

School for Primary Care Research

Increasing the evidence base for primary care research

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This year's annual report highlights the School's increasing influence and impact both on clinical practice and in policy development. Research outputs reflect a continued commitment to provide answers to very practical and important health issues across a number of areas of primary care research. While dedication to facilitating policy and guidance within the NHS continues, the School is equally driven to advance developments between research and capacity. Another focus

of the School is the embedding of Patient and Public Involvement (PPI) within research and it has become evident, through project reports, just how many studies have taken this responsibility on as an intrinsic component of their research. The imminent School showcase will hopefully provide further evidence of collaborative work across the members - the pooling of expertise being one of the School's strengths. A copy of the annual report can be downloaded from: www.spcr.nihr.ac.uk/research. Feedback from the National Institute for Health Research (NIHR) will be added once received.

NIHR SPCR Showcase

Promoting
excellence and
impact 26 September 2014

The National Institute for Health Research School for Primary Care Research (NIHR SPCR) is a partnership between eight leading academic centres for primary care research in England.

The School's main aim is to increase the evidence base for primary care practice through high quality research and strategic leadership.



CURRENT AWARDS

Research projects: 117

- Largest project: £2 million
- Smallest project: £14,949

CURRENT TRAINEES

- Fellowship: 17
- PhD/ DPhil: 33
- ST3: 6
- GPCP: 8
- ACF: 2



Specialist treatment for ME sufferers

As many as one in three adults who are severely affected by chronic fatigue syndrome (CFS) have little or no access to specialist services, say researchers at the Universities of Southampton and Cumbria. Doctoral Research Fellow **Clare McDermott** and **Professor George Lewith** from the University of Southampton and Professor Diane Cox and colleagues at the University of Cumbria, received media coverage on BBC South Today, Radio Solent and ITV Meridian for their School funded study on patients affected by chronic fatigue syndrome and their access to specialised care within the NHS. Clare's interview by ITV Meridian can be viewed [here](#). Read the University of Southampton's [press release](#).

National and international need for new antimicrobials

Antibiotic resistance is an increasingly serious patient safety and public health problem worldwide. The overall uptake of antibiotics in an individual and in the population has an impact on antibiotic resistance. According to **Dr Gail Hayward**, PI for the Treatment options without Antibiotics for Sore throat (TOAST) trial at the University of Oxford, primary care in England is responsible for 80 percent of all antibiotic prescriptions of which over half are prescribed for respiratory infections.

A current project led by the Universities of Oxford, Southampton and Bristol is examining ways to help with the symptoms of sore throat, cough and urine infections and is at the forefront of strategies to reduce the prescribing of antibiotics. **Professor Geraldine Leydon** and researchers at the University of Southampton confirmed claims in the media that the dangers of rising antibiotic resistance are national and international issues "It is right that the government review this issue and the need for new antimicrobials... the School for Primary Care Research is supporting a programme of work to understand the culture of antibiotic prescribing and alternative approaches to help with patient's symptoms."

"One of the key problems is not just that antibiotics do not work well and their inappropriate use is fuelling antibiotic resistance, but that there are no effective alternatives for doctors to be able to offer patients. There is encouraging preliminary evidence that a short course of steroids may help: TOAST will provide much more definitive evidence for the use of one potential tool in the fight against antibiotic resistance."

Professor Paul Little. [Read the full story](#).



Should a pertussis booster vaccination be introduced in the UK?

Findings from a School funded study will help to inform ongoing discussions about whether an adolescent pertussis booster vaccination should be introduced in the UK.

According to **Dr Kay Wang** from the University of Oxford, whooping cough is still an important cause of persistent cough among school age children whose cough is sufficiently severe to trigger a visit to their GP.

After recruiting 279 children between the ages of five and 15 years, evidence of recent pertussis infection was found in 56 children (20 percent), including 39 out of 215 children (18 percent) who had been fully vaccinated against pertussis. Findings from the School funded study were recently published in the [BMJ](#) and attracted media attention from Medical News Today, The Independent, PULSE as well as a BMJ video abstract on [youtube](#). [Read the full article](#).



World Health Organization

Collaborating centre established in Oxford

A School funded overview of the effectiveness of self-care strategies in non-communicable diseases in 2011 informed a World Health Organisation guideline on self-care. This guideline has since become instrumental in establishing the Nuffield Department of Primary Care Health Sciences, University of Oxford as a WHO Collaborating Centre. [Read more](#).

