



*National Institute for  
Health Research*

# **Research in the NHS: HR Good Practice Resource Pack**

Frequently Asked Questions:  
Human Resources and  
Contractual Arrangements

## HUMAN RESOURCES (HR) AND CONTRACTUAL ARRANGEMENTS

1. **The HR Good Practice Resource Pack states that honorary research contracts (HRCs) should only be issued when the researcher's activity has a direct bearing on the quality of patient care. What does this mean?**

Researchers require an HRC only if:

- the research is hosted in the NHS **and**
- they have no contractual relationship with the NHS **and**
- the activities which the researcher plans to undertake in the host NHS site involve interacting with individual patients in a way that has a direct bearing on the quality of their care.

A researcher's activity may be deemed to have a direct bearing on the quality of patient care if:

- the researcher's activity could directly influence decisions made on:
  - a patient's access to care
  - the care pathway which the patient followed
  - the type, quality or extent of prevention, diagnosis or treatment of illness.
- the researcher's action could foreseeably cause injury or loss to patients or service users to whom the NHS organisation has a duty of care, leading to a possible case of clinical negligence being made against the NHS organisation.

Examples of activities that could have a direct impact on care include:

- taking consent for an interventional study (as this will determine an individual's access to a specific treatment)
- delivering a treatment that forms part of the research study
- performing phlebotomy on trial patients (as this is an invasive procedure which could lead to injury or infection).

Activities that would not have a direct impact on care include:

- some types of interview study, where information from the study will NOT feed into the patient's care plan or decision-making in relation to the care of the patient
- undertaking the randomisation procedure to allocate trial patients to a specific treatment, as this is preceded by the consent process. Randomisation is considered a research procedure.

By issuing an HRC, the NHS organisation ensures that:

1. Patients in receipt of these research procedures come under the NHS duty of care and the NHS indemnity scheme applies to the researchers and their activities.
2. The researcher is accountable to the NHS organisation for their activities, explicit supervision arrangements are in place, and the researcher is made aware of the relevant NHS policies with which they must comply in their activities.
3. The researcher's substantive employer understands the research activities and has undertaken all the necessary checks in relation to the researcher's suitability to carry out those activities.

## 2. Shouldn't we issue an HRC to all researchers to make sure that we have a way of controlling their activities so that we minimise the risk to the NHS?

The Department of Health (DH) previously advised that researchers who do not have a substantive contract with an NHS body, but whose research involves NHS staff or patients, their organs, tissue or data, should have an honorary contract with an NHS body. The advice was withdrawn some years ago.

The UK Research Governance Frameworks make it clear that appropriate allocation of responsibility, and hence liability, is fundamental to good overall governance of research. Higher Education Institutions (HEIs) must accept their responsibilities as employers of researchers, because it is only the employer that can be responsible ultimately for ensuring the suitability of the individual in terms of training, experience and conduct.

HEI substantive employers must retain accountability and liability for the actions of researchers that are outside the core responsibility of NHS organisations, i.e. actions that do not relate to the legal duty of quality and the common law duty of care of the NHS organisation. NHS organisations should not lay claim to responsibility, and hence liability, for issues that are outside their ability to fully discharge.

HEIs, as employers, are responsible for ensuring that staff conducting research within the NHS have been subject to appropriate pre-engagement checks commensurate with their proposed research activity in the NHS (and in line with NHS standards in this area), are appropriately trained to carry out their research activity and to handle confidential information, and that disciplinary arrangements are in place for handling breaches of confidentiality.

The Research Passport system provides for information-sharing between the NHS organisation and the substantive HEI employer to ensure that overall governance arrangements are in place to support researchers and their activity.

## 3. In what circumstances should a Letter of Access (LoA) be issued instead of an HRC?

The HR Good Practice Resource Pack contains three types of LoAs, these should be issued in the following circumstances:

For HEI researchers, the [Example letter of access for university researchers who do not require an HRC \(DOC\)](#) should be issued in the following circumstances:

- where the research is hosted by the NHS **and**
- the researcher needs to access NHS facilities or patients or data to undertake their research **and**
- it is judged that the researcher's activity will **not** have a direct bearing on patient care.

