

# University of Manchester Clinical Lecturer Handbook

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*This handbook contains general information about  
The University of Manchester's Clinical Lecturer programme as well as  
the schedule for assisting and monitoring academic progress*

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# Welcome to the Integrated Clinical Academic Training Programme

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Welcome to the University of Manchester and Health Education England (NHSE) Integrated Clinical Academic Training (ICAT) Programme. We are delighted that you have chosen our programme for the next phase of your clinical and academic training. The two organisations work very closely together to deliver an individualised high-quality education.

We host the second largest NIHR ICAT programme in the UK, with over 300 Academic Clinical Fellows (ACFs) and Clinical Lecturers (CLs) recruited since 1997. The University of Manchester has an international reputation for high quality medical research, and the overall scale and diversity of our research at this University is unrivalled in the UK.

The ICAT team is here to make sure you make the most of this opportunity, and we are here to help and to advise. Further information can also be found on our webpages:

<http://sites.bmh.manchester.ac.uk/icat>

***Please note that for clinical trainees, clinical rotations and progress are managed by NHS England North West, not the University of Manchester. Please contact NHSE for additional information (see the Key contacts section in the Appendix for the relevant details).***

The purpose of this handbook is to outline the structure and objectives of your Clinical Lectureship, where to seek help and guidance if needed, and how your progress through the post will be monitored and supported.

Please do not hesitate to contact your local academic team (supervisor, advisor), the programme Co-ordinator or the CL Programme Lead if you have any queries.

**We hope that you enjoy your time in Manchester as a Clinical Lecturer and beyond!**

Dr John Blaikley, CL Programme Lead [john.blaikley@manchester.ac.uk](mailto:john.blaikley@manchester.ac.uk)

Laura Skinkis, ICAT Programme Co-ordinator [icatadmin@manchester.ac.uk](mailto:icatadmin@manchester.ac.uk)

## **CL Representatives:**

Dr Alexander Oldroyd [alexander.oldroyd@manchester.ac.uk](mailto:alexander.oldroyd@manchester.ac.uk)

Dr Jessica Drinkwater [jessica.drinkwater@manchester.ac.uk](mailto:jessica.drinkwater@manchester.ac.uk)

Dr Gabriella Lindergard [gabriella.lindergard@manchester.ac.uk](mailto:gabriella.lindergard@manchester.ac.uk)

## Introduction

The Faculty of Biology, Medicine and Health (FBMH) Clinical Lectureships are designed to offer postdoctoral support for clinicians and allied health professionals who have completed a higher degree (PhD, MD or equivalent) and currently hold a National Training Number (NTN) - with the exception of post CCT GPs, GDPs and NMAHPs.

The Clinical Lectureships are part of the Faculty's Integrated Clinical Academic Training (ICAT) Programme and appointees join a vibrant programme of junior clinical academics throughout the Faculty.

Where appropriate, the post-holders will spend 50% of their time in clinical work and 50% of their time undertaking research and developing their academic skills.

The research/academic aspects must be commensurate with existing areas of strength within the Faculty. The exact nature and commitments of the research and clinical aspects of the posts will generally depend on the clinical specialties and the research groups in which the Clinical Lecturers are based. These should be agreed with the post-holders, the Academic Programme Leads and the relevant Specialty Training Committee (STC) Chairs (where appropriate). If taken at the end of specialty training, the Clinical Lectureships should lead to the award of Certificate of Completion of Training (CCT) in the clinical specialty, with appropriate adjustment of CCT date (except for post CCT GPs, GDPs and NMAHPs).

The posts are available for a maximum of four-years (full time equivalent), depending upon how much time is left prior to CCT and subject to satisfactory annual review by a joint University / North Western Postgraduate Deanery Annual Review of Competence Progression (ARCP) process (if still in clinical training). Being successfully awarded an advanced fellowship will also bring the post to an end.

**It is expected that Clinical Lecturers will have applied for an external Advanced Fellowship within the four-year period.**

## Induction

All new appointees are required to have an introductory Project Planning meeting with the CL Programme Lead. You will be emailed details on how to arrange this by the ICAT Team during your first month on the programme.

As a priority, you need to obtain an honorary NHS contract (for GPs/GDPs this might be a substantive NHS contract) where you provide clinical services. This ensures that you have NHS indemnity for your clinical work in your clinical setting. Please contact HR at your host clinical setting to discuss this. Obtaining an honorary contract can take time to arrange, so try to do this as soon as you know where you are due to rotate to next or be based.

