



**National Institute for
Health Research**

School for Primary Care Research

Increasing the evidence base for primary care practice

STUDENTSHIPS IN PRIMARY HEALTH CARE 2016

Applications are invited from individuals with a strong academic record who wish to develop a career in primary care research. Awards are offered at all nine Universities within the NIHR School for Primary Care Research: Bristol, Cambridge, Keele, Manchester, Newcastle, Nottingham, Oxford, Southampton and University College London. Details of the specific research training opportunities available at each University are described below.

Awards will normally be taken up in October 2016.

Applicants must have a first degree in a discipline relevant to primary care research and will be expected to complete a PhD/DPhil during the award period. The precise academic qualifications required depend on the University and training offered. Students must be defined as "home/EU" for fee purposes to be eligible to apply for this award.

As the Universities do not always offer mentorship in every discipline relevant to primary care, it is possible to apply for a "linked" award so that applicants can benefit from training within the School but maintain a link with, or be primarily based within, a University outside the School that can provide discipline-specific mentoring. In these cases, the linked SPCR partner must be agreed and specified in the application.

Studentship awards include tuition fees, an annual tax-free stipend normally of £16,000 and a contribution towards research and training costs.

All applicants must ensure that their proposed research project is compatible with the published NIHR remit.

HOW TO MAKE AN APPLICATION

Potential applicants are strongly encouraged to contact the University at which they would like to hold the award to discuss their application. Contact details for each University (and in some cases for each subject area offered) are given below.

Applications are currently being accepted by the University of Cambridge and the University of Oxford. Please visit their application pages for further details.

Applications for the other seven SPCR partner universities will be accepted from late January 2016. Details to follow.

Dr Georgina Fletcher
Senior Scientific Manager
December 2015

DETAILS OF TRAINING OPPORTUNITIES AT EACH UNIVERSITY

UNIVERSITY OF BRISTOL

The Centre for Academic Primary Care (CAPC) at the University of Bristol (www.bris.ac.uk/primaryhealthcare) is one of the largest and most productive centres for primary care research in the UK. We aim to provide high quality evidence to address some of the most important health challenges relating to primary care – the use (and misuse) of antibiotics, the rising number of people with multimorbidity, avoidable hospital admissions, improving mental health, helping victims of domestic violence, earlier cancer diagnosis, and the role of telehealth. During 2008-13 we published 474 peer-reviewed papers in prestigious journals, including 7 papers in the Lancet and 25 in the BMJ. Our research is supported by funders including the NIHR, the MRC and the Wellcome Trust, with a grant income in 2008-13 of some £25 million. More than 25,000 patients participated in our studies in this period.

CAPC is a friendly and thriving centre comprising around 90 people, including academic GPs and nurses, statisticians, social scientists, health economists and support staff. We are based within the School of Social and Community Medicine, which has an international reputation for research in population health sciences, with centres of excellence in genetic and life-course epidemiology, public health, health services research, medical ethics, medical statistics and health economics as well as primary care. We use a range of research methodologies, both quantitative and qualitative.

We offer excellent training opportunities via an internationally recognised programme of short courses offered within the School of Social and Community Medicine. These cover a range of health services research and epidemiological methods, as well as generic research skills. We have an outstanding track record of helping academic trainees to obtain prestigious externally funded research PhD and post-doctoral fellowships.

We conduct research within two broad themes:

Management of disease: Diagnosis and management of illness mainly treated in primary care, with a focus on: addiction, cancer, cardiovascular disease, childhood health, depression and anxiety, domestic violence, eczema, infection, musculoskeletal conditions.

Organisation and delivery of care: The role of primary care within the health care system, with a focus on: commissioning and quality, service delivery, avoidable hospital admissions, multimorbidity and long term conditions, new technology and complementary therapies.

We also conduct methodological research in collaboration with the MRC ConDuCT-II Hub for Trials Methodology Research and the Bristol Randomised Trials Collaboration (BRTC).

All of our research aims to impact primary care practice and health policy, leading to benefits for patients. Aided by our Knowledge Mobilisation team, we seek to generate knowledge that is accessible and useful to academics, commissioners, clinicians, service providers, the voluntary sector and the public. We involve patients and the public in our research at all stages, with the help of PPI groups for each of our research themes.

