Job Description for NIHR Academic Clinical Fellowship in General Practice (Multiple Long-Term Conditions) ST1 entry

1. Job Title.
Academic Clinical Fellowship in General Practice (Multiple Long-Term Conditions)

2. Duration of post.
4 years

3. Research institutions in which training will take place
Wolfson Institute of Population Health, Faculty of Medicine and Dentistry, Queen Mary University of London.

4. Timetabling of clinical and research time
The ACF will rotate through a choice of clinical specialties during ST1 and ST2 and have their research time mainly during ST3 and ST4. The trainee will spend 75% (3 years) of their total time in clinical training, and 25% (1 year) in academic research.

5. Description of research component of programme

The ACF will be based in the Centre for Primary Care in the Wolfson Institute of Population Health (WIPH). WIPH offers an excellent environment for the Fellow to thrive. WIPH includes over 100 postgraduate research students (PGRs), over 100 academics and in total close to 600 staff and PGRs contributing to research, education and public engagement activities. Average *annual* research income into WIPH (over the last 3 years 2022/23, 2023/24 and 2024/25) exceeded £35M. Expertise in the Institute covers a broad range of clinical areas, including: cancer, asthma, COPD, diabetes, mental health, the health of older people, women's health, public health and multimorbidity. Our disciplinary expertise is broad and includes: primary care; public health and global health; translational genomics and health data science. WIPH staff have methodological expertise in areas including: applied heath research; behavioural science; clinical trials; epidemiology; ethnography and other qualitative methods; health economics; research methodology and statistics. This is a highly collaborative, generous Institute and colleagues are keen to offer advice and support.

Until March 2029 (when the NIHR will launch a new model of support for primary care, public health and social care research) WIPH remains a member of the prestigious NIHR School for Primary Care Research, which focuses on facilitating high-quality primary care research through strategic leadership and ringfenced funding, and on building capacity in primary care research through an established training programme.

WIPH is firmly embedded in the east London community and has strong, longstanding partnerships with the North-East London (NEL) Integrated Care Board (ICB). WIPH academic staff are developing good links to the new Integrated Neighbourhood Teams. Queen Mary has a Civic University Agreement and genuinely strives to meet the needs of our neighbours and partners. Within this framework, WIPH has an extensive programme of public engagement work.

The Centre for Primary Care is a thriving group with particular expertise in developing actionable insights from patient data and data driven tools for improved patient care and in applied health services research including clinical trials of non-pharmacological interventions. It has strong links to the Academic Centre for

Healthy Ageing at Whipps Cross hospital where researchers have particular expertise in frailty and rehabilitation, delirium and care home populations.

The Fellow will conduct research in the area of multimorbidity (also known as multiple long-term conditions, MLTC, and commonly defined as the presence of two or more long term conditions in one individual). Multimorbidity is common worldwide and associated with poorer health related quality of life and a greater risk of hospital admission and premature death compared to people without MLTC. Care for people with multimorbidity is often fragmented and people may experience significant treatment burden from disjointed care (Witham et al. Interventions to prevent and treat multiple long-term conditions and their consequences across the life course: concepts and definitions BMC Med 24, 228 (2026). https://doi.org/10.1186/s12916-026-04838-4). We currently lack good evidence around preventing, treating or mitigating the impact of multimorbidity.

One potential solution for all these areas may be assistive technology - researchers in CPC are part of a multidisciplinary network researching in this area. Assistive technology (AT) comprises home modifications, digital technology or digital infrastructure solutions to support independence and health amongst those with disability, long-term conditions or multimorbidity, but most people who require AT in the UK have no access to it. Our research has found that AT provision is inconsistent and unequal with convoluted referral pathways. Primary care services are often unaware of the AT requirements/ provision amongst their patients and AT needs/ use are inconsistently recorded in medical records.

One possible project area for the Fellow would be to investigate what primary care should know and might do to help reduce health inequalities in the provision of AT, with a particular focus on multimorbidity. Another area of work for a project would be to investigate how Integrated Neighbourhood Teams might respond to the AT needs of people with multimorbidity, and address the following questions: what models of care would be most effective?; and how might they be scaled up across the NHS? The Fellow would also be supported to develop their own project around the area of multimorbidity and AT, if they wished. Whatever the final project/s – this Fellowship brings the opportunity to work closely with social care providers, a rare opportunity in general practice but one that will be invaluable for effective delivery of the NHS 10 Year Plan.

6. Description of clinical training component of programme

The Tower Hamlets specialist training programme in general practice provides trainees with a learner-centered programme of education and experiential training in inner-city multicultural general practice. It offers placements in GP training practices, alongside the academic time.

The Tower Hamlets GP Training Scheme aims to mutually inform and co-ordinate training within the practices, the training posts and the half-day release, maximising potential by utilising all these available learning opportunities. It tries to foster a capacity within each doctor on the scheme to become aware of and express their own learning needs, and then to have a scheme so flexible that these identified needs can be met within the most appropriate context. This may be achievable via the training practice, co-ordinated teaching sessions between practices, or the half-day release sessions. The programme aims to produce doctors who feel confident to work in a stimulating but challenging environment in east London: who have learned to maintain themselves as caring and competent doctors, being aware of their needs for learning and for support and being able to work with others to meet their needs.

7. Academic Programme Director name

Dr Yin Zhou yin.zhou@qmul.ac.uk (GP IAT lead at QMUL)

8. Clinical Programme Director name
Dr Phillip Bennett-Richards

9. Programme contact for further information (phone or email)

- Academic Supervisor
  - Prof Steph Taylor Email s.j.c.taylor@qmul.ac.uk

- IAT Leads at Queen Mary
  - Dr Upkar Gill Email: u.gill@qmul.ac.uk
  - Dr Sasha Howard Email: s.howard@qmul.ac.uk

10. NHSE contact:
Specialty Team https://lasepgmdesupport.hee.nhs.uk/support/home
Recruitment Enquiries - https://lasepgmdesupport.hee.nhs.uk/support/home

11. Useful websites for further information IAT Guide | NIHR
https://www.nihr.ac.uk/explore-nihr/academy-programmes/integrated-academic-training.htm

12. Confirmation that the post attracts an NTN (A)

Yes.

This job description was prepared on 6th August 2026.