You should also meet with Dr Rachel Cowen to discuss your individual academic development training needs.

Whilst CLs are not expected to complete the New Academics and Fellows Programme ([NAP](#)) during their post, many of the modules of the NAP\* are extremely beneficial. Notably, completion of NAP components during the CL post will contribute to ultimate completion of the NAP should a probationary Senior Lecturer appointment be made at the University in the future.

\* There is mandatory equality, diversity & inclusion (EDI) training as part of NAP and an online social responsibility module that includes EDI and links to Athena Swan, Race Charter etc.

## Contracts

For all CL posts, the University of Manchester is your formal employer. The University pays your baseline salary, is responsible for ensuring that occupational health requirements are met, and has oversight of HR and leave, etc. You are entitled to continue contributing to your NHS pension, and should be offered this opportunity when signing contracts at the beginning of your employment.

You **MUST** have an Honorary Contract for all NHS work performed. Without this, the organisations you conduct clinical work for have no legal obligation to indemnify your practice (although they are likely to, in practice). Not having an Honorary Contract for clinical practice also has implications for continuity of service in regard to the NHS pension, parental leave, and sickness benefits. Previous CLs have had difficulties in arranging their Honorary Contracts, for a number of reasons. This should not happen, and if you experience such difficulties please inform the ICAT team as soon as possible.

Please find a contact list at the end of the handbook regarding the set-up of your University and honorary NHS contracts. If you are a hospital based CL in training you need to inform the ICAT and NHS-liaison teams of your clinical training placement and rotations between NHS Trusts so that appropriate contracts and pay arrangements can be made. Pay for on-call work is 'recharged' from the clinical Trusts to the University, so it is important to keep everyone up to date with your current working arrangements. Please ensure you give prior warning before rotating to ensure our finance department can setup salary (for matched CL posts) and on call recharges in time. The University is unable to recharge your salary and any pay banding without sign off from your NHS Trust. If you have specific questions about NHS Trust liaison please contact: [nhsliaison@manchester.ac.uk](mailto:nhsliaison@manchester.ac.uk)

If you are a GP or GDP, you are responsible for arranging an honorary or substantive NHS contract. If you are an NIHR funded CL you can negotiate top up pay with your general practice for your clinical sessions. Your practice will pay you this top up directly and you should have a substantive NHS contract associated with this. Equally if you are funded by local match funding your general practice should be paying you directly and you should have a separate contract for your clinical time which can be negotiated independently by you. In both cases, receiving some payment via your practice will protect your NHS continuous service benefits and ensure you are visible on the Performers list as you will need still need to submit an annual Tier 2 pensions contributions form. It is always worth getting your contract checked for example through the BMA.

If you are an NIHR funded CL, not receiving a top up payment locally, and not employed by an NHS trust, YOU will need to arrange an honorary contract. You also need to ensure that you are not accidentally removed from the Performers list if your practice is not paying you directly. You are strongly encouraged to discuss your honorary contract and Performance list status with your Practice Manager, local HR, and union (e.g. BMA). The ICAT team and university HR can provide support but cannot give you a contract.

There is national guidance and a template for senior academic GP honorary contracts here: <https://www.nhsemployers.org/articles/guidance-employing-clinical-academics>

### Ongoing support

Your academic supervision team, CL Programme Lead, Training Programme Director (TPD) and the ICAT team will support your academic and clinical progression through your CL training. You will be expected to record your progress through twice-yearly progress meetings. Please contact the ICAT team at any time if there are specific issues which need additional input.

### Panel

In 2022, it was recognised that CLs may not be receiving uniform support and oversight from a Division level. The opportunity to discuss progress with members of the Division has been developed. This should be an informal discussion offered to all CLs, focussing on your personal development (rather than an in-depth critique of individual projects). This process is just beginning to be established and so please let the ICAT team know of any concerns. These panels should be representative.