FURTHER INFORMATION:

Contact: Non-clinical: Ali Heawood ali.heawood@bristol.ac.uk or Rebecca Barnes rebecca.barnes@bristol.ac.uk; Clinical: Prof Debbie Sharp debbie.sharp@bristol.ac.uk or visit www.bris.ac.uk/primaryhealthcare

UNIVERSITY OF CAMBRIDGE

The Primary Care Unit at the University of Cambridge is based within the Department of Public Health and Primary Care, one of Europe's premier university departments of population health sciences. The Primary Care Unit has doubled in size in the last five years, and currently numbers more than 110 people including academic GPs and nurses, social and behavioural scientists, statisticians, health economists and support staff. Our goal is to reduce the burden of ill health by identifying and targeting the behaviours that lead to chronic disease, by improving early detection of illness, and by improving the delivery of health services in community settings. We aim to achieve this by delivering research and education at the highest international standards of excellence. Our research is organised into five research groups: behaviour and health; cardiovascular disease and diabetes; cancer; health services research; and end of life care.

We offer an excellent training environment for clinical and non-clinical students, and have trained, or are training, 18 junior academic GPs through the NIHR Academic Clinical Fellowship Scheme. We have developed a bespoke Masters in Primary Care Research which we now deliver alongside the Masters in Public Health and Epidemiology. We work with other units and departments across the University of Cambridge that have complementary skills to our own, for example in conducting trials, measuring behaviour, statistics, development of innovative diagnostic tests and neuroscience. We also benefit from strategic partnerships nationally and internationally.

The voices of patients and service users are central in shaping our research at all stages: deciding the research questions, developing research proposals (including study design), phrasing of documents, monitoring research progress, supporting data analysis and interpretation and joint authorship of papers and conference presentations. We actively engage with the wider public through open meetings, presentations to support groups and engagement with the media.

Our research has had a major impact on primary care practice and health policy. It has influenced national and international guidelines on atrial fibrillation, heart failure, hypertension, diabetes, and end of life care. It has informed government policy (e.g. on alcohol use) and underpinned the way in which quality of care in general practice is now measured. Examples of key studies include the MoleMate study, which was a randomised trial of different ways for primary care to diagnose melanoma, and ADDITION-Cambridge, which was the first randomised trial of screening for type 2 diabetes.

Interested candidates are strongly recommended to contact us and discuss their interests before submitting an application.

FURTHER INFORMATION:

For research related queries you can contact Dr Fiona Walter: fmw22@medschl.cam.ac.uk

Or Frances Cater: pcupa@medschl.cam.ac.uk

For further information, please visit our website: <http://www.phpc.cam.ac.uk/pcu/>

KEELE UNIVERSITY

The Institute of Primary Care and Health Sciences delivers internationally renowned research programmes in musculoskeletal disorders, mental health and multimorbidity in primary care. This work is underpinned by several existing and ongoing high-quality observational cohorts and randomised clinical trials, with linkage to medical records. The Research Institute hosts the Arthritis Research UK Primary Care Centre.

Current NIHR, MRC, Wellcome and Arthritis Research UK grants to the Centre amount to over £34 million. The Research Institute forms a strong collaboration between academics from professional backgrounds including primary care, clinical rheumatology, psychiatry, physiotherapy, psychology, epidemiology, pharmacy, ageing research and social sciences and health services research.

Our clinical partners include the North Staffordshire Primary Care Research Consortium and South Staffs and Shropshire Foundation Mental Health Trust.

The research institute conducts research that aims to:

- Highlight the importance of musculoskeletal conditions (particularly chronic pain, inflammatory arthritis and osteoarthritis) demonstrating the extent, frequency and impact of pain and disability on individuals, and their increasing health and social care burden and costs on society;
- Evaluate new ways of providing effective assessment, self-management and treatment of these conditions and their co-morbidities, including anxiety and depression, in primary and community care;
- Evaluate interventions for the management of depression and sleep disorders in older people, with multimorbidities, in primary care, and across the primary/secondary care interface;
- Shift the perception that musculoskeletal conditions are an inevitable consequence of growing old, and takes a more positive, salutogenic approach, where the symptoms of pain, disability and co-morbid depression or anxiety can be managed;
- Evaluate interventions for the management of unexplained symptoms (including CFS/ME, CWP/Fibromyalgia).
- Value Patient and Public Involvement and Engagement in all our work, supported by an active Research User Group.

