



# Investigating clinician researcher career pathways project

Telephone Interviews Summary Report

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# Contents

<b>1. Project overview</b>	<b>1</b>
1.1 Project Background	1
1.2 Project Context	1
1.3 Summary of methods	2
<b>2. In-Depth Telephone Interviews Project</b>	<b>3</b>
2.1 Background	3
2.2 Participants	3
2.3 Sampling	3
2.4 Indigenous Clinician Researchers	3
<b>3. Project Questions</b>	<b>4</b>
<b>4. Discussion</b>	<b>10</b>
4.1 Limitations of this study	10
4.2 Key Outcomes	10
4.3 Clear career path for clinician researchers	10
4.4 Increased value and duration of funding	10
4.5 Organisational support	11
4.6 Protected research and clinical time	11
4.7 Final message	11
<b>Appendix A – Participants</b>	<b>12</b>

# 1. Project overview

## 1.1 Project Background

The *Investigating Clinician Researcher Career Pathways Project* (the project) was initiated as a priority project by National Health and Medical Research Council (NHMRC) Health Translation Advisory Committee (HTAC) during its 2015–2018 triennium. HTAC is a principal committee of NHMRC and provides advice to the CEO and Council of NHMRC on opportunities to improve health outcomes in areas including clinical care, public, population and environmental health and prevention of illness through effective translation of research into health care and clinical practice. The results of the project will assist HTAC in making recommendations to the CEO on the training and career pathways for clinician researchers.

This project aims to help NHMRC better understand:

- whether there are appropriately clear and supported career pathways available to clinician researchers in Australia
- factors that enable some clinicians to enter research
- factors that enable some clinicians to maintain a career in research
- factors that cause some clinicians to choose not to enter research
- major support mechanisms and enablers for clinician researchers
- major barriers and current issues for clinician researchers.

For the purpose of this project clinician researchers are defined as those who:

- conduct research and provide direct clinical services, in any setting, under a formal work arrangement, although not necessarily for the same organisation; and
- are eligible to undertake clinical practice in Australia through registration with the Australian Health Practitioner Regulation Agency (AHPRA), the National Alliance of Self-Regulating Health Professionals (NASRHP), or equivalent.

## 1.2 Project Context

Clinician researchers play a vital role in health and medical research as translators of health and medical research into clinical practice; however, it is not known how many clinician researchers are currently working, or are eligible to work in Australia.

As a major funder of the research sector in Australia, NHMRC provides funding for the translation of research into practice. Clinician researchers are eligible for NHMRC funding through the Postgraduate Scholarships and Investigators Grants schemes (and previously the Practitioner Fellowships scheme).

## 1.3 Summary of methods

The Investigating Clinician Researchers Career Pathways Project is comprised of multiple components (see figure 1 below), with each stage overseen by HTAC as the project sponsor. Project components were:

- development and implementation of a pilot survey, with the survey method based on intelligence gathering and interviews with key informants
- a large survey of self-selected current, former and non-clinician researchers conducted by a contracted research organisation
- in-depth telephone interviews of two representative cohorts: a subset of the second survey respondents and a new cohort of Indigenous clinician researchers
- desktop analysis, surveying the Australian and international landscape for information on funding programs for clinician researchers.

Figure 1: Key phases and dates of the investigating clinician researcher career pathways project



This report provides a summary of findings for the in-depth telephone interviews (all clinician researchers). A separate telephone survey of Indigenous clinician researchers was instigated by NHMRC's Principal Committee Indigenous Caucus, the findings of which are reported separately in the *Investigating clinician researcher career pathways project: report on qualitative research about pathways for Aboriginal and Torres Strait Islander clinician researchers*.