### Peer Support

There are 3 appointed CL trainee representatives who attend the ICAT operational meetings with the leadership team to feed back trainee questions and queries. There is also a trainee WhatsApp group for sharing information between CLs. **If you would like to be added to this group, please email one of the CL reps (details on page 3).**

### ICAT Trainee Representative Role Description

ACF and ACL Trainee Representatives are defined as current trainees on the Integrated Clinical Academic Training (ICAT) Programme who act as a conduit between the trainees and the ICAT

Operations Group, ensuring issues/feedback/updates are communicated in every direction. ICAT Reps have a vital role in supporting the development of a culture that fully supports the clinical academic community. They help to raise awareness of relevant issues and opportunities and act as champions for researcher careers and skills development, reward and recognition.

The expected time required to be allocated to the role will, in general consist of 9 hours of scheduled meetings per academic year plus planning and attending the trainee annual symposium. The time devoted to general responsibilities is estimated to be no more than 1 hour per week.

**General responsibilities of this role are to:**

Regularly communicate with trainees to learn about issues that affect them

- Attend and contribute to the agenda of the bi-monthly ICAT Operations Group Meetings in which the ICAT Leadership Team, NHSE representatives, PS staff and link groups meet
- Cascade information from the meeting to trainees and provide input to actions as and when required
- Attend and take the lead on the planning of the ICAT annual symposium

**Knowledge, skills and experience that can be gained from this role:**

- Teamwork
  - ~ Liaise closely with colleagues
  - ~ Co-ordinate with other areas of the University and external parties
- Communication
  - ~ Ability to communicate effectively with diverse groups of staff on all levels
  - ~ Ability to motivate colleagues and stimulate discussion
  - ~ Liaise, establish and maintain positive links throughout the University
- Leadership skills
  - ~ Ability to observe and define priorities in the achievement of strategic and operational objectives
  - ~ Time management skills
  - ~ Influencing skills
- Administrative skills

**Selection process:**

It is the responsibility of the ICAT programme to appoint at least one ACF and one ACL Rep. The selection process will vary dependent upon the governance processes and needs of the programme, but should be done in an open and transparent way so that the ICAT rep pool fully represents the diversity of the clinical academic community. ICAT Reps are encouraged to help identify someone to take over the role if/when they move on in their career (when possible).

### **Organising your Academic/Clinical time split**

Over the duration of your CL your time should be split equally (50:50) between clinical work and academic duties. The division of time is flexible – e.g. you may choose to split the weeks or do longer academic and clinical blocks. You should agree your timetable with your CL Programme Lead and academic supervision team and this should be reviewed regularly over the time frame of your CL. For CLs wishing to work less than full time (LTFT), which is fully supported, your time should continue to be divided 50:50 between clinical and academic duties. Keep a clear log of the divide of time between academic and clinical placements, so this is available for your CCT calculator.

### **Academic objectives**

Research: A commitment should be made for undertaking cutting edge research that is commensurate with the research priorities of the relevant research groups within the Faculty. This will include seeking and exploring external funding opportunities during and following the CL post and publishing your research in appropriate peer-reviewed journals of national/international standing. The primary goal of your CL is to be in a position to submit a postdoctoral Advanced Fellowship level application towards the end of your contract.

Academic development: Your academic skills should be developed throughout your CL by participation in post-doctoral academic training and research activities. Your academic training needs should be discussed with your supervisory team and CARD.

Supervision experience: Supervision of medical student and post graduate students is encouraged during your CL to progress your academic skills and also to develop new research opportunities. However, this needs to be balanced with your primary research activities.

Teaching: Your teaching allocation should be kept to a minimum – supervision of undergraduate student projects is encouraged if it contributes to your ongoing project aims.

Administrative responsibilities: Following discussion with your academic supervisory team, it may be appropriate to take on some administrative responsibilities. These should take into account your workload in other areas and the need to gain this type of experience for purposes of personal academic development.

University engagement: You will be expected to attend Research Group/Division/School or Faculty meetings and participate in other committees and working groups within the University as appropriate. Attendance and engagement with ICAT events is also expected.

Networking: The ICAT team hold an annual symposium and regular networking events through the year. There is also a regular email newsletter – please forward any announcements or suggestions for the networking events to the ICAT team.

### **Trust placements**

For CLs who are clinical trainees, an appointment to the North West Region Training Programme will be made. Importantly, CLs are not counted within the regional trainee allocation and should therefore conduct their training in the hospital(s) most appropriate for their training needs. Placements should be discussed and agreed between yourself, your TPD and CL Programme Lead.

On call duties, where appropriate, should be locally determined according to the clinical placement and your training needs. It is generally expected that CLs will do a minimum of 50% on call duties.

