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| Host department: Southampton |
| Project Title: |
| Meetings between experts: understanding patient and clinician (de)-prescribing discussions and decisions in primary care |
| Proposed supervisory team:  |
| Geraldine Leydon – SouthamptonFiona Stevenson – University College LondonNote: The rest of the team to be determined depending on needs/interests of the successful candidate.The supervisors offer expertise in the study of health care interaction, antibiotic prescribing/managing common infection, prescribing in primary care, medical sociology, intervention design and evaluation, qualitative methodology, conversation analysis, thematic analysis, digital health. Clinical research scientist scholars from apt disciplinary/methodological backgrounds will be added to the supervisory team once the candidate is appointed and we determine the most appropriate person (e.g. nurse or GP; specialist in specific aspects of communication and so on). |
| Potential for cross consortium networking and educational opportunities: |
| The project includes access to mid and senior-level researchers across two SPCR departments (University College London, Southampton). The candidate will have access to leading experts in primary care, communication research/science of talk, medical sociology, and qualitative methodologists. |
| Project description: |
| Data sets collected in recent years from UK primary care hold more than 600 face to face and telephone primary care consultations between GPs/nurses/patients. The PhD offers a wonderful opportunity for a candidate interested in understanding how clinicians communicate with patients around prescribing and de-prescribing Many of the video/audio recordings were transcribed and coded drawing on relevant communication research to discriminate key features and outcomes. The coding framework was largely numerical, and it drew on the International Classification for Primary Care (ICPC), combined with some textual coding to enable further understanding of the consultation data collected. This included coding details of the problem presented including the nature of the problem presented, diagnosis, and outcome/prescriptions.There is scope for further analyses of this unique corpus to deepen our understanding, both qualitatively and quantitatively, of key conversational patterns when different types of prescribing decisions are made. This is a great opportunity to analyse a novel data set to advance our knowledge of communication ‘at the coal face’ and in so doing will be well placed to identify further research ideas. T will also be opportunity for further data collection.A range of PhDs are possible for the doctoral fellow, using qualitative methodologies (primarily) depending on the preference and interests of the fellow, and to be agreed with the supervising team. |

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| Training and development provision by host: |
| *Formal training:*The training plan will be informed by an analysis of the academic needs of the PhD candidate carried out in the first month. Training will be directed towards helping the candidate develop as an independent researcher, as well as towards the needs of the PhD project.The formal taught postgraduate research training programme at the University of Southampton includes epidemiology, statistics, research governance and study design. In addition, transferable skills courses are offered including Good Clinical Practice, time management, leadership, grant writing, and presentation skills. The Conversation Analytic Data Sessions (CADSS) will also provide opportunity for training (this includes developmental sessions ran over a 10-week period). The Fellow will also be able to access free on-line masterclasses on systematic reviews and meta-analysis, research governance, ethics, patient and public involvement and engagement, developed by leaders in the SPCR. UCL offers opportunities to strengthen training through their various short course offerings.  |
| *Informal training:* The student will also be offered mentorship from a senior primary care academic (chosen depending on the candidate’s interest/needs). Mentors receive formal training, developed by the Society for Academic Primary Care, to ensure independence and appropriate support. The Fellow will also have access to informal mentoring from senior members of the collaboration at an annual training meeting, and to participate in doctoral exchange programmes. In addition, a mentoring scheme which is available to doctoral candidates. Our REACH (Research Education Advice and Communication in Health ECR) group will also provide a programme of meetings which deal with key topics both practical and academic geared towards supporting researchers and students in their scholarly endeavours. UCL also offers opportunities to strengthen training through their various informal meetings for students / researchers interested in the study of interaction.  |
| *PPIE:* If funded, the PhD candidate would work with the supervisory team to recruit two public contributors to aid the design, execution and dissemination arising, outside of the primary output of a doctoral thesis. The student will also benefit from working with our strongly embedded PPIE team at the University of Southampton Primary Care Research Centre, and the Wessex Public Involvement Network.  |