



University Hospitals  
Plymouth  
NHS Trust

## STANDARD OPERATING PROCEDURE

**DO NOT USE THIS SOP IN PRINTED FORM WITHOUT FIRST CHECKING IT IS THE LATEST VERSION**

The definitive versions of all UHPNT RD&I Dept SOPs appear online, not in printed form, to ensure that up to date versions are used. If you are reading this in printed form check that the version number and date below is the most recent one as shown on the Trust's website:

<https://www.plymouthhospitals.nhs.uk/research-sops>

### Research Passport

SOP No: P11  
Version No: 2.1  
Effective Date: Jan 2019  
Supersedes: Version 2.1, Sep 2017  
Page: 1 of 5

Last Review Date: Jan 2019                      Next review date: Jul 2022

#### AUTHORISED BY

Name: Chris Rollinson.....

Job Title: Research Governance Manager.....

Signature:

A handwritten signature in black ink, appearing to read 'Chris Rollinson', written over a horizontal line.

Date: 21<sup>st</sup> Jan 2019.....

# STANDARD OPERATING PROCEDURE

SOP No: P11	Page 2 of 5
Title: Research Passport	Version: 2.1

## 1 Purpose and Scope

This Standard Operating Procedure (SOP) gives guidance on the issue Research Passport and identifies the National Institute for Health Research (NIHR) website for more detailed instruction on the procedure to be followed.

The Research Passport aims to ensure that a standardised process for granting access to NHS premises, data and participants, is in place for researchers not employed by the NHS. The Research Passport replaces the need for NHS Trusts duplicating pre-engagement checks whilst ensuring that regulations are adhered to. This scheme is fully endorsed by UK Clinical Research Collaboration and supported by the UK Health Departments, NHS Employers, NHS RD&I Forum and other key stakeholders, including Universities and Colleges Employers Association.

In scope: this SOP relates to the use of the Research Passport scheme for the issuing of Honorary Research Contracts (HRCs) and / or Letters of Access (LoAs) for University Hospitals Plymouth NHS Trust (UHPNT). This SOP does not relate to issuing of honorary contracts at other NHS organisations.

### ***Definitions***

CI	Chief Investigator
CRB	Criminal Records Bureau
CV	<i>Curriculum Vitae</i>
DBS	Disclosure and Barring Service
HR	Human Resource
HRC	Honorary Research Contract
LoA	Letter of Access
NIHR	National Institute for Health Research
UHPNT	University Hospitals Plymouth NHS Trust
PI	Principal Investigators
RD&I	Research, Development & Innovation
RO	Research Office
SOP	Standard Operating Procedure

# STANDARD OPERATING PROCEDURE

SOP No: P11	Page 3 of 5
Title: Research Passport	Version: 2.1

## 2 Who should read this document?

All staff involved in setting up of research projects e.g. Chief Investigators (CI), Principal Investigators (PI), Clinical Trial Co-ordinators / Managers, RD&I Managers and Clinical Trial Administrative staff

## 3 Procedure to Follow

Researchers who are employed by a university or charitable organisation need to apply for access to the Trust site/patients *via* the research passport system. This allows the Trust to ensure that all research staff are appropriately qualified, trained and vetted before commencing work.

The decision on whether an HRC or LoA is appropriate is dependent on the nature of the research activity. This is also true of the supporting documentation required for the Research Passport application.

The Research Passport algorithm (see NIHR link below) can be used to identify whether a Disclosure and Barring Service (DBS) (previously CRB clearance) or occupational health clearance are required.

Once sections 1-6 of the Research Passport application are completed by the researcher, the form should be submitted to the Lead organisations HR or RD&I Office (dependent on local procedure), along with a CV and any other appropriate supporting documentation.

The Research in the NHS: Human Resource (HR) Good Practice Resource Pack describes the process for handling HR arrangements for researchers and provides a streamlined approach for confirming details of the pre-engagement checks they have undergone with the NHS.

The Resource Pack includes details of:

The Research Passport system for issuing HRCs or LoA to researchers who need to undertake their research within the NHS but are not employed within the organisation. The research passport provides evidence of the pre-engagement checks undertaken on the researcher in line with NHS Employment Check Standards; and

NHS to NHS arrangements for sharing and accepting pre-engagement checks between NHS organisations when NHS staff wish to undertake research within the NHS outside of their employing Trust.

The Resource pack is located on the NIHR website at:

<https://www.nihr.ac.uk/about-us/CCF/policy-and-standards/research-passports.htm>

### 3.2. Responsibility

#### 3.2.1. Researcher

# STANDARD OPERATING PROCEDURE

SOP No: P11	Page 4 of 5
Title: Research Passport	Version: 2.1

To ensure that all sections of the Research Passport document are completed appropriately and that all relevant documents are submitted to the lead organisation RD&I Office for processing.

**3.2.2. The Lead organisation** (initiating research or the substantial employer of the researcher) Will conduct the pre-engagement checks that are appropriate for the type of research– and issue the Research Passport.

### 3.2.3. RD&I Office

To facilitate completion of the application and undertake appropriate checks on the documents submitted and to ensure that the issue of a HRC or LoA is done in a timely manner. RD&I will ensure that updates of HRCs and LoA issued are passed to the UHPNT HR Department on a regular basis.

**If you are in any doubt please contact the RD&I office and we will be pleased to advise you (Tel: 01752 (4) 32 842 or e-mail [plh-tr.RD-ClinicalTrials@nhs.net](mailto:plh-tr.RD-ClinicalTrials@nhs.net) ).**

## 4 Document Ratification Process

The review period for this document is set as **default of three** years from the date it was last ratified, or earlier if developments within or external to the Trust indicate the need for a significant revision to the procedures described.

This document will be approved by the **RD&I Manager or their Deputy**.

Non-significant amendments to this document may be made, under delegated authority from **a Senior RD&I manager**, by the nominated author. These must be ratified by **a Senior RD&I manager**.

Significant reviews and revisions to this document will include a consultation with **appropriately knowledgeable staff**. For non-significant amendments, informal consultation will be restricted to **staff** who are directly affected by the proposed changes.

### **Dissemination and implementation**

#### **4.1. Dissemination of this SOP**

**4.1.1. New SOPs and new versions of existing SOPs:** The Research Governance Manager will be responsible for ensuring authorised SOPs are uploaded on the RD&I internet site. Internal Trust Staff are expected to use the RD&I internet site to access latest versions of SOPs and to check the website regularly for updates.

Notice of new or amended procedural documents that have undergone a major amendment will be given *via* the following routes:

- Inclusion in the Trust weekly e-bulletin Vital Signs
- Direct email to Trust Researchers and or teams

# STANDARD OPERATING PROCEDURE

SOP No: P11	Page 5 of 5
Title: Research Passport	Version: 2.1

## 4.2. Training in this SOP

4.2.1. All staff whose activities are subject to this SOP should ensure that they read and understand the content of the SOP.

## 5 Reference material

NIHR Research Passports

<https://www.nihr.ac.uk/about-us/CCF/policy-and-standards/research-passports.htm>

## 6 Amendment History

Version Number: 2.1  
Date Of Amendment: Jan 2019  
Details Of Amendment: Updated logo and Trust name.

---

Version Number: 2.0  
Date Of Amendment: Aug 2017  
Details Of Amendment: Updated SOP template and numbering system. Reviewed and simplified the SOP.

---