



A WORD FROM DR KATHERINE GEOGHEGAN

APMJ Conference Coordinator

Hi I'm Kate the APMJ Conference Coordinator,

We are thrilled to announce this year's APMJ Conference: *Imagining Tomorrow*. This virtual conference will run on September 28th and feature sessions on careers, AI in palliative care and ways in which the specialty may grow and change in coming years. This is set to be a fantastic day and tickets are already available.

There is an exciting opportunity for all resident doctors/ medical students to submit a 250 word abstract with the opportunity for a poster or presentation at the conference. (Deadline 01/09)

We also have our medical student essay competition, inviting you to write a 750 word essay with the title 'Creating the Future of Palliative Care.' (Deadline 01/09)

If the 28th September feels too far away then remember our exciting monthly webinars which are free for APM members. The APMJ committee will be running the September webinar - 'Focus on Multimorbidity'.

This month we have an article from Dr Phoebe Sharratt who is undertaking a PhD while in IMT training about research in palliative care.

We also have some interesting research highlighted by our research coordinator Dr Ishbel Luke on paediatric palliative care.

Hope you enjoy the newsletter!



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submissions.apmj@gmail.com



Research of the Month

Barrett, L., Peat, G., McLorie, E.V. et al. Parents' experiences of the financial and employment impacts of their child receiving end-of-life care: a national qualitative study. BMC Palliat Care 24, 157 (2025). <https://doi.org/10.1186/s12904-025-01796-1>

This article focuses on paediatric palliative care and highlights the unique challenges faced by parents caring for a seriously ill child, especially towards the end of life. Bereaved parents are at a higher risk of poor mental and physical health outcomes compared to those experiencing other bereavements. Reduced ability to work due to caring responsibilities reduces income and adds financial issues at an already very challenging time, leaving families in a difficult financial and emotional position.

Junior Doctor Resource Page

We have a resource page aimed at resident doctors and medical students and it's full of valuable information. If you've joined the AMPJ recently you can still access previous recordings [here](#) too!

There are recordings covering palliative care for FY1s which is ideal for those of us starting work in August.

Careers in academic palliative care and research are also covered, and you can find a palliative care research directory divided into regions if you'd like to get more involved.

Please let us know of anything else you would like to be covered.

Recommended Reading

If you're looking to learn more about palliative medicine this [list](#) has been compiled based on recommendations from APM members. There's a mixture of textbooks and novels. We hope you find some of these books valuable and would be interested to hear your thoughts.



Association for
Palliative Medicine
Of Great Britain and Ireland

June
2025

APM Juniors Newsletter

APM Juniors Survey

Please fill in our survey to help us better understand what our members want from an APM junior membership. The survey will take no more than five minutes to complete and can be found [here](#). Thank you!

APM Medical Students Survey

Please fill in this survey to help guide our future events and resources for medical students. The survey will take no more than five minutes to complete and can be found [here](#). Thank you!

Free Medical Student Membership with the International Association for Hospice & Palliative Care

The International Association for Hospice and Palliative Care is pleased to announce a free one-year membership to undergraduate college/university students of any discipline.

For more information, visit the IAHPC [website](#).

RESEARCH IN PALLIATIVE CARE

Could a career involving research be for you?



Image created with AI

My name is Phoebe Sharratt and I am an IMT3 doctor, currently taking time out of training to complete a PhD at Lancaster University. My PhD is focused on hospital based palliative care for older people with frailty, with a particular focus on how we identify their palliative care needs. This blog aims to share a little about how I went from someone who had no interest in research to studying for a PhD. I hope it will encourage those who think that research is not for them to see the benefits that research can have for our clinical career pathways, outside of the added points on a specialty training application!

MY PATH TO RESEARCH

During medical school and my foundation years I was adamant that I had no interest in research becoming a significant part of my career. I naïvely thought that research didn't involve much interaction with patients, and as I had entered medicine because of my interest in people, this misconception put me off. As such, my only research experience at this point was completing a systematic review for my intercalated BSc and I had no research publications.

The COVID-19 pandemic became an important turning point in my career. At this point I was an F3, working as a trust grade doctor on a care of older people. This was the start of my interest in research. I became involved in some research projects with my ward team, I became a local recruiter for the RECOVERY trial and was a study participant for the SIREN study. Seeing research being done on the ground, from multiple aspects, started to change my perception and made me re-appreciate its value. These experiences taught me that research can be influenced by, and can influence, your clinical practice as it takes place. I learnt that patients are interested in being involved in research. Even those who did not want to take part in the RECOVERY Trial expressed to me the importance of that research taking place in the hospital where they were being cared for.

Around this time, I met an academic clinical fellow (ACF) who had been re-deployed to my department. I had heard of the academic (now specialised) foundation programme but had no idea that there were funded research opportunities beyond this. Through encouragement from this ACF and advice from a colleague who was also applying for an ACF, I decided to apply. I applied for a role at two Universities. Although initially unsuccessful, the first-choice applicant at Lancaster took up a post elsewhere so I was offered this post and took up my role in August 2021.

