

Guidance Notes for NIHR School for Primary Care Research PhD Studentships in Primary Care 2021

Applications are invited from individuals with a strong academic record who wish to develop a career in primary care research. Awards are offered at all nine Universities within the NIHR School for Primary Care Research: Bristol, Exeter, Keele, Manchester, Nottingham, Oxford, Queen Mary University of London, Southampton and University College London.

Awards will normally be taken up in October 2021.

Applicants must have a first degree in a discipline relevant to primary care research and will be expected to complete a PhD/DPhil during the award period. The precise academic qualifications required depend on the University and training offered.

The awards offer traditional project-specific training in areas of particular importance to primary care and awarded to applicants from diverse backgrounds including e.g., medical statistics, social sciences, health economics, health psychology). We will encourage students to make connections with relevant NIHR Incubators, where appropriate (e.g., methodology, nursing and midwifery education) in addition to working with other parts of the NIHR Infrastructure (including but not restricted to NIHR ARC, BRC, Patients Safety Translational Centres).

<https://www.nihr.ac.uk/health-and-care-professionals/learning-and-support/incubators.htm>

<https://www.nihr.ac.uk/explore-nihr/academy-programmes/academic-career-development-in-nihr-infrastructure-and-nihr-schools>

As the Universities do not always offer mentorship in every discipline relevant to primary care, it is possible that applicants can benefit from training within the School but maintain a link with, or be primarily based within, a University outside the School that can provide discipline-specific mentoring. In these cases, the linked SPCR partner must be agreed and specified in the application.

Studentship awards include tuition fees, an annual tax-free stipend of £16,000 and a contribution towards research and training costs. Students at Queen Mary University of London and University College London will receive a London weighting and students at Oxford will receive combined university/college fees. These awards fund tuition fees up to the value of Home/Ireland fees; students with overseas status are welcome to apply but will need to fund the remainder of their fees from alternative sources.

All applicants must ensure that their proposed research project is compatible with the published NIHR remit:

<https://www.nihr.ac.uk/documents/academy-nihr-remit-for-personal-awards/21380>

UNIVERSITY OF SOUTHAMPTON

The Southampton Primary Care Research Centre (PCRC) is one of the world's leading primary care centres of excellence, offering an excellent spectrum of expertise in methodologies and a remarkable range of topic areas. We are located on the South Coast with the New Forest and the sea on our doorstep and easy access to Winchester, Salisbury, London and the South West. We doubled in size between the 2008 Research Assessment Exercise and the 2014 Research Excellence Framework (REF) assessment, and have increased by another one third in size since 2014. 87% of our research was rated as 'internationally excellent' or 'world-leading' in REF 2014, and we were ranked 3rd highest for the quality of our research outputs out of 32 institutions in the Public Health, Health Services Research and Primary Care unit of assessment.

PCRC is part of the School of Primary Care, Population Sciences and Medical Education in the Faculty of Medicine, giving us very close links with Public Health with shared interests in kidney disease, liver disease and alcohol misuse. We have particularly strong links with the world-famous Health Psychology group, and a very strong track-record of developing effective behavioural interventions for both patients and clinicians that really make a difference to patient care. We have close collaborations with the Southampton NIHR Biomedical Research Centre in Nutrition and Respiratory Medicine, the Faculty of Health Sciences, Southampton Statistical Sciences Research Institute, and Computing Sciences within the University. Thus, PhD students and post-doctoral research fellows may be co-supervised by clinical academics in primary medical care and scientists in these disciplines. They will also be supported to develop national and international links, through our extensive existing fruitful collaborations, where appropriate.

Our research provides new evidence to inform key challenges in primary care, including addressing major issues affecting population health. Our research currently focuses on areas such as: infections and antibiotics; long-term conditions; healthy ageing; and integrative healthcare.

We organise our research around four broad themes:

- Supporting self-management
- Improving use of medicines
- Healthcare communication
- Diagnosis and prognosis

Supporting self-management

Research in this area covers a remarkable range of content areas, developing and testing internet interventions addressing: lifestyle, mental health, emotional distress, cancer-related distress and cancer survivorship, low back pain, chronic dizziness, asthma, COPD, respiratory infection, IBS, eczema, hypertension, and weight management. We have successfully developed and trialled the POWeR interventions to help tackle infectious disease epidemics such as COVID-19 (GermDefence) and major public health epidemics such as obesity (POWeR). We are evaluating self-help behavioural interventions for eczema (ECO) and irritable bowel syndrome (ACTIB). For mental health problems we are providing evidence to support self-help for distress and mindfulness meditation. We have evaluated the Alexander Technique for back pain, and psychologically based symptom management strategies in both COPD and asthma. Our SPEAK (SPEcialist cAnCER helpline) studies on Macmillan's Cancer Helpline, and

the PROACTIVE intervention designed to diminish anxiety in prostate cancer patients on active surveillance. The major CLASP Programme is developing a complex internet-supported intervention for lifestyle change and the management of distress among cancer survivors.