Please ensure that you update the ICAT Team, NHS Liaison and Health Education England North West of any changes to your clinical rotations between NHS Trusts. Please give prior warning before rotating to ensure our finance department can set up salary (for matched CL posts) and on call recharges in time. The University is unable to recharge your salary and any pay banding without sign off from your NHS Trust.

For GPs and allied health professionals, clinical arrangements should be negotiated with the relevant honorary employer, you will be responsible for this.

### **Pensions**

You can continue your NHS pension whilst on your University contract but you need to arrange this in the first months on the programme with UoM P&OD and Trust, or local HR.

### **CCT**

The number of months between your appointment date and your current CCT date will be doubled to calculate your new CCT date. The CCT date will be extended at the beginning of your CL and should be agreed at your ARCP. Those with more than two years between appointment and CCT will complete the CL prior to CCT. For those with less than two years between appointment and CCT, there is the possibility of extending your CL contract beyond your CCT date.

### **Extensions**

Applications for extensions need to be discussed and approved by the ICAT team and will be dependent on your academic progress. Extensions are not available to GPs, GDPs, AHPs who are post CCT.

There are two different process for applying for extension, depending on whether you are in an NIHR funded post, or a matched post. Please ensure you follow the correct pathway, depending on which funding route applies to you. It is expected that the extension will allow additional time for academic training and development, particularly the preparation of an external fellowship. Post CCT clinical duties may also be possible, but usually at only 2 clinical sessions per week, and are dependent on local arrangements.

## **NHS England West (NHSEW) and National Institute of Health & Care Research (NIHR) Academic Clinical Lecturer (CL) Extension Process:**

### **NIHR funded trainees**

This process does not apply to GP CLs. CLs wishing to extend their NIHR funded CL contract beyond CCT must submit their application, including all signatories, at least 6 months prior to their CCT date.

NIHR will fund up to an extra 2-years of contract if the postgraduate doctors has not taken up a consultant post.

CLs that are matched still need to follow this process but the approved documentation is to be sent to appropriate ICAT Lead for their approval.

Once NHSEW are informed that a postgraduate doctor wishes to apply for an extension, the **NHSEW Academic Training Support Lead**, will send the trainee an [email](#) detailing the requirements.

The following guidance is taken from the [NIHR website](#).

*There are links with this document that are for internal use only.*

### Eligibility

- The option to apply for an extension post-CCT is open to CLs in specialty training provided they are within the 4 year's funding for the award.
- If the CL does not reach CCT by the end of the 4 year CL post period, then no extensions will be considered by the NIHR.
- Applications for extension must be made at least 6 months prior to CCT.
- A trainee that wishes to apply for an extension must have more than 12 months remaining of their training at the time of appointment to the NIHR CL post.
- Trainees with less than 12 months to CCT will be considered ineligible.
- GP CLs are ineligible for a post-CCT extension, as they have already gained CCT and are fully qualified.

**Extensions are not automatically given; they are considered on a case-by-case basis and are not guaranteed to be granted.**

### Extension duration

- A CL extension is for a maximum of 24 months beyond CCT, or until the 4-year funding maximum is reached. For example, a CL who uses 3.5 years of the funding to reach CCT will be offered a 6-month extension.
- Except in exceptional circumstances, post-CCT/CCST CLs must reduce their clinical commitments to 2 clinical sessions per week, which should be sufficient to maintain clinical skills and remain appointable as a NHS consultant. Those employed in the craft specialties may undertake up to 4 clinical sessions per week, with the extension request accompanied by an explanation for this requirement.

### Documentation

The documentation noted below needs to be submitted to [natalie.dawson14@nhs.net](mailto:natalie.dawson14@nhs.net) / [lindsey.robinson9@nhs.net](mailto:lindsey.robinson9@nhs.net)

**Cover Letter** addressing the following points:

- NIHR CL Start Date
- Target CCT date
- The intended academic / clinical time split. **This must be 80% Academic and 20% Clinical.**

**Postgraduate Doctor Statement of Intent** (1-2 pages) addressing, for example, the following points as befits the personal circumstances of the individual:

- What are your career ambitions?
- What research and academic training will be undertaken during the extension?
- What will your clinical duties consist of?
- Are there any publications in preparation / under review?
- What stage are you at with applications for further funding (grants/fellowships etc.)?
- If a fellowships application has been submitted but was unsuccessful, what steps are being taken to address the feedback?
- What is the intended submission date for a future fellowship / grant application?
- What support is the host institutional partnership offering to facilitate applications for further funding?
- In the event that the fellowship or grant application is unsuccessful, will the host institution provide bridging funding?
- Has the host institution offered a substantive post at the end of the NIHR CL award?