Within the research institute, there are a number of areas of research expertise in epidemiological research, trials and mixed methods involving qualitative methods.

The institute has a strong commitment to ensuring that research findings contribute to evidence-based practice, health policy and guidelines, and the training of practitioners (including general practitioners, practice nurses, physiotherapists, psychological well-being practitioners).

All senior academics have past or current roles in NIHR (and other) funding panels, NICE Guideline Development Groups and Professional College groups.

FURTHER INFORMATION:

Contact Professor Christian Mallen: c.d.mallen@keele.ac.uk

Or Professor Carolyn Chew-Graham: c.a.chew-graham@keele.ac.uk

Or visit our website: <http://www.keele.ac.uk/pchs/>

UNIVERSITY OF MANCHESTER

The University of Manchester is the largest, single-site university in the UK. The Centre for Primary Care is a member of the NIHR School for Primary Care Research, and sits within the Institute of Population Health (<http://www.population-health.manchester.ac.uk/primarycare/>)

Capacity building is critical to our Centre. We are keen to support those interested in either qualitative or quantitative research methodologies. Applicants will work within one or more of our research themes (Quality and Safety, Methods and Applications in Primary Care Informatics, Long Term Conditions, and Health Policy), enabling them to develop their own project and benefit from the support of other researchers working in the same area. Our aim is to train future research leaders by providing multidisciplinary training and career development opportunities.

Quality & Safety:

Lead: Professor Stephen Campbell

This theme addresses the quality and safety of primary health care, through 3 sub-themes:

- quality of care and quality improvement
- the role of incentives
- patient safety

Quality and Safety has an international track record in primary care research and comprises a dynamic multi-disciplinary team of health services researchers, clinicians, and methodologists. The Theme hosts the £6 million National Institute for Health Research Greater Manchester Primary Care Patient Safety Translational Research Centre (<http://www.population-health.manchester.ac.uk/primary-care-patient-safety/>).

Current projects include the development of a general practice Patient Safety Toolkit; exploring patient views of safety; and reducing polypharmacy and adverse effects in patients with chronic disease. Further details can be found on our website: <http://www.population-health.manchester.ac.uk/primarycare/research/qualityandsafety>

Health Policy, Politics and Organisations (HiPPO):

Lead: Dr Kath Checkland

The latest strategy for the NHS in England, set out in the NHSE 'Five Year Forward View', suggests that the next five years will be a turbulent and exciting time in general practice, with significant changes affecting the organisation and delivery of services. The HiPPO team is a multidisciplinary group of researchers who research the organisation and management of the NHS, with a focus upon primary care. We are interested in all aspects of NHS organisation, from high level policy relating to primary care and its implementation, to the organisation and management of small NHS organisations such as general practices. The overall aim of the theme is to deliver high quality, theory-informed research which will be of value to policy makers, NHS managers and clinicians as they navigate the changing landscape.

Our current research programme is largely funded by the Department of Health Policy Research Programme and delivered with colleagues at the London School of Hygiene and Tropical Medicine and the University of Kent in the Policy Research Unity in Commissioning and the Healthcare System (<http://www.prucomm.ac.uk/>). We are currently studying: contracting in the NHS; development of Clinical Commissioning Groups, with a focus upon the 'added value' provided by GPs and other clinicians; competition and co-operation between providers; and the commissioning of public health services with a focus on obesity prevention and management.

We work closely with colleagues in the wider Centre for Primary Care. We are a multidisciplinary group, with expertise across the social science spectrum from linguistic analysis to observational research. We have a largely qualitative focus, although we also have expertise in survey research. The driving force behind our research is the application and development of social science theory to the real world of the NHS. We welcome applications from anyone with interest in research into any aspect the organisation and delivery of primary care services.

Further details can be found on our website: <http://www.population-health.manchester.ac.uk/primarycare/research/HiPPO/>

Long Term Conditions:

Lead: Professor Pete Bower

The global burden of disease is shifting to long-term conditions. These conditions require patients to make changes to lifestyle and adopt self-management, which needs an active partnership between patient and professional. To achieve this, services need to support personalised care, shared decision making and choice. This has the potential to improve patient experience, ensure better health outcomes and reduce costs. However, achieving that potential in the context of high illness burden, multimorbidity, and limited budgets is a significant challenge. We aim to conduct high quality research into care for patients with

long-term conditions; and to have a demonstrable impact on the delivery of such care locally, nationally and internationally