For HEI researchers, the [Example letter for university researchers, where the NHS site accepts an existing HRC](#) should be issued in the following circumstances:

- where the lead NHS organisation has already validated a Research Passport form, **and**
- the lead NHS organisation judged that the research activity had a direct bearing on patient care, **and**
- the lead NHS organisation issued an HRC, **and**
- the researcher now needs to undertake the same research activity in a different NHS organisation.

For **NHS** researchers and clinical academics<sup>1</sup> the [Example NHS to NHS LoA \(DOC\)](#) should be issued following the procedures outlined below

- Researchers with an existing substantive NHS or honorary clinical contract do not require an HRC
- The NHS organisation which hosts their research can accept their existing relationship with the NHS
- The [NHS to NHS LoA](#) gives permission for any types of research activity to be undertaken at the host site
- The researcher's substantive NHS employer remains fully responsible for undertaking and updating the pre-engagement checks.

**The procedure for researchers who require an NHS to NHS LoA has been revised as follows:**

A new [NHS to NHS \(LoA\) – proforma confirmation of pre-engagement checks](#) has been developed. The R&D office for the employing Trust is responsible for ensuring this confirmation is issued by their Trust for all staff requiring NHS to NHS LoAs. For clinical academics, the Trust holding the honorary clinical contract may need to liaise with the HEI who is the substantive employer, in order to issue the signed proforma.

The NHS researcher/clinical academic can then submit this declaration, along with their CV, to all NHS organisations who are hosting their research. The host site can accept this declaration as confirmation that the required pre-engagement checks have been undertaken by the employer and issue the [Example NHS to NHS LoA \(DOC\)](#) to the researcher, copied to the researcher's substantive employer. The copy NHS to NHS LoA sent to the employer will also be accompanied by a copy of the proforma confirming completion of pre-engagement checks submitted to the host organisation.

#### **4. Who needs a Research Passport?**

If you have no contractual relationship with the NHS, you *may* need a Research Passport, which enables the NHS to decide whether or not you need an HRC or LoA to enable you to undertake your research within NHS facilities. A Research Passport is valid for a period of three years and may be project-specific or may cover a number of projects. The Research Passport may be used for both single-site and multi-site studies.

#### **5. Why is the Research Passport form not completed for NHS employees who need to carry out their research activity in a different NHS Trust?**

Throughout the NHS there is a level of assurance with regard to the standards and the processes in place to support HR arrangements as applied at individual NHS organisations. With the introduction of the Vetting and Barring Scheme (VBS), the employer as the Regulated Activity Provider is responsible for the management and control of that person's activity, and for making the arrangements for their employees to work in that activity.

The NHS Employment Check Standards<sup>2</sup> have been developed with key stakeholders including the DH, the Centre for the Protection of the National Infrastructure (CPNI), and employers in the NHS, and includes all pre-appointment checks that are required by law, those that are mandated by DH policy, and those that are required for access to the NHS

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<sup>1</sup> Clinical academics hold joint appointments across NHS and HEI organisations to conduct clinical activity, teaching and research. <http://www.academicmedicine.ac.uk/uploads/folletreview.pdf>

<sup>2</sup> NHS Employers Check Standards  
<http://www.nhsemployers.org/RECRUITMENTANDRETENTION/EMPLOYMENT-CHECKS/EMPLOYMENT-CHECK-STANDARDS/Pages/Employment-Check-Standards.aspx>

Care Record Service. Furthermore, employer organisations in the NHS need to evidence their compliance of these standards as part of the Care Quality Commission's (CQC) Annual Health Check (formerly the Healthcare Commission).

In addition, there are existing processes and systems in place to facilitate the movement of highly mobile staff within the NHS as a whole, for example from October 2009, the Electronic Staff Record (ESR) contains details of pre-engagement occupational health screening and has replaced the Occupational Health Smart Card (OHSC) system. On this basis, the advice in the HR Good Practice Resource Pack in relation to those with a substantive or honorary clinical NHS contract is that the Research Passport system is not required when sharing information.

