# BSW Research Hub Newsletter Spring 2022



Welcome to the spring edition of the BSW Research Hub quarterly e-newsletter. If you have an item to add to the next bulletin, <u>email us</u> by 20<sup>th</sup> May 2022.

## About us

The BSW Research Hub supports all aspects of applied health research and innovation involving local primary and community NHS and HSC organisations. We can help with preparing research proposals and obtaining relevant approvals, to advising on involving the public in research. Find out more about our services here.

#### Team

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#### News

# CRN West of England Research Awards 2022

After an unprecedented couple of years, the Clinical Research Network West of England (CRN WE) hosted an awards ceremony on Thursday 24<sup>th</sup> March 2022 to recognise the hard work and achievements of those working within research in the region. You can watch the full ceremony here.



We would like to say a huge **congratulations** to:

Rowden and Hathaway Surgeries who were **shortlisted** for the **Collaboration in Research** award

Mary Fifield, Research Nurse at Heart of Bath who won the **Supporting and Developing Colleagues** award.

The Research Team at Heart of Bath who won the Innovative Recruitment award.

Recruitment success for primary care research sites across BSW CCG

For the period April 2021 to February 2022 primary care research sites across BSW CCG have collectively seen another increase in recruitment activity, when compared with the same period in the previous financial year.

They also highest number of recruiting commercial studies, along with the highest number of recruits to commercial studies, with Bradford-on-Avon and Melksham Health Centre recruiting the highest number of patients to commercial studies between April 2021 and February 2022.

The top ten primary care recruiting sites across the CRN West of England includes **four** sites across BSW CCG: Heart of Bath, Hathaway Surgery Medical Centre, St. Augustine's Medical Practice and Trowbridge Health Centre.



A revolutionary device called 'Earswitch' could enable people with neurological conditions to communicate

A simple but revolutionary device called 'Earswitch' could enable people with neurological conditions to communicate using a small muscle in their ear. The device is being developed by Dr Nick Gompertz, a GP, with support from researchers from the University of Bath.



Earswitch Ltd. has developed a prototype that allows people to communicate by tensing a tiny muscle in the ear to operate an assistive keyboard. The muscle, called the tensor tympani, can be voluntarily controlled by some people.

It is believed that control of this muscle might be preserved in people 'locked-in' due to stroke, and in late-stage MND. This is important because current existing assistive devices can become unusable as neurological conditions such as MND worsen over time. As such, Earswitch might offer a breakthrough for individuals with the most severe communications restrictions

A preliminary study, that has just been completed with National Institute for Health Research (NIHR) funding, found that approximately 85% of people report they can move this muscle, with 55% reporting they can move it alone (i.e. without needing to make any other facial movement). More importantly, 70% of people with neuro-disabilities reported the ability to squeeze this ear muscle.

These preliminary findings will support the research team in applying for further research funding, that will be used to demonstrate that EarSwitch is useful for people who are losing their ability to talk, write or use a keyboard, enabling them to communicate better and improving the quality of their lives.

Find out more here.

## Results are in for the study: An investigation of skill mix in Primary Care

During the period Sept 2018-Dec 2020, a team of researchers led by Dr Sharon Spooner from the University of Manchester, conducted a comprehensive study of the changing composition of the general practice workforce.

The team discovered that a lot of background work is needed to make sure that practices can appropriately distribute the limitless variety and unpredictability of problems brought by patients. Processes need to be in place to ensure that each type of problem is allocated to a practitioner whose skills allow them to deal with it. In addition, practitioners need to have access to ad hoc advice and support from more experienced colleagues when unable to fully resolve the problem/s.

The processes of sorting and matching, as well as in-built flexibility to access support and advice are not always clear to patients, particularly when their team is changing rapidly, and they have limited information about what newer practitioners can do. Based on the findings, the research team have prepared a <u>short video</u> that spells out how the general workforce is changing, explains the principles of 'getting the right patient to the right practitioner' through matching their problem with a practitioner's skills or competencies, but also recognises the importance of immediate access to advice and support.

The team thought the video may be of particular interest for individual patients and patient groups as well as staff who find themselves explaining new appointment systems, new practitioners etc.

# Spotlight on

# Dr Ali Llewellyn, Research Manager at Dorothy House Hospice Care

I joined Dorothy House in September 2020 because I was so impressed by its commitment to put research, along with education, at the heart of the organisation. What I found was that it's also a lovely place to work, with an incredibly supportive management team, wide range of exceptionally skilled staff and volunteers, all working hard together to ensure everyone in our area has access to outstanding palliative and end of life care.



As a Chartered Psychologist and healthcare researcher, it's really important to me that research ideas come from, and apply to, the 'grass roots' of healthcare. Dorothy House's commitment to research means I can concentrate on supporting projects that are geared around the Hospice's clinical needs, and which provide direct benefit to its patients, as well as to their families and carers. I also particularly enjoy being able to offer my academic skills to support wider organisational activities too. As a result, my day-to-day role is hugely varied. On any given day I might be looking after a research governance enquiry, working with members of our "Hospice User Group", helping a staff member write a conference abstract, supporting the evaluation of a clinical service, writing a bid for research funding, or supporting an academic research placement. The list goes on!

Of course, I do absolutely none of this alone; my role is part-time