1 See *Survey of Clinician Researchers Report* for a summary of this work

# 2. In-Depth Telephone Interviews Project

## 2.1 Background

The major component of the Investigating Clinician Researcher Career Pathways Projects was a 2019 survey to capture clinician researcher experiences in relation to career pathways.<sup>1</sup> Post-survey, a decision was made to conduct a number of semi-structured interviews with 50 respondents in order to explore key themes that were identified in the larger survey, as well as identify any other issues of importance to clinician researchers and to discuss key career supports in detail.

## 2.2 Participants

Of the 901 participants who completed the survey, 433 (48%) consented to be contacted for further research. From these 433 ORIMA Research collated a list of 100 randomly selected names representative of the gender, clinical field and type of clinician researcher (former, current, clinician or researcher) of the survey group. The demographic data is reported at Appendix A.

ORIMA Research managed the recruitment and booking processes in order to protect participant privacy. 100 people were invited to participate in the telephone interviews and the first 50 who responded were interviewed.

## 2.3 Sampling

Reports on the Australian health workforce from the Australian Bureau of Statistics, Australian Institute of Health and Welfare and health and medical professional organisations were reviewed. Data from these reports were used to provide a crude indicative estimate of the number and demographic profile of clinician researchers in Australia. NHMRC is confident that a wide range of clinician researchers were approached and subsequently participated in the broader project based on the indicative estimates.

## 2.4 Indigenous Clinician Researchers

Only 1% of respondents in the survey identified as Aboriginal and/or Torres Strait Islander. As a result, a further study<sup>2</sup> was commissioned by NHMRC's Principal Committee Indigenous Caucus to capture the views and experiences of current and former Aboriginal and Torres Strait Islander clinician researchers, clinicians and researchers, as well as prospective medical clinician researchers who had commenced a medical degree. The results from this study identified issues of importance to Indigenous clinician researchers, as well as supplementing the results of the cohort reported here.

<sup>1</sup> See *Survey of Clinician Researchers Report* for a summary of this work

<sup>2</sup> *Investigating clinician researcher career pathways project: report on qualitative research about pathways for Aboriginal and Torres Strait Islander clinician researchers*

# 3. Project Questions

## 1. Are there clear and supported career pathways for clinician researchers in Australia?

The majority (86%) of participants reported that there is not a clear and supported career pathway for clinician researchers in Australia. 14% of participants reported that there are clear and supported career pathways for clinician researchers in Australia. These participants were successful in pursuing a career as a clinician researcher and felt supported to do so, within their workplace and clinical field. All allied health clinician researchers (n=21) reported that their career pathway was unclear and unsupported. Allied health clinician researchers developed their own career pathway and negotiated with their workplace and managers to obtain financial and professional support.

*“That pathway doesn’t exist, or if it does, it’s not a supported pathway, and everything depends on funding.”*

*Clinician Researcher, Allied Health, Female*

Male clinician researchers working in medicine most commonly reported that clinician researcher career pathways are clear, and they were supported to follow that pathway within the profession of medicine, across a number of specialities.

Many participants discussed established medical career pathways which support students from undergraduate education to specialist training. These pathways were also reported to be well supported by professional organisations, universities and clinical workplaces.

*“I did my advanced training in cardiology, and then I went straight to do a PhD after that. That’s a fairly – not an uncommon pathway at the hospital I work at because it’s an academic institution as well.”*

*Clinician Researcher, Medicine, Male*

## 2. What are the factors that enable clinicians to enter research?

Participants reported a range of factors that enabled clinicians to enter research including *workplace peer and infrastructure support* (29%), *securing funding* (12%) and *personal interest in research* (14%). Support from peers including *colleagues, a manager, and informal or formal mentors* was widely reported as a significant enabler in a clinician being able to enter research. Overarching support from *senior staff* and also support from *organisational executive staff* enabled clinician researchers to begin conducting research that was relevant to their clinical roles. 8% of participants highlighted *opportunity* as a factor in their ability to enter research. Participants reported that managers and senior staff encouraged and supported their staff to pursue *research opportunities* and *clinical opportunities*. Role creation and *increased responsibility* to conduct research in a clinical workplace was also reported as a factor in clinicians entering research.

