

# **PC-CRTU** in Contact

Welcome to the summer edition of the PC-CRTU Newsletter. Since the last issue I have been appointed Acting Clinical Director (taking up from where Joe Kai left off) pending the advertisement of the substantive post. I hope to be able to maintain the success of MidReC that has been achieved under Richard Hobbs' and Joe's leadership and with your hard work. I am a GP at Greenridge Surgery in Billesley (South Birmingham) and have been a Clinical Research Fellow in the Department since 1997. Some of you will have come across me at MidReC training days in the past or if you have taken part in the Cardiovascular Risk and TASMINH blood pressure self monitoring studies. My personal research interests lie in the fields of cardiovascular disease, self management, and the use of computerised General Practice

Data in research. An early ambition is to set up a network of practices interested in collecting and using electronic data. I would hope that with the gains under the new contract being so dependent on accurate and complete data, a mutually beneficial relationship might be built up between practices and MidReC with quality feedback an important part of this.

I hope that you will continue to give the support that is so vital for the success of our network and would be happy to hear from anyone with research ideas of their own which they would like to take forward.

Dr Richard McManus R.I.Mcmanus@bham.ac.uk

# The Society for Academic Primary Care: Political and Professional Challenges in Primary Health Care

The Society for Academic Primary Care (SAPC) grew out of the Association of University Departments of General Practice which was founded. as the Association of University Teachers in General Practice in the late 1970s. The SAPC, which now has a membership of approaching 600, and the closely-associated Heads of Departments Group (representing the University departments in the UK with undergraduate medical educational responsibilities) has been centrally involved in negotiations to support research and education in academic primary care and to improve career structures for clinical and non-clinical primary care academics.

Research in general practice and primary care has increased very substantially, both in volume and quality, over the last fifteen years. Primary care requires a robust evidence base to inform high standards of clinical practice, and the wide range of clinical, health services and other research in primary care settings has contributed substantially to this. The MRC Topic Review and the Mant Report, in the mid 1990s, affirmed the importance of research in primary care and led, amongst other things, to a substantial MRC:DH funding programme for primary care research and the establishment of a number of different research development awards, funded largely by the NHS R&D programme, with some support from PPP. This has certainly contributed to capacity building in academic primary care, although a recent survey (New Century, New Challenges) undertaken by the Heads of Departments Group suggests that a good deal of the momentum given to primary care research in the mid-1990s has now been lost. We need to work hard to ensure that primary care research remains on the research agendas of the NHS R&D programme and other funding organisations.

Membership of the SAPC enables clinical and non-clinical academics as well as practitioners active in teaching and research working and in general practice and primary care, to contribute to all of these important political and professional challenges.

The Society holds a major annual scientific meeting, which provides a showcase for high-quality research and an opportunity to discuss policy issues. Regional meetings are held regularly, research training and careers workshops, forming part of these and the national meeting. Special interest groups are now being set up and we are currently having interesting dialogues with other professional groups, including academic nursing and the Federation of Primary Care Research Networks.

Full details of the Society's activities can be found on the website: www.sapc.ac.uk

**Brendan Delaney** Secretary, SAPC

### **Practice Forums**

Practice Nurse and Practice Manager Forums have not met recently but research work is slowly and quietly carrying on. We hope to arrange meetings in the near future.

### **Small Grants Scheme**

### Oral Health Promotion Video To Encourage Dental Registration Amongst Under Fives From Asian Ethnic Minority Groups

Inequalities exist in the dental health of young children in Birmingham and these are related to a family's socio-economic status, religious background and fluency in English.

The aim of this study was to evaluate the effectiveness of an oral health promotion video to maximise uptake of routine dental services by pre-school Asian children in Birmingham.

Asian mothers with young children attending nurseries in the Alum Rock and Saltley areas of Birmingham were invited to watch a video made in Urdu, highlighting the importance of regular dental check ups from a young age and providing information on the source of routine care. Dental registration levels were recorded before and after showing the video.

The video was successful in producing an increase in the number of pre-school Asian children registered with a dentist: a significant increase in registration was achieved in the target area in comparison with a control group.

Many thanks to the individuals and organisations that helped with carrying out this project and in particular, the West Midlands PC-CRTU (Small Projects Scheme) for provision of funding and access to the very useful research facilitation service.

Abida Raja — PDS Dentist Birmingham Personal Dental Service (Heart of Birmingham NHS Primary Care Trust) 0121-327-0345

### **MSc Project on Walk-In Centre Nurses**

A project to examine the adequacy of training, and confidence levels, of Walk-in Centre (WIC) nurses was the subject of a dissertation by one of the MSc in Primary Care Students.