ACF posts are funded by the National Institute for Health and Care Research (NIHR). Universities provide training in research skills and academic supervision, while clinical training is provided by the associated deanery. ACF posts provide Masters-level research training and for me, this involved enrolling on a Clinical Research MSc. Although Masters-level research training is not necessarily required for a PhD application, the training I was provided with was incredibly useful for developing my research skills from my undergraduate knowledge. These skills can be developed outside of a formal teaching course and there are both free and paid for resources that can help you develop skills specific to your research.

I started my ACF post alongside IMT training; this meant 75% of my time would be clinical and 25% was spent on research. This did not extend my training, meaning I had to gain my clinical competencies in 75% of the time (including gaining MRCP) whilst also undertaking my research training and project. In the increasingly busy world of clinical medicine, being involved in research can feel like you are balancing two careers and could be off-putting for some. This was certainly a tricky balance for me during my ACF.



Image created with AI

I completed my research time during blocks, and was amazed to find that I had the first say in when these should take place and (to some extent) how long they would be. I suddenly had autonomy over my own time and schedule, and after 4 years of full-time work in hospital this was invaluable to both my work-life balance and keeping me engaged in research.

During my last year of my ACF post, my supervisor informed me of PhD funding that was becoming available at the University for clinical academics. During my ACF I had been putting together ideas about a future research project and so applied when the advert came out. Once again, I was initially unsuccessful in getting the post but a few months later, I was informed that the first-choice applicant had decided not to pursue the post and that I was now being offered it.

I took up that role six months before finishing IMT3 and am now 15 months in. My PhD will hopefully enable me to pursue a career which involves both academic and clinical time. Although starting a PhD during IMT has delayed me reaching palliative specialty training, I feel fully immersed in palliative care through the expertise of my supervisors and the freedom of time to join palliative care webinars and communities of practice.

KEY TAKE AWAYS

Research isn't for everyone, but here are my key take aways for those who think it might be an interest they'd like to pursue:

- **Rejection in research is common** – it is normal to encounter setbacks in the world of research, these should never be seen as a negative reflection on your ability and skills but as a useful learning process.
- **Networking and developing relationships are key** – having connections can improve your chances of knowing about new opportunities; it is also just as important not to gatekeep opportunities you are aware of and to share these with others who you know might be interested.
- **Training pathways can support you** – information about the NIHR clinical academic training pathways can be found here <https://www.nihr.ac.uk/career-development/research-career-funding-programmes/predoctoral/academic-clinical-fellowship>.
- **Non-training pathways are an option** – many clinical academics do not undertake the NIHR formalised training pathways; find out more about career options here <https://www.catch.ac.uk/training-careers/medicine>.

- **Research benefits your clinical work** – there is mutual benefit for both your clinical and research skills through involvement in both.
- **Research takes time** – it is both a pursuit that takes time away from your busy schedule and also progresses at a much slower pace than clinical work where decisions, actions and outcomes can happen in a matter of minutes.
- **Research enables greater autonomy** – from creative control of a project, down to choosing what days you want to work on your research project, you might have deadlines, but you are still in greater control of the time you choose to spend on your research.
- **Search for a good supervisor** – a good supervisor or mentor can help you with so many key aspects of research from knowing what training to complete to introducing you to others who may bring you wider opportunities.

GET IN TOUCH

If you have any questions or would like to have a chat about research careers in palliative care please do get in touch via p.sharratt@lancaster.ac.uk



Myself and one of my supervisors at the beautiful Lancaster Medical School campus.



UPCOMING EVENTS

Watch-back Tickets

Clinical Updates Series - Oncology, Acute Medicine and Hot Topics in Specialist Palliative Care

<https://apmonline.org/events/clinical-update-series/>

2nd September 2025

Focus on Multimorbidity

<https://apmonline.org/events/focusonmultimorbidity/>

6th November 2025

Undergraduate Medical Education in Palliative Care: Addressing New Challenges

<https://apmonline.org/events/addressing-new-challenges/>

January 2026

An APM Ethics & Research Committee Virtual Course

https://apmonline.org/events/ethics-course-january-2026/?dm_i=2GTP,21XLN,AD6RBD,7H1OK,1

26 - 27th March 2026

PCC Congress 2026

<https://pccongress.org.uk/registration/>



USEFUL RESOURCES

APM/ PCRS Research directory

<https://apmeducationhub.org/wp-content/uploads/2023/06/Palliative-Care-Network-April-2023.pdf>

Palliative Medicine Curriculum

<https://www.jrcptb.org.uk/sites/default/files/Palliative%20Medicine%202022%20curriculum%20FINAL.pdf>

e-ELCA

https://portal.e-lfh.org.uk/myElearning/Index?HierarchyId=0_29&programmId=29

Junior Doctor and Medical Student Resources

<https://apmonline.org/junior-doctor-medical-student-resources/>

PREVIOUS WEBINARS TO WATCH

Palliative Care for FY1 Doctors

Vimeo Link <https://vimeo.com/apmeducationhub/pallcarefy1?share=copy>

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