*“Having a supportive department that does value research but is also willing to let me build my clinical skills as well at the same time.”*

*Clinician Researcher, Allied Health, Female*

*Access to funding, including securing ongoing funding* was also reported by current and former clinician researchers as a significant factor in entering research. Some participants reported that they were only able to enter research because they secured funding for their project. *Clinicians’ personal drive* and *personal interest* in conducting research, particularly wanting to contribute to research in their field, enabled them to enter research and pursue a clinician researcher career. Infrastructure like desk and office space to conduct research and a *clear pathway* for clinician researchers was discussed as factors that enable clinicians to enter research and pursue a career as a clinician researcher.



*“You’ve got to get a grant... and know how to actually do it... so I’m co-collaborating on a couple of grants. So that’s how I managed to get some of the grants I’ve been on.”*

*Clinician Researcher, Allied Health, Male*

### 3. What are the factors that enable clinicians to maintain a career in research?

Key factors for maintaining a career in research were similar to those that enabled clinicians to enter research, in that being awarded a research grant or having support from senior staff or the workplace also assisted clinicians in maintaining a career in research. Factors that enable clinicians to maintain a career in research included *team support* (20%) and *organisational support* (12%). Team support and organisational support included participants working with *experienced Chief Investigators* and working for an organisation that *promoted and supported research*. Participants reported that they would not be able to maintain a career in research if they did not have the support of their managers or the opportunity to work with senior researchers. Organisational support also included *flexible working arrangements, protected clinical time and protected research time*, as well as *additional staff* to support research projects or *complete administrative tasks*. Many participants discussed the benefit of flexible working arrangements to enable them to continue to conduct research, while managing a clinical workload.

*“Supportive environment... here as part of their new cultural footprint is research or innovation, so it’s very much within the culture of the place that I work.”*

*Clinician Researcher, Allied Health, Male*

*“I sort of rely on the good grace of my boss to sometimes give me a day away from clinical work... it’s basically funded or covered by my department giving me a day to actually sit and write the grant applications.”*

*Clinician Researcher, Allied Health, Female*

13% of participants discussed *jobs and staffing* related factors as enablers to maintain a career in research. Participants highlighted the benefit of their workplace *employing junior research* staff to support projects and working as part of a *wider research group* in their organisation or department. This allowed clinicians to manage their time between clinical and research work, with the support of their colleagues. One participant also discussed the need to conduct *clinically relevant research* where findings could be translated into their own clinical practice in order to maintain a career in research.

*“Finding a fulltime tenure position at a really good university (was a career enabler). I was very very lucky that I had that... that basically gave me access to a fantastic research group, research platform that I can - I teach.”*

*Clinician Researcher, Allied Health, Female*

*“There was a clinician researcher on the team that I worked on who really encouraged my clinical skills, so I think there was plenty of opportunity to develop research skills and that helped me stay passionate and interested.”*

*Former Clinician Researcher (Clinician), Female*



## 4. What are the factors that cause some clinicians to choose not to enter research?

Not gaining *suitable funding* was reported by all groups as a factor in choosing not to enter research. Approximately a quarter (24%) of respondents reported that they decided not to enter research or delayed entering research because of *funding and pay issues* including a *reduction in income* while working as a clinician researcher. Early career participants highlighted the difficulty of gaining funding, which prevented them from entering research. Allied health clinician researchers reported a hesitation in entering research as *allied health research was not well supported* in terms of *funding and corporate support* in their workplace. Allied health participants felt that their research was not respected by other clinical fields or valued by their managers. 16% of participants from all fields also reported that *lack of protected time and capacity to conduct research* in addition to clinical workload caused some clinicians to choose not to enter research, among other time related issues. Where clinicians were unable to negotiate protected time within their workplace to conduct research, they choose not to enter research.

