NIHR SCHOOL FOR PRIMARY CARE RESEARCH

Annual Report

PART A:
Report of the School for Primary Care Research contract (managed by CCF).

OVERVIEW OF SPCR

Please provide an update on the following:
   a. Any changes to the objectives of SPCR
   b. Any significant developments to implementing the objectives
   c. Any changes with the business plan, leadership, governance and management arrangements for SPCR

In August 2019 we were informed that the current contract would be extended by six months whilst the renew and refresh of the SPCR programme was commissioned. This has resulted in additional business plans which seek to build a closer relationships between primary care researchers and relevant stakeholders such as NHS England and NHS Improvement, local government and other health bodies in England as well as patients, service users and practitioners. We are committed to the ongoing support and development of researchers’ career and personal development. We will use the opportunity to engage more widely with primary care institutions external to SPCR to increase the primary care evidence base, build capacity and provide career development opportunities across the sector.

A new SPCR PPIE Officer joined the directorate team in December 2018 and this has widened our objectives relating to patient and public involvement and engagement. We have strengthened the involvement and engagement programme within the SPCR.

UPDATE ON SPCR ACTIVITIES AND RESEARCH HIGHLIGHTS

Please provide an update on the following:
   a. Highlights of research funded by the NIHR SPCR award in 2018/19 (Please submit a complete list of projects as requested in Section 11).
   b. Include examples of how the School has increased the evidence base for primary care practice.
   c. Overview of new research projects or new areas of research activity. Please place most emphasis on the most recent activities of the School.
   d. Any major accomplishments/awards received as a consequence of your SPCR membership. Please don’t include leveraged funding for projects as this is covered later in Section 10.
   e. Please set out clearly, the progress made within each research theme or research priorities.
   f. Details of planned commissioning cycles
   g. Examples of funding in all disciplines within primary care.

RCGP Research Paper of the Year (RPY) 2019 – impact on clinical practice
Whilst one of these papers directly resulted from SPCR funded research, the SPCR has contributed to the environment in the SPCR partner department and funded studies in the same areas therefore adding to the capacity and providing supplementary funding.

The overall winner of the RPY award was from the Clinical Research category. This was a trial led by Miriam Santer in Southampton that found no evidence of clinical benefit from pouring emollient bath additives in the standard management of eczema in children. This trial should ensure GPs prescribe effective treatments for children with eczema, and de-prescribe bath additives, thus leading to substantial savings for the NHS. (SPCR projects 135 Predictors of onset and persistence and psychological impact of childhood eczema: a birth cohort study, 382 The TEST (Trial of Eczema allergy Screening Tests) Study: feasibility randomised controlled trial with economic scoping and nested qualitative study), S128 Understanding Families' Experiences and Views of Eczema Treatments in the Online World).

Highly commended paper
A paper reporting the TASMINH4 trial led by Richard McManus in Oxford, which demonstrated that self-monitoring, of blood pressure with or without telemonitoring, when used by GPs to titrate antihypertensive medication in individuals with poorly controlled blood pressure, leads to significantly lower blood pressure than titration guided by clinic readings without increasing GP workload. (171 Self-monitoring of blood pressure in pregnancy: developing the evidence base in primary care, 267 Blood pressure self-monitoring individual patient meta-analysis of registered trials; sub group analyses in a multi-morbid population, 335 Optimising Treatment for Mild Systolic hypertension in the Elderly (OPTIMISE), 388 Evaluating the impact of the 2011 NICE Hypertension Guideline on the Management of Hypertension in Primary Care and Subsequent Outcomes, 418 Ratifying Antihypertensive Treatments In multi-morbid hypertensives For personalised management of Blood Pressure, S18 Investigating home blood pressure monitoring and drug titration using qualitative and quantitative methods).

Highly commended paper
This was by Maria Panagioti from Manchester and colleagues at the universities of Westminster, Keele, Birmingham, Leeds, and Thessaloniki, who reported on a meta-analysis which provides evidence that physician burnout may jeopardise patient care. Tackling burnout is thus not just essential for the individual clinician, it is important to maintain good-quality care. (298 Burnout in general practitioners: a systematic review of relationships with patient safety and a feasibility study of the measurement of burnout).

Highly commended paper
This was the 3D trial, led by Chris Salisbury in Bristol. The intervention, based on dimensions of health, depression, and drugs, for patients with multimorbidity did not improve patients' health-related quality of life.

Professor Chris Salisbury (Bristol) was invited to deliver the 2018 RCGP James Mackenzie lecture. The lecture is one of the College’s main awards, with the lecturer chosen by the Fellowship and Awards Committee of the College. He addressed one of the biggest challenges facing primary care: how to provide care related to need for the growing number of people with multiple health problems (multimorbidity). Royal College of General Practitioners' YouTube channel read the transcript

A new study also based in Bristol builds on the 3D IMPPP (Improving Medicines use in People with Polypharmacy in Primary Care) is a £1.9M HSDR-funded multi-centre clinical trial investigating a primary care based complex intervention to optimise the case of people with polypharmacy in primary care. The trial is currently in the pilot stage and undertaking patient recruitment. It will be one of the largest studies ever of a polypharmacy intervention and aligns with UK health service structures and demands. The study has been able to draw on our previous expertise around multimorbidity from the 3D trial, and the associated SPCR-funded development work that went into 3D. SPCR has supported a number of studies in Bristol which informed the development of the 3D multimorbidity trial, as well as key epidemiological work around polypharmacy. This has included methodological development work establishing us as experts in conducting primary care trials more generally, as well as specific multimorbidity and polypharmacy ensuring Bristol’s recognition as one of the key international research leaders in these fields.

Professor Christian Mallen (Keele) won the inaugural Society for Academic Primary Care Principal Investigator of the Year 2019 for: exceptional support, leadership and encouragement for his team through the highs and lows of research, careers and life. He was also invited to deliver a keynote lecture at
the 7th Asia Pacific Primary Care Conference in Malaysia entitled Complex solutions to straight forward questions? Highlighting complex interventions in primary care.

Professor Richard Hobbs (Oxford) and Professor Paul Little (Southampton) and were recipients of the 2018 and 2019 RCGP Discovery Prizes in recognition of outstanding research in general practice. 
https://sapr.ac.uk/news/2018/12/21/rcgp-discovery-prize

Professor Hobbs was invited to deliver a plenary lecture at the 24th WONCA Europe Conference in Slovenia (World Organization of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians). The lecture title was "Is primary care research important?". This keynote speech considered whether primary care research is important or not, and whether academic primary care has helped enable a greater research capacity in the complex environment of general practice to host more and better research. https://www.spcr.nihr.ac.uk/news/is-primary-care-research-important

Professor Hobbs and Professor Louise Robinson (Newcastle) were recognised in the 2019 Queen’s New Year’s Honours, receiving a CBE and a Damehood respectively. https://www.spcr.nihr.ac.uk/news/new-years-honours-2019
https://www.spcr.nihr.ac.uk/news/damehood-to-professor-louise-robinson-in-new-years-honours-list

Professor Dame Louise’s work was also recognised by the MadeAtUni campaign. She was named as one of the Nation’s Lifesavers – the top 100 individuals or groups based in universities whose work is saving lives and making a life-changing difference to our health and wellbeing. The Nation’s Lifesavers fight disease, help new parents and children enjoy the best start in life, support older people and improve mental health and wellbeing. https://www.spcr.nihr.ac.uk/news/dame-louise-robinson-named-among-nation2019s-lifesavers

NIHR Senior investigators 2019
RE-APPOINTMENT :Prof Jonathan Mant, University of Cambridge
NEW APPOINTMENTS: Prof Krysia Dziedzic (Physiotherapist), Keele University, Prof Richard McManus, University of Oxford, Prof Alastair Hay, University of Bristol

# PRIMARY CARE ENGAGEMENT

a. Please provide information, including examples of how SPCR has engaged with the national primary care infrastructure. 
b. Please describe how the School has engaged with relevant disciplines within primary care 
c. Please explain how the School has collaborated and built relationships with key stakeholders. 
d. Please list any links made with academic centres outside of the School membership.

