



**National Institute for
Health Research**

School for Primary Care Research

Increasing the evidence base for primary care practice

PHD STUDENTSHIPS IN PRIMARY HEALTH CARE 2017

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 2017.

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.

This award will fund tuition fees up to the value of Home/EU fees; students with overseas status are welcome to apply but will need to fund the remainder of their fees from alternative sources.

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. Students at University College London will receive a London weighting.

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

<http://www.nihr.ac.uk/documents/funding/Training-Programmes/TCC-NIHR-Remit-For-Personal-Awards.pdf>

HOW TO MAKE AN APPLICATION

You are strongly encouraged to contact the university at which you would like to hold the award to discuss your application. Contact details for each university (and in some cases for each subject area offered) are given below.

Please note: The deadline for applications to the Universities of Cambridge, Nottingham and Oxford has now passed.

The application process consists of two stages.

Stage 1

Interested individuals should submit* a two page CV and a covering letter of not more than two pages. This letter must include an explanation as to why you want to train in primary care research.

- Please state **Studentship 2017** as the subject of the email
- Please name the CV and covering letter attachments using the naming convention:
Surname_CV_STUD17 and
Surname_Letter_STUD17
- Applications must be received by **12 noon** on Thursday 16th February 2017.

*Your application should be sent by email to the School's Senior Scientific Manager
georgina.fletcher@phc.ox.ac.uk

Stage 2

Candidates selected for interview will be contacted by the relevant department. Unsuccessful applicants will be informed.

The National Institute for Health Research has a duty as a public body to promote equality of opportunity. This means we need to ensure that applications for NIHR awards, are treated equally in terms of gender, ethnicity or disability. Once you have submitted your application you will be sent an automated email asking you to complete an equal opportunities questionnaire.

Dr Georgina Fletcher
Senior Scientific Manager

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. We publish our research in the highest ranked journals including the Lancet, the BMJ, the Annals of Family Medicine and the BJGP amongst others. CAPC was ranked 4th overall in the most recent Research Excellence Framework in its Unit of Assessment.

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: Dr Rebecca Barbes rebecca.barnes@bristol.ac.uk or visit

www.bris.ac.uk/primaryhealthcare/

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 (<http://research.bmh.manchester.ac.uk/primarycare/>)

Capacity building is critical to our Centre, and 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 projects 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* *Clinical lead: Professor Aneez Esmail*

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: assessing the epidemiology of diagnostic error in primary care, the use of decision aids to reduce diagnostic error, development of a patient information booklet to reduce error in general practice and training for diagnostic uncertainty 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 Harm van Marwijk*

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	aneez.esmail@manchester.ac.uk
Health policy	katherine.h.checkland@manchester.ac.uk
Long term conditions	harm.vanmarwijk@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

Newcastle University is home to a rapidly growing and dynamic group of primary care researchers within the Institute of Health and Society, and Newcastle University Institute for Ageing. The primary care research team includes general practitioners, dentists, dieticians, epidemiologists, nurses, psychologists, public health practitioners and social scientists. There is a breadth of expertise focused on addressing some of the most important questions in health care today. Ageing research is a particular strength, but there are opportunities for the students to work with academics on a range of other topics. (For further information see <http://www.ncl.ac.uk/ihs/> and <https://research.ncl.ac.uk/napcr/>) The Institute for Health and Society is one of a handful of departments in the country to host two NIHR research professorships, and it is also a member of both the NIHR School for Public Health Research and the School for Primary Care Research.

Newcastle University has a number of research strengths, but it is known across the world as a centre of excellence in ageing research. The award of the Queen's Anniversary Prize in Ageing and Primary care in 2010 was followed in 2014 by a £20M award from the government to establish a National Innovation Centre for Ageing and in 2016, a Regius Chair in Ageing. Applicants who are interested in ageing research will be particularly welcome, but those with other interests should not be deterred from applying.

Management of age-related illness

Dementia is a priority area for our research. The Prime Minister's Dementia Challenge highlighted the importance of more timely diagnosis and post diagnostic support and national guidance is in place to support referral for a secondary care assessment. The role of the GP and primary care in promoting risk reduction interventions and ensuring early diagnosis and intervention are key areas of our work.

Multiple conditions and end of life care

Managing long-term conditions and supporting individuals to live independently for as long as possible is central to primary care policy. Our work with the Newcastle 85+ study showed that multi-morbidity is the norm in old age; frailty and geriatric syndromes add further challenges. Our ongoing and future work looks to improve primary care management for multi-morbidity. End of life care, care homes and family carers are particular interests.

Healthy lifestyles in older age

Primary care has a central role in promoting life-style change to deliver direct patient and public benefit, extending healthy life years and delaying the onset of age-related morbidities. Our work in Newcastle has a focus on the management and consequences of obesity and alcohol consumption.

Shared decision making

Engagement of patients in shared decision making and support for self management is a cornerstone of UK policy for enhancing patient experience and outcomes. In Newcastle, we have a programme of research on developing and implementing SDM and supported self management in primary care.

In addition, to these areas we are active in research into health literacy, and a number of other areas such as loneliness and health at older ages. Socioeconomic inequalities is a cross cutting area of interest in our work.

FURTHER INFORMATION:

Contact Professor Barbara Hanratty: Barbara.Hanratty@newcastle.ac.uk

Or visit our website: <http://www.ncl.ac.uk/ihs/> and <https://research.ncl.ac.uk/napcr/>

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), herbal medicines for symptom relief 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, Associate Professors Miriam Santer and Hazel Everitt and Professor Lucy Yardley in Health Psychology. We currently have work streams developing and testing internet interventions which address issues surrounding lifestyle, mental health, supported self-management, 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 and Associate Professor

Hazel Everitt. We are providing evidence to support self-help for distress to reduce the demands on primary care, improve the targeting of drug and psychological treatments for depression, anxiety and insomnia to the people who really need them. Current work includes: a Cochrane systematic review of patient reported outcome measures in depression; a Cochrane systematic review of Antidepressants for Insomnia; 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 and Associate Prof Hazel Everitt are our leads 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 or Hazel Everitt hae1@soton.ac.uk
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 health and wellbeing;
- Provide excellent teaching in primary care, population health and research methods;
- Strengthen the discipline of primary care 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;
- 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. 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 in ageing including the epidemiology of age-related conditions 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, mental health, health promotion in older people (exercise and nutrition), loneliness and end of life care. We are a multi-disciplinary group and can support research using quantitative (eg analysis of large datasets, clinical trials) and qualitative methodologies. 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> Candidates interested in educational research should contact Sophie Park: Sophie.park@ucl.ac.uk

FURTHER INFORMATION:

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