**Letters of Support** indicating how the CL will benefit from the extension both academically and clinically from the following:

- The NIHR Academic IAT Lead
- The academic supervisor
- The clinical supervisor/Training Programme Director
- The host HEI, justifying the need for extension. Commitment from the academic institution should also include a post-CCT/CCST job plan

[Upon receipt](#) approval will be sought from the Postgraduate Dean or nominated delegate (presently Dr Mumtaz Patel Deputy Postgraduate Dean). If approved, NHSEnw will provide a [cover letter](#) and apply to [NIHR](#) on the applicant's behalf.

**NHSEnw will inform the Programme Support Manager of the applicants' speciality of such request. All extension requests from January 2022 will be stored in the following [folder](#) and the [extension tracker](#) updated accordingly.**

#### **Once approved/declined**

**NHSEnw will email the postgraduate doctor confirming the decision from NIHR and update the NHSEnw will copy in all relevant parties in the email.**

NHSEnw will update the [extension tracker](#) and the [master spreadsNHSEt](#), ensuring the extension is noted accordingly. Programme Support are not required to update the Trainee Information System as the CL will be classified as a leaver from their CCT date.

NHSEnw is responsible for keeping the Head of School for the applicant's specialty updated with the progress of such application.

### Employer and responsible officer

The CL will remain employed by the Higher Education Institution (HEI), or substantive employer post-CCT with an honorary contract with an NHS Trust.

Ideally the doctor will move Responsible Officer from the Postgraduate Dean to the Responsible Officer at the trust where the doctor will hold an honorary contract.

The CL post-CCT will need to be appraised jointly, both clinically and academically, via the [Follet Report](#) principles with adherence to the joint working checklist, with academic progression managed by the substantive employer's HR processes.

### Useful notes

Postgraduate doctors in their CL extension funded by NIHR can do on call for twilight hours and weekend days but not obliged to work twilight shifts during the extension.

### Timeline

<p style="text-align: center;"><b>AT LEAST 8 MONTHS PRIOR TO CCT</b></p> <p>Postgraduate Doctor contacts Academic IAT Lead and Academic Supervisor to discuss an extension to contract.</p> <p>Postgraduate Doctor must meet the <a href="#">eligibility criteria</a> before such extension can be considered.</p> <p>If approved, Postgraduate Doctor to collate all the required <a href="#">documentation</a> for submission to NIHR</p>
<p style="text-align: center;"><b>AT LEAST 7 MONTHS PRIOR TO CCT</b></p> <p>Postgraduate Doctor to submit the required document to NHSE(NW) to process and to seek approval from the Postgraduate Dean or nominated delegate (presently Dr Mumtaz Patel Deputy Postgraduate Dean).</p> <p>NHSE(NW) to update the <a href="#">extension tracker</a>.</p>
<p style="text-align: center;"><b>AT LEAST 6 MONTHS PRIOR TO CCT</b></p> <p>NHSE(NW) to send cover letter and supporting evidence to NIHR requesting an extension to the ACL contract post CCT.</p> <p>NHSE(NW) will inform all relevant parties once a decision has been made and update <a href="#">extension tracker and the master spreadsheet</a></p>

### Match-funded trainees

1. Write a letter to the ICAT team outlining the reasons for applying to the extension, including
  - a. progress to date
  - b. fellowship application plans
  - c. what you hope to gain from an extension period
2. Once the extension has been approved by the ICAT team and NHSE(NW), you will need to arrange your pay to continue to be paid half by The University and half by the Trust. There are two potential options for how this might work.

- a. Have a single employment contract with the University (a continuation of your CL arrangement), where the Trust funds 50% of your salary, all of which is paid at StR level.
- b. Have two employment contracts. The University will continue to pay you at StR level for their 50% of salary. The Trust may pay you at Consultant level or StR level for their 50%, depending on what you are able to negotiate locally.