The [NHS to NHS LoA](#) should be issued, which:

- accepts the employee's existing NHS contract
- accepts confirmation from the substantive employer that the pre-engagement checks and associated contractual obligations are in place (through receipt of the [NHS to NHS LoA – proforma confirmation of pre-engagement checks](#))
- places the obligation fully on the substantive NHS employer to ensure these checks continue to be in place for the role to be undertaken in the NHS organisation hosting the employee's research activity.

**6. Does the letter of agreement between NHS organisations HAVE to be in place between NHS organisations, to support NHS to NHS LoAs?**

Where NHS organisations can demonstrate that they are effectively managing and implementing the Research Passport system within the UK Clinical Research Networks, then it is not necessary to put an additional [letter of agreement between NHS organisations](#) in place to cover cross-institutional working between the organisations. In England, NHS organisations can check through their NIHR Comprehensive Local Research Networks whether individual NHS organisations are implementing the Research Passport system. In Scotland, Wales and Northern Ireland, NHS organisations can contact the nominated Research Passport lead from their Health Department<sup>3</sup>. Where there is any doubt with regard to the substantive employer's compliance with the scheme, host organisations can issue the [letter of joint arrangements](#) alongside the [NHS to NHS LoA](#).

**7. The Research Passport form does not provide the relevant information relating to the start and end-date of a researcher's substantive contract. How can I ensure that the duration of the Research Passport and the associated HRC or LoA does not run beyond a researcher's contract end-date?**

The Research Passport form (Version 2) has been amended to include this information. For NHS to NHS arrangements the [NHS to NHS LoA – proforma confirmation of pre-engagement checks](#) also requires that the substantive employer confirms the contract end-date. Working with the current application form (Research Passport form (Version 1)), there are a number of additional principles and safeguards available to address this issue:

1) *The substantive employer is responsible for the actions of their employee*

In order to fulfil this responsibility, the substantive employer should ensure that they have established an appropriate process for notifying and monitoring changes to the content of their employee's Research Passport (or the conditions of their employment for NHS staff and clinical academics) and that this process is documented in the organisation's procedures and policies. The CLRN in England and the Health Departments of the Devolved Nations are

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<sup>3</sup> <http://www.ukcrc.org/regulationgovernance/researchpassport/>

working with academic and healthcare organisations to ensure that substantive employers are aware of this requirement.

*2) The Research Passport holder is obliged to notify Trusts of changes in their situation*

Similarly, the substantive employer should ensure that they have established an appropriate process to actively manage the researchers they employ. In addition, HRCs and LoAs place an obligation on the researcher to provide details of any changes to the terms on which the HRC or LoA was issued to the host organisation.

*3) Limit the dates of the Research Passport or HRC to coincide with the substantive contract*

The organisation validating the Research Passport can contact the researcher or their employer to confirm the contract details and where the duration of an applicant's substantive contract is less than the duration of the project, organisations may choose to limit the dates of the validity of a Research Passport (and any HRC or LoA issued following the validation of a Research Passport) or stipulate a review date to coincide with the terms of the substantive contract. The latter would enable an extension or new HRC/LoA to be issued if appropriate, and would ensure appropriate tracking. A similar approach can be applied to researchers working under NHS to NHS arrangements.

**8. How does the Research Passport system apply to the staff who work for Independent Contractors, for example GPs or practice nurses, when they are carrying out research in the NHS?**

A PCT, like all NHS Trusts, has a duty of care to its patients, including those who are cared for by a GP. Therefore a PCT retains vicarious liability for patients who receive care from a GP or their staff, and for patients who are participants in research undertaken during provision of NHS services through their GP. Although the new NHS Contract<sup>4</sup> defines staff employed by Independent Contractors (e.g. practice nurses) as NHS staff, NHS indemnity arrangements (the Clinical Negligence Scheme of Trusts (CNST)) specifically do not extend to Independent Contractors (or their staff) working under contract for services to a PCT. Therefore, the issuing of an NHS honorary contract to this group of practitioners does not bring them within the scope of NHS indemnity arrangements.

