|  |
| --- |
| Host department: QMUL |
| Project Title: |
| Inclusive multiple long-term condition management in Primary care |
| Proposed supervisory team: |
| Dr Megan Armstrong (QMUL) Lecturer in Mental Health Research Methods with expertise in addressing health inequalities for people experiencing socioeconomic deprivation, multiple long-term conditions and conducting mixed methods.  Dr Jamie Ross (QMUL) Senior Lecturer in Primary Care Sciences with expertise in development and implementation of complex interventions for the prevention and management of long-term health conditions, digital health and qualitative research methods.  Professor Steph Taylor (QMUL) Professor of Public Health and Primary Care with expertise in complex interventions for chronic conditions directed at improving quality of life and reducing morbidity.  Dr Abigail Woodward (UCL) Research Associate at Department of Primary Care and Population Health. Expertise in management of multiple long-term conditions in primary care, health inequalities and social prescribing. |
| Potential for cross consortium networking and educational opportunities: |
| There are excellent opportunities for collaboration and learning including:   * Leading multidisciplinary centres (QMUL & UCL) conducting world leading primary care research * NIHR School for Primary Care Research (national links) * A network of Voluntary Sector and Community Organisations (VSCOs) aiming to address health inequalities. |
| Project description: |
| The prevalence of multiple long-term conditions (MLTCs) is a growing concern globally, placing an immense burden on healthcare systems, particularly in primary care settings. People experiencing socioeconomic deprivation (PESD) are more likely to develop MLTCs, which appear at younger ages and are more severe. Managing MLTCs requires a comprehensive and integrated approach to ensure optimal patient outcomes. This research proposal aims to investigate strategies to enhance the management of MLTCs within primary care, focusing on improving patient-centered care, increasing care coordination, and leveraging digital health technologies, whilst addressing health inequalities.  Objectives:   1. Evaluate the current landscape of MLTC management in primary care, including the challenges faced by healthcare providers and patients. 2. Identify effective strategies for enhancing patient-centered care in the context of MLTCs, such as shared decision-making, care planning, and self-management support, whilst considering the needs of PESD. 3. Investigate mechanisms to improve care coordination among healthcare providers involved in the management of MLTCs, including interdisciplinary collaboration and the use of care pathways. 4. Explore the potential of digital health technologies, such as remote monitoring, telemedicine, and mobile applications, to facilitate MLTC management in primary care settings. 5. Develop evidence-based recommendations and guidelines for healthcare providers to optimise MLTC management in primary care, considering the perspectives of both patients and providers and for use in deprived and non-deprived areas.   Methodology:  This research will employ a mixed-methods approach, combining quantitative and qualitative data collection methods and systematic reviews. Quantitative data will be collected through surveys and medical record reviews to assess the current state of MLTC management in primary care and measure patient outcomes. Qualitative data will be gathered through interviews and focus groups with healthcare providers and patients to understand their experiences, challenges, and preferences regarding MLTC management.  Expected Outcomes:  The proposed research aims to contribute to the body of knowledge surrounding MLTC management in primary care by providing evidence-based recommendations for improving patient-centered care, care coordination, and the integration of digital health technologies. The findings will guide the development of guidelines and interventions that can be implemented in primary care settings to enhance the management of MLTCs, leading to improved patient outcomes, increased patient satisfaction, and more efficient use of healthcare resources.  Conclusion:  This research seeks to address the pressing need for better MLTC management in primary care settings. By investigating patient-centered care, care coordination, and digital health technologies, it aims to offer practical solutions to healthcare providers and policymakers, ultimately improving the quality of care for individuals with MLTCs in primary care settings. |
| Indicative project costs: |
| See FAQs |
| Training and development provision by host: |
| *Formal training:* A wealth of training opportunities exist for PhD candidates at QMUL. Details of training can be accessed: <https://www.qmul.ac.uk/doctoralcollege/phd-students/training/>. Training specific to the candidate needs and professional development will be identified, this may include for example, training in undertaking systematic reviews and qualitative research methods. |
| *Informal training:* Successful candidates will be encouraged and supported to take up informal training opportunities such as attendance at workshops and seminars across the University and school.  . |
| *PPIE*: The supervisory team have established PPIE networks which can be drawn upon to provide input into the PhD, and the candidate will also be encouraged and supported to establish new links. There are many PPIE training opportunities at QMUL: https://www.qmul.ac.uk/publicengagement/support/training/ |