Improving use of medicines

Research in this area includes providing evidence on the safe and effective use of conventional and alternative medicines for common conditions managed in primary care, including: infections, eczema, acne, irritable bowel syndrome, insomnia, depression, asthma, CKD, hypertension and COPD. A key focus has been on tackling the major public health threat of antibiotic resistance by providing evidence to support the better use of antibiotics and alternative treatments for infections. Current studies include a trial of a novel treatment for COVID-19, a trial of antibiotics for chest infections in children, a trial of a nasal spray (and lifestyle approaches) to reduce recurrent respiratory tract infections, trials of Pelargonium for chest infections and Uva ursi for acute UTI, and medication reduction/optimisation in hypertension. We are also conducting database studies on the use of ACE-inhibitors in-patients with COVID-19 and have a major grant on cessation of long-term antidepressants (REDUCE).

Healthcare communication

We aim to provide evidence to enhance health care communication and improve patient outcomes. Current work includes developing tools to enhance empathy and positive messages within the consultation (EMPATHICA). Recent work identified key challenges associated with managing patients who attend with multiple concerns (EPAC study (Elicitation of PATients' Concerns) in general practice consultations and trialled a new communication technique to encourage early agenda setting in the GP consultation (SoCs). Qualitative work continues to explore prescribing practice in general practice consultations through in-depth analysis of video recorded consultations (AN-CAP). In the area of managing infections, we have developed and trialled communication skills approaches, and qualitative evaluation of approaches such as delayed prescribing and comparing GP and nurse practitioner perspectives on the challenges of prescribing antibiotics out of hours (UNITE). Other studies include exploring how GPs communicate with patients presenting with symptoms that may indicate cancer (CATRIC), the use of patient-reported outcome measures in depression (PROMDEP), and work on the placebo and non-specific therapeutic effects in consultations for pain, aiming to reduce the use of anti-inflammatories.

Diagnosis and prognosis

Work in this theme includes prospective observational studies, routine data studies, qualitative studies, diagnostic studies and randomised controlled trials that aim to improve the management of infections, asthma and COPD, mental health problems, atrial fibrillation and cancer. Recent and ongoing studies are on the diagnosis, prevention and treatment of COVID-19, diagnosis of sore throat, using routine record data to explore variations in outcome for people with asthma and COPD, evaluating the use of a FeNO-guided approach to managing asthma, and identifying whether biomarkers can predict progression with the Respiratory Biomedical Research Centre. We are also developing evidence for best practice in the early detection of cancer in general practice, building on the 20,000 patient CANDID cohort and in the longer-term support of survivors of cancer, working with Macmillan Cancer Support.

Prof Hazel Everitt and Dr Mark Lown are our leads for postgraduate development within the group, our liaison with the SPCR and internally with the University's postgraduate and postdoctoral organisations. Since 2014 we have been awarded six NIHR, one Wellcome, and two Chiropractor Association doctoral fellowships; two SPCR postdoctoral fellowships, four Academic Foundation posts (AFPs); five NIHR Academic Clinical Fellowships (ACFs); two GP In-Practice Fellowships; and three Academic Clinical Lectureships (CLs). All our PhD supervisors attend the University supervisor training and the Faculty Graduate School provides generic training (in ethics, presentations, statistics, Good Clinical Practice, etc.). Many of our PhD students have completed an MSc involving research methods, and training is individualised, depending on the needs of the PhD. This often involves specific specialist courses outside the department funded by our internal reserves. The SPCR meetings provide an excellent environment for PhD fellows to learn what happens in other departments, to meet colleagues in a non-threatening academic environment, and to be mentored. We have a PhD support group and an annual Primary Care, Population Sciences and Medical Education conference for PhD students to receive feedback from all the senior academics. Our postgraduate students also have an annual formal assessment with an invited internal adviser from outside the supervisory team. Supervision and mentoring are judged to be excellent and students have many opportunities for presenting their research findings at conferences and for co-authorship on peer reviewed publications, and good support for new research ideas. As well as offering academic excellence, our Academic Unit provides a vibrant and friendly culture for PhD students. We eagerly await new doctoral candidates so please email to enquire about any of the themes above. It is also possible to discuss your ideas and how they might fit in with our Centre's research strategy.

FURTHER INFORMATION:

Contact: Hazel Everitt hae1@soton.ac.uk or Mark Lown M.Lown@soton.ac.uk

Please see the Southampton Primary Care Research Centre webpage:

<https://www.southampton.ac.uk/primarycare/research/index.page>