Pay from the University during post-CCT extensions will continue to be paid at StR level for both NIHR and match-funded ACLs, rather than moving up to consultant pay scales following CCT. This is because the University has a finite budget for CLs, and so anyone applying for an extension needs to understand and accept this limitation.

### Post CCT pay

Trainees who are moving from either the post or pre-2016 Junior Doctor scale will move to the Clinical Academic pay scale on appointment to a Clinical Senior Lecturer post, where the joint job plan holds Consultant PA's approved for and paid by an NHS Employer.

Trainees who have undertaken training on a LTFT are entitled to enter the consultant salary at a higher starting threshold, there are currently only two situations whereby that advancement can happen:

- Firstly to train LTFT, and have written documentation from the Deanery/HEE NW to confirm that application was successful.
- Secondly, to have dual accreditation whilst training, where the dual accreditations is usually a dental degree, and then the MBBS required to be a Maxfax Surgeon.

At the time of writing (January 2024), there is no precedent for NHS starting salary to reflect delay to completion of training due to dual academic and clinical training.

### NIHR £1,000 Bursary

The NIHR bursary provides NIHR CLs with a source of funding to attend and/or present their research findings at external research meetings and conferences that are relevant to their academic training. The University of Manchester's ICAT team manage the bursary fund of £1,000 per year, per CL and is responsible for approving expenditure against the bursaries.

Each financial year any unclaimed bursary funds remain with the ICAT team for use on activities that benefit the academic development or training of the NIHR CL trainees unless you submit a written request to the ICAT Team for any remaining funds to be rolled over to the following year.

Please email the ICAT team in the first instance to request use of the bursary ([icatadmin@manchester.ac.uk](mailto:icatadmin@manchester.ac.uk)). Once we have given approval, **after the event**, you need to log-on to the University of Manchester [MyView](#) system and complete the on-line form, including the ICAT Finance Code (FA01665) and submit, along with **all receipts**.

For more information please visit the ICAT CL intranet:

<http://sites.bmh.manchester.ac.uk/icat/ICATintranet/CL/>

## Mentoring Programme

The mentoring programme has been specifically designed for newly appointed CLs and has corporate support from the University Staff Training and Development Unit. The programme's overall aim is to assist CLs in training to achieve personal and professional growth leading to academic success and, ultimately, to the development of academic leadership. This aim will be facilitated through the following objectives:

- to give mentees the opportunity to build networks
- to help to build a framework of support for mentees
- to enrich mentees understanding of the University and North West Deanery e.g. their culture and systems
- to facilitate career and personal development planning
- to give mentees time for reflection
- to give mentees an opportunity to challenge pre-conceived ideas

The Faculty recognises the immense potential of mentoring for staff at all stages of their career and is committed to developing a mentoring culture that engages and empowers everyone across the Faculty. The aim is to make mentoring a core staff activity, which is valued and rewarded, enabling us to learn from each other and grow professionally and personally. For further details please go to:

<https://acmedsci.ac.uk/grants-and-schemes/mentoring-and-other-schemes/mentoring-programme>

## Monitoring of Progress

All CLs should have regular informal meetings/discussions with their local academic supervisors/mentors, their CL Programme Lead and TPD.

In addition, you are required to have a number of formal meetings (with completion of the forms below) during your post to ensure satisfactory academic progress is demonstrated; these meetings are summarised in the table below. Your twice-yearly review meetings should include your immediate supervisors/mentors and your academic programme lead. One of your twice-yearly review meetings should include your Head of Division.

If you are pre-CCT in the meeting nearest to your ARCP, a summary of your progress must be submitted to the ICAT Team ([icatadmin@manchester.ac.uk](mailto:icatadmin@manchester.ac.uk)) and to the CL Programme Lead. This summary of progress will be considered as part of your annual training assessment at your ARCP along with your clinical progress.

**It is a mandatory requirement that your progress form is reviewed and signed by John Blaikley, the CL programme lead prior to your annual ARCP** and it is your responsibility to ensure that your review meeting has taken place and that your form has been submitted to the ICAT team in a timely manner. In the event that appropriate progress is not demonstrated by the annual review form, you will be expected to meet with a member of the ICAT team to discuss additional support. Make sure that you clearly label this form and upload it to your e-portfolio for ARCP purposes.

If you have any concerns about your academic training, research progression or supervision arrangements a meeting can be arranged at any time with a member of the ICAT team.

