How to get into Academic Psychiatry: Perspectives from Trainees

CHAIR: DR VIVIENNE CURTIS

THURSDAY 26TH JUNE 2014
BARBICAN CENTRE, LONDON
Outline

- **NIHR Academic Training Scheme**
  Lisa Cotterill, NIHR Trainees Coordinating Centre

- **Academic Foundation Programmes**
  Dr Roxanne Keynejad, St George's University of London

- **Academic Clinical Fellowships**
  Dr Tom Pollak, Institute of Psychiatry

- **Alternatives to ACFs**
  Dr Kimberley Kendall, Wales CAT Fellow

- **Clinical PhDs**
  Dr Jonathan Hafferty, Scottish Training in Academic Research scheme

- **Clinical Lectureships**
  Dr Tim Nicholson, Institute of Psychiatry
NIHR Integrated Academic Training Programme

Lisa Cotterill
NIHR Trainees Coordinating Centre
“Medically- and dentally-qualified academic staff: Recommendations for training the researchers and educators of the future”.
Integrated Academic Training

**Institutional awards:**
Apply to Deanery/NHS/University:

NIHR Academic Clinical Fellowship (ACF) (250)
NIHR Academic Clinical Lectureship (CL) (100)

**Personal awards:**
Apply to NIHR TCC for funding

NIHR In-Practice Fellowship (IPF) (10-12)
NIHR Clinician Scientist Award (CS) (8)
NIHR Integrated Academic Training post allocation 2009-2012

Average CCTs PA (2009-2012) vs ACFs + CJs

- Medium to High Allocation
- Low allocation

Specialties:
- General Surgery
- General Psychiatry
- Public Health Medicine
- Endocrinology and Diabetes Mellitus
- Geriatric Medicine (Dementia priority)
- Trauma and Orthopaedic Surgery
- Clinical Radiology
- Emergency Medicine
- Forensic Psychiatry
- Intensive Care Medicine
- Old Age Psychiatry (Dementia priority)
- Psychiatry of Learning Disability
- Child and Adolescent Psychiatry
- Anaesthetics
Medical Clinical Academic Career

NIHR ACF
Clinical Training
NIHR CL
CCT
Clinical Academics
Clinicians with Research PAs
Clinicians

NIHR & others
PhD Fellowships

NIHR & others
Clinician Scientist

NIHR ACF
Clinical Training

Clinicians with Research PAs
Clinicians
More Opportunities .....
Look at the websites and talk to the Funder
NIHR Trainee Support

- NIHR Annual Trainees meeting
- Experimental Medicine Training Camp
- Bursaries
- Training programmes
- Trainee forums and workshops
- Systematic Reviews Training
- NIHR Trainee Leadership Programme
- NIHR/AMS Mentorship Scheme
- Faculty World
Challenges and the Future

• Changes in the NHS Landscape
• The Economy
• Shape of Training
• Priorities – Dementia
• Capacity
• NIHR

Training will always be important
Academic Foundation Programme

DR ROXANNE KEYNEJAD

ACADEMIC FOUNDATION YEAR 2

ST GEORGE’S HOSPITAL, LONDON
ST GEORGE’S UNIVERSITY OF LONDON
Why?

• 450 per year (~5% all FPs)
• Gain experience & develop skills in Research, Teaching, Leadership, Management
• Explore a specialty in greater depth, through research
• Consider whether you want to pursue academia further in specialty training

Time

Why not? Less clinical time, unbanded, not prerequisite
How?

- Alongside the usual Foundation Application (no longer earlier)
- Additional white space Qs + interview
- Demonstrate understanding of the programme & reasons for undertaking it
- Demonstrate academic excellence in addition to clinical ability (less clinical time)
‘Academic Excellence’

- Publications – not essential
- Other articles & Writing
- Posters
- Presentations
- Prizes
- Courses & Conferences
- Intercalated & other Degrees
- Student Selected Components
- Research Projects
- Electives
- Audits
- Leadership, positions of Responsibility
Interviews