The First5® Award RCGP and NIHR Clinical Research Award offered by the RCGP Scientific Foundation Board and the National Institute for Health Research (NIHR) Clinical Research Network was presented to Dr Elizabeth Morris, a clinical research fellow at the University of Oxford in the Department of Primary Care Health Sciences. The award recognises research-active NHS GPs and general practices that demonstrate excellence and innovation in delivering NIHR research.

In 2014, Lau and colleagues (S30 3 year SPCR studentship, 137 The design of prognosis research in primary care: a systematic review of prognostic factor measurement and implications for clinical credibility) undertook a review of systematic reviews to understand the causes of the evidence to practice gap in primary care, and the ways in which interventions might help to close this gap. Achieving change in primary care--causes of the evidence to practice gap: systematic reviews of reviews. Implement Sci. 2016 Mar 22;11:40. It was a collaborative programme that offered understanding of both qualitative and quantitative data and has informed several further publications (cited by 173 manuscripts). Professor Dziedzic was a member of
the research team and is the Director of Keel’s Impact Accelerator Unit (IAU) on which the Lau framework was initially based. The IAU to demonstrate our commitment to maximising the benefits of closing the evidence-to-practice gap in primary care by accelerating the uptake and impact of best evidence, guidance and quality standards. The unit works closely with NICE, the Academic Health Science Network, NIHR Applied Health and Research Collaboration (ARC), NIHR Research Design Service, national charities (e.g. Versus Arthritis) and regional STPs. The IAU provides the enabling infrastructure, facilities and expertise in knowledge mobilisation, clinical leadership, NHS partnerships and engagement and PPIE, which are utilised in the flexible delivery of funded implementation activities.

Within the IAU there is nationally recognised academic and clinical expertise: NIHR Knowledge Mobilisation Fellows, NIHR SPCR Launching Fellow: Knowledge Mobilisation and NICE Fellows (Alumni), national and international clinical guideline panel members.

SPCR funding for Dr Andrew Kingston (F136 Understanding how primary care can identify and moderate disability pathways of older people) allowed him to work with Carol Jagger to complete two high impact papers from the MODEM study on which he was previously employed. Kingston A, Robinson L, Booth H, Knapp M, Jagger C. Projections of multi-morbidity in the older population in England to 2035: estimates from the Population Ageing and Care Simulation (PACSim) model. Age and Ageing 2018;47(3):374-80) Also won the Dhole-Edlestone Memorial prize for the best paper in Age and Ageing in 2018.

Kingston A, Comas-Herrera A, Jagger C. Forecasting the care needs of the older population in England over the next 20 years: estimates from the Population Ageing and Care Simulation (PACSim) modelling study. Lancet Public Health 2018;3(9):E447-E55). Both papers received much media attention including TV and radio. The second paper is contributing to ongoing analyses for DHSC, predominantly, though not exclusively, through the NIHR Older People and Frailty PRU (OPF PRU). The work is also contributing to strategy documents to address the Ageing Grand Challenge to increase by 5 years healthy and independent life by 2035 whilst narrowing the gap between the richest and the poorest, particularly the strategy from the All Party Parliamentary Group on longevity. A new project through the OPF PRU is updating the estimates of care needs by incorporating the new 2018 population projections for DHSC.

Oliver van Hecke (366 Parents’ perceptions of Antibiotic USE and antibiotic resistance (PAUSE): a qualitative interview study, 439 Using evidence-based infographics to increase parents’ understanding about antibiotic use and antibiotic resistance: a proof-of-concept study) attended the House of Commons in April 2019 as panel expert on the All-Party Parliamentary Groups (APPG) on Antibiotics, Pharmacy, and Dentistry/Oral health https://www.spcr.nihr.ac.uk/news/blog/attending-the-house-of-commons-as-panel-expert Dr van Hecke is a member of the British Society of Antimicrobial Chemotherapy Council. The aim of the APPG session was to discuss what primary care professionals can do to help "contain and control" antibiotic resistance in the UK. As a GP and a specific research interest in the topic, Dr van Hecke had the opportunity to address MPs and Lords on what might be done in primary care to reduce antibiotic prescribing.

In Nottingham the FAMCAT tool has been refined as a result of the FAMCAT study and related algorithm development. (266 Implementing diagnostic genetic testing for familial hypercholesterolaemia in primary care: qualitative study, 332 Improving identification of familial hypercholesterolaemia in primary care using a new case ascertainment tool (FAMCAT), 361 External Validation of the Familial Hypercholesterolaemia Case Ascertainment Tool (FAMCAT), 400 Developing and validating an optimised tool to identify familial hypercholesterolaemia in routine primary care). Further, the quality improvement tool developed from the FAMCAT study has been implemented in over 800 General practices, with the support of several AHSNs and British Heart Foundation FH nurses. The strategy is also supported in Public Health England policy document “Familial Hypercholesterolaemia Implementing a systems approach to detection and management” and aligned to NHS Long term plan to identify 25% of FH in next 5 years. The FAMCAT tool is also being implemented in Malaysian primary care as an international tool funded through MRC Newton Grant in Malaysia. Impact generated:

- Altmetric score 527 – top 1% of all research articles published in 2019
- Over 439 news outlets, covering newspaper print media, national TV, national and local radio
- Interviews conducted by Dr Stephen Weng, Dr Ralph Akyea and Professor Nadeem Qureshi for BBC Breakfast TV Live, BBC Radio 4, Sky News at 1 PM, Channel 5 New, BBC Evening News
- The Guardian (https://www.theguardian.com/17576004.half-of-patients-on-statins-have-suboptimal-response-study-says/)

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• British Medical Journal podcast released by Dr Stephen Weng (https://soundcloud.com/bmjipodcasts/cholesterol-the-lower-the-better)
• Total reach of 314 million people with advertising value of £2.9 million

This led to interest from Lambeth and East London Primary Care organisations providing improved identification in underserved BAME communities and working closely with Heart UK to improve identification of FH in Primary Care. The research on implementing Familial Hypercholesterolemia into primary care has also provided the evidence for recommendations in NICE FH guidelines (CG 71), particularly the data to populate the economic analysis.

Another Nottingham project (265 Anticholinergic drugs and the risk of dementia: a nested case control study) was widely referenced in 2019 https://www.spcr.nihr.ac.uk/news/commonly-prescribed-drugs-could-increase-the-risk-of-dementia The research suggested that regular use of certain types of commonly-prescribed drugs used to treat bladder conditions, Parkinson's disease and depression, could significantly increase the risk of dementia in later life. Picked up by BBC, Telegraph, Sun, WebMD, Medical Xpress. Additional funding was provided by the Faculty of Medicine and Health Sciences Research Board, University of Nottingham, NIHR Nottingham Biomedical Research Centre, NIHR Collaboration for Leadership in Applied Health Research and Care East Midlands (CLAHRC EM), NIHR MindTech, MedTech, and In Vitro Cooperative.