Insights into primary care – challenges within the NHS

A new collaboration was announced between the NIHR and the Royal College of General Practitioners (RCGP) in June this year. Members of the RCGP have been asked to participate in NIHR research by informing and directing primary care in the NHS and the best interests of patient safety and care. The NIHR believes "As frontline providers of the majority of patient care in the NHS, GPs have special insights into issues and challenges in primary care."

Chief Medical Officer and Chief Scientific Adviser at the Department of Health, Professor Dame Sally C. Davies FRS FMedSci, said: "GPs have a vital role to play in our shift towards preventative, community based care which is why it is so important they help the NIHR identify the most important questions for patients and the NHS. I look forward to seeing GP frontline experience influencing medical research."

Read more and provide suggestions by visiting the NIHR website. www.nets.nihr.ac.uk

Congratulations

Three awards received by **Prof Christian Mallen**: John Fry Award, RCGP fellowship and a NIHR Research Professorship.

Prof Sarah Purdy: Fellow of the Royal College of Physicians (RCP).

Dr Clare Taylor: Elected to the RCGP Council.

Prof Richard Hobbs, Andrea Roalfe, Dr Clare Taylor, Prof Carl Heneghan, Dr Kay Wang: Published research that received North American Primary Care Research Group (NAPCRG) Pearls status.

Dr Paramjit Gill: Appointed Non-executive Director of Sandwell and West Birmingham Hospitals NHS Trust. The first GP to be appointed to a NHS Trust Board.

Ruth Baker: Early Career Prize at the Trent Regional Society for Academic Primary Care (SAPC) meeting.

Dr Helen Atherton: Yvonne Carter Award for Outstanding New Researcher.

Dr Sam Creavin: Junior Researcher Award for excellence in the field of primary care research.

Dr Sarah Knowles: Best PPI presentation prize at the Health Services Research Network Symposium.

Kieran Ayling: Led a team to win the Runner-up prize for 'Best Group Health Research Funding Application' at the recent NIHR Research Training Camp.

Grace Moran: Best First Time Presentation at the Australian Association for Academic Primary Care, Primary Health Care Conference.



The rising number of hospital emergency admissions

Research published by the Nuffield Trust in November 2013 revealed that the number of hospital admissions for chronic conditions rose by 40 percent between April 2001 and March 2011. **Professor Sarah Purdy**, University of Bristol, claims that emergency admissions constitute around 65 percent of hospital bed days but it is difficult to pin point what is causing some people to use emergency services and others not, when different social factors are at play. She goes on to say it is essential for Clinical Commissioning Groups (CCGs) to have access to all the evidence in order to make a difference, for example in co-ordinating end of life care. Read the article in [PULSE magazine](#).

Read the [press release](#) 'Seeing the same GP at every visit will reduce emergency department attendance', issued by the University of Bristol's department for Academic Primary Care on 24 July 2014.

The findings of the School funded systematic review, a collaboration between the Universities of Bristol, Manchester and Oxford, were published in the BMJ '[Which features of primary care affect unscheduled secondary care use? A systematic review](#)'. Huntley A, Lasserson D, Wye L, Morris R, Checkland K, England H, Salisbury C, Purdy S.

Three inspirational days in Edinburgh

The Society for Academic Primary Care Annual Scientific Meeting (SAPC), hosted by the University of Edinburgh, witnessed some innovative research from a large School contingent in July. Members convening special interest groups included **Prof Tony Avery**: Clinical Excellence Awards Meeting; **Dr Sophie Park**: Education Research; **Prof Chris Salisbury** and Joanne Reeve: Personal Care; **Dr Brian Nicholson**: Primary Care in Resource Poor Countries. **Prof Debbie Sharp** gave the Inaugural Helen Lester Memorial Lecture 'Motherhood and Mental Illness - thirty years of families in south London.' A comprehensive list of SPCR presenters at the conference can be found on the [website](#).

