

## Research in COVID-19

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*This month, Research Management Lead Rose reflects on primary care research in response to COVID-19. If you need any advice about participating in COVID-19 studies or in general in regard to participating in research please get in touch with a member of [our team](#).*

As we start to get used to 'the new normal' we are facing big challenges in research.

The Chief Medical Officers and National Medical Director wrote to NHS colleagues recently to emphasise the importance of research. Research is being prioritised and fast-tracked through to make sure that studies can be put into place as quickly as possible. Additional funding is being provided to support studies, and studies which do not relate to COVID-19 are being paused. Generating new evidence in relation to this new threat will be enormously important.

As a population we have made big changes to the way we carry out our day-to-day lives. As a system we have had to make changes too. But these changes are mainly focused on the day to day care of COVID-19 patients, and ensuring the system can cope. Of course we are all grateful of the efforts that NHS workers, former NHS workers returning to the front line, and the general public, are making. This is vital for keeping the NHS going.

Also vital is the role of research, which provides hope for testing, treating and preventing COVID-19. Without research we will not solve the crisis.

We are starting to think creatively as a sector about ways that research can be delivered while reducing the impact on the system, in particular clinicians. Does a study really need a lengthy site initiation visit? Is Good Clinical Practice (GCP) training really required for a particular study role, and can we consider training that took place over 2 years ago sufficient in a time of crisis? Can study visits take place in a non face-to-face way?

Research activity which usually takes place in all settings will need to readdress how it can take place anyway, with face-to-face contacts in many settings being restricted. But of course research, like other parts of health provision, is still important, and we should think carefully about what we should keep going.

We are working in a fast-moving environment which means we want to get studies in place within a matter of days. The HRA is reducing its timelines to ensure that approvals can take place in 1-3 days. Research ethics committees are meeting virtually and MHRA is implementing flexibilities to enable research to get started. All

of this is designed to ensure that research is going through necessary regulatory approvals while reducing the time taken in the process.

The next critical step to get studies into progress is to get sites on board. Studies are encouraged to start speaking with sites up-front before the approvals are in place. It is not always possible to engage with absolutely all sites in advance of the study approvals, but it must be a high priority as early as possible. Organisations like West Yorkshire Research and Development, the Local Clinical Research Network, and clusters and federations of practices, are all vital at this stage. The existing relationships with practices will be essential to reach staff who, understandably, have other pressing priorities. Research often needs a clinical practice champion or Principal Investigator. As mentioned above, studies are being asked to minimise what they are asking staff to do. But sites must be able to prioritise research and give time to these studies if at all possible. The regulatory authorities are doing their best to get studies through which are well thought-out and essential, and will minimise impact on sites as much as possible – respecting the staff's competing priorities.

Research is key to resolving the COVID-19 crisis and we must do our bit to support this across the system. We are already talking with our colleagues across the system to find ways to work together and contribute to new research. We would love to hear ideas from practice about how we can best ensure that this happens, and how the system can help sites in getting set up and ensuring research is a priority. We are looking forward to more studies which will generate the knowledge that will be needed to find cures, treatments and vaccinations for coronaviruses. It is a challenging, but exciting time, and we hope to work with academics, health professionals and patients, to make important differences.