**NIHR School for Primary Care Research**

**Annual report for the period April 2022 - March 2023**

**SPCR aims, activities and achievements**

Please provide a summary of the activities undertaken by the school over this reporting period.

In the second year of our contract, we have run four research commissioning rounds and recruited 3 Primary Care Clinician Career Progression fellows, 5 post-doctoral fellows as well as 9 PhD students. Two new board members have been recruited, an Academic Lead for Patient and Public Involvement and Engagement and an Academic Lead for Equality, Diversity and Inclusion. A second cohort of students has been recruited to the Wellcome funded PhD Programme for Primary Care Clinicians. All awards in the first cohort were made to GPs and this year additional work was undertaken by the SPCR Academic Capacity Development Leads to work with primary care networks within other disciplines to widen awareness and participation in the scheme which resulted in a more diverse applicant field and two awards being made to Pharmacists. In addition to the annual residential event for SPCR training award holders, a writing retreat was held for PhD students.

The SPCR board convened a working group to look at the current landscape of primary care databases in the UK. The group was led by John Macleod (Bristol) and involved academics from across the school membership and beyond, working with colleagues from HDRUK to undertake this. The group has submitted a paper for publication to the British Journal of General Practice *‘Navigating the ecosystem of UK primary care electronic health records’*

The directorate team have been working to collect additional data on our award holders across both our research and capacity programmes, this will enable us to make better informed decisions on how to target our funding to ensure we are delivering on our aims as well as being better able to respond to emerging research priorities.

Please focus on any significant new initiatives, studies or increased research capacity undertaken during the reporting period.

The SPCR has responded to feedback from our independent International Advisory Committee and external funding panel to develop two new funding rounds that represent a novel approach for the school. The first is to offer an opportunity to early career researchers within the school to lead a significant research project. The second is to encourage participation from underrepresented professional groups and for the first time, the PI for these projects may be located outside of a school member department. We anticipate that both initiatives will strengthen research capacity across the school and increase our reach among Primary Care practitioners, consolidating and building on existing research partnerships. At a membership level, this has facilitated conversations about strengthening connections with primary care research going on in other areas of those institutions and encouraged a broader more inclusive approach to school membership therein.

Please highlight those activities with a focus on strengthening the primary care research sector beyond school members and non-medical primary care research.

We have run a highly successful internship programme to date and this year ran a nationwide promotion resulting in a high number of strong candidates from outside of the School membership. Each member ringfenced one post for non-medical students and we have received very positive feedback from both members and the interns, one of whom went on to win the SPCR George Lewith prize. We are working on a mechanism to track the impact of these internships and are working to expand our offering in this area. 179 applications were received for the 2022 internship programme.

In addition to the planned funding rounds, research funded during this year involves collaborations outside of the school including; Baylor College of Medicine (Houston), Leeds University, Newcastle University, Warwick Medical School, Imperial College London, Medway School of Pharmacy, PenARC and many NHS trusts as well as third sector partners. One of our SPCR funded PhD students has received additional funding from an industry partner for their project *Creating and intervention for type 2 diabetes for those of African Heritage* (ref C054)

Please briefly describe how the research being conducted responds to the needs of local populations and local health care systems and addresses the nation’s changing demographics.

SPCR member departments work closely with their existing local networks to inform decision making on the research proposals submitted to the SPCR. We would like to highlight the work undertaken as part of the below studies and initiatives:

The MaPP study (ref 509) being carried out at Bristol University to find out whether annual reviews for those with Long-term conditions might be helpful to people living in deprived areas. If there is a favourable response from patients and practices to the MaxWELL way of delivering long-term condition reviews, this will influence policy locally among GP practices and more widely via ICBs.

The ELOPE-GDM study (ref 562), a collaboration across four of the SPCR member departments, explores the lived experiences of gestational diabetes and motivations for lifestyle change amongst diverse women living in the UK. The project seeks to identify whether extra attention needs to be given to the needs of women who develop GDM, and whether added efforts are required to prevent and treat GDM, to reduce burden on primary care and will provide the ideal opportunity to develop interventions that can be targeted at this relatively young and otherwise healthy population to reduce the risks of developing longer term health conditions.