Dr Helen Atherton, University of Oxford, won the RCGP Yvonne Carter Award earlier this year and received it at the conference where she also presented a brief overview of her work. "I was delighted to receive the award, especially given the strong competition. Giving the presentation was an excellent platform for my work. I hope to be able

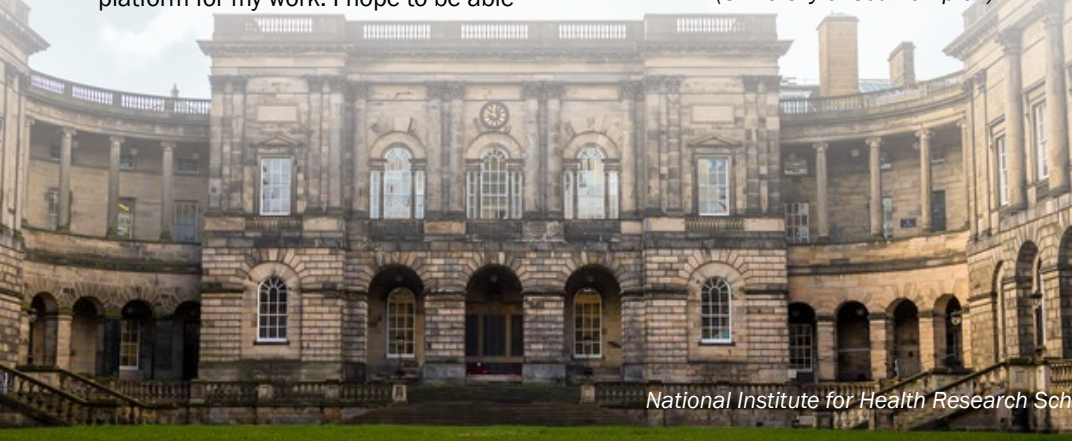
to come back to the SAPC conference in future and present the findings of my research work in Denmark on use of email consultation, which I will use the award to fund. More about Helen's presentation can be found on our [website](#).

Abigail Methley, University of Manchester, recently posted a blog about her experiences at the conference. Please visit the new SPCR blogsite at: [nihrspcr.com](#)

"It was wonderful to see SPCR have such a strong presence at this national conference with representation from trainees and fellows and across all 8 institutions. We were especially pleased however to see SPCR postdoctoral research fellow Dr. Helen Atherton pick up the well-deserved Yvonne Cartier award that will help build on exciting work on using email for consulting with patients in primary care."

Lily Lai

(University of Southampton)