This means that PCTs should not extend HRCs to practice staff if they are conducting research as part of their NHS practice. However, the PCT may wish to highlight that compliance with research governance is a contractual obligation for such staff as part of the broader obligation to comply with the PCT's corporate risk management arrangements.

Medical defence organisations (MDOs) provide cover for clinical negligence to GPs for the service they (and their staff) are contracted to provide to the NHS. If they undertake research as part of their routine activity, their professional indemnity arrangements would normally provide adequate cover for that activity. However, this should be confirmed with their MDO before starting the research<sup>5</sup>.

If a GP or practice nurse is supporting research activity that is not considered part of the services under the NHS contract, the PCT will need to ascertain whether it owes a duty of care

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<sup>4</sup> Annex F3, Delivering Investment in General Practice. Implementing the new GMS contract Department of Health, December 2003

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_4070242](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4070242)

<sup>5</sup> Research in the NHS: indemnity arrangements

Gateway reference: 5957

Department of Health, December 2005

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_4125281](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4125281)

to the study participants with respect to the research activity. If this is the case, then the GP or practice nurse is operating within the vicarious liability of the PCT and arrangements should be made to include these staff under CNST arrangements. Such arrangements would involve the organisation responsible for the research, either the PCT or HEI, putting in place a contract for services with the GP or practice nurse relating to these additional research activities<sup>6</sup>. If the organisation responsible is the HEI, then the Research Passport system could then be used to obtain an HRC or LoA as applicable. If the organisation responsible is the PCT, the PCT is encouraged to accept the pre-engagement checks undertaken by the GP practice, though it can request its own pre-engagement checks if warranted following a proportionate risk assessment. NHS to NHS arrangements as described in the HR Good Practice Resource Pack would then cover any additional movement of these staff to other participating NHS organisations.

Where the research activity and involvement of the GP or practice nurse is commercially funded, the commercial company should hold adequate insurance to indemnify the research, covering negligent and non-negligent harm and provide this cover for the GP/practice nurse.

Although the specific example used in this guidance refers to GPs and practice nurses, the same also applies to other Independent Contractors based in primary care including dentists, ophthalmologists, community pharmacists and podiatrists.

## 9. How does the Research Passport system apply to students?

The research activities of undergraduate and postgraduate students who conduct research as part of their healthcare placements will come under the memorandum of understanding between the HEI and the NHS organisation which governs healthcare placements. This confirms the accountability arrangements between the organisations. Students on healthcare placements also have the appropriate pre-engagement checks conducted before they can commence a course which includes a healthcare placement<sup>7, 8</sup>. NHS organisations can delegate the verification of identity and issue of a Smartcard (within the Registration Authority governance framework) to educational establishments. Any research conducted as part of healthcare placements should come under the existing arrangements for such students. Therefore **students conducting research as part of their healthcare placements should not be issued with HRCs or letters of access by the NHS organisation.**

Where students are undertaking research as part of a Masters or PhD, and that course is not subject to a healthcare placement agreement with clinical supervision, then the Research Passport system should be applied. For students, the HEI would need to ensure that the student admissions section was able to complete the sections of the Research Passport normally completed by HR for employed staff. On submission of a complete and validated Research Passport, the NHS organisation may issue the student with an HRC or LoA, depending on the nature of the research activity.

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<sup>6</sup> Indemnity arrangements within Primary Care – who is responsible for what?  
NHS R&D Forum, Primary Care Working Party  
[http://www.rdforum.nhs.uk/workgroups/primary/indemnity\\_arrangements.doc](http://www.rdforum.nhs.uk/workgroups/primary/indemnity_arrangements.doc)

<sup>7</sup> NHS Employers' Check Standards  
<http://www.nhsemployers.org/RecruitmentAndRetention/Employment-checks/Employment-Check-Standards/Pages/Employment-Check-Standards.aspx>