IMPACT

a. Please provide descriptions of impact or potential impact on primary care practice or policy arising from research undertaken by the School, explaining precisely how the research has contributed to changes in practice or policy (rather than simply stating that it has made a contribution). Please use Section 9 to elaborate on a few high impact examples.

b. Please evidence how having a collective, such as the School adds value to primary care more generally and not just in activities and projects.

Several SPCR funded studies were picked up by the NIHR Dissemination Centre in 18/19. The centre identifies the most reliable, relevant and significant health research findings and summarises them in a range helpful formats for health professionals, patients, members of the public as well as researchers to use – Signals, Highlights and Themed Reviews. https://www.spcr.nihr.ac.uk/news/nihrdc

https://discover.dc.nihr.ac.uk/content/themedreview-03898/moving-matters-interventions-to-increase-physical-activity Study 27: Keeping active: maintenance of physical activity after exercise programmes for older adults. 2018 was conducted by PI Denise Kendrick (264 Keeping active: maintenance of physical activity in older people after an exercise intervention).

Lifestyle changes may be more important than drugs for mild hypertension
J Sheppard, S Stevens, R Stevens, U Martin, J Mant, R Hobbs, R McManus

Stability of thyroid function in older adults: the Birmingham Elderly Thyroid Study
L Roberts, D McCahon, O Johnson, M S Haque, J Parle and R Hobbs

Poisoning substances taken by young people: a population-based cohort study
Edward G Tyrrell, Denise Kendrick, Kapil Sayal and Elizabeth Orton

The blood-thinner apixaban is less likely to cause major bleeding than warfarin
Y Vinogradova, C Coupland, T Hill, J Hippisley-Cox

https://discover.dc.nihr.ac.uk/content/signal-00572/multi-morbidity-predicted-to-increase-in-the-uk-over-the-next-20-years

A BMJ article by Jack O’Sullivan et al. (386 Quantifying variation in UK primary care test use: A 15-year retrospective analysis of temporal and geographical variation in test use) received wide coverage. GPs are ordering more than three times as many tests diagnostic for their patients as they were 15 years ago as they now provide more services previously provided by hospitals and monitor more patients with chronic diseases. Jack W O’Sullivan, Sarah Stevens, F D Richard Hobbs, Chris Salisbury, Paul Little, Ben Goldacre, Clare Bankhead, Jeffrey K Aronson, Rafael Perera, Carl Heneghan. The BMJ 2018. DOI: 10.1136/bmj.k4666 Press release and media coverage: https://www.spcr.nihr.ac.uk/news/number-of-diagnostic-tests-ordered-by-gps-rises-more-than-threefold-in-15-years https://www.phc.ox.ac.uk/news/number-of-diagnostic-tests-ordered-by-gps-rises-more-than-threefold-in-15-years

News of SPCR research in Nottingham was picked up by a wide range of media (The Times, the Nottinghamshire Post, the Mirror, and Radio Berkshire). The research, jointly funded by the MRC, the University of Nottingham and the SPCR (S56 Behavioural and Psychological Approaches to Optimising Antibody Response to Vaccination in Older People, 363 Non-pharmacological approaches to optimising vaccine effectiveness: the development of an effective and acceptable intervention for primary care, 434 Positive mood and vaccine effectiveness: examining consequences for the health service) https://www.spcr.nihr.ac.uk/news/increasing-the-effectiveness-of-the-flu-jab-with-comedy

In his pioneering clinical trial, patients will have their mood measured in an online test and will then watch 15 minutes of clips from comedians such as Michael McIntyre and Victoria Wood. After watching, their mood will be retested to see if they are happier. The patients will also have their blood tested before the jab and four weeks later to see if they have higher antibody responses which means the vaccination should work better.

Prof Kavita Vedhara, a specialist in health psychology at the University of Nottingham and Dr Kieran Ayling are collaborating with London-based creative tech agency Rehab to create the intervention. Because flu vaccination is estimated to be far less effective in older people, between 17-53% compared with 70-90% in younger people, its vital to improve protection. The team want to be able to improve the effectiveness of vaccinations so that fewer older people end up with flu which can be a devastating condition in the elderly.

Professor Christi Deaton was interviewed by BBC East about her SPCR funded research on the management of patients with heart failure (384 Optimising Management of Patients with Heart Failure with Preserved Ejection Fraction in Primary Care). The current study aims to develop an optimised management programme, based in primary care, in collaboration with specialist services. * Earlier research on HFpEF (Heart Failure with Preserved Ejection Fraction in Primary Care) was published in the BJGP The tip of the iceberg: finding patients with heart failure with preserved ejection fraction in primary care*. An additional SPCR qualitative study aimed to better understand heart failure, conditions affecting patients, their needs for support, experience of treatment, and if they have problems acquiring hospital care has just completed.


A study (282 Doctors as patients - a qualitative study to explore the barriers and facilitators to help-seeking by General Practitioners with mental health problems: improving access to care) to explore the barriers and facilitators to help-seeking by General Practitioners with mental health problems was added to the NIHR website as a case study https://www.nihr.ac.uk/documents/case-studies/packing-an-emotional-punch-using-theatre-to-raise-awareness-of-doctors-mental-health/21421
Building on experience Rachel Denholm gained developing project **339 The effectiveness of CVD preventative treatment in a multi-morbid population** she successfully applied for a Researcher-in-Residence Fellowship, at Bristol, North Somerset and South Gloucestershire clinical commissioning group. She also applied for a Lecturer position in Applied Data Health Sciences. Her experience in conducting complex, causal analysis using electronic health records gained in this project was a major contributing factor in the successful application.

The SPCR has funded a number of workforce projects: **(260 Investigation of the factors behind the training choices of junior doctors which result in inadequate recruitment to general practice careers, 354 An investigation of factors which are associated with successful transitions from GP Specialty Training Programmes to long-term careers in NHS general practice, 398 An investigation into the career intentions and training experiences of newly qualified general practitioners)**, which have provided findings related to workforce and occupational choices. The SPCR studies of Foundation doctors uncovered misconceptions about general practice, and have been disseminated to national Foundation School directors; Health Education England (North West); and RCGP. The research has influenced Health Education England’s online content supporting specialty choices, and supported RCGP-led promotion of general practice careers in medical schools. The SPCR studies of GP specialist training programmes have fed into the RCGP review of the GP training curriculum and the Prime Minister’s Implementation Unit and the DHSC.

In Southampton the SPCR funded PROMS (**369 Patient reported outcome measures for acne: mixed methods validation study**), allowed 3 potential acne patient reported outcome measures to be validated, using both qualitative and quantitative approaches. This informed the choice of primary outcome measure for a large HTA-funded trial, Spironolactone for Adult Female Acne (SAFA). Samantha Hornsey joined the study as a junior researcher and was able to gain research experience from the start-up of the study all the way through to submitting the journal article as lead author. This has not only allowed her to develop a good understanding of the research process but lead to a successful application for a SPCR-funded PhD studentship.

The largest SPCR grant involving all 9 partners continues to engage with various stakeholders (**390 Evidence Synthesis Working Group**). The leads have been in discussions with the Royal College of General Practitioners (RCGP) to gain College endorsements for each of the reviews and fitting with the RCGP “new models of working” theme.

