and the researchers who hold the awards, using the resources provided by the logic model inputs.

The activities to be undertaken by the NIHR are:

- Open competition managed by NIHR
- Sufficient, good quality applications with PPI and Equality, Diversity and Inclusion (EDI) content submitted and reviewed
- Ongoing programme management and co-ordination of annual and final reports from award holders
- Professional practice partners provide mentorship for award holders
- Professional practice partners provide clinical training
- Research and development mentorship provided (Academic Organisation)
- Undertaking research
- Undertaking needs based training and development activities (including overseas visits) e.g. Short courses or collaborating with subject experts overseas
- Attendance at conferences
- Networking and Collaboration Activities e.g. Research visits and meetings, partnership with Clinical Trials Unit
- Partnering with charity or industry
- Personal development activity - leadership, project management, relationship building
- Research- specific development activity based upon doctoral training
- Continuing PPI
- 20-40% of salaried fellowship time will be spent undertaking practice, associated training and professional development

Outputs

The next stage in the logic model, after the activities section, are the outputs. The outputs arise as a direct result of the previously defined activities. The outputs for this logic model are:

- A competitive award, with a range of suitable candidates from diverse backgrounds obtained funding
- Progress and impact reported in NIHR annual and final reports and ResearchFish submissions
- Increased professional practice and influence
- Protected time for mentees with mentors
- Substantially increased publication record
- Training awards, qualifications, accreditations, and development of clinical and professional practice skills
- Knowledge exchanged via conferences, presentations, publications and social media
- Established research networks and collaborations with practitioners and policy makers
- Showcasing of clinical academic route to clinical associates and stakeholder organisations
- Increased independence of the researcher
- Development of clinical and professional practice skills e.g. developing advanced clinical techniques
- Increased personal development skills
- Research specific skills developed, e.g. grant proposals produced, websites or online tools created, patents developed
- Competitive application for peer-reviewed senior post doctoral level research training fellowship
- Patients, public, and other key stakeholders contributed to, and gained knowledge in, relevant research areas via PPI activities
- Further development of professional practice skills due to protected time e.g. becoming a leader in their area

Outcomes

The fourth part of the logic model is the outcomes section. Outcomes are the measurable, often medium-to-long-term, changes that we expect to see as a result of the programme or award taking place. The outcomes for this model are divided into the following five different sub-sections: building capacity, advancing knowledge and skills, informing decision-making, broad socio-economic, and health impact. The outcomes within each of the five subsections are listed here:

Building Capacity and Capabilities :

- Expansion of research capacity in clinical areas
- Increasing number of researchers in the health and social care workforce as well as in the clinical workforce
- Increased collaboration and expansion of research networks
- Demonstrable upskilling and progression of applied health and care research workforce
- Obtaining funding to carry out further academic or health and social care research

Advancing Knowledge and Skills:

- Expansion of research in non-medical professional areas
- Advancements made in knowledge and understanding of health and social care research
- Knowledge transfer and translation between researcher, HEI host and professional practice host
- Embedding technical and/or personal skills (e.g. leadership development, project management, informal mentorship)
- Growing PPI informed research through the upskilling of researchers in the area of PPI
- Increased knowledge in inclusive research design

Informing Decision-Making:

- Supports and contributes to changes adopted in Health and Social Care settings as a result of research activity: policy changes, practice changes and efficiency savings

Broad Socio-Economic:

- Contribution to wider economic growth or a Return on Investment
- Contributing to the broad economic benefits resulting from health improvements across society
- Supporting improvement in Quality of Life: Quality-Adjusted Life Year or Disability-Adjusted Life Year
- Health research increasingly matched the needs of patients, the public and society as a whole via PPI-informed research

Improving Health and Social Care:

- Contributes towards patient and public benefit (Accessibility, efficiency, effectiveness)
- Evidence of wider dissemination of research informed practice in research area
- Contributing to a reduction in health inequalities

Assumptions:

The assumptions included within the logic model are underlying principles, ideas, and beliefs that we hold about how a programme will work. The assumptions may be about a number of different things, such as the external or internal environment of the programme, the programme participants, or the problem that it seeks to address. The assumptions included in this logic model are:

- Mentors will sufficiently engage with their assigned mentees to discuss research ideas and offer support during the award
- Awardees will choose areas of development appropriately and engage with their chosen activity in order to improve their skills
- Charity and industry partners recognise the importance of supporting advancement of clinical and professional skills
- Sufficient interest from the patients, public and other stakeholders

Contributions and acknowledgements

The NIHR supports the principles of open research, including full and appropriate recognition of the many varied contributions to the creation of knowledge. Those that have contributed to this work are listed alphabetically according to their surname.

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