- Vary between regions
- Separate Academic & Clinical
- Practise critical abstract appraisal
- If few posts, know them well
- Revise clinical emergency basic management
- Safety first
- **Why do you want an AF post; what you would do?**
- **Why do you think research and teaching matter?**
- Realism re: clinical academia
- Back yourself – nothing to lose
- Shortlisting ≠ Rejection
- NB/ Ranking >100 jobs
- Plan well in advance
- Start early, esp. Ethics
- Organisation
- Work continues after post ends
- AFP may be after CT1 applications!
- Other projects throughout FP
- Tie up loose ends
- Evidence for everything
- Networking
- Exploring Career options
Example: AFP in GP & Medical Education

- 2 days per week, clinical GP
- 3 days per week, Med Ed, SGUL

👍 Clinical experience of GP
👍 Self-directed timetable
👍 Timing

👎 Limited time for self-contained Research project
👎 Post started 4th December; ACF interviews 2nd & 3rd Dec!
Example AF Post

FY1:
- Audits, Quality Improvement project, bedside teaching, medical school project publications, teaching course

FY2:
- PGCert Healthcare & Biomedical Education (SGUL)
- Clinical skills teaching: 3rd years
- Simulation training: Final years
- Exam Q Writing
- OSCE examining
- Systematic Reviews: GMH capacity building in LAMICs (EMERALD)
- Clinical Research: Spatial Navigation in MCI & Ψ comorbidity – NeuroΨ clinic
- Audit, Quality Improvement
- Presentations, Posters
- Courses, Conferences
- BMA activities
- Random publications
- Career planning, applications
- Exams
- Rest
Advice

- If good reasons...
- Go for it
- Back yourself
- Nothing to lose
- Excellent opportunity
- The gift of time
- Every post is different
- Transferable skills
- AF posts are what you make of them
- Get out what you put in
- Most can be achieved on non-Academic FP
Academic Clinical Fellowships

DR TOM POLLAK
CT3 ACADEMIC CLINICAL FELLOW
DEPARTMENT OF COGNITIVE NEUROPSYCHIATRY
INSTITUTE OF PSYCHIATRY
KING'S COLLEGE LONDON
Academic Clinical Fellowships in Psychiatry

- 3 years; 25% protected research time = 9 months (usually a block of 3 and a block of 6).
- CT/ST 1-4 entry points.
- Run-through training.
- Newcastle: General 1, Old Age 1; Hull York: CAMHS 1; Sheffield: General 1; Manchester: General 1, CAMHS 1; Nottingham: CAMHS 1; Oxford: General 1, CAMHS 1; Cambridge: LD 1; KCL: General 5, CAMHS 1; UCL: Old Age 1, CAMHS 1, LD 1; QMUL: General 1; Imperial: CAMHS 1; Southampton: General 1
- Aim, if applying pre-PhD, is broadly to lead up to a clinical research training fellowship (e.g. Wellcome, MRC, NIHR) – counts as OOPE.
How to prepare

• Read the marking criteria **early on** and sculpt portfolio accordingly – too much of one kind of achievement will not get extra points!
• Get some research experience and be prepared to talk intelligently about your experience of *being a researcher*, not just what your study was about.
  – SSM/SSC
  – Intercalated/previous degree/MSc
  – Academic Foundation Programme
  – Don’t be afraid to contact ‘big names’ – you’ll rarely be rebuffed! There’s always data to be analysed!
• If empirical/lab work is not possible, **SYSTEMATIC REVIEW**/case series and review.
• Make contact with IAT organisers and current ACFs.
• Need to have an awareness of academic training pathway and be able to outline medium to long-term plans (doesn’t commit you!).
The interview

• Usually early December. May be interviewed by staff from multiple sites.
• 2 interviews: academic and clinical.
• Can apply separately for different ACF specialities (i.e. general psych as well as child/adolescent).
• Results usually after deadline for General Psych non-academic core training, so will need to apply to both (app form v. similar).
• Recommended books: Picard et al. Medical Interviews: A Comprehensive Guide to CT, ST and Registrar Interview Skills (good for clinical interview).
• Mock interviews.
• Practice timing (e.g. ‘take me through your research career to date’ in 3 mins).
Making the most of an ACF