The group is multidisciplinary in focus, with particular expertise in the conduct of systematic reviews, high quality clinical trials and the use of large databases for research. We organise our work in 4 areas (although many individual projects relate to several areas):

- Health and Illness Experience
- Primary Care Mental Health
- Multimorbidity
- Technology and Service Delivery

Further details and information on individual projects can be found on our website:

<http://www.population-health.manchester.ac.uk/primarycare/research/longterm/>

Methods and Applications in Primary Care Informatics (MAPCI):

Leads: Dr David Reeves and Dr Evangelos Kontopantelis

The emergence of large-scale electronic health record (EHR) databases has enormous potential as a resource for research and some of the largest of these datasets are the UK Primary Care Databases (PCDs), which contain detailed longitudinal individual consultation data for many millions of patients. The datasets can be used to address a very wide range of primary care research questions, ranging from disease epidemiology, through drug safety, to the impact of national health policies. However, methods for obtaining the maximum benefit from these datasets are still in their infancy and questions remain around how to ensure the validity of findings derived from these observational data sources.

The MAPCI group includes informaticists, statisticians, clinicians and pharmacists with the goal of conducting high quality and impactful research using PCDs and other large-scale datasets. The group has strong ties with the Farr Institute (<http://www.farrinstitute.org/>), the Health e-Research Centre (<http://www.herc.ac.uk/>) and the Centre for Pharmacoepidemiology and Drug Safety (<http://www.pharmacy.manchester.ac.uk/cpds/>).

We maintain an equal emphasis on both applied and methodological research using these data sources. Key areas of investigation include:

- Using PCDs and other large databases to address important health policy questions
- Validity of PCD-based research
- Development of software tools for PCD research
- Improved methods for analysing PCD data and for addressing missing observations

Current and recent projects include examining PCD validity using independent replication of existing studies; the impact of the Quality and Outcomes Framework on quality of care; creation of an on-line repository for clinical code-lists (the 'building blocks' of EHR research); relationships between risk factors and clinical outcomes for patients with diabetes type 2; spatial analyses of the impact of quality of primary care on patient outcomes at the population level; development of software to speed up routine PCD manipulation and analysis procedures; methodological work around the application of marginal structural

models to PCD data; and development of multiple imputation and power calculation methods for PCDs.

FURTHER INFORMATION:

Quality and Safety	stephen.campbell@manchester.ac.uk
Health policy	katherine.h.checkland@manchester.ac.uk
Long term conditions	peter.bower@manchester.ac.uk
Primary Care Informatics	david.reeves@manchester.ac.uk
Or visit our website:	http://www.population-health.manchester.ac.uk/primarycare/

NEWCASTLE UNIVERSITY

Primary care database research

The Institute of Health and Society at Newcastle University has considerable experience in research with primary care cohorts. It is home to the Newcastle 85+ Study, the Newcastle 1000 Families Study and it is one of the centres for the Cognitive Function and Ageing Study.

We are building a programme of work using data from electronic health records. We are working with ResearchOne, the database run by TPP SystemOne and currently have researchers working with the THIN database. Much of our work is focussed on later life in primary care and we have specific studies ongoing on frailty, liver disease and alcohol. All our database work is supported by a team of statisticians and epidemiologists.

FOR FURTHER INFORMATION:

Barbara Hanratty, Professor of Primary Care and Public Health
(Barbara.hanratty@newcastle.ac.uk)

Louise Robinson, Professor of Primary Care and Ageing (a.l.robinson@ncl.ac.uk): General enquiries and dementia.

Professor Eileen Kaner (Eileen.kaner@newcastle.ac.uk) : Healthy lifestyles in older age

Professor Richard Thomson, Professor of Epidemiology and Public Health: Shared decision making.

Or visit our website: <https://research.ncl.ac.uk/napcr/>

UNIVERSITY OF NOTTINGHAM

We are one of the foremost primary care centres in the UK, with 82% of our research judged as world-leading or internationally excellent in the 2014 Research Excellence Framework. We are a multi-disciplinary unit of over 130 people, including practicing GPs, other health professionals, psychologists, statisticians, research and support staff.

