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| Host department: Manchester |
| Project Title:  |
| Examining the use of tools to support patient-centered care in remote consultations in primary care  |
| Proposed supervisory team: Names and areas of expertise to be included |
| Professor Caroline Sanders, Professor of Medical Sociology with expertise in primary care research focusing on patient experience and digital health.Dr Rebecca Morris, Research Fellow with expertise in the social and digital processes of care, patient safety and developing tools to support patient involvement in their care. Another supervisor will be identified from one of the other SPCR Consortium members |
| Potential for cross consortium networking and educational opportunities: |
| There will be multiple opportunities for the doctoral candidate to network and build on educational and academic links supported by the supervisory team which builds on their existing national and international collaborations. Both supervisors have links across the NIHR and wider academic primary care infrastructure which will provide the successful candidate the opportunity for a portfolio of training and seminars, for example within the School for Primary Care Research (SPCR), the Patient Safety Translational Research Centre (GM PSTRC), and the Applied Research Collaboration (ARC-GM). Prof Sanders leads collaborations for Public and Patient Involvement and Engagement (PPIE) across Greater Manchester, including the Public and Community Involvement and Engagement Forum which multiple stakeholder partners and networks, including: the GM Health and Social Care Partnership; Health Innovation Manchester; the Clinical Research Network, Manchester Biomedical Research Centre. Prof Sanders is also a member of executive teams for Manchester Academic Health Science Centre and the Health Data Research UK Better Care North Programme.Dr Morris is an elected national executive member of the Society for Academic Primary Care leading a programme of support for early careers academics across primary care as well as leading a national special interest group for PPIE and participatory research approaches in primary care. |
| Project description: |
| BackgroundThere has been an increasing focus on patient safety globally especially on preventing the most common causes of harm such as prescribing, diagnosis and treatment in primary care. Improving patient safety requires a dual focus on learning from events and lived experience to prevent harm whilst also anticipating, predicting and preventing unsafe care/services, which requires action at all levels. Much of the research on patient safety in primary care is descriptive, with few of the studies focusing on interventions that will improve it that supports patients in primary care with medication, information exchange to diagnosis and treatment across care. Defining and applying strategies to improve patient safety involve an ongoing dialogue between patients and healthcare professionals that build on patient-centred approaches to care developing trust, clarifying expectations to ensure understanding. The timing, authenticity and ability to discuss experiences with clinicians are key elements for patients speaking up when patients have concerns about their care. The increasing shift to remote consultations means that there needs to be an in-depth understanding of how to support patient-centered care in remote consultations in a safe and acceptable manner and changing traditional assumptions about care provision. The successful candidate will be part of a team leading the development of patient-centred tools for improving patient safety.MethodsMethods will include: a systematic review of the use of tools to support patient-centered care in remote consultations; a qualitative interview study with GPs, patients, carers and other relevant practice staff to examine in-depth the tools and support that is needed to support patient-centred care in remote consultations; iterative development of an intervention to support patient-centered care with remote consultations with initial feasibility and acceptability testing. We will work with the successful candidate to identify in more detail the focus of study in terms of population of interest, for example a consideration of inequalities of access or use of remote consultations where there may be greater need for support.  |
| Training and development provision by host: |
| *Formal training:*We will work in partnership with the successful candidate to develop a bespoke training programme to support the candidate to excel and develop their academic career. All PhD students undertake a training programme delivered by the Doctoral Training Academy within the Faculty of Biology, Medicine and Health and is aligned to the Researcher Development Framework. It provides foundation and intermediate level training throughout, as well as professional, personal and career development opportunities. Funds will also be available to attend training sessions from external providers where necessary. The successful candidate will be expected to attend and participate in the centre’s vibrant seminar programme. |
| *Informal training:* The successful candidate will benefit from the supervisors’ networks and links as well as the Faculty’s supportive environment which is home to a number of senior academics with related interests. They will be able to draw upon the multi-disciplinary expertise within the Centre for Primary Care and Health Services Research (CPCHSR), which comprises of staff with academic and professional backgrounds in general practice, nursing, psychology, social sciences, health economics, and statistics. In addition there are a range of other seminar and training programmes in the division which the candidate will be able to participate in and an active PHD network for informal peer support. |
| *PPIE:* The successful candidate will be supported to develop their PPIE skills and PPIE will be embedded throughout the programme. Dr Morris leads the Faculty PPIE training for doctoral students and staff in collaboration with members of PRIMER (Primary Care Research in Manchester Engagement Resource), a diverse group of patients, carers and members of the public with an interest in primary care research at CPCHSR). The candidate will present their research to PRIMER in their studies to get early and ongoing PPIE input as a core element at all stages of the PhD. Prof Sanders leads PPIE across multiple components of NIHR infrastructure in Greater Manchester. Together both supervisors have extensive experience of involving public contributors throughout their research, co-designing interventions and publications and the doctoral candidate will be encouraged to involve people using innovative and inclusive approaches to involvement. |