• Shop around at the start! Common for first research block to be unrelated to 2nd.
• Focus on choosing and developing skills (e.g. epidemiology vs. imaging vs. genetics) and supervisor.
• Having pilot data is ESSENTIAL for training fellowship applications.
• Apply for relevant clinical jobs. Start data collection during the placement/help team become more research-oriented.
• Ensure a desk in your supervisor’s lab/don’t just work from home.
• Seize opportunities!
• Spend the ACF/IAT bursary! Conferences etc.
• Apply for as many internal/external awards and funding calls as possible.
• If possible get experience of writing protocols/ethics applications etc. before clinical research training fellowship applications.
• Talk to seniors who have been awarded fellowships. Ask for copies of their application.
Alternatives to ACFs
The Wales Option

Dr Kimberley Kendall
WCAT Fellow and Core Psychiatry Trainee

@KimMHayes
Clinical Academic Mentorship Scheme

Aim:
To develop applications for externally funded fellowships at the MRC Centre

Provided:
Mentorship
Training budget
Residential meetings every 6 months
Place on annual research summer school

Requirements:
Postgraduate Academic excellence
Research potential

http://medicine.cardiff.ac.uk/cngg/research-opportunities/mentorship-scheme/
Wales Clinical Academic Track (WCAT)

Run-through Fellowship
Entry: From CT1
Provided: Salary funded full-time 3-year PhD Training Fellowship
Clinical training with dedicated academic time
Very flexible
‘Typical’ WCAT Progression

UG | Foundation | CT1

WCAT 1 | CT2/3  
PhD 3 years  
90-100% research

WCAT 5 | WCAT 6 | WCAT 7 | WCAT 8

80% clinical, 20% research
# My Planned WCAT Progression

<table>
<thead>
<tr>
<th>UG</th>
<th>Foundation</th>
<th>CT1 Med</th>
<th>CT2 Med</th>
</tr>
</thead>
<tbody>
<tr>
<td>WCAT 1 CT1</td>
<td>WCAT 2 CT2</td>
<td>WCAT 3 CT3</td>
<td>PhD 3 years 90-100% research</td>
</tr>
</tbody>
</table>
Thank you

@KimMHayes

kendallkm@cardiff.ac.uk
W10 How to get into Academic Psychiatry: Perspectives from Academic Trainees

- Clinical PhDs -

Dr Jonathan Hafferty, ST4 Psychiatry - Scottish Training in Academic Research (PsySTAR) scheme
Presentation Overview

• General structure of Clinical PhD programmes
  – PsySTAR as example

• Guidance for potential applicants

• Experience of current PsySTARs

• Beyond the PhD...
General Structure

• Entry is for psychiatrists who are already in clinical training
  – Typically post Membership

• PhD is taken as Out Of Programme Research (OOPR)
  – i.e. as ‘Mental Health Research Training Fellow’

• Research funding is provided within scheme
• Clinical salary – provided by scheme
“Standard” Post MMC NHS Specialist Training Funded NHS etc.

PsySTAR Advertised. Subject to successful entry to specialist Psychiatry training, appointees join PsySTAR, typically beginning ST4

Checkpoints: Year 1 report PhD Graduation etc

PsySTAR training programme
Eligibility

• “We welcome applicants from across the UK and will simply select the most promising candidates”

• “Typically, fellows will come from CT3/ST4 grade, with the MRCPsych and holding an NTN, and have a strong research background (intercalated BSc and evidence of clinical academic activity during core training in psychiatry).”

• “We realise that some promising candidates will not necessarily have the exam, an NTN and research experience, particularly as we advertise and recruit early in the academic year. We would therefore encourage candidates who expect to gain these in 2014-2015 to apply in Nov/Dec 2013.”

• “Candidates who still need to gain research experience may be eligible for our four year MRF/MRC Fellowships.”
PsySTAR Year 1: Research Training & PhD Project Selection

1 week full time ‘crash’ course
Overview of programme
Introduction to PhD selection
Meeting role models – postdoc fellows
Overview of transkills/MSc training
Tours of facilities - including CRFs & Institutes - on all sites
Intro to participating Research Centres
Meeting with Clinical Mentors
Social event

Sept-Mar:
• Access to Masters, on-line and face-to-face courses
• Meeting potential PhD supervisors
• Monthly CATRIP (Clin Acad Trainee Research in Progress) meetings
• Monthly updates with PsySTAR Director and Board members

1 week full time ‘techniques carousel’
Wet and/or Dry Lab, eg:
Microscopy, EM,
Immunoassay, Cell
culture, RT-PCR;
Imaging data analysis,
GWAS meta-analysis,
Bioinformatics intro
Statistical epidemiology
Clinical trial design