This was a national project, using a multi-method approach, involving postal questionnaires to 600 nurses, interviews with regional co-ordinators, and a literature review. The results indicate overall that WIC nurses are a skilled and experienced group, but do not feel adequately prepared for their role. There is considerable variability among WICs, depending

on whether their focus is Primary Care, or Accident and Emergency, but further clarification of the optimal training for the role is indicated. The continuing development of Primary Care, and acceptance of the new GP Contract make this an ideal time to explore this issue more closely.

Funding for the project was made available through the 'Small Projects Scheme' of the Research Support Facility of the PC-CRTU. The author, Jane Edwards, who works at Birmingham WIC, gratefully acknowledges this assistance.

Jane Edwards

#### **Interested in Our Scheme?**

We have small amounts of funding available through our PC-CRTU Budget 2 funding for practitioners based within the West Midlands who would like to undertake research within the primary care setting. If you have a research

idea and would like advice or funding, in the first instance please contact either Sue Clifford or Sheila Bailey on 0121-414 2845 for further information. Alternatively you can email us on pccrtu-gp@bham.ac.uk

# Recruiting Now for November

#### The WARM Study

The WARM Study is an important research project funded by the British Lung Foundation, involving older people aged 65 or over who consult their GP with chest infections in the winter. We are looking to identify medical, social and lifestyle factors which influence the need for admission, with the aim of reducing admissions to hospital in the future.

Unfortunately for us, last winter was not a typical year for respiratory consultations, in fact everyone will be well aware of the virtual absence of influenza in the community. This means that in order for us to answer the research questions, we will need to recruit many more patients next winter. We are very keen to sign up new practices. The study procedures have been shown to be straightforward and take relatively little time – hopefully this will encourage you to take part!

If your practice is interested in this research for November this year, please contact the WARM Study Office on 0121-415 8183 (Kate, Rachel or Caroline).

#### **PC-CRTU CONTACTS**

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### **Ongoing Studies**

# **SAFE** – Screening for Atrial Fibrillation in the Elderly



The SAFE study aims to identify the most cost effective method of screening for atrial fibrillation in patients aged sixty-five and over.

After a considerable amount of hard work by both practice staff and the SAFE team, both opportunistic and systematic screening has been completed in all twenty-five intervention practices. Final quality of life questionnaires have been returned by patients and final note searching is nearing completion. Batches of ECGs have been sent to the majority of participating control and intervention practices. Many thanks to the GPs and

Practice Nurses who have already completed this exercise and returned their interpretations. This is the final part of the study, so getting the remainder of the interpretations back in good time would be greatly appreciated.

As almost all the data are collected, preliminary analyses are underway. The scale of the SAFE study is evident in that over 2600 patients have had an ECG. Full results will be available for this newsletter at the end of this year as the study report will be submitted in November 2003.

Sue Jowett - 0121-414 2677



# **SMART** – Patient Self-Management of Anticoagulation Therapy

The SMART trial is investigating the clinical and cost effectiveness of patient self-management (PSM) for oral anticoagulation in comparison with standard care.

All of the patients have now completed the self-management phase of the trial. Sixty patients are continuing to self manage outside of the trial. We are currently cleaning and verifying data in preparation for the final analysis.

We would like to thank all of the practices that have participated in and supported the trial. A report will be available in the autumn of 2003.

Deborah McCahon — 0121-414 2954



# **BETS** – Birmingham Elderly Thyroid Study

The Birmingham Elderly Thyroid Study (BETS Study) aims to examine the effects of sub clinical thyroid disease in an elderly population. We are recruiting patients aged sixty-five to eighty-four to take part in a prevalence screen. Dependent on the results of that screen, patients may be invited to take part in further follow up studies.

BETS has now screened over 1000 patients in just over six months! Congratulations to all the practices involved and thanks once again for all your hard work. The study aims to screen 6000 patients and to maintain our recruitment, over the summer we will be increasing the number of practices seeing BETS patients to sixteen. Many thanks to all those practices who responded to the recent mail shot, we were pleasantly surprised to see that so many practices wanted to get involved! It is anticipated that we will need to recruit another eight practices towards the end of the year, so there is still an opportunity for those of you still keen to get involved!

If you are interested in finding out more about BETS, please contact Lesley Roberts, Trial Manager on 0121-414 3356.

# PROCEED Professionals Responding to Cancer and Ethnic Diversity

The aim of the PROCEED project is to research and develop training for health professionals who care for people from diverse communities who are affected by cancer. The main objective of the project is to produce a training resource with an accompanying video.