Our main research groups' available opportunities are in the following fields:

Applied Genetics and Ethnicity

We aim to improve translation of traditional genetics and new genomic advances into primary care practice, whilst ensuring equitable access for underserved populations. Prevention and care of major health problems, such as cancer and cardiovascular disease, and common inherited disorders, could be radically enhanced by better application of genetics in routine health care and understanding of ethnic and social variation. Our previous and current research includes qualitative, observational, database and intervention studies.

Bio-behavioural approaches to optimising health and healthcare

Medicine and healthcare have traditionally been 'disease focussed', i.e., they look at the biological processes that give rise to and maintain disease, and focus on these when considering treatment. Our group examines how the characteristics of the patient (i.e., their mood, cognitions and behaviour) can be harnessed to improve healthcare'. In other words, how treating both the patient and their disease can improve health. Further details can be found at: <https://www.nottingham.ac.uk/research/groups/biobehaviouralhealth/index.aspx>

Primary Care Epidemiology

Our research focusses on the epidemiology of diseases (e.g. heart disease, diabetes, cancer and infectious disease) and drug safety of commonly prescribed drugs (including antidepressants, statins, steroids, NSAIDs and Cox-2 inhibitors).

We make extensive use of a number of databases including QRESEARCH, the largest database of its kind worldwide, containing a wealth of longitudinal data from patients in over 600 UK practices linked to secondary care data.

Injury Epidemiology and Prevention

The research group specialises in the epidemiology and prevention of injuries in all age groups, including:

- preventing falls in older people,
- preventing injuries in childhood,
- measuring the long term impact of injuries and
- evaluating interventions in primary care and community settings.

They achieve this through conducting randomised controlled trials, systematic reviews, case-control and cohort studies and epidemiological studies using large primary and secondary care databases.

Medication safety and effective health care

Our group conducts research on the safe and effective use of medicines. This includes investigating the prevalence, nature and causes of medication errors in general practice; evaluating patient safety initiatives; undertaking epidemiological work to assess the benefits and harms of medicines used in primary care; and assessing the safety of primary care organisations. The group seeks to influence policy and practice so that effective interventions to improve patient safety are rolled out across the health service.

Smoking in pregnancy

Preventing smoking relapse after childbirth by vaping

With strong, active international research collaborations Nottingham's Smoking in Pregnancy Group lead research into NRT and digital interventions for smoking cessation in pregnancy. Most pregnant women who stop smoking restart after childbirth and we offer a PhD studentship to investigate ways of using e-cigarettes (vaping) to prevent this relapse. We comprise health psychologists, applied researchers and statisticians so, any student working on this novel and fascinating research will benefit from effective multidisciplinary supervision.

Medical Education

The Primary Care Education Unit at the University of Nottingham School of Medicine delivers teaching to all 5 years of teaching. The team has a proven track record in conducting medical education research, including projects commissioned by the RCGP, Health Education East & West Midlands. Current research projects include developing a situational judgement test for the summative assessment of professionalism, and evaluation of compassion education. Our main research themes are professionalism, compassion, CPD and revalidation of doctors.

Proposed research areas:

1. Evaluation of the teaching and assessment of professionalism in undergraduate and postgraduate training.
2. Exploring possibilities in teaching about multi-morbidity.
3. Reviewing the mechanisms of teaching integrated care in long-term conditions.

FURTHER INFORMATION:

Initial enquiries for the opportunities available at the University of Nottingham should be directed to:

Christina Brindley, Research Officer, christina.brindley@nottingham.ac.uk. Or visit our website: <http://www.nottingham.ac.uk/medicine/about/primarycare/index.aspx>

UNIVERSITY OF OXFORD

The [Nuffield Department of Primary Care Health Sciences](#) at the [University of Oxford](#) is a well-established department conducting high impact multi-disciplinary research. This was recognised by the recent Research Excellence Framework, where Oxford was ranked top for the quality of our research, its infrastructure, and the impact we make on the world. We are able to do this because we are well supported by genuinely helpful research infrastructure and have an excellent training programme for doctoral. This inter-disciplinary department is home to clinicians, clinical epidemiologist, medical statisticians, social scientists and psychologists, working collaboratively on programmes to improve health and healthcare. We have a number of fully funded studentships available to start in October 2016.

We aim to develop the careers of our doctoral students and to provide opportunities to form productive collaborations and develop high level content and methodological expertise, which will enable students to grow their careers as postdoctoral scientists in applied health research. The themes of our [research](#) include:

- Cardiovascular and metabolic conditions
- Health behaviours
- Infections and acute care
- Patient experiences,
- Research methods/Evidence-based medicine

Much of our work takes a global perspective and is truly cross-cutting. We also have access to skills in big data, health policy development, digital interventions, and an in-house UKCRC registered NIHR clinical trials unit.