Apr–June:
• Write formal PhD proposal with supervisors
• One week full-time in lab

Panel meeting
• Defend project
• Necessary iterations identified

PhD Commences
• Sept for project amendment if required
• Final project agreed by Oct

Pool of potential supervisors includes a wide array of >50 leading basic and clinical scientists from a range of biomedical sciences, health services research and public health backgrounds based across the four research centres which make up PsySTAR.
Experience of Current PsySTARs

PsySTARs:
2013-
• Dr Alasdair Rooney
• Dr Adele Warrilow
• Dr Lindsay Mizen

2014-
• Dr Leanne Duthie
• Dr Grant Robertson
• Dr Filippo Queirazza
• Dr Jonathan Hafferty

2015-
Beyond The PhD…

PsySTAR training programme

- Int BSc
- Graduation MB ChB
- MRCPsych
- UG studies
- FY1-2
- CT1-3
- ST4
- PhD selection
  20% Research
  Full time PhD
  Further Research and Clinical training

PsySTAR1 (ST4)
PsySTAR 2-4 PhD;
(Out of Programme Experience)
PsySTAR5 (ST5)
PsySTAR6 (ST6)

“Graduation” from PsySTAR with Clinical Academic Training and CCT or Further Training as required

Encouraged to take substantive period of Post Doc training via Intermediate Fellowship
Clinical PhD Programmes

- PsySTAR
- ECAT (Edinburgh Clinical Academic Training)
- University of Dundee Discovery PhD Programme for Clinicians
- WCAT (Welsh Clinical Academic Track)
- Wellcome Doctoral Fellowships for Mental Health Clinicians in Oxford
- Wellcome Trust PhD Programme for Clinicians (Cambridge)
- Etc....
Summary

• You don’t have to be an ACF to get on clinical PhD programme
• Some schemes are aimed at clinical doctors generally, some specifically at psychiatrists
• Think through the Ps – Person, Place, Project, Professors (!), Publications, Potential
• Competition can be fierce but don’t be put off – be passionate about science and \textit{go for it}
Further information

- http://www.ed.ac.uk/schools-departments/psychiatry/psystar/home

- Professor Stephen Lawrie, Director of PsySTAR can be contacted by:
  - phone: 0131 537 6671
  - email: s.lawrie@ed.ac.uk

jonathan.hafferty@oxfordhealth.nhs.uk
Clinical lectureships
the 1st post-doctoral phase of a clinical academic career

Dr Tim Nicholson
Academic Clinical Lecturer,
Institute of Psychiatry,
King’s College London
How to climb the greasy pole!

Professor

Reader

Senior Lecturer

Lecturer

PhD student
Clinical and academic training paths

Clinical training

Student → FY 1-2 → CT 1-3 → StR (ST4-6 / SpR) → Consultant

Academic training

Research degree

PhD – 3 yrs*

or

MD (res) – 2 yrs*

Lecturer post → → →
The options

Types of Lecturer

1. Academic Clinical Lectureship (ACL)
   - Whilst in (and for) clinical training
   - NIHR funded

2. Post-doctoral fellowship:
   - For as long as the fellowship lasts (normally 3-5 years)
   - NIHR, MRC, Wellcome (and a few other) funding bodies

3. University post
   - Can be ‘fixed term’ or open ended (reliant on productivity)
   - Funded by Higher Education Funding Council for England (HEFCE)

4. Other money e.g. (‘project’) grant
Academic Clinical Lecturer posts

- England only (0-2 /yr in centres of academic excellence for psychiatry)
- Sub-speciality specific (General adult, old age, child, forensic...)
- 2.5 days / wk for research
- No extra clinical training
- Up to 4 yrs  - normally just for 3 yrs (or remaining time) of specialty training
- Best to apply before or early on in specialty training
# Psychiatry ACL posts 2011-14