SPCR funded research has provided the building blocks for work at Nottingham currently supporting the Pharmacy First policy. The study *Supporting community pharmacists in skin condition management; a research priority setting exercise* (ref 522) has led to further research supporting self-management of common skin conditions and exploring clinical inequalities in care relating to skin of colour, and inequalities of access to services for people with skin conditions.

*Violence and abuse towards General Practice Staff* (ref 614) seeks to better understand the experience and perceived impacts of patient / public initiated violence and abuse toward staff in general practice settings. This responds to the increase in such workplace incidents in general practice in the last few years, especially since the first national lockdown necessitated by the COVID-19 pandemic. As violent incidents and abusive behaviours affect staff wellbeing, workforce capacity, and in turn, the actual patient care, the research also explores measures staff believe may help prevent / reduce risk as well as support those who have been affected.

At Keele, examples of research pump-primed or directly funded by SPCR closely aligning with regional and national NHS/NIHR priorities include: (i) development of tools and new knowledge to support surveillance and monitoring of musculoskeletal health and care (e.g. identifying health inequalities, predicting long-term outcomes, understand the role of comorbidities, estimate benefits and harms of treatment); (ii) design and evaluation of interventions to improve care for musculoskeletal or mental health conditions; (iii) improving early recognition and management of anxiety and depression in people with other long-term conditions and in pregnancy; (iv) early detection of dementia progression; and (v) a series of projects focusing on engaging with underserved ethnic communities to improve the diversity of Patient and Public Involvement in research.

Please describe the strategies that have been put in place to facilitate collaboration and comment on how these are translating into new partnerships so far.

The School has supported the development of the Community Nursing Research Community of Practice, hosted by the Queen’s Nursing Institute, by funding a series of webinars and online bite-size research masterclasses for members to meet, network and learn from each other. Two more are planned for 2023

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| December 2022 | Value of research for patients and community nursing | 150 attendees |
| January 2023 | Critically appraising qualitative research papers | 144 attendees |
| February 2023 | Writing about your research for publication | 129 attendees |
| March 2023 | Introduction to qualitative data analysis: Reflexive Thematic Analysis | 126 attendees |

The facilitator, a previous SPCR fellow, has stated that *the returns on the investment have been huge, increasing the reach and impact of the Queen’s Nursing Institute Community Nursing Research Forum and School for Primary Care Research across the community nursing workforce. The modest investment is having a dramatic, short-term and long-term impact on developing primary care and community nurse-led research activity.*

Building on the success of the Community Nursing Research Community of Practice, the inaugural SPCR Supporting Nursing Research in Primary Care event took place at Keele in February. This event was open to all with the aim of raising the profile, capacity and opportunity of nursing research. The School has committed to support this event for the duration of the contract to assist with its strategic aims to demystify research funding for nurses, develop clinical academic roles that are fit for purpose and to work to an ambitious research ambition that is meaningful to patient care and outcomes.

The school provided continued support to the 2023 GP ACF conference held at Edgehill University including facilitating the nationwide training leads meeting and hands on input into the conference itself.

Please also comment on any developments or activities that pertain to ensuring equality, diversity and inclusion.

This year, the SPCR board has appointed a new member as Academic Lead for Equality, Diversity and Inclusion. James Sheppard is an Associate Professor at Oxford and deputy lead for their Athena Swan initiative which recently received a Gold award.

The SPCR has taken the following action since this appointment:

* Undertaking an anonymous data capture of our current award holders as part of our work to embed the NIHR Research Inclusion Strategy into our practice
* Inviting a member of the NIHR Research Inclusion team to present at our annual trainee event in September 2022
* Strengthening relevant questions on SPCR funding application forms
* Running a pre-application workshop on embedding EDI in research applications for upcoming funding rounds
* Development of a mandatory workshop for successful applicants to identify areas for improvement prior to the outset of SPCR projects

In addition, the SPCR is currently seeking to appoint an independent EDI consultant to audit its processes and where appropriate provide high level training to the SPCR board.