*“Certainly the lack in salary was why I didn’t go full-time initially. The other thing was actually having to negotiate with management to have the time off.”*

*Clinician Researcher, Allied, Female*

*“Research is seen as something extra; it’s not widely recognised by grass root staff and by nurse managers as being core components of practice.”*

*Former Clinician Researcher (Researcher), Female*

Allied health participants reported a *lack of research skills* as a factor in not entering research. 22% reported they felt they didn’t have the *skills* required to conduct research and they felt like they *needed a PhD or basic research skills* to become a clinician researcher. This was a particular issue in the allied health group as many respondents were conducting research in an *unsupported environment* and without *experienced research staff* or chose not to enter research at all. Allied health participants also chose not enter research because they did not have *protected time* to conduct research projects.

*“It was very hard to be on the floor working in a clinical sense and then trying to do research”.*

*Clinician, Female*

*“So there were some managers that were incredibly supportive and others that were completely disinterested and saw it as completely not a valid use of time.”*

*Clinician Researcher, Allied Health, Male*

## 5. What are the major support mechanisms and enablers for clinician researchers?

*Organisational support* (17%) and obtaining *general funding* (10%) were reported by all groups as major support mechanisms and enablers for clinician researchers. *General support* included *support from colleagues* and *senior team members* as well as *mentors*. Participants discussed the value of formal mentoring programs as well as informal support from managers and senior staff within the workplace. General support including *desk or lab space* and *documented support from workplaces* such as listing *research as a key performance indicator* in clinical areas was also reported. Some participants highlighted the value of their workplace demonstrating support for clinical research by providing workspace to conduct research. *Funding support* discussed by participants included *specific grants* for clinician researchers and *smaller grants* to provide financial support for *administrative tasks* and *funding of research assistants*.

*“I think my colleagues within my own institution have been very supportive, and often my senior colleagues have been very supportive.”*

*Clinician Researcher, Medicine, Male*

*“So I had a really fantastic mentor for both of my doctorates, the same person. And then I have a very, very good mentor currently as well and that’s hugely important.”*

*Clinician Researcher, Allied Health, Female*

General advocacy for clinician researchers including *collaborative networks* and *professional support organisations* emerged major support mechanisms for medical and allied health participants. Participants from these groups highlighted the benefit of clinical research support from bodies such as professional colleges. 14% of participants reported *collaborating and networking* as major support mechanisms and enablers. Many participants stated that they would not be able to maintain their clinical research career without their wide networks. Participants discussed building *collaboration networks within their organisation* and immediate *working group* as an enabler and the support they received from *wider collaboration networks* with peers in their field as significant career supports. A *respectful working environment* was discussed by 5% of participants and *respect from other fields* enabled them to continue to conduct research, for example a medical clinician expressing respect for a nurse conducting research.

*“Picking projects that are small and bite-sized and realistic, finding collaborators who are also enthusiastic, branching out and finding people with different skills so that you can tap in on their particular expertise, getting involved in other projects that are funded to gain experience.”*

*Clinician Researcher, Medicine, Female*

*“I think definitely, just people from my research community valuing clinical practice and seeing it as being important and seeing the impacts that you can make in clinical practice being important.”*

*Clinician Researcher, Allied Health, Female*

## **6. What are the major barriers and current issues for clinician researchers?**

A lack of *general funding* (13%) and lack of *capacity and time* (14%) were raised as major barriers and current issues for clinician researchers. Participants said they were not able to financially support their own research and experienced difficulty winning grants. Without grants they were unable to supplement their clinical income while working reduced clinical hours. All clinician researchers reported these barriers and current issues, across all fields and genders. Participants reported *clinical workload as being a priority* over conducting research. This was *enforced by their workplaces* and they felt personally responsible for prioritising clinical work before research. Many participants commented on the pressure from their manager and workplace to prioritise clinical load over research.