Recent Publications

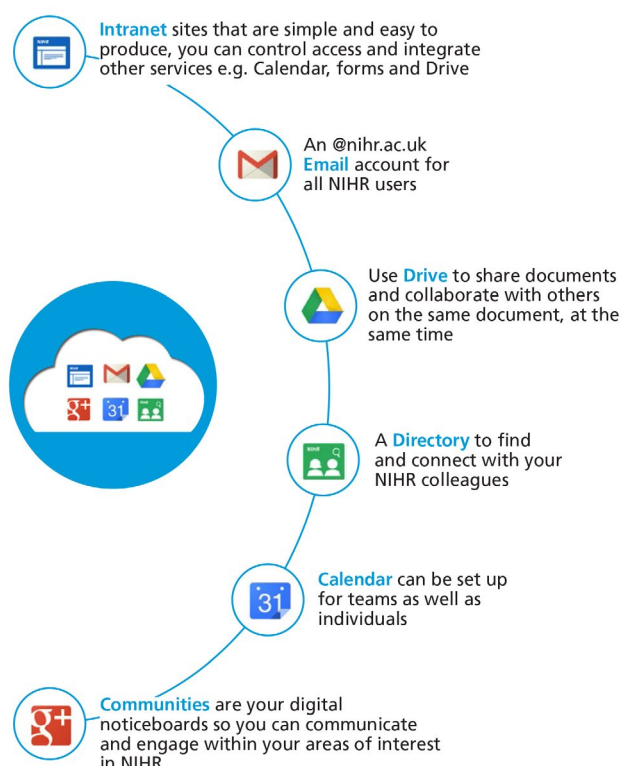
- Identification of an updated set of prescribing-safety indicators for GPs. Spencer R, Bell B, Avery A.J, Gookey G, Campbell SM. 2014. British Journal of General Practice.
- Observational longitudinal cohort study to determine progression to heart failure in a screened community population: the Echocardiographic Heart of England Screening Extension (ECHOES-X) study. 2014. Taylor CJ, Roalfe AK, Tait L, Davis RC, Iles R, Derit M, Hobbs FDR. British Medical Journal.
- What is the current NHS service provision for patients severely affected by chronic fatigue syndrome/myalgic encephalomyelitis? A national scoping exercise. 2014. McDermott C, Al Haddabi A, Akagi H, Selby M, Cox D, Lewith G, BMJ Open.
- Critical items for assessing risk of lung and colorectal cancer in primary care: a Delphi study. 2014. Mansell G, Shapley M, van der Windt D, Sanders T, Little P. BJGP.
- An online clinical codes repository to improve the validity and reproducibility of research using electronic medical records. 2014. Springate DA, Kontopantelis E, Ashcroft DM, Olier I, Parisi R, Chamapiwa E, Reeves D. PLoS One.
- Addressing the evidence to practice gap for complex interventions in primary care: a systematic review of reviews protocol. 2014. Lau R, Stevenson F, Ong BN, Dziedzic K, Eldridge S, Everitt H, Kennedy A, Kontopantelis E, Little P, Qureshi N, Rogers A, Treweek S, Peacock R, Murray E. BMJ Open.
- Evidence based medicine: a movement in crisis? 2014. Greenhalgh T, Howick J, Maskrey N. BMJ.
- Public perceptions of non-pharmaceutical interventions for reducing transmission of respiratory infection: systematic review and synthesis of qualitative studies. 2014. Teasdale E, Santer M, Geraghty AWA, Little P, Yardley L. 2014. BMC Public Health.
- Blood CEA levels for detecting recurrent colorectal cancer. 2014. Nicholson BD, Shinkins B, Pathiraja I, Roberts NW, James TJ, Mallett S, Perera R, Primrose and JN, Mant D. The Cochrane Library.
- Computer-Based Interventions to Improve Self-management in Adults With Type 2 Diabetes: A Systematic Review and Meta-analysis. 2014. Pal K, Eastwood SV, Michie S, Farmer A, Barnard ML, Peacock R, Wood B, Edwards P, Murray E. Diabetes Care.
- Fatigue, psychological and cognitive impairment following transient ischaemic attack and minor stroke: a systematic review. 2014. Moran GM, Fletcher B, Feltham MG, Calvert M, Sackley C, Marshall T. European Journal of Neurology.
- Which features of primary care affect unscheduled secondary care use? A systematic review. 2014. Huntley A, Lasserson D, Wye L, Morris R, Checkland K, England H, Salisbury C, Purdy S. BMJ Open.
- A systematic review investigating the cumulative incidence of Chronic Kidney Disease (CKD) in young adults aged 18-40 years with Impaired Glucose Tolerance (IGT). 2014. Jadhakhan F, Marshall T, Gill P. PROSPERO.
- Exploring the role of social factors on help-seeking, symptom interpretation and diagnosis, in patients with lung cancer or at heightened risk of developing lung cancer. 2014. Chatwin J, Kennedy A, Firth A, Povey A, Rogers A, Sanders C. Social Science & Medicine.
- Qualitative Meta-Synthesis of User Experience of Computerised Therapy for Depression and Anxiety. 2014. Knowles SE, Toms G, Sanders C, Bee P, Lovell K, Rennick-Egglestone S, Coyle D, Kennedy CM, Littlewood E, Kessler D, Gilbody S, Bower P. PLoS One.

NHS
National Institute for
Health Research


Making the most of the NIHR Hub

The new National Institute for Health Research (NIHR) Hub has been active for the past six months and is a popular collaborative platform for communications between members of the NIHR.

The Google platform replaces SharePoint with a wide capacity to share information between researchers, administrators and other NIHR organisations. Locating people within the NIHR is much simpler and members can form online research groups, hold video conferences and work on documents simultaneously. In addition, the facility provides secure cloud based storage for up to 30 GB per user and that covers Gmail, Drive and any Google+ images. The School encourages all of its members to join the NIHR Hub, in preparation for using it in late 2014, by emailing: ask@support.nihr.ac.uk for your login details.



profile: Richard Hobbs

A photograph of Richard Hobbs, a middle-aged man with grey hair, wearing a grey suit jacket over a light pink shirt. He is sitting at a wooden desk with his hands clasped. Behind him is a bookshelf filled with books and decorative items, including a framed picture of a landscape and a small statue. The office has large windows with blinds in the background.