For a list of potential graduate research projects, visit the website:

<http://www.phc.ox.ac.uk/study/dphil-and-msc-by-research/potential-graduate-research-projects>

Further details on the studentships, application process and the wide range of projects are available on the [NDPCHS](#) website. Individual [supervisors](#) can also be contacted by email about their projects.

For further details about eligibility and the application process, please contact our Postgraduate Training Administrator, [Daniel Long](#).

The closing date for applications is 12 noon (midday) on 8th January 2016

FURTHER INFORMATION:

The graduate studies website: <http://www.phc.ox.ac.uk/study/dphil-and-msc-by-research>
The University of Oxford requires that students have an excellent academic record and having a masters degree in a relevant subject will put you at an advantage. If you are not sure whether you are eligible to apply, or would like to discuss the application process, please contact Daniel Long, our Postgraduate Training Administrator (graduate.studies@phc.ox.ac.uk).

UNIVERSITY OF SOUTHAMPTON

The Southampton Primary Medical Care group is a thriving department that offers a broad spectrum of expertise in both methodologies and topic areas. We doubled in size between the 2008 Research Assessment Exercise and the 2014 Research Excellence Framework assessment, in which 87% of our research was rated as 'internationally excellent' or 'world-leading'. In the Public Health, Health Services Research and Primary Care unit of assessment, we were ranked 3rd highest for the quality of our research outputs out of 32 institutions.

The group is part of the Primary Care & Population Sciences Academic Unit in the Faculty of Medicine, giving us very close links with Public Health with shared interests in kidney disease, liver disease and alcohol misuse.

We have particularly strong links with the Health Psychology group, and with highly rated groups in secondary care medicine (particularly through the Southampton NIHR Biomedical Research Centre in Nutrition, and Biomedical Research Unit in Respiratory Medicine), the Faculty of Health Sciences, Southampton Statistical Sciences Research Institute, and Computing Sciences within the University, so PhD students and post-doctoral research fellows may be co-supervised by clinical academics in primary medical care and scientists in these disciplines. They will also be supported to develop national and international links, through our extensive existing fruitful collaborations, where appropriate.

We are engaged in providing evidence to inform new approaches to major challenges in primary care, including:

- ***Improving the management of acute infections and reducing antibiotic prescribing***, led by Professors Paul Little and Michael Moore: we are providing evidence for better antibiotic use and alternative treatments to reduce the major public health threat of antibiotic resistance and save NHS resources. Current studies include the further development and implementation trial of very successful internet based modules to change GP prescribing behaviour (the GRACE INTRO intervention), autoinflation for otitis media with effusion in school age children, qualitative work on GP views of delayed antibiotic prescribing, the ARTIC-PC multicentre HTA trial to assess antibiotics for childhood chest infections, the R-GNOSIS consortium in urinary infection (with Utrecht), and an HTA bid for a trial of antifungals in cellulitis.
- ***Internet health promotion and disease self-management programmes***, led by Professors Paul Little, Michael Moore, George Lewith, Mike Thomas and Lucy Yardley in Health Psychology: we currently have work streams developing and testing internet interventions which address issues surrounding lifestyle, mental health, and/or better medication management for a range of conditions including emotional distress, cancer-related distress and cancer survivorship, low back pain, chronic dizziness, asthma, COPD, respiratory infection, IBS, eczema, hypertension, and weight management, and are extending them to the whole population for health promotion and the prevention of obesity, and alcohol problems.
- ***Improving the assessment and management of mental health problems in primary care***, led by Professors Tony Kendrick and Michael Moore: we are providing evidence to support self-help for distress to reduce the demands on primary care, and improve the

targeting of drug and psychological treatments for depression and anxiety to the people who really need them. Current work includes a Cochrane systematic review of patient reported outcome measures in depression, analysis of CPRD data to determine the effects of NICE guidelines, the economic recession, and the QOF on diagnosis and treatment of depression since 2003, the PROMDEP trial of PROMs in depression and a recently funded HTA trial of cessation of long-term antidepressants.