The collaborations formed workstream 3 ‘Assessing new drugs and technologies in chronic disease patients using unpublished data sources’ have launched a new programme of research dedicated to social prescribing (led by Tierney and Mahtani). Members of the ESWG teamed with the University of Oxford’s Gardens Libraries and Museums Division. The collaboration levered funding to hold two knowledge exchange workshops in 2019: one for members of the public, and one for wider stakeholders. The response has been considerable, with the group now working with the All-Party Parliamentary Group on Arts, Health and Wellbeing. Members of this workstream, have also been working with the Kings Fund, who share an interest in social prescribing. The team have been collaborating with colleagues in Exeter, Hull, Bristol and the Kings Fund.


Workstream 4 supports the service redesign of primary care. Ongoing collaborations and working relationships have been developed with the Royal College of General Practitioners. One of the reviews, 4.2 “The role of care navigators in primary care: a realist review”, has had extensive collaboration with key stakeholders that provide this service in NHS settings. The team have been looking to identify ways in...
which these environments can support NHS England’s social prescribing agenda and have been working with the King’s Fund.

**PATIENT AND PUBLIC INVOLVEMENT AND ENGAGEMENT**

- Please highlight any significant successes as well as any difficulties or barriers experienced in implementing your PPIE strategy, as well as identifying any areas where you would like further support or information.
- Please provide specific examples of how patients and public have been actively involved in the research undertaken within your organisation detailing the nature of their contribution and the impact this has made to the research, researcher or the patient/public member.
- Please provide specific examples of how patients and public have been actively engaged in the research undertaken within your organisation detailing the nature of engagement and the impact this has made to the research, researcher or the patient/public member.
- Please describe how you make people aware of the opportunities to take part in research that takes place in your centre/unit/facility and elsewhere.
- Please describe how you keep patients and public informed of the research being undertaken within your organisation.
- Please indicate if you provide feedback to public contributors on their involvement in any aspect of your research funding.

**Quantifiable measures:**

- How many public members sit on your:
  - Trust Governance/Executive group
  - Research steering groups/committees
- How many patients and/or public members get involved in:
  - Research design,
  - Data collection,
  - Data analysis and report writing

We updated our patient and public webpages to include a clear overview of guidance available for researchers cross-NIHR, practical advice and answers to frequently asked questions. We have included an up-to-date overview of training opportunities within the country open to researchers. These webpages are open to the wider primary care infrastructure. Additionally, the SPCR is active on Twitter, where it promotes researchers and their work amongst its 2000+ followers and sends out a monthly newsletter to keep people informed about the latest developments.

To enhance knowledge sharing of involvement and engagement within primary care research, the SPCR actively encourages researchers to write blogs, which are publicly available on the SPCR website. 15 blogs were published on topics such as how to involve public contributors in systematic reviews or conferences and how to engage with the public in unconventional locations such as a pub or science festival. Many blogs contain tips and tricks relevant to the primary care research community.

The School has:
- Provided 4 bursaries for public contributors to attend the ‘patient stream’ at Evidence Based Medicine EBMlive (2019) Oxford
- Provided 4 bursaries for public contributors to attend and participate in discussions at the conference National GP ACF and Early Career Medical Researchers Conference (2019) Manchester
- Contributed to bursaries for attendees who would otherwise be unable to attend International Perspectives on Evaluation of PPI in Research (2018) Newcastle

The SPCR held a successful PPIE funding call in 2019 aiming to allow researchers to:
- Trial novel and creative approaches of PPIE
- Raise awareness/promote primary care research
- Expand PPIE plans to reach new and underserved audiences

Thirteen submissions were reviewed by a panel consisting of PPIE experts, public contributors and primary care researchers. Eight projects were funded that will reach out to seldom heard communities and use creative approaches to PPIE and learnings and outputs from the call will be shared next year.

Participation in research is managed locally by each department and grant holder. They use various approaches, such as social media and leaflets in public spaces like GP surgeries. Where feasible, the SPCR supports recruitment via Twitter.

The SPCR communicates the outcome of their funding calls to the public reviewers. Researchers are encouraged to provide feedback to their public contributors and the SPCR website has a section on giving feedback with references to supportive guidance.

All SPCR funded research projects include involvement plans. Common practices are involvement: i) co-developing feasible patient-facing information, ii) members of study or trial management teams, iii) test and discuss interventions before launch, iv) study recruitment strategies, v) dissemination strategies. Researchers have also collaborated with charities such as Diabetes UK, Heart UK and Bladder Health UK in their PPIE practices.

Examples of PPIE within SPCR funded research in 18/19:

389 Expectation Management for Patients in Primary Care: Developing and Feasibility Testing a New Digital Intervention for Practitioners development an online training package to teach practitioners how to show more empathy and encourage patients to have positive yet realistic expectations. Public contributors involved in preparing study documents and ensuring they are accessible and appropriate. Specifically, one contributor assisted with the IRAS application for the feasibility study and provided a written patient perspective in support of the ethics application. This allowed the ethics committee to make an informed review of the application and resulted in minimal queries and a fast approval. The team actively uses Twitter (@GP_empathy) to post updates on their research progress, including posting details of conference presentations, and to publicise research publications.

404 A low-carbohydrate, low-energy dietary intervention in primary care for patients with type 2 diabetes: a randomised feasibility trial investigating whether it is possible for GPs and practice nurses to support people with type 2 diabetes to change their diet. The trial management group included a public contributor who was involved in the analysis of results and will be a published co-author on the main results paper. Additionally, due to the interest that the study has generated in a wider audience, including members of the public who have come across the study due to its online ISRCTN registration, the researchers have generated a virtual PPI panel of a broader range of representatives across the country who have expressed an interest in future involvement.

408 Investigating the unintended consequences of the use of digital health tools in primary care examining the unintended consequences of technology for patients, GP’s and other practice staff in GP practices. Two public contributors are part of the study team. Both assisted with the refinement of the study design, developing patient-facing materials and have taken part in data analysis sessions to assist with interpretation of the findings. Members of the public were invited, together with technology developers, GPs and key researchers, to an initial stakeholder workshop, co-facilitated by a public contributor, which helped the team identify their initial range of consequences to investigate. One of the contributors has also been awarded ESRC funding to conduct a PhD to examine the impact of patients access to online medical records under the supervision of the PI for this grant.

435 Hormone replacement therapy and risk of breast cancer: case-control study using CPRD is a data-study which is investigating real-life use of hormone replacement therapy (HRT) and risk of breast cancer. There were meetings with public contributors to help the researcher understand issues related to routinely collected data on menopause, the uptake of HRT and the attitudes of patients to their treatments. This was particularly important with respect to the need for these treatments and consideration of adherence issues. Information received from the patients helped the researcher address the discussion of findings and helped to shape the conclusions more realistically than without PPI.
Implementing the National Standards for Public Involvement in Research Environment (INSPIRE)

As one of the test-bed sites for the UK Standards for Public Involvement, Keele University (in co-production with its Research User Group) used the Standards to assess and improve the quality of public involvement in the School for Primary, Community and Social Care. Informed by an audit of public involvement process, new ways of working were co-produced, including approximately 40 new initiatives and resources, to put the Standards into practice. Going forward, Keele’s new Public Involvement Strategy will be underpinned by the National Standards. The experience and learning from the INSPIRE project will feature in a series of INVOLVE Case Studies, on the use of the UK Standards. Keele’s leadership of the NIHR Research Design Service Public Involvement Community, learning from the INSPIRE project will enable the SPCR to drive forward improvements in quality and consistency of public involvement across the School.

