

My journey into research – Steven Cooper

Tell us a bit about you

I'm a Lead Advanced Clinical Practitioner and independent prescriber for a GP surgery in Lincolnshire. I'm a paramedic by background and have worked in primary care for around ten years.

Tell us about your experience with research

My first exposure to research was through participating in NIHR research studies as a paramedic. I really enjoyed participating in studies and contributing to research and have always been passionate about the importance of evidence based medicine.

Though I had been involved in audits and service evaluation, I initially lacked the confidence to take the next steps in research and thought things like publishing an article or doing a PhD were beyond my capabilities.

I completed the Foundation Research Training Programme, it helped me to better understand the research process, Patient and Public Involvement and Engagement and applying for funding.

The real turning point was the NIHR Emerging Researcher Internship. It gave me the opportunity, and importantly the protected time and support, to explore research properly.

That has ultimately led to me securing an NIHR-funded PhD, which I'll be starting in October 2026. So, while the direction of my career has been quite consistent, the internship was what gave me the confidence and experience to take that next step into clinical academia.

I've really enjoyed being able to take something that I've noticed clinically and investigate it properly. I think there is something quite satisfying about asking a question that has come from your everyday work, collecting evidence, and then seeing what that evidence tells you.

I've also enjoyed the problem-solving side of research. You start with an idea, but you quickly realise that there are lots of questions underneath it: What exactly are you trying to measure? Who is affected? What data do you need? What are the ethical considerations? How do you involve patients properly?

I've particularly enjoyed the Patient and Public Involvement and Engagement side because it brings you back to the reason you're doing the work in the first place. And publishing a service evaluation was a huge moment for me. It was probably the first time I really thought, *actually, I can do this*.

What would you tell other people interested in getting involved in research?

I'd encourage people to find someone who can support them. Mentorship is really important because I had the clinical experience and the ideas, but initially I didn't have the confidence that I could actually turn those ideas into a proper research project. Having someone who could guide me, challenge my thinking and give me confidence made a real difference. It helped me recognise that I had more ability in research and clinical academic writing than I had initially believed.

Working clinically, it's very easy to focus on the individual patient in front of you. Research has made me think much more about the wider system and about how the design of a service can create benefits for some patients but potentially create barriers for others.

I'd say don't assume that research is only for people who are already academics. I'm a clinician first, and I certainly didn't start out with a strong academic background. What I did have was curiosity about something I was seeing in practice.

And don't underestimate the value of small projects. You don't have to start with a PhD or a huge research study. An audit, service evaluation or quality improvement project can be a really good starting point.

If Steven's story has inspired you to find out more about research and innovation in your work, please see the Sources of help table on the R&I Hub webpages for details of people you can reach out to.

Further details about the Foundation Research Training Programme Steven refers to and other training opportunities can be found in the Training and Development section of the R&I Hub webpages.