- **Evaluating complementary therapies for common conditions**, led by Professors George Lewith, Michael Moore and Paul Little: we are developing evidence for novel treatments that give patients more choice, and do not involve the risks of medication, including herbal medicines, mindfulness meditation, the Alexander Technique, and acupuncture. Current work includes trials of Pelargonium for chest infections, Uva ursi in acute UTI, and work on the placebo and non-specific therapeutic effects in consultations for pain, aiming to reduce the use of anti-inflammatories.
- **Improving the assessment and management of respiratory disorders**, led by Professors Mike Thomas, George Lewith and Tony Kendrick: we are developing self-help and non-drug, psychologically based symptom management strategies in both COPD and asthma, in partnership with Asthma UK, which can increase patients' self-reliance and help reduce the demands on primary care. We are using routine record data to explore variations in outcome in asthma and COPD, and exploring independent determinates of health related quality of life in people with COPD, such as anxiety, in SPCR funded research with Birmingham. We aim to evaluate psychological interventions for COPD, develop non-pharmacological approaches for asthma, and identify whether biomarkers can predict progression with the Respiratory Biomedical Research Unit.
- **Patient-centred cancer research**, led by Professor Paul Little and Associate Professor Geraldine Leydon: we aim to further develop evidence for best practice in the early detection of cancer in general practice, building on the 20,000 patient CANDID cohort and in the longer-term support of survivors of cancer, working with Macmillan Cancer Support. Current work includes the EPAC (Elicitation of PATients' Concerns) and SPEAK (SPEcialist cAncer helpline) studies on Macmillan's Cancer Helpline, mindfulness for breast and prostate cancer, and the PROACTIVE intervention designed to diminish anxiety in prostate cancer patients on active surveillance. We aim to develop a complex internet-supported intervention for lifestyle change and the management of distress among cancer survivors, and exploration of a database of video-recorded GP consultations to identify techniques that enhance or hinder the management of patient concerns, with access to US primary care consultation data.

Prof George Lewith is our lead for postgraduate development within the group, and our liaison with the SPCR and internally with the University's postgraduate and postdoctoral organisations. All our PhD supervisors attend the University supervisor training and the Faculty Graduate School provides generic training (in ethics, presentations, statistics, Good Clinical Practice, etc.) Many of our PhD students have completed an MSc involving research methods, and training is individualised, depending on the needs of the PhD. This often involves specific specialist courses outside the department funded by our internal reserves. The SPCR meetings provide an excellent environment for PhD fellows to learn what happens in other departments, to meet colleagues in a non-threatening academic environment, and be mentored. We have an annual Primary Care and Population Sciences

conference for PhD students to receive feedback from all the senior academics. Our postgraduate students also have an annual formal assessment with an invited internal adviser from outside the supervisory team. Supervision and mentoring are judged to be excellent and students have many opportunities for presenting their research findings at conferences and for co-authorship for publications, and good support for new research ideas.

FURTHER INFORMATION:

Contact: Professor George Lewith gl3@soton.ac.uk

Website:

www.southampton.ac.uk/medicine/academic_units/academic_units/primary_care_population_page

UNIVERSITY COLLEGE LONDON

The Research Department of Primary Care and Population Health at UCL is part of the Institute of Epidemiology and Health Care and is headed by Professor Elizabeth Murray. Our goals are to:

- Undertake excellent research that is clinically relevant and impacts on the health of individuals and populations;
- Provide excellent teaching in primary care, population health and research methods;
- Strengthen the discipline of general practice through leadership in research, teaching and clinical practice;
- Work in partnership with service users, practitioners, policy makers and other stakeholders to increase the impact of our research, teaching and innovation on health and health care systems;
- Foster professional development in all members to enable each individual to reach their full potential.

In order to do this we:

- Encourage all phases of clinical research from epidemiology through intervention development and evaluation to implementation and translational research, as well as methodological research and development;
- Encourage multi-disciplinary working, bringing together clinicians and scientists with a wide range of methodological skills and epistemologies;
- Foster excellent communication within the Department, across workgroups and disciplines, and with local, national and international colleagues and organisations.
- Foster a learning environment where students, researchers, teachers and professional service staff are supported in learning and continuing professional development;
- Invest in the career development of all of our staff;
- Promote an open, friendly and inclusive working environment.