Some of the new resources have already made an impact at regional and national levels. For example:

- The role descriptions of ‘RUG adviser’ will be used by partners in the PILAR West Midland regional public involvement network, to involve public contributors to advise on the planning of public involvement in studies.

- The guidance on the role of public involvement in research design has influenced the forthcoming updated guidance for the Stage 1 and 2 NIHR Standard Application Forms.

- The role descriptions for public members of Trials Steering Committees has been referred to in the forthcoming MRC/NIHR Charter and Terms of Reference for Trial Steering Committees.

Experiences and resources have been shared with colleagues in Sri Lanka, who as part of a MRC funded global health research development programme (SEARCH) aiming to establish a centre of excellence for cohort studies, are seeking to introduce and sustain public involvement and community engagement in research in South-East Asian countries.

Evidence Synthesis Working Group – examples of engagement and dissemination.


- Stephanie Tierney - Social prescribing and care navigation: A complementary approach to medical care (Rotary Club Oxford, Oct 2018)

- Carl Heneghan, Kamal Mahtani, Sir Iain Chalmers: Systematic reviews: the past the present and the future. University of Oxford free event and members of the public welcome

- Carl Heneghan presented at the Continuing Education Open Day Sep 2018 Oxford, and Alumni Weekend Oxford 15th Sep 2018 at the University of Oxford on the Hormone Pregnancy Test review work Public dissemination

- Alyson Huntley. Do social and health care packages for the elderly help to reduce unplanned secondary care and delayed discharge and improve patient wellbeing. Presented at HSRUK Manchester July 2019 (poster) & SAPC July 2019 Exeter (oral)

- Igbo Onakpoya. Benefits and harms of Mysimba® (naltrexone-bupropion) in the management of overweight and obesity: Clinical pharmacology Colloquium, Green Templeton College, Oxford Nov 2018 Alumni Weekend, University of Oxford Sep 19

FORWARD LOOK

Please identify any significant developments (e.g. major research findings or planned initiatives) anticipated in 2019/20, particularly those that are likely to generate media interest:

Our focus for 2019/20 will be ensuring all research activity completes within the contract period and delivering the objectives set out in the six month extension business plan.

PART B. Report for the School for Primary Care Research Capacity Development Contract (managed by NIHR Academy)

SUMMARY SENTENCE

Please provide a sentence that captures the very high level achievements of the School’s research capacity development programme. This may be used by the Department of Health and Social Care for providing quotes as part of Ministerial updates.

The NIHR School for Primary Care Research aims to; deliver world leading, high quality, research-based evidence on clinical and social areas of high relevance to the NHS and Social Care; help transform primary care in the UK and beyond; increase the numbers and quality of primary care researchers, through special training and career development programmes.

STRATEGY UPDATE

a. Please provide an update on the research capacity development strategy of the NIHR SPCR, highlighting any major progress or developments and any significant changes since the submission of its most recent business plan:

b. Please tell us about any new collaborations, including with other parts of the NIHR, what the work entails or will entail, and any impact on the business plan.

No changes to the research capacity strategy. New business plan for six month extension 1.10.2020-31.3.2021.

RESEARCH TRAINING

a. Please provide the main outputs of research training funded by the NIHR SPCR award in 2018/19, including
   i. outputs highlighting how the School has increased the research capacity for primary care
   ii. outputs of new research training activities or new areas of research capacity building.
   iii. outputs of activities that include the wider primary care disciplines, or activity undertaken to include the wider primary care disciplines

b. Please detail outputs from activities with the national primary care research training infrastructure and how your activities have impacted on increasing research capacity in Primary Care beyond the School.

c. Please provide any appropriate metrics that support the list of outputs.

3.1 Seed Corn and Bridging Numbers - please list outputs with partner departments including the outcomes and impact of the awards, e.g. career progression information

23 recipients of seed corn and bridging 2018/19
Cambridge
Support Needs Approach for Patients (SNAP) 2 study presented at Marie Curie Annual Research Conference: Poster Presentation (October 2019). C Gardner

Manchester

Newcastle
What is the evidence that people with frailty have needs for palliative care at the end of life? A systematic review and narrative synthesis. Stow D, Spiers G, Matthews FE, Hanratty B. Palliative Medicine;33(4):399-414
Stow D, Matthews FE, Hanratty B. (2019) What Are the Palliative Care Needs of Older People with Frailty near to the End of Life, and Can Primary Care Identify when to Help. European Association of Palliative Care 16th World Congress: Berlin, Germany.
Are Alcohol Brief Interventions with older adults in public spaces hitting the mark? Breslin, J., & Bareham, B. (2019) blog for Alcohol Change UK
Preventing alcohol harm among people in later life as expert in alcohol and ageing with Public Health England and Age UK (July 2019) Bareham, B.

Nottingham
Stop smoking practitioner consensus on barriers and facilitators to smoking cessation in pregnancy and how to address these: A modified Delphi survey. Fergie L., Campbell, K.A., Coleman-Haynes, T., Ussher, M., Cooper S., and Coleman, T. Addictive Behaviors Reports. 2019; 9:100164.
https://doi.org/10.1016/j.abrep.2019.100164
Edward Tyrell Paracetamol and alcohol are the most common substances taken by young people and rates of poisoning are increasing https://discover.dc.nihr.ac.uk/content/signal-000694/paracetamol-and-alcohol-overdose-increase-in-young-people

Oxford
doi:10.1080/08870446.2019.1626394

UCL
Crossing the digital divide in online self-management support: analysis of usage data from HeLP-Diabetes. Poduval S, Ahmed S, Marston L, Hamilton F, Murray E. JMIR Diabetes 06 Dec 2018


iPoster presentation at International Clinical Trial Methodology Conference (6-9 October 2019; Brighton). Poster was titled “Joint modelling of multiple primary outcomes in clinical trials with missing data.” Vickerstaff, V.

Oral presentation at School of Primary Care Research Showcase 2019 (26 November 2019). Presentation was titled “Joint modelling of multiple primary outcomes in randomised controlled trials.” Vickerstaff, V.

Oral presentation at Royal Statistical Society Conference (2-4 September 2019; Belfast). Presentation was titled “Joint modelling of multiple primary outcomes in clinical trials with missing data” Vickerstaff, V.

Brain and Mind Centre Symposium, University of Sydney (December 2018, Invited Oral presentation). My talk was titled “A multilevel multivariate model to analyse multiple correlated outcomes in clinical trials with missing data”. Vickerstaff, V.

Centre for Transitional Data Science Seminar series, University of Sydney, (December 2018, Invited Oral presentation). “Analysing multiple correlated outcomes in clinical trials with missing data”. Vickerstaff, V.

UCL Beacon Bursary Public Engagement award received by Paula Alves to disseminate findings of “iCARE: helpful aspects of treatment for substance use in primary care from the patient perspective”.

Career Progression

Sarah Sullivan (University of Bristol) promoted from Lecturer in Psychology to Senior Lecturer in Psychology at the University of Chester in August 2019.

Alexander Hodkinson 3 year Presidential Research Fellowship from Brightest Minds
https://www.spcr.nihr.ac.uk/news/presidential-research-fellowship-from-brightest-minds

Daniel Stow (Newcastle University) awarded NIHR Infrastructure Short Placement Award for Research Collaboration to work at the Cicely Saunders Institute, King’s College London on Exploring contemporary issues in palliative and end of life care for older people. Daniel was also awarded the Newcastle University Faculty of Medical Sciences postgraduate travel award.