Patient and Public Involvement and Engagement (PPIE)

This year, the SPCR board has appointed a new member as Academic Lead for Patient and Public Involvement and Engagement. Miriam Santer is a Professor of Primary Care Research at Southampton. This appointment has embedded a voice for PPIE within our strategic governance.

The SPCR embeds PPIE into its work according to our 6 strategic aims:

*Ensure our research community incorporates patient and public involvement and engagement throughout research*

The SPCR provides an annual PPI budget to our membership in order that they can ensure PPI is incorporated into research going on in their departments. Each member provides a report into the use of these funds, reported usage includes:

* PPI input into grant applications and PhD projects, through local enablement funds
* Provision of PPIE training workshops to be run for researchers and public collaborators
* PPI members to attend workshops for potential applicants to SPCR funding rounds
* Payment for involvement in local PPIE advisory groups who input into departmental strategy

*Incorporate relevant involvement throughout our funding processes*

We ensure PPI involvement in all of our funding decisions, using a diverse group of public contributors. Our PPI funding group continue to be involved in our competitive funding process, review scores from public contributors are given an equal weighting to academic review scores at these funding panels. Local SPCR funding decisions include public contributor review and panel representation funded by their PPI budget as above

*Lead by example in our involvement and engagement practice*

We continue to engage with our SPCR PPI funding group for all decisions made at our competitive funding rounds. Our wider group, and specific PPI funding panel meetings, enables a supportive environment for people who have previously felt uncomfortable in board settings to still influence decision making as well as allowing more public contributors to give feedback and be involved in SPCR funding decisions. PPI feedback during the funding panel meeting is based on a group consensus, rather than a single opinion

*Strengthen involvement and engagement practice of SPCR members*

The SPCR has a strong PPI peer support network with bi-monthly meetings for all members. We have recently appointed a new PPI manager to the directorate. The post will be based at Bristol after hosting an internal competition last year to identify a suitable host based on differing PPIE strengths in our departments.

Working with members from the central NIHR PPI team, the SPCR put together guidelines for Public Contributor payments for its membership this year to ensure that opportunities for Public Contributors are equitable and accessible.

The SPCR is a member of the PICG Public Involvement Collaboration Group (PICG)

*Inspire and encourage inclusive, innovative, diverse and creative patient and public involvement and engagement*

This year we ran a very successful PPIE award competition to provide researchers with funds to enhance their involvement/ engagement work by adding novel and creative methods and/ or reaching out to minoritised communities in addition to their existing plans. The calibre of applications was extremely high and 5 awards were made. Each project involves public contributors as co-applicants and we would like to highlight the project *Bridging Gaps: Lived experience changing primary care services* (ref 685) intending to extend the work of the Bridging Gaps project, a group of women with lived experiences of extensive trauma, including addiction, homelessness, mental health problems, sexual exploitation, domestic and sexual violence, and poverty. The project improves access to primary care for others who have also experienced trauma and/or have complex needs, working in collaboration with GP practices

List of PPI Awards granted

* Bridging Gaps: Lived experience changing primary care services
* Symptom Patterns and life with longer-Term COVID-19 in children and young people: cOproductiON of long-Covid resources for children and young people (SPLaToon)
* The Creative Community Output Collective: exploring local communities experience during the covid-19 pandemic in Greater Manchester
* Exploring approaches to reach and engage people with chronic high pain (CHIP)
* Found poetry: a creative approach to explore the lived experiences of blood testing

*Improve the knowledge sharing of patient and public involvement and engagement*

Alongside colleagues from across our networks the SPCR has hosted or contributed to a series of online workshops during the last year, including *Exploring the impact of patient, public and community engagement and involvement in the design and development of the evaluation of the Recovery Navigator programme in the north-east and north Cumbria,* as well as *Why and how to involve people living with dementia and learning disabilities in research.* These events have involved researchers sharing their experiences and tips of working with people with lived experience

The first of four papers commissioned from the school by the European Journal of General Practice has been submitted for publication. The four papers will cover; *Fundamentals of Public Engagement, Engaging with Underserved Communities, Community Engagement* and *Co-production, Role of the Public in the Implementation of Research*