We are currently running focus groups with a wide range of health professionals, including nurses, doctors, physiotherapists, bilingual advocates and those involved in education in this field. Through exploring their experiences, we hope to identify relevant issues and determine the type of training needed.

If you would like to find out more about PROCEED, please contact Jackie Beavan on 0121-414 3330 or BeavanJ@medgp3.bham.ac.uk

# **CUBE (C13 Urea Breath test** and Eradication) MRC-CUBE Study



CUBE is a two-year multi-centre randomised controlled trial of C13 urea breath testing and *H.pylori* eradication for dyspepsia in primary care compared with PPI's alone.

The CUBE study started in early January. To date, 160 patients have been recruited from the three centres involved in the trial – Birmingham, Leeds and Nottingham.

We currently have space for additional practices to take part and would welcome your participation.

If you are interested in finding out more about the study, please either read the enclosed flyer or contact Beth Hinks, Trial Administrator on 0121-414 8545.

# **BAFTA** – Birmingham Atrial Fibrillation Treatment of the Aged Study



We now have over 350 people aged over 75 in atrial fibrillation who have entered the trial – a randomised comparison of Aspirin versus Warfarin therapy.

The scientific case for the study remains strong – a meta-analysis published in JAMA at the end of last year demonstrated that there is insufficient evidence in this age group to know whether Warfarin or Aspirin

should be the preferred treatment. To those practices that are taking part in BAFTA, thank you for all your hard work to date, and please remember to consider any people in atrial fibrillation that you come across for the trial. Any practices who are not taking part in this study, but would like to do so, please contact us.

Kate Fletcher - 0121-414 8091

### **New Studies**

# **REDIRECT** – biRmingham Early Detection In untREated psyChosis Trial

#### Be Part of the Solution

Practices needed in the Heart of Birmingham Teaching PCT and the Washwood Heath area of Eastern Birmingham PCT for FREE TRAINING in improving detection of first episode psychosis!

3% of the population currently have a psychotic illness. The first episode of psychosis is a relatively rare event in primary care, but is often devastating for the individual and their family. Long periods between first presentation of psychosis and effective treatment are linked to poor outcome, however, early treatment of first episode psychosis speeds up recovery and

reduces the chance of relapse. In the early stages, psychosis symptoms are sometimes difficult to detect which may be part of the reason why the average length of untreated psychotic illness in Birmingham is currently forty-six weeks.

### Can we reduce the duration of untreated psychosis?

We have developed a training package, consisting of a short video and written guidelines, to help GPs to identify first episode psychosis in young people and, we hope, reduce the length of untreated psychosis. In REDIRECT, we hope to train fifty practices and ask fifty practices to act as 'controls' so we can see what effect training has on GP referral patterns.



We are asking practices to sign up for REDIRECT and fifty will be offered **FREE TRAINING!** Locum costs of £100 will also be reimbursed if training occurs in practice time. There is no other commitment since the Redirect Trial team will explain the study to patients, obtain consent and collect data from secondary care.

Approval has been obtained from Local Research Ethics Committees. The Heart of Birmingham and East Birmingham PCT Chief Executives and Mental Health Leads are all fully supportive of this study and are encouraging participation.

GPs who are interested in participating in the free thirty minute training or who have questions should contact Dr Lynda Tait at Tel: 0121-414 8584 L.Tait.1@bham.ac.uk

### **Completed Recruiting –** Analysis Underway



# **TASMINH** – Targets and Self Monitoring in Hypertension Study

#### Background

- I The TASMINH study compared self monitoring of blood pressure with routine monitoring by GPs or Nurses for patients with treated hypertension.
- Patients in the self monitoring arm of the TASMINH study were given a target blood pressure (BP) to aim for (BHS Guideline targets) and attended the practice once a month to measure their own BP using an electronic machine in the waiting room. They made a routine appointment to see their GP or Nurse if their BP was above target for two months in a row.
- Patients were seen in study clinics at baseline, six months and one year.
- 441 patients were randomised at baseline.

#### **Current Progress**

- At the time of writing we have completed the final follow up study clinics.
- 402 patients from eight practices completed the study (91%).
- Analysis and writing up is ongoing with final results expected in the autumn.

Thank you for the support we have been given both from GPs and their staff.

Richard McManus

R.J.Mcmanus@bham.ac.uk 0121-414 2658



### **Class** – Chlamydia Screening Study

Data collection and analysis are now almost complete. We have presented results at various international conferences over the past six months including; prevalence and risk markers for Chlamydia; test performance in the community; practice based partner notification; qualitative data on patient and practice staff views of screening. Several papers describing these results are also

forthcoming. ClaSS would not have been possible without the enthusiasm and commitment of participating practices. We will soon be organising practice feedback meetings in Birmingham and Bristol where we will present all our results and discuss their implications for primary care. Venues and dates will be announced soon, watch this space!