Bethany Bareham (Newcastle University) has secured funding to work as a full time Research Associate at Newcastle University until September 2020.
Ali Albasri (University of Oxford) Secured a further 12-18 months of post-doc funding to work on the STRATIFY program grant at the Dept. of Primary Care - Oxford. Received the BIHS Young investigator award – covering travel and subsistence to develop research and professional collaborations with the Barts Heart Centre in London.

Shoba Poduval (UCL) has received 4 years funding as an Academic Clinical Lecturer.

3.2 Studentships and Fellowships Awards - please list outputs with partner departments including the outcomes and impact of the awards, eg career progression information

**Studentships**


**Kelly Birtwell**


Travel award, University of Manchester (2019): Travel funds awarded to attend the Courage Festival at the University of East Anglia, which focused on Postgraduate Researcher mental health.

First prize, PhD symposia presentation, PsyPAG conference (2019): Awarded for the oral presentation: What elements are important to include in a brief mindfulness-based intervention? Mindfulness teacher and mindfulness course participant perspectives.

TUTOR-PHC programme fellow (2019): I was awarded the NIHR SPCR funded 2019 place on this one-year pan-Canadian interdisciplinary research capacity building programme for primary and integrated healthcare researchers.

NIHR Infrastructure Visiting Speaker Award (2018): Funding from this competitive scheme was awarded to disseminate my research and connect with the NIHR School for Public Health Research at the University of Sheffield.

**Ben Bowers**

Royal College of Nursing Foundation Professional Bursary (2019) Awarded £2100 towards PhD research (Just in Case Drugs Study) costs.

Member of winning team 'Best MPHrp Research Proposal’ at The Tenth NIHR Infrastructure Doctorial Research Training Camp 2019. Berkhamsted. 3-5 July 2019

Awarded best abstract submission in nursing category at The Association of Palliative Medicine (APM) Supportive & Palliative Care Conference. Harrogate. 21 -22 March 2019


Royal College of General Practitioners Grant (2019). Co-applicant for 'What circumstances lead out-of-
hours clinicians to arrange hospital admissions for end-of-life patients? A systematic review of UK evidence. Awarded £40,000


Guest speaker at the end of life quality improvement event in Leicester with hospitals, hospice and the community service providers. Leicester. June 2019


Invited to have a roundtable discussion on anticipatory prescribing with NHS England. I presented the existing evidence-base along with anticipatory prescribing and our shared concerns highlighted in my GP interview study. London. April 2019


**Nathan Davies**

Alzheimer's Society recognises contributions made to dementia research. Congratulations to Dr Nathan Davies who received a Dementia Research Leaders Award for his outstanding contribution to dementia research from the Alzheimer's Society this month. The award is in recognition of his contribution to research since starting his PhD in 2011 and post-doctoral work since 2014, as well as the impact it has had on those affected by, and living with, dementia.[https://www.spcr.nihr.ac.uk/news/alzheimers-society-recognises-contributions-made-to-dementia-research](https://www.spcr.nihr.ac.uk/news/alzheimers-society-recognises-contributions-made-to-dementia-research)

**Buddhika Fernando**

Collaborated with Dr. Mandella King from the St. Joseph's Hospital, Monrovia, Liberia to present a case study entitled 'Advancing good governance - international aspects' - at the Global Forum on Bioethics in Research Meeting on 'The ethics of datasharing and biobanking in Health research' held in Cape-Town, South Africa on 13-14 November 2018.

Collaborator on a project with Dr. Genevieve Lively and Dr. Jonathan Ives of the University of Bristol on Bioethics and Narratology that won a grant funded by Wellcome through the University of Bristol's Elizabeth Blackwell Institute to explore the potential for use of narratological methods, rationale and methodological possibilities for blending narratology and qualitative health care data for use in empirical bioethics research.

Collaboration with Dr. Anna Chiumento, ESRC Post-Doctoral Fellow of the Institution of Population Health Sciences, University of Liverpool for the Global Mental Health Research Ethics Symposium on September 23, 2019 at the University of Liverpool, London Campus.

Won a fully funded place to present one of eight case studies at the Global Forum for Bioethics Workshop on the Ethics of Datasharing and Biobanking held in CapeTown, South Africa in November 2019.

**Benjamin Fletcher**

Research finds that when managing hypertension, patients have no preference for presenting to a GP over pharmacist management or telehealth. The Pharmaceutical Journal picked up the news: 'Patients do not prefer GP over pharmacist for hypertension management, study finds'
Jemima Dooley
Awards: Obtaining Elizabeth Blackwell Institute and Brigstow Institute funding for a co-produced project with colleagues with dementia exploring post-diagnosis experience.

Accepted to the NIHR Emerging Leaders training programme.


Qualitative Research in Dementia group. I co-founded this group with Dr Sarah Griffiths from Plymouth University and Dr Anna Volkmer from UCL to explore innovative approaches in qualitative research in dementia. We held our first meeting, recorded a podcast alongside this meeting, and have our next meeting in March 2020.

Dementia Health Integration Team: I joined the research workstream of the Dementia HIT, making local collaborations and gaining an overview of dementia research in the area.

Dr Iain Lang, PenArc and the University of Exeter: NIHR SPARC award allowed me to make collaborations with the Implementation Science team at the University of Exeter. This included a week’s training in Implementation Science and plans for future research project currently being made within the team.

Department of Sociology, Loughborough University: A group of researchers with an interest in medical interactions are forming a research group interested in the role of companions in research. This has involved one group meeting so far, with another due in January.

Alison Gregory
Congratulations to former SPCR PhD Student and Research Fellow Alison Gregory who has secured a 125,000 Euro fellowship with the insurance firm AXA. One of eight winners, Alison proposes to investigate ‘Building resilience in the forgotten heroes: Improving informal support for women experiencing domestic violence.’

https://www.spcr.nihr.ac.uk/news/spcr-funding-gets-the-ball-rolling

Georgia Richards

Attended Rotary Club meetings and actively talk to Rotarians regarding my research. I presented my research during the breakfast meeting at the Rotary Club of Reading Matins (6th Feb 2019). During a brief visit home to Brisbane, Australia in May 2019 I was invited to speak on assembly at my high school, Lourdes Hill College, to tell the girls about my journey to Oxford and the research I'm doing. My research was also filmed and recently disseminated on the CEBM youtube channel (https://www.youtube.com/watch?v=rrfxXXTi_Bo&feature=youtu.be).

Collaborating with Dr Nav Persaud from the University of Toronto and St Michael’s Hospital, Toronto on the global consumption of opioids. Joined/been part of creating the group called OPeRA which stands for Open Pain Research Appraisal and Advocacy (https://osf.io/h239s/); we are a team of early-career researcher’s from across the world (Ireland, Oxford and Sydney) all working in the field of pain.

RCGP conference in Glasgow (4-6th Oct 2018) and had a poster at the Rotary District 1090 conference (9th March 2019) and the British Pharmacology Society conference (15-17 Dec 2019). OxPain meeting in Oxford (9th Nov 2018), the Clinical Pharmacology Colloquium in Oxford (24th Nov 2019), to junior researchers who visited the department from the University of Erlangen, Germany (12th March 2019), at
the University College London Hospital (UCLH) Monthly Clinical Scientific Meeting on Pain (4th April 2019). Co-lead the inaugural Doug Altman Scholarship which allowed 14 early-career researchers to attend the conference from all over the world. I chaired the Doug Altman Scholarship Committee and awarded the final Doug Altman Award at the close of the conference.