*“I think financial support... it really is a struggle to get support for your research in the clinical field.”*

*Clinician Researcher, Allied, Female*

*“Yes, time, available time. I think the priority within a hospital is to provide clinical care, and so any research activity is done really in your own time.”*

*Clinician Researcher, Medicine, Female*

*“If you're trying to be a good clinician and a good researcher it takes time to do that. It's a good kind of 50, 60 hours a week.”*

*Clinician Researcher, Allied Health, Male*

Male and female participants reported that *career breaks and carer responsibilities* impacted their ability to win grants and continue working as a clinician researcher. 7% of participants highlighted *track record policies* as a major barrier for clinician researchers. Participants found it challenging to *establish a track record in research* and win grants, despite some being senior in their clinical careers. *Administrative burden* was reported by 13% of participants as a current issue, as they need to balance their clinical, research and administrative workload. Major barriers included a *lack of space* to conduct research and a *lack of workplace support* for writing and submitting grants applications. Where participants were unable to find desk or lab space within their organisation, this was reported as a barrier to conducting research and a major issue for clinician researchers.

*“Getting a scholarship for clinicians to do research degrees can be really difficult. They often don't have the academic scores that a lot of the people coming out of basic science and other fields have.”*

*Former Clinician Researcher (Researcher), Female*

## 7. What are the suggested improvements for the clinical practice model?

*General funding* was widely discussed with all groups highlighting the need for *clinician researcher specific funding, ongoing funding* spanning the length of a project and grants for clinician researchers working outside metropolitan areas. Some participants suggested grants for early career clinician researchers to assist them in establishing their career and research track record. Administrative support for funding applications and managing grants (8%) was also suggested. Participants found it challenging to manage their clinical and research time and also prioritise administrative time to contribute to grant applications.

*“Grants for young researchers who don't have a track record... Because then we could get them started and they could develop a track record.”*

*Clinician Researcher, Medicine, Male*

Some current and former clinician researchers (13%) identified *advocacy for clinician researchers* as something that could be improved in the clinical practice model. *Publicly promoting clinician researchers and their key role in research translation* was raised a method to improve the clinician researcher environment in Australia. Participants suggested that advocacy and promotion could begin at the workplace level in hospitals, clinics and universities for example. Participants also discussed the critical role of professional bodies in publicly promoting and supporting clinician researchers.

*“Thinking about ways to promote, and more widely, the value of clinician researchers.”*

*Clinician Researcher, Allied Health, Female*

The need for a clear career pathway for clinical researchers was raised by 14% of participants. However, participants discussed the different pathways for each field and the variation on pathways within each field. Participants felt that if a clear and flexible career pathway was available this would be a great improvement to the clinical practice model in Australia. A number of participants also discussed the *clinical research model being used in the UK* and many European countries where clinicians are supported to conduct research within their clinical workplace. This model was appealing to participants due to the *secure salary and protected hours* to complete clinical work and conduct research. Some participants also discussed the benefit this career model can have on their practice as they are supported to conduct research and translate findings into their clinical practice.

*“A combined clinician researcher PhD program integrated with GP training like they do in the Netherlands which means that General Practice in the Netherlands is based on solid research in General Practice not on what’s handed down from hospitals that isn’t really relevant.”*

*Clinician Researcher, Medicine, Female*

Integrating research into *clinical workplace key performance indicators* (KPI) was a suggestion that emerged from the current clinician researcher cohort. Participants in this group felt that research should be included in all *workplace strategic priorities* as well as *employee contracts*. However, no practical solutions for ensuring this results in more research being conducted in clinical workplaces were discussed by participants.