Richard Hobbs, Head of Department at the University of Oxford's Nuffield Department for Primary Care Health Sciences.

Immediately striking on entering his office is Richard's keen eye for the aesthetic. His collection of woodcuts, hand-printed fabric and statues from travels to Japan, the Middle East and India are attractively arranged above his books on evidence based general practice and atrial fibrillation. They create an interesting counter-position between culture and medicine.

Richard has been Director for the School for Primary Care Research since 2009 and a GP at an inner city practice in Birmingham for more than 30 years. He completed his degree in medicine in 1977 at the University of Bristol before going into practice and embarking on a research career where cardiovascular disease has become his primary focus.

When did you realise you wanted to become a researcher?

I conducted my first bit of research on cystic fibrosis while I was a medical student and it was published in the Archives of Disease in Childhood in 1978. This initial taste of research and publishing made the prospect of becoming a researcher very exciting. I was appointed Senior Lecturer in General Practice at the University of Birmingham in 1985 and haven't really looked back.

How does your clinical work impact on your research?

I enjoy interacting with the public and I see working in an inner city practice not only the socially responsible thing to do but it balances the more theoretical elements of my research.

What is your highlight of being Director of the School?

Seeing researchers from different departments and universities work in partnership on research is incredibly meaningful. Collegiality is greatly strengthened through collaborative work and continually promotes the School into a position where it has become far more than the sum of its parts.

With which key skills would you like to see SPCR trainees leave?

Sound research skills and with renewed enthusiasm to continue work in their areas of primary care research. Hopefully

they would have developed networks across departments to enable them to apply for funding alongside each other in the future.

In your opinion, have opportunities for women in research and academia improved?

When I started my career, lack of gender equality was not considered a serious issue. It is encouraging to see that institutions are increasingly taking responsibility to ensure women are recognised in science and academia. For example, the imperative to represent women in academic departments through the Athena SWAN Charter. This and similar initiatives have demanded more attention is paid to defining the family and career pathway balance. Opportunities may have increased but I believe we still have a long way to go.

What is the greatest success of the School since you became Director?

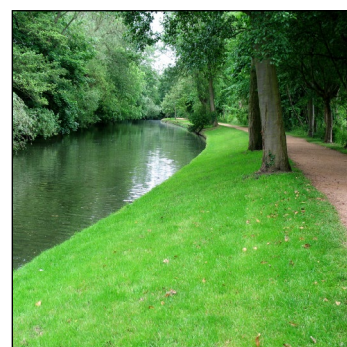
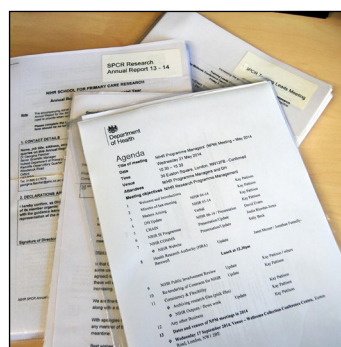
The broad range of research has expanded greatly over the years and as the School has grown. We have now funded over 250 projects and the collaboration between partners across the eight universities is a considerable success. The management and communications strategies have improved and become more professional in approach. I would like to see all these elements grow in the future.

What are your most memorable travel experiences?

An encounter I will never forget was when I swam amongst a group of wild leatherback turtles in a lagoon just off the Great Barrier Reef. In the clear waters, there was stillness and tranquility - it was a very humbling experience.

A day in the life of

Georgina Fletcher, SPCR Senior Scientific Manager



Having successfully negotiated the M40 and Oxford's Park and Ride, I arrive at New Radcliffe House where the School's Directorate staff are based. First things first, I make myself a large cup of tea and then switch on my PC. Outlook opens and a whole host of reminders ping loudly, several of them in red.

I check through the few items of snail mail. There is a signed contract document that we have been waiting for that I can hand over to Karen Rhodes, School Finance Officer. A couple of strides across the office and it is in her hands to process.