Jamie Ross

Jamie Ross and Elizabeth Murray were involved in the development of a new NHS online support tool for Type 2 Diabetes. The tool will enable people with Type 2 Diabetes to manage their condition via an online portal, giving them convenient and quick help. Eleven sites will now pilot the new service later this year, with a national roll out from 2020.  

Kym Snell

Collaborating with fetal medicine researchers at Queen Mary University London and University of Birmingham, who provide the data, subject specific expertise, and links with the PPI groups for pregnant women. Project was originally funded by NIHR HTA. Also collaborating with researchers at the University of Liverpool and University of York and researchers at the University of Manchester (Division of Informatics, Imaging and Data Science).

Amy O’Donnell

https://doi.org/10.1111/add.14778. 

The journal accompanied publication of the paper with a press release, and Dr O’Donnell also took part in a podcast interview for the journal website (https://www.addictionjournal.org/newsroom/podcasts). The BMJ covered the study in their Research News section (Elisabeth Mahase, GPs talked to fewer patients about alcohol after incentive scheme ended, study finds, www.bmj.com/content/367/bmj.l5920). Additional coverage included articles in the Daily Mail and The Times (https://wiley.altmetric.com/details/68154067).

Presented the results at the 2019 Lisbon Addictions Conference, and at a Faculty of Public Health and Public Health England Alcohol Learning Event. Co-author Colin Angus (University of Sheffield) also presented findings at events including a meeting with senior members of the PHE Alcohol Team, a the 23rd Managing Drug and Alcohol Problems in Primary Care Conference organised by the RCGP, and at a meeting of the All-Party Parliamentary Group on Alcohol Harm.

Based on this study and Dr O’Donnell’s wider research in this area, she was invited to join the NHS Health Scotland Alcohol Brief Intervention Research Expert Advisory Group, which will provide expert advice and generate recommendations, to review and help build the evidence base in Scotland. She was also invited to join the European Commission funded DEEP SEAS (Developing and Extending Evidence and Practice from the Standard European Alcohol Survey) project as an expert adviser on brief intervention implementation.

Other publications from studentships and fellowships in 18/19

Developing an implementation strategy for a digital health intervention: an example in routine healthcare

Patients’ understanding of cellulitis and views about how best to prevent recurrent episodes: mixed-methods study in primary and secondary care

NIHR SPCR Annual Report for the 2018/19 Financial Year  17
Nasal balloon autoinflation for glue ear in primary care: a qualitative interview study
Jane Vennik

Synthesis of researcher reported strategies to recruit adults of ethnic minorities to clinical trials in the United Kingdom: A systematic review
Yumna Masood

Persistent unexplained physical symptoms: a prospective longitudinal cohort study in UK primary care
Kethakie Lamahewa

Stop smoking practitioner consensus on barriers and facilitators to smoking cessation in pregnancy and how to address these: A modified Delphi survey
Libby Fergie

Anticipatory prescribing of injectable medications for adults at the end of life in the community: A systematic literature review and narrative synthesis
Ben Bowers

Women’s views on lifestyle changes to reduce the risk of developing Type 2 diabetes after gestational diabetes: a systematic review, qualitative synthesis and recommendations for practice
Becky Dennison

A discursive exploration of public perspectives on placebos and their effects
DougI Hardman

What is the evidence that people with frailty have needs for palliative care at the end of life? A systematic review and narrative synthesis
Daniel Stow, Gemma Spiers

A scholarship to foster future leaders in evidence based medicine
Georgia Richards

Persistent unexplained physical symptoms: a prospective longitudinal cohort study in UK primary care
Kethakie Lamahewa

Drinking in later life: a systematic review and thematic synthesis of qualitative studies exploring older people’s perceptions and experiences
Bethany Kate Bareham

Using out-of-office blood pressure measurements in established cardiovascular risk scores: a secondary analysis of data from two blood pressure monitoring studies
Sarah Lay-Flurrie

Secondary prevention of cardiovascular disease: Time to rethink stratification of disease severity?
Ralph K Akyea

Getting anticipatory prescribing right in end-of-life care
Ben Bowers

Anticipatory syringe drivers: a step too far
Ben Bowers

Venous thromboembolism in patients with gout and the impact of hospital admission, disease duration and urate-lowering therapy
Sara Muller

A chance to improve end-of-life care
Ben Bowers

Analysing self-regulatory behaviours in response to daily weighing: a think-aloud study with follow-up interviews
Kerstin Frie, Jamie Hartmann-Boyce

Home care and end-of-life hospital admissions: a retrospective interview study in English primary and secondary care
Sarah Hoare,
the outcomes and impact of the awards, eg career progression information

Lucy Pocock
Part of the cross-ARC National Collaboration for Palliative and End of Life Care. I am also collaborating with colleagues from the University of the West of England on a RfPB application. Poster presentation at Hospice UK conference. Co-applicant on a successful application to the Wellcome Trust (£98K) for a public engagement festival on grief - Good Grief, Bristol
https://goodgriefbristol.com/

PATIENT AND PUBLIC INVOLVEMENT

a. Please provide specific examples of how patients and the public have been involved in the research capacity development undertaken within the School (e.g. in funding decision processes).
b. Please detail the patient and public involvement in research training you have undertaken for trainees
c. Please highlight how you have ensured that the training is in line with NIHR standards of patient and public involvement?
d. Please provide metrics alongside the list of examples

During the annual trainees’ event in September 2019, the SPCR PPIE Officer co-created and delivered a training on PPI and public engagement with two public contributors and a researcher. This was a more in-depth session, as most trainees had already attended introductory training to PPI via various organisations. A public contributor shared their experience on PPI and how expectations between researcher and public contributor can differ. This was followed by group discussions amongst the trainees, where they discussed their own PPI plans and they gained advice from the trainers. The public engagement training was of an introductory nature and had a strong focus on language and communication, which was identified by the public contributors as a key element for successful engagement. The trainees were able to ask. 32 trainees funded by the SPCR attended the sessions

In 18/19 there were three funding calls; launching fellowships, GP career progression fellowships and a PPIE funding call. There was a public contributor on each fellowship interview panel, who were briefed to ask questions on the applicant’s PPI plans, but also asked questions on other elements of the applications.

There were 3 public contributors on the reviewing panel for the PPIE funding call. These were selected based on motivation, geographical spread, gender and ethnic diversity. No differentiation was made on SPCR review panels between lay and professional members contributions in the decision-making process.

The SPCR's training programme is in line with the NIHR standards of patient and public involvement in various ways. For SPCR activities, public contributors are explicitly asked about their support needs and these are provided when requested to ensure inclusive opportunities. Role descriptions are made and shared with public contributors before they commit. Where value can be identified, such as in our funding decision processes and training development, we work together with public contributors. The SPCR focuses on supporting the researchers and SPCR PPI leads and increasing their skills and peer learning. Researchers are trained via trainings and the PPI pages on the SPCR website are regularly updated to include links to helpful guidance and relevant external trainings. SPCR PPI leads are supported by providing a network which have regular contact to share learnings and discuss overarching topics and challenges. It is expected of departments and researchers that they support public contributors locally with any learning needs. Currently the SPCR has limited PPI on a governance level, but the School’s renewal is seen as an ideal moment to critically reflect on current activities and strengthen practices. The School has several relevant links and guidance on their website to strengthen usage of plain language amongst its researchers. For activities led by the SPCR, timelines of activities and expected deadlines are communicated in advance to allow planning and reasonable time is given to review and prepare for meetings. Trainees are asked to report on their PPI in their annual and final reporting to provide information on their PPI. Follow-up takes place if trainees report to not have any PPI plans and support is provided. The reporting is also used to actively approach researcher to write a blog on their PPIE for the SPCR website, to generate more case studies and share the impact of PPI.
The SPCR trainees all report having PPI plans in place. Many work together with charities (Alzheimer’s Society, autism charities, Mc Pin Foundation) in their PPI approach. Three trainees (GP Career Progression grant holder, Launching Fellow and PhD student) have been successful in securing funding from the SPCR to extend their PPI methods to include seldom-heard audiences or use creative methods to engage with the wider public about their research.