PCPH is a member of the prestigious NIHR School for Primary Care Research (<http://www.spcr.nihr.ac.uk>) and contributes to the NIHR School for Public Health Research (<http://www.sphr.nihr.ac.uk>). In the 2014 REF UCL submitted 159.75 FTE staff to UoA 2 (Public Health, Health Services and Primary Care) with 46% of the total submission rated as

4*. We have strong collaborations internationally, nationally and within UCL. In addition to being part of the Institute of Epidemiology and Health Care we have links with the UCL Institute of Digital Health (<https://www.ucl.ac.uk/digital-health>), the Institute of Clinical Trials and Methodology (<http://www.ucl.ac.uk/ictm>) and the Centre for Behaviour Change (<http://www.ucl.ac.uk/behaviour-change>)

We are able to offer studentships and fellowships based in one or more of the following research units. Interested candidates are strongly urged to contact proposed supervisors to discuss their proposed programme of research before submitting an application.

British Regional Heart Study

The Cardiovascular Epidemiology Group includes major longitudinal research on risk factors for cardiovascular disease, in particular the British Regional Heart Study (BRHS) of over 7000 men recruited through general practice. The BRHS is a unique cohort with over 35 years of follow-up allows investigations on prevention and prediction of a range of chronic diseases from middle to older ages. The successful candidate will work within a team principally of statisticians and epidemiologists, with strong links to collaborators who are applied methodologists and experts in primary care. The projects will suit a candidate with a background in medical statistics or epidemiology and experience in analysing large datasets. Possible areas of investigation include CVD (coronary heart disease, heart failure and stroke), diabetes, risk factors (diet, physical activity, novel biomarkers), and a range of ageing conditions (disability, frailty, poor oral health). Contact Goya Wannamethee: g.wannamethee@ucl.ac.uk

Centre for Ageing Population Studies

The Centre for Ageing Population Studies undertakes a broad range of research on the epidemiology of ageing, health services research on effective health and social care for older people and the development and testing of complex interventions for older people in primary care and community settings. Particular areas of interest are neuro-degenerative diseases (dementia, Parkinson's disease), frailty, multi-morbidity, mental health, health promotion in later life, preventing unplanned admissions, and palliative care. Contact: Kate Walters: k.walters@ucl.ac.uk

eHealth Unit

The eHealth Unit focuses on the use of new technologies, such as the internet, to improve health and health care. Areas of interest include using the internet to deliver self-management programmes for patients with long term conditions (e.g. diabetes, heart disease) and for health promotion (e.g. alcohol, sexual health). The unit also undertakes research on implementation of new technologies in the NHS and the impact of new technologies on health care professional – patient interactions. Contact Elizabeth Murray: Elizabeth.murray@ucl.ac.uk

Electronic Health Records Research

Areas of interest include epidemiological and methodological research on drug safety and risk communication - for example on medicines prescribed in pregnancy, diabetes and mental health. For further details of our work please see our website <http://www.ucl.ac.uk/pcph/research-groups-themes/thin-pub/>. Projects with this group would suit applicants with epidemiological/statistical background and some experience in handling large datasets. Contact Irene Petersen: i.petersen@ucl.ac.uk

Infections

The Infections in Primary Care group is a newly established group that conducts research in sexually transmitted infections (STIs) and other common infections in primary care. Our projects include epidemiological research (including working with electronic health records), trials and qualitative research. We have excellent links with Public Health England and are part of the NIHR Public Health Research Unit (HPRU) in Blood Borne Viruses and STIs at UCL. PhD fellows would have the opportunity to join the HPRU Academy. Contact Greta Rait: g.rait@ucl.ac.uk

Mental Health

The Primary Care Mental Health Research group offers studentship or fellowship opportunities on a range of topics in mental health (including severe mental illness / psychosis, common mental disorders such as anxiety and depression, medically unexplained symptoms and somatisation) and using a variety of methodologies including both quantitative and qualitative research. Contact Marta Buszewicz: m.buszewicz@ucl.ac.uk

The Department and Institute also contribute to a wide range of undergraduate and postgraduate teaching programmes at UCL, so postgraduate students and fellows have the opportunity to undertake some teaching related to their interests, background and skills. Time commitment for teaching is negotiated with supervisors on an individual basis. UCL supports training and accreditation for all staff involved in teaching. See <https://www.ucl.ac.uk/teaching-learning/arena>

FURTHER INFORMATION:

Full details of the application process are available on our website at: <http://www.ucl.ac.uk/pcph/postgrad>