<sup>8</sup> Medical student access to patient records  
NHS Employers  
[http://www.nhsemployers.org/PlanningYourWorkforce/MedicalWorkforce/Medical\\_Education\\_and\\_training/Pages/MedicalstudentsCRS.aspx](http://www.nhsemployers.org/PlanningYourWorkforce/MedicalWorkforce/Medical_Education_and_training/Pages/MedicalstudentsCRS.aspx)

#### **10. How does the Research Passport apply to visiting international researchers that are not formally employed by the hosting university?**

In situations such as these, the university hosting the researcher would need to complete the Research Passport form. Where there is no formal employment contract in place between the researcher and the hosting university, a suitable honorary academic contract should be put in place to ensure that there is clear accountability between the hosting university and the researcher.

The hosting university should then undertake the necessary pre-engagement checks to support the completion of the Research Passport. Any associated cost would be allocated in accordance with local policy and the researcher's funding source.

Where an international researcher presents occupational evidence from their country of origin, the hosting university would need to assess the evidence, bearing in mind any differences in clinical or regulatory practice compared with the UK, and determine whether this evidence could be used to support completion of the Research Passport form. Checks should be repeated where considered necessary.

The completed Research Passport would be presented to the Lead NHS organisation for validation in the usual manner.

#### **11. How does the Research Passport system apply to trial data monitors?**

It is the role of the sponsor (and the data monitor's employer, if different) to take responsibility for the actions of any trial data monitor. The suite of model agreements for use in both commercial and non-commercial clinical trials provides specific information relating to the activities of trial data monitors including issues of access and confidentiality. For trial data monitors, a clinical trial agreement should be put in place addressing the issues relating to their activities and a Research Passport and subsequent HRC or LoA should not be used.

Any NHS organisation that has any concerns about the conduct of a trial data monitor must inform the sponsor (and their employer, if different), as this may be a matter of misconduct that the employer must follow up.

#### **12. How does the Research Passport system apply to staff such as research nurses provided to the NHS Trust by Contract Research Organisations (CROs), to undertake research activities in the Trust which form part of a commercial study**

In commercially sponsored trials, commercial research staff should not be given a Research Passport, or issued with an HRC or LoA or any other document that could be construed as indicating that the NHS organisation is accepting liability for their actions.

With the exception of clinical study data monitors, the UKCRC model agreements do not cover issues relating to commercial organisations providing staff to undertake commercial research activities in the host NHS site (e.g. commercial research nurses). Therefore, the host organisation needs to ensure that a contract for the provision of these services is put in place with the commercial organisation. This contract should address all issues relating to the activities and suitability of the commercial staff (e.g. pre-engagement check requirements (Criminal Records Bureau (CRB), occupational health, professional registration, right-to work, qualification etc), training, accountability and management arrangements, insurance for negligent actions etc).



The host organisation's legal, HR or procurement departments may be familiar with standard contracts for services that address these issues and may have appropriate templates available for use in these circumstances. In many cases, the CRO may provide a template agreement that can be amended by your Trust as appropriate.

**Please also see guidance under QUESTION 39 of the [Frequently Asked Questions Full Supplement](#).**

**13. How does the Research Passport system apply to contract research staff who undertake research activities forming part of a non-commercial study sponsored either by the university, the NHS or a non-commercial funder?**

There is a distinction to be made when the research is being sponsored and led by a non-commercial organisation, compared with a situation when the study is wholly commercially sponsored. In the former situation the CRO staff are being contracted by the university to undertake non-commercial research. Therefore the university should ensure it has appropriate agreements in place with the CRO governing the provision of services for the study, which appropriately address indemnity issues and the requirement for and sharing of information on pre-engagement checks, where both organisations agree to follow the requirements of the HR Good Practice Resource Pack. On this basis, the university can then provide assurance to the Trust about the suitability of these individuals, and the Trust can deal with these individuals as though they were university researchers.