Some PPI highlights from SPCR trainees of the year 2018-2019:

**GP Career Progression Fellowship;** During this fellowship the trainee will identify feasible and effective models of primary care-led post diagnostic dementia care and explore the views of GPs. The research topic and plan was presented to a group of multiple stakeholders in a Dementia Care Community workshop. This group included people living with dementia, carers of people with dementia and health and social care professionals. The trainee gained views on and experiences of annual dementia reviews. As not everyone invited could attend the workshop, those who were unable received information about the study and a summary of the presentation by email. This resulted in additional written feedback from people who otherwise wouldn’t have been able to contribute. The input provided have led to refinement of the research question, aims and methods of the research project. The wider group will remain informed on the study’s progresses and more involvement is scheduled on the analyses and dissemination of the research.

**PhD Studentship;** The trainee investigates current practice and patient, family carer and healthcare professionals’ perspectives towards Anticipatory Prescribing in community End of Life Care. Public contributors have been supporting the trainee throughout the whole research cycle and PhD journey by meeting every 3-4 months. They have helped the trainee revise their research questions, research methods and are helping with interpreting the results. A public contributor recently came along with the trainee to the NHS Research Ethics Committee to discuss the research project and its appropriateness / the importance of offering dying patients and their families the opportunities to take part in the research interviews. They were given ethical approval following this meeting.

**Launching Fellowship;** This fellowship aims to examine how people with dementia and their companions/professional carers access unplanned primary care, and how decisions about the appropriate care pathway for people with dementia can be facilitated in an intervention. The trainee developed a Patient and Public Steering Group for their project, consisting of carers and people affected by dementia. To expand the input received, especially from people living with dementia, the trainee also attended local dementia groups. Additionally, they made use of the national Alzheimer’s Service User Research Panel network to gain input from a more geographically spread population. PPI has influenced all areas of the project. The first meeting of the steering group focused on the research protocol and patient documents for the ethics application. This included setting the questions and search strategy for the trainee’s scoping review of the literature. They then met to discuss the results of the scoping review, how this was relevant to their experiences, and how to synthesise the results. The last meeting in this year was to aid the conversation analysis of the video recordings collected as part of the communication study.

**MANAGEMENT, FINANCE AND GOVERNANCE ARRANGEMENTS**

a. Please provide an overview of the management, finance and governance arrangements for the NIHR SPCR research training programme, indicating whether they have changed since the submission of its business plan (and if so, how).

b. Please tell us how you are identifying and managing risks, including financial, to the programme. Please share your risk register with us.

The University of Oxford hosts the School as the Lead. The Training Lead sits on the Board. Each partner has a Training Lead.

Fellowships opportunities are advertised nationally, and recruitment and selection managed centrally. Plans for partner allocation of seed corn and bridging funds must be approved by the SPCT training leads prior to funds being awarded.
We identify risks (such as trainees not being able to complete their award or absence of training leads) on an ongoing basis and record these centrally.

**FORWARD LOOK**

Please identify any significant developments (e.g. major changes to training programmes or planned initiatives) anticipated in 2019/20, particularly those that may impact other NIHR research training programmes:

The third round of summer internships for undergraduate students to gain experience and skills in academic primary care, will advertised across all universities in the UK and will be open to students in any discipline that is relevant to health research.

**Additional Information**

Please use the space below to provide us with any other topics that you would like to highlight, or comments you would like to make. This should include any significant changes to the primary care landscape that may affect academic training.

The ESWG has a commitment to increase capacity and capability through training. The programme lead (Heneghan) and training leads (Park; Mahtani) have overseen the implementation of several initiatives to meet this commitment including:

1) **Appointing new trainee representatives.** The steering group were delighted to welcome Jonathan Livingstone-Banks (Oxford), Tom Kingstone (Keele) and Peter Hartley (Cambridge) as joint trainee representatives. The ESWG training leads have been working with the new representatives to identify and implement additional ways in which the group can support trainees across the school.

2) **Offering trainee placements**

Several cross-school review teams have welcomed trainees / Early Career Researchers to collaborate on reviews. The ESWG teams have disseminated information about these opportunities; expertise required; anticipated workload; opportunities with involvement; and review team contact.  

3) **Training bursaries**

The ESWG offered two training bursaries for early career researchers to attend taught short courses on evidence synthesis methods. Applications proved very competitive.

4) **A new Evidence Synthesis Advisory Service**

A new Evidence Synthesis Advisory Service was launched. The service provides methods support to SPCR trainees across the School for Primary Care Research who are considering or actively planning an evidence synthesis, particularly within their proposal development stage for new funding. The service helps with: Developing research questions suitable for evidence synthesis, offers early advice on the most suitable synthesis design for the research question or providing an outline of how analysis may be approached.  

The SPCR is supporting a new initiative, Primary care Academic CollaboraTive (PACT), a UK-wide network of enthusiastic primary care health professionals that collectively design and take part in well thought out research that seeks to improve patient care.
Appendix One

The ESWG programme has leveraged additional project funding of over £580,000.

**ESWG workstream 1**

NIHR SPCR FR 17; Project 437: Patients’ attitudes towards and beliefs surrounding the management of urinary tract infections (UTIs) and participant experiences of the Cranberries for UTI (CUTI) feasibility trial: A qualitative study. Kome Gbinigie. Amount awarded: £15,000

NIHR SPCR Round 16. Project 413. Do cranberry capsules reduce the consumption of antibiotics for symptoms of acute uncomplicated urinary tract infections? A feasibility study. Amount £110,000

**ESWG Workstream 2**

A systematic review of the circumstances that lead out-of-hours clinicians to arrange hospital admissions for end-of-life patients. Funding from RCGP/ Marie Curie £40,000

**ESWG Workstream 3**

Nuffield Oxford Hospitals Fund. Accelerating development of digital education in evidence-based medicine. Carl Heneghan To develop online systematic review training for medical students £59,024

NIHR SPCR FR17. The long-term impact of surgical mesh devices in UK primary care: a 20-year retrospective case-control study. Carl Heneghan, Georgia Richards Amount awarded: £20,000

**ESWG Workstream 4**


NIHR SPCR FR17 award to Veronika Williams, Geoff Wong, Sophie Park, Georgina Masters (patient representative), Kamal R. Mahtani - Barriers and facilitators to the implementation of an expanded NHS primary care workforce (Stage 1): stakeholder inquiry, conceptual framework development and design of a participatory mixed methods evidence synthesis protocol. Amount £12,562, start date Nov 18 until July 19

University of Oxford Knowledge Exchange Fund award to Kamal R. Mahtani, Stephanie Tierney and Lucy Shaw - How can the gardens, libraries and museums of Oxford support NHS social prescribing? University of Oxford Knowledge Exchange Seed Fund - November 2018 Amount £3,967.22,