<table>
<thead>
<tr>
<th>Location</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>KCL/IoP</td>
<td>4</td>
<td>3.5</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Manchester</td>
<td>1</td>
<td>1</td>
<td>0.33</td>
<td>1.33</td>
</tr>
<tr>
<td>UCL</td>
<td>0.33</td>
<td>0.33</td>
<td>1</td>
<td>0.67</td>
</tr>
<tr>
<td>Oxford</td>
<td>0.33</td>
<td>0.5</td>
<td>0.67</td>
<td>0.33</td>
</tr>
<tr>
<td>QMUL</td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Nottingham</td>
<td>0.5</td>
<td></td>
<td>0.33</td>
<td>1</td>
</tr>
<tr>
<td>Bristol</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Leeds</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Penninsula</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sheffield</td>
<td>0.5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ICL</td>
<td></td>
<td></td>
<td></td>
<td>0.5</td>
</tr>
<tr>
<td>Sheffield</td>
<td>0.5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hull/York</td>
<td>0.33</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Newcastle</td>
<td>0.33</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cambridge</td>
<td>0.33</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Mostly general adult posts - rarely other (old age, forensic, C&A, occ health)
Fellowships

NIHR: must be translational ("patient benefit <5yrs after end of project")
- ‘Post-doc’ (<3yrs after PhD): 2-3 yrs funding, 1 round/yr
- ‘Clinician scientist’ 5 yrs funding (1 RA for 3yrs) 1 round /yr

MRC: any research (helpful to be translational?)
- ‘Clinician scientist’ 5 yrs funding, 1 round/yr

Wellcome: any research (generally mechanistic?)
- Post-doc clinician (<2yrs postdoc) 2-4 yrs funding, max 250k, 3 rounds/yr
- Intermediate: 5 yrs funding, 2 rounds/yr

AMS (Academy Medical Sciences):
- Clinician scientist: 5 yrs funding, 1 round every 2-4 yrs

MQ (Mental Health & Quality of Life)
- MQ fellows programme: 3yrs max 225k 1round /yr

ESRC (Economic & Social Research Council): Future research leaders scheme
Fellowships

Can’t apply for both at same time!

NIHR: must be translational (“patient benefit <5yrs after end of project”)
- ‘Post-doc’ (<3yrs after PhD): 2-3 yrs funding, 1 round/yr
- ‘Clinician scientist’ 5 yrs funding (1 RA for 3yrs) 1 round /yr

MRC: any research (helpful to be translational?)
- ‘Clinician scientist’ 5 yrs funding, 1 round/yr

Wellcome: any research (generally mechanistic?)
-Post-doc clinician (<2yrs postdoc) 2-4 yrs funding, max 250k, 3 rounds/yr
-Intermediate: 5 yrs funding, 2 rounds/yr

AMS (Academy Medical Sciences):
- Clinician scientist: 5 yrs funding, 1 round every 2-4 yrs

MQ (Mental Health & Quality of Life)
- MQ fellows programme: 3yrs max 225k 1round /yr

ESRC (Economic & Social Research Council): Future research leaders scheme
University posts

Increasingly rare, but could expand in upcurve of ‘financial cycle’ if HEFCE funding increased!

Will have variable research / teaching components and length of contracts....perhaps not as secure as they once were!

Subscribe to jobs.ac.uk / bmjcareers for email alerts

Ask around / get connected to places / departments you’d like to work in (or consider working in!)
Grants

- NIHR: Programme / Research For Patient Benefit (RFPB) grants
- MRC: Programme grant
- Wellcome: Programme grants
- AMS (Academy Medical Sciences): ACL starter grants
- MQ (Mental Health & Quality of Life): Psy-IMPACT
- NARSAD
- ESRC (Economic & Social Research Council):
  - (Specific calls from any of the above – in DoH)
- European Research Council
Getting competitive

Maximise outcomes for the work you put in:
- Doing a little extra on things you already have to do (e.g. presentations / audit)
- Think about chances of publication / other career progression

Plan ahead: work backwards from application forms for next step (& beyond!)

Start working on getting:

- Publications: Increased emphasis on
  • Quality (not quantity): for Research Exercise Framework (REF) only best 4 (2 if still trainee / ‘early career’) papers in 4 year cycle count. Being only author from a university helps.
  • Citations (not journal) Increasing importance of citations / H index.

- Grants: international/national/local

- Teaching sessions: esp those that attract money (taught courses). Consider formal teaching course (e.g. diploma)

- Other: Presentations/posters (esp at research meetings, particularly national/international) / Prizes / MSc or diploma
Panel Q & A