The Implementation Project and the HR Good Practice Resource Pack present a risk management framework to support the decision to accept pre-engagement checks undertaken by others. In practice, the university could complete a Research Passport form for the nurse. If they felt it was appropriate, they could use evidence of pre-engagement checks undertaken by the CRO to support this application. (NB where the research involves regulated activity, the HEI would need to initiate Independent Safeguarding Authority (ISA) registration and register their interest in the individual concerned – see section on VBS below). Similarly, the Trust receiving the Research Passport should apply an appropriate and proportionate risk assessment to the evidence provided in deciding whether it is comfortable accepting these checks. If risk assessment demonstrates that it is warranted, the Trust can request that the University repeats the checks undertaken by the CRO or the Trust can request its own.

Depending on the nature of the clinical trial and the activity involved, an HRC or LoA may be issued. The RP issued by the university and the HRC or LoA issued by the NHS would be project-specific and time-limited.

**14. Bank nurses seem to present some considerable challenges to the Research Passport system. Is there any national guidance on bank nurses?**

With regard to the handling of bank nurses, if the nurses are recruited to the bank in accordance with current NHS Employment Checks Standards<sup>9</sup>, and are then involved in research roles as NHS staff, these bank staff can be handled using the NHS to NHS arrangements described in the HR Good Practice Resource Pack. They should not use the Research Passport form.

If, however, bank nurses have an HEI as their substantive employer, the Research Passport system will apply. The Research Passport form includes an Appendix which allows new projects to be added, or additional information regarding amendments to agreed research activities to be documented.

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<sup>9</sup> NHS Employers' Check Standards  
<http://www.nhsemployers.org/RECRUITMENTANDRETENTION/EMPLOYMENT-CHECKS/EMPLOYMENT-CHECK-STANDARDS/Pages/Employment-Check-Standards.aspx>

**15. Can a project-specific passport be converted into to a multi-project/generic passport?**

The ideal situation would be for researchers to apply for the multi-project/generic three-year passport, rather than the project-specific Research Passport at the outset. However, researchers in possession of a valid project-specific Research Passport, who then find that they need to work on more than one project, can at a later stage submit an amendment to their project-specific Research Passport, by completing the relevant details in the Appendix to the application form and submitting this to the Lead NHS organisation for approval. The Lead NHS organisation then needs to ensure that the pre-engagement checks in place are also valid for the new activity. If so, the Lead NHS organisation can convert the project-specific Research Passport into a multi-project/generic three-year Research Passport. In addition, the researcher is required to inform all NHS organisations that have received their original Research Passport of any changes to information within the Research Passport. Having alerted the other NHS organisations of the change in their Research Passport from project-specific to multi/project generic, the researcher can then provide details of additional studies and/sites as would be the case for a multi-project/generic three year Research Passport

**16. A researcher with an NHS substantive contract wishes to carry out research in a different Trust, but their NHS employer states that they cannot be responsible for this person's research activity. What can be done in this circumstance?**

In a case such as this, it is important to determine if the researcher is undertaking this activity as part of their contracted working hours/job description, or whether it is completely outside their contracted responsibilities. This issue needs to be clarified and agreed between the employer, employee and the NHS Trust hosting the research, in order to enable the appropriate arrangements to be put in place.

If the activity is being undertaken as part of the researcher's substantive contracted hours and job role, and they are being paid by their substantive employer whilst completing this activity, the substantive employer will remain responsible for the researcher's activity, as they will continue to have a duty of care towards their employee even if the research is not directly related to the substantive Trust. In this case, the NHS to NHS agreements described in Question 3 (above) and the HR Good Practice Resource Pack should be followed, and the [NHS to NHS LoA](#) should be issued by the host NHS Trust to the researcher and their NHS employer.

If the researcher is undertaking this activity independently and not in the course of their paid employment, they should ensure that they have appropriate professional indemnity in place to cover the research activity. Evidence of this would need to be reviewed as part of the research governance review and a suitable agreement put in place between the Trust hosting the research and the researcher (e.g. a contract for services).

If the researcher is undertaking this activity completely outside their contracted hours, the Trust hosting the research may enter a separate contract with this researcher enabling them to undertake research sessions in the host Trust. In this case, the host Trust becomes responsible for the researcher's activity and would be encouraged to accept the existing pre-engagement checks undertaken by the substantive employer following a proportionate risk assessment rather than undertaking its own.

