

Host department:

Cambridge

Title:

Implementation of atrial fibrillation screening: qualitative evaluation and patient experience

Proposed supervisory team:

- Name and area of expertise to be included

Jenny Burt, Senior Social Scientist

Professor Jonathan Mant, Professor of Primary Care Research

Project description:

This PhD will be embedded within a programme of research funded by NIHR on screening for atrial fibrillation which seeks to answer whether screening for atrial fibrillation in people aged 65 and over is effective and cost effective in reducing stroke and other key outcomes compared to current practice. The programme is in three phases: initial feasibility work; an internal pilot and an end-point powered cluster randomised trial. This PhD candidate will be involved in aspects of the internal pilot work: qualitative and linked patient experience studies to explore implementation of atrial fibrillation screening.

The objectives will be to:

1. Explore health care professional's perspectives and practice level approaches to operationalising and implementing atrial fibrillation screening and the context in which it takes place
2. Explore how GPs and practice staff deliver the atrial fibrillation screening programme to patients
3. Explore patient experience of the programme, including the consent process, and decision making on anticoagulation treatment for screen-detected patients (both newly diagnosed and previously detected atrial fibrillation).

The successful candidate will agree with the supervisors whether the PhD will take a broad approach encompassing all three objectives, or focus in greater depth on one or more of them (or indeed sub-questions within these broad objectives).

The successful candidate will use a multi-method case study approach in a sample of practices that will involve observation, interviews, video-recording of GP-patient consultations, video elicitation interviews and documentary analysis. Throughout the evaluation, there will be a focus on GPs, nurses and administrators (including practice manager, receptionists and staff responsible for patient searchers), but it is recognised that other practice staff may play a key role, including physician associates, pharmacists and other allied health care professionals. We aim to recruit both patients who participate in screening and those who decline screening.

It is envisaged that the successful candidate may also use quantitative analyses of, for example, characteristics of people who participate in screening compared to those that do not, and characteristics of people who accept treatment (anticoagulation) for screen detected atrial fibrillation compared with those that do not.

Training plan:

Formal training:

Bespoke training will be provided depending upon the learning needs and experience of the successful candidate. This will include attendance at training courses on qualitative and quantitative methods both within and outside the University of Cambridge. The PhD student will also be encouraged to consider training courses that will benefit their wider development as an academic GP. The student will be a member of a Cambridge college.

Informal training:

The PhD will be carried out within a supportive multi-disciplinary environment that includes social scientists, behavioural scientists, statisticians, health economists, and clinical expertise in nursing, general practice, and public health. The wider research programme involves expertise both within the UK and internationally. There are many opportunities to attend seminars and lectures within the Primary Care Unit, the wider Department, the Institute for Public Health, the Clinical School and indeed the wider University.

PPIE:

The research programme has established strong PPI/E links. We have a PPI co-applicant, who is chief executive of the Atrial Fibrillation Association, which is a patient advocacy group that represents over 64,000 people with atrial fibrillation. We also have three independent PPI members who are consulted on all aspects of the programme. We also consult existing PPI groups, such as those convened at the Addenbrookes. The successful applicant will be encouraged to make use of these existing PPI networks, but also to consider setting up new avenues for PPI/E as appropriate.