Andrea Morcom - 0121-414 8071

# Stroke Models Study

The Stroke Models Study aims to identify what long-term support stroke patients and their carers feel they need from community-based services.

The first stage, now completed and published in the July issue of British Journal of General Practice, looked at how accurate GP computer based registers of stroke patients are. This concluded that GP based computer systems can produce more accurate stroke registers than hospital data. In areas where practice registers were poorly developed, patient survey is a useful alternative. The second stage involved carrying out focus groups with stroke patients and their carers who had been identified in stage one to find out what their major problems were, and what sort of services they found most helpful. Using this information, and the information from a survey of stroke patients in the study area, we are now developing a pragmatic model of care which we will begin piloting in the study practices in South Birmingham shortly.

Rachel Hare - 0121-414 2691

For those of you who would like more than just taster sessions, the department also offers the following...

### The Department of Primary Care and General Practice

#### **Short Course Programmes**

The Department of Primary Care and General Practice offer training in skills relevant to the health service. These courses are open to ALL health professionals as well as researchers.

These courses include both practical exercises and theoretical sessions. Students will be encouraged to bring examples from their own work to share with the group and also to demonstrate the application of their learning back in their workplace.

Course title and contents	Cost	Dates for 2003/4
Introduction to Research Methods	£300	1-3 October 2003
Epidemiology with Statistics	£500	10 -14 November 2003
Qualitative Research Methods	£500	5 -9 January 2004
Evidence Based Health Care	£500	9-13 February 2004
Teaching and Learning	£300	23 -25 March 2004
Ethics, Law and Communication Skills	£500	21 -25 June 2004

### Postgraduate Certificate in Learning and Teaching for Health Professionals

The University of Birmingham are pleased to offer this certificate programme for health professionals who want to develop and update their skills in learning and teaching. The aim of the programme is to develop an understanding of the principles and practice of education as these apply to a health care context. This course is accredited for 60 credits at Masters level. Doctors and Dentists working in the West Midlands region are eligible for a bursary of £1,000 towards their course fee.

#### **MSc in Primary Care**

The University of Birmingham are pleased to offer the MSc in Primary Care available from October 2004. This modular course is open to all healthcare professionals in primary care. Five core modules are taken during the first year followed by up to 3 optional modules in the second year.

#### FOR FURTHER DETAILS CONTACT

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http://medweb5.bham.ac.uk/pcgp/



The PC-CRTU are offering free 'taster' sessions which have been tailored to meet the requirements of those Primary Care Practitioners who wish to undertake research within the primary care setting and are newcomers to this field. PGEA approval is being applied for each session.

The sessions are being held at Birmingham University's Conference Park where parking is easy and free of charge. Details of courses together with a brief description are listed below:

#### Qualitative Research Methods 25th September 2003 13.00-16.30 hrs

Dr Helen Lester

Using practical examples from recent and ongoing qualitative studies run by the Primary Care Mental Health Team in the Department of Primary Care and General Practice this introductory session will cover the basic principles of qualitative research, including its strengths and weaknesses and discuss the principles and application of widely used qualitative methodologies including one to one interviews and focus groups.

#### **Quantitative Research Methods**

Ms Lesley Roberts

16th October 2003 13.00 - 16.30 hrs

Quantitative research unravelled – determining the question, appropriate designs, interpreting results and lots of 'what not to do's'!

Interpreting the Results Dr Rhian Loudon/Dr Richard McManus 6th November 2003 13.00 - 16.30 hrs

How do I turn my data into results? How do I convince others that my research is useful? This session will use examples of research conducted in the Department of Primary Care to illustrate basic principles of quantitive and qualitative data analysis and critical appraisal.

The above sessions can only be offered to those Primary Care Practitioners (GP's, Nurses, Practice Manager's) who are based in the West Midlands. Places are limited and will be offered on a first come, first served basis.

As each session is being run independently, you do not have to commit to attending all three sessions. So, if you would like to book a place, on any number of these sessions, please contact either Sue Clifford or Sheila Bailey on 0121-414 2845 or email S.M.Bailey.20@bham.ac.uk.

### Anticoagulation Management Training

### Remaining anticoagulation management training dates for 2003

- I Oral anticoagulation management three-day course 6, 7, 8, October; 1, 2, 3 December
- Anticoagulation management update day 4 December
- Anticoagulation patient self-management one-day course
   21 October; 18 November

All events will be held at the University of Birmingham See enclosed flyer for further details

FOR FURTHER INFORMATION CONTACT
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