A summary of the formal meetings is given below along with links to the forms:

Date	Meeting	With
First month	<p><b><u>Project Planning meeting:</u></b></p> <ul style="list-style-type: none"> <li>Contract and HR</li> <li>Supervisor-Sponsor arrangements</li> <li>Project plans</li> <li>Collaborations (internal, external)</li> <li>Research facilities</li> <li>Clinical duties</li> <li>Research-Clinical balance</li> <li>Our expectations, in particular external Fellowship application</li> </ul>	John Blaikley (CL programme lead)
<p>Twice-yearly</p> <p>In the meeting nearest ARCP, form should be submitted to the ICAT team for approval by CL Programme Lead</p> <p>At least one meeting per year must include your Head of Division</p>	<p><b><u>Project Progress Meeting:</u></b></p> <ul style="list-style-type: none"> <li>Project progress – outputs (abstracts, presentations, papers), skills acquired</li> <li>Clinical progress</li> <li>Successes and Obstacles</li> <li>Supervisor-sponsor arrangements</li> <li>Progress towards Fellowship application</li> </ul>	Supervisor and CL Programme Lead ± University Head of Division

## Appendix

### Key Contacts

#### INTERNAL

Name	Position	Email
John Blaikley	CL Programme Lead	<a href="mailto:john.blaikley@manchester.ac.uk">john.blaikley@manchester.ac.uk</a>
Jenny Myers & Tom Blakeman	Co-ICAT Leads	<a href="mailto:jenny.myers@manchester.ac.uk">jenny.myers@manchester.ac.uk</a> / <a href="mailto:t.m.blakeman@manchester.ac.uk">t.m.blakeman@manchester.ac.uk</a>
Laura Skinkis	ICAT Co-ordinator	<a href="mailto:icatadmin@manchester.ac.uk">icatadmin@manchester.ac.uk</a>
Anne Brandolani	ICAT Administrative Assistant	
Lisa Roach	HR Partner	<a href="mailto:Lisa.J.Roach@manchester.ac.uk">Lisa.J.Roach@manchester.ac.uk</a>
Cheryl Holmes/Clare Cooke	NHS Liaison	<a href="mailto:nhsliaison@manchester.ac.uk">nhsliaison@manchester.ac.uk</a>

#### EXTERNAL

Name	Position	Email
NIHR Academy	General Enquiries	<a href="mailto:IAT@NIHR.ac.uk">IAT@NIHR.ac.uk</a>
Mumtaz Patel	North Western Deanery	<a href="mailto:mumtaz.patel2@nhs.net">mumtaz.patel2@nhs.net</a>
Natalie Dawson / Lindsey Robinson	Programme Support Co-ordinator	<a href="mailto:natalie.dawson14@nhs.net">natalie.dawson14@nhs.net</a> / <a href="mailto:lindsey.robinson9@nhs.net">lindsey.robinson9@nhs.net</a>

## Starter checklist

Item	Comment
Organise honorary clinical contract	New CLs need to ensure that they have an honorary contract with the Trust(s)/Practice(s) where they provide clinical services (for some post-CCT CLs this may be a substantive contract). This ensures that you have NHS indemnity for that Trust/practice/organisation. Please contact HR at your host Organisation on this. Obtaining an honorary contract can take time to arrange, so try to do this as soon as you know where you are due to rotate to next.
Pension considerations	If you wish to continue contributing to the NHS pension scheme instead of the University pension scheme, please contact University HR within the first 3 months of your appointment.
Arrange induction meeting with CL Programme Lead	
Arrange meeting with your University Head of Division	Consider clarifying monitoring process and teaching commitment obligation (e.g. by sharing the CL Handbook or by linking them with the CL Lead)
Liaise with University HR	Complete new starter paperwork and return to University HR. University staff card can be obtained at the same time. This should be completed within the first 2 weeks of starting in post.
Liaise with University IT	Request IT and email access
Liaise with University supervisory team	Discuss where University work could be conducted (including lab space and computer allocation)
Liaise with TPD and clinical rota team	Consider discussing how training and research are going to be integrated, what rotations should be prioritised and what are the expectations regarding on call.
On call commitments	Communicate with your TPD/CL Programme Lead/supervisory team regarding on call commitments. Once this has been agreed inform the NHS Liaison Team to arrange relevant reimbursement.
Arrange meeting with Rachel Cowen and plan for NAP involvement	