*“It would be wonderful if health services would create some positions where research was a quite clearly stated part of the job description and respected in terms of workload.”*

*Clinician Researcher, Allied Health, Male*

*“Job security is the other thing. I mean it really is up to the institutions to provide that support to those researchers who are being successful.”*

*Clinician Researcher, Allied Health, Female*

# 4. Discussion

## 4.1 Limitations of this study

NHMRC and ORIMA Research staff responded to many emails from people seeking clarification about the definition of clinician researcher and whether they were eligible to participate. Most enquiries were from PhD students with a clinical qualification; however, it was determined that this group did not meet the project definition of a clinician researcher if they were not registered and practising in a clinical role. Basic screening of participants was conducted by ORIMA Research prior to booking the interviews to ensure cohort precision. However, the survey participants self-identified as clinician researchers so it is possible that some telephone interview participants do not meet the project definition of a clinician researcher and therefore should not have participated.

## 4.2 Key Outcomes

The telephone interviews explored the major supports and enablers, barriers and issues and career pathway concerns of clinician researchers. Themes were similar between genders and across the current and former clinician researcher groups. All participant groups highlighted the need for a clear career path for clinician researchers in all disciplines, increased value and duration of research funding, support from organisations that employ clinician researchers and protected research and clinical time.

## 4.3 Clear career path for clinician researchers

The need for greater career path clarity and ongoing career support was reported by all participant groups. Participants discussed the lack of clear and achievable career pathways across all fields and disciplines. Some participants from medical disciplines discussed the clear pathway that was available to them; however, many felt unsupported to follow that path. Allied health participants, particularly those working in nursing, found there was no clear career path for clinician researchers. Some allied health clinician researchers developed their own career pathway; however, it was not clear and not well supported.

## 4.4 Increased value and duration of funding

Securing funding, including one off grants and ongoing project funding, was also reported widely as an enabler that impacts the clinician researcher career pathway. Long term funding was reported as the most desirable type of funding; however, smaller grants and one off grants were also identified as being helpful in supporting clinician researcher careers. Participants did not report a preferred grant duration but they did report the need for longer and higher value grants. Many participants reported moving from grant to grant without gaps and where funding was not obtained, their work paused or stopped completely.

## 4.5 Organisational support

Support from senior managers and executive staff within an organisation, was reported as a key enabler to conducting research in the clinical setting. Participants also discussed increasing the legitimacy of clinician researcher roles as a respected career option and key member of a clinical team as a career entry and career maintenance support. Organisational support to promote the value of clinician researchers in the workforce was widely reported as a career enabler and a feature in building professional networks.

## 4.6 Protected research and clinical time

Protected clinical and research time was also identified as a necessity. Protected time to complete administrative tasks including writing grant applications was also discussed by participants as a career enabler. Participants did not discuss a preferred time split for clinical and research workload. Many participants reported working hours greater than one full time equivalent role in order to complete clinical and research responsibilities.

## 4.7 Final message

No single clinician researcher model or standard path was identified by this cohort, but participants confirmed that gaining funding allows clinicians to enter research and gaining ongoing funding allows clinicians to maintain a career in research. Unsurprisingly, general support from a supervisor, manager or spouse/partner was also identified as an important career enabler, as was protected time for research or clinical load.

The telephone interview results confirm the results of the survey of researchers which also found that the clinician researcher career pathway is not clear and that clinician researchers found it difficult to obtain ongoing funding.

# Appendix A – Participants

Table 1: Demographic profile of telephone interview participants

The clinician researcher allied health cohort included nursing. This was not separated from other groups as ORIMA labelled de-identified transcripts as medical, allied health and other. NHMRC used the aggregated demographic data report provided by ORIMA to determine that 5% of the cohort completed a degree relevant to nursing.

Gender	Type of clinician researcher	Field	#
Female	Clinician Researcher	Medical	6
Female	Clinician Researcher	Allied Health	17
Female	Clinician Researcher	Other	5
Female	Former Clinician Researcher	Research	4
Female	Former Clinician Researcher	Psychology	1
Female	Clinician	Medical	1
Male	Clinician Researcher	Medical	11
Male	Clinician Researcher	Allied Health	4
Male	Clinician	Other	1
<b>Total Participants</b>			<b>50</b>