It should be noted that if the host Trust issues an HRC, then liability for the researcher's activity is transferred from the employing Trust to the host Trust.

**17. Does the Research Passport system apply to researchers who are not employed either by the NHS or by a university (e.g staff employed by social care organisations or the voluntary sector)?**

In this situation it is important firstly to clarify that the research is hosted through the NHS. If so, it is then important to establish to whom the researcher is affiliated in respect of the research activity being undertaken. For example, in an HEI sponsored non-commercial trial, if the HEI sponsor sub-contracts staff to assist in the delivery of the research, the organisation responsible for the research, i.e. the HEI, should put in place a contract with the individual(s) relating to these additional research activities. Once this is done, the Research Passport system can be used to obtain an HRC or LoA as applicable. Similarly, if an NHS Trust is responsible for the conduct of the study, they could put in place a contract for the additional research activities with the researcher and then NHS to NHS arrangements would apply.

Where individuals are employed by organisations which have no formal agreements in place to operate the Research Passport system, and therefore there is no established method for sharing information, NHS organisations hosting research may need to undertake appropriate checks on the researchers and claim the costs of such checks from the employer or research funder.

NHS organisations can establish local arrangements with other organisations in addition to HEIs, e.g. public sector research partners such as local authorities or charities, where those organisations can also undertake to implement the Research Passport system, in order to facilitate methods for sharing information on researchers where their research is hosted through the NHS.

**Please also see guidance under QUESTION 10 for commercially sponsored research and QUESTION 13 for Bank Nurses.**

## List of Abbreviations

CLRN	Comprehensive Local Research Network
CPNI	Centre for the Protection of National Infrastructure
CQC	Care Quality Commission
CNST	Clinical Negligence Scheme for Trusts
CRO	Contract Research Organisation
CRB	Criminal Records Bureau
DH	Department of Health, England
ESR	Electronic Staff Record
GP	General Practitioner
HEI	Higher Education Institution
HRC	Honorary Research Contract
HR	Human Resources
ISA	Independent Safeguarding Authority
LoA	Letter of Access
MDO	Medical Defence Organisation
NHS	National Health Service
OHSC	Occupational Health Smart Card
PhD	Doctor of Philosophy
PCT	Primary Care Trust
UKCRC	UK Clinical Research Collaboration
VBS	Vetting and Barring Scheme

## References

1. A Review of Appraisal, Disciplinary and Reporting Arrangements for Senior NHS and University Staff with Academic and Clinical Duties  
Department for Education and Skills, September 2001  
<http://www.academicmedicine.ac.uk/uploads/folletreview.pdf>
2. Annex F3, Delivering Investment in General Practice. Implementing the new GMS contract  
Department of Health, December 2003  
[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_4070242](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4070242)
3. Indemnity arrangements within Primary Care – who is responsible for what?  
NHS R&D Forum, Primary Care Working Party  
[http://www.rdforum.nhs.uk/workgroups/primary/indemnity\\_arrangements.doc](http://www.rdforum.nhs.uk/workgroups/primary/indemnity_arrangements.doc)
4. Medical student access to patient records  
NHS Employers  
[http://www.nhsemployers.org/PlanningYourWorkforce/MedicalWorkforce/Medical\\_Education\\_and\\_training/Pages/MedicalstudentsCRS.aspx](http://www.nhsemployers.org/PlanningYourWorkforce/MedicalWorkforce/Medical_Education_and_training/Pages/MedicalstudentsCRS.aspx)
5. NHS Employers' Check Standards  
<http://www.nhsemployers.org/RECRUITMENTANDRETENTION/EMPLOYMENT-CHECKS/EMPLOYMENT-CHECK-STANDARDS/Pages/Employment-Check-Standards.aspx>
6. Research in the NHS: indemnity arrangements  
Gateway reference: 5957  
Department of Health, December 2005  
[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_4125281](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4125281)