Next task is to sort out train tickets for several meetings in the next month. In London I will be attending the NIHR (National Institute for Health Research) Programme Managers meeting which is held three times a year. It is a useful meeting where colleagues from across the NIHR who are involved in research programmes come together to meet with Department of Health staff. Agenda items this time include budget profiling and a presentation about ResearchFish, the new

research output management system. The other meetings include several about Patient and Public Involvement (PPI); the Public Involvement Collaboration Group which is a cross NIHR group, the national Primary Care PPI Stakeholders Group (<http://spcr.nihr.ac.uk/PPI/>) and the NIHR Training Leads PPI Working Group. Lastly is a Mentoring Master class, also in the big smoke and then a change of scene visiting Sheffield for one of our sister School's, the NIHR School for Public Health Research, annual scientific meeting.

Time for another cup of tea and a biscuit.

Time to check that all the arrangements are in place for the next School Board meeting. As well as the usual standing reports, I need to ensure that an item on research award updates is included on the agenda. With the current phase of the School ending next year, it is vital that we keep track of progress of the 100+ live projects taking place across the 8 partners.

My lunch break involves cycling to one of the many gorgeous green spaces in Oxford to meet up with my brother for a sandwich and a catch up.

Feeling suitably refreshed I am ready for my afternoon meeting with Kate Farrington, School Communication Officer and Vicky Colbourne who supports the SPCR with administration. We need to discuss last minute arrangements for the research showcase and for the annual trainee meeting which will be held shortly. B&B accommodation, tick, lecture theatres, tick, Tweeters, tick. Ah and of course the refreshments for the regular breaks in the programmes.

A look at the clock, yes, you guessed it, I must visit the kitchen for a brew.

I am working from home tomorrow so I check that I have all the resources that I need for the items on my 'to-do' list. I don't want too many tasks to turn to red....

Hacking into Health Research: Is there a role for Rapid PPI?

Sarah Knowles, University of Manchester

PRIMER's Economic and Social Research Council (ESRC) funded Patient Hack Day took place on 30 April, bringing together over 60 patients, carers & members of the public with researchers to 'hack' solutions to health problems and discuss challenges to PPI in research. Six PPI partners pitched their research ideas and mixed teams of researchers and PPI partners spent the morning translating these research ideas into the beginnings of new research proposals. Teams used the 'Research Toolkit' activity designed especially for the day – a set of prompts to help non-researchers work through the steps needed to produce a proposal – which will be made available through the PRIMER website. The NIHR School for Primary Care Research funded artists to produce 'visual minutes' to capture the discussions in illustrated form (right). The production of the minutes was a delight to watch and the pitchers especially were very happy to have themselves and their idea captured in ink.

The ideas pitched ranged from mapping the needs of ethnic minority carers to understanding the stigma of dermatillomania. Pete Bower, head of the Centre for Primary Care at Manchester, commented "The range and sophistication of the ideas was impressive, especially given the time people had available [and] it was reassuring to see the overlap with some of our current work. In at least two of the projects pitched, we had work in similar areas [but] we can sometimes have a blind spot for the rare. One of the pitches was around an area that I have no knowledge of, and these events can help bring those to our attention. In overlapping areas, there were very different perspectives on what was required. This not only made me think about assumptions we had made in our work, but had clear potential for new research projects."



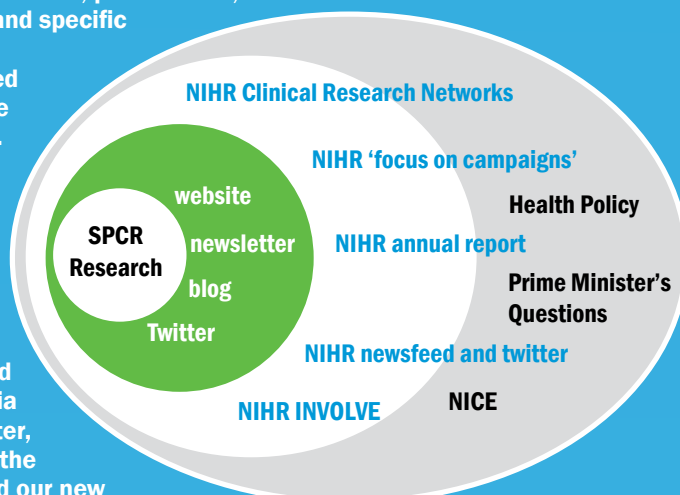
In the afternoon, we heard from three more pitchers discussing the challenges to PPI including the lack of diversity in PPI groups and the need to consider the impact PPI has on those who may be vulnerable and needing support. These points are now being summarised and submitted to the NIHR Breaking Boundaries review by Ailsa Donnelly, chair of the PRIMER group. There was strong consensus that there needs to be far better outreach to 'easy to ignore' groups, and also sustained support for PPI to allow relationships to be built and tokenistic involvement avoided.

The Hack Day has shown the appetite there is for patients and carers to pitch their own research ideas. One of the

most successful aspects of the format therefore seems to be the platform provided for PPI partners to highlight problems they want researchers to explore, rather than being consulted on researcher-led proposals. A key concern expressed on the day and in feedback however is how the ideas can now be taken forward. Both research and patient involvement are a marathon, not a sprint, and the Patient Hack format might be best understood as the starting blocks that give both researchers and PPI partners a rapid start to the race, but which needs to be complemented with an understanding of the importance of long term approaches to PPI in health research.

Ever wondered where your information goes?

Research news, press releases, publications, annual project reports and specific requests for case study information are collected and disseminated by the School in various forms. The NIHR makes use of it in their annual reports and 'Focus on' campaigns. Research outputs have an impact on policy and Prime Minister's questions and information is relayed via the SPCR website, Twitter, monthly news updates, the quarterly newsletter and our new trainee blog: www.nihr.spcr.com





Future events

SPCR Training Event

www.spcr.nihr.ac.uk/events/te

St Anne's College,
University of Oxford

25 September

SPCR Showcase

www.spcr.nihr.ac.uk/events/spcr-showcase

Mathematical Institute,
University of Oxford

26 September

NIHR INVOLVE conference

www.invo.org.uk/involve2014/

National Exhibition
Centre, Birmingham

26-27 November

RCGP Annual Primary Care Conference

www.rcgp.org.uk/courses-and-events/rcgp-annual-conference.aspx

ACC, Liverpool

2-4 October

NIHR Trainees Co-ordinating Centre (TCC) Annual Trainee meeting

www.nihrtcc.nhs.uk/conference/

Queens Hotel, Leeds

10-11 November

From Evidence to Practice: Implementing Change in Primary Care

9 October, 2014: Jointly organised by the E-Health Unit, UCL and Arthritis Research UK Primary Care Centre, Keele University, the dissemination event is aimed at clinicians, managers, policy makers and academics interested in improving care and health service delivery in primary care. For more information visit: www.ucl.ac.uk/pcph/research-groups-themes/e-health



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NIHR funding opportunities

NIHR Evaluation, Trials and Studies Co-ordinating Centre (NETSCC)

- Efficacy and Mechanism Evaluation (EME) Programme.
- Health Service and Delivery Research (HS&DR) Programme.
- Health Technology Assessment (HTA) Programme.
- Public Health Research (PHR) Programme.

Find out more:

www.nihr.ac.uk/funding/nihr-themed-research-calls.htm

NIHR Central Commissioning Facility (CCF)

- Invention for Innovation (i4i).
- Programme Grants for Applied Research (PGfAR).
- Programme Development Grants (PDG).
- Research for Patient Benefit (RfPB).

Find out more about NIHR CCF research calls and competitions, guidance notes and supporting information: www.nihr.ac.uk/about/central-commissioning-facility.htm

NIHR Trainees Coordinating Centre (TCC)

- NIHR Fellowships (Doctoral, Post-Doctoral, Career Development, Senior Research, Transitional Research).
- NIHR Integrated Academic Training (ACF, CL, IPF and Clinician Scientist Schemes).
- NIHR Research Professorships.
- NIHR Research Methods.
- NIHR Health Education England (HEE) Clinical Academic Training for nurses and midwives (Doctoral, Clinical Lecturer, Senior Clinical Lecturer).
- NIHR Health Education England (HEE) Healthcare Science Research Fellowships (Doctoral, Post-Doctoral, Senior Clinical Lecturer).
- NIHR Clinical Trials Fellowships.
- NIHR Knowledge Mobilisation Research Fellowships.

Find out more about our awards and the funding available from NIHR TCC: www.nihr.ac.uk/funding/funding-for-training-and-career-development.htm

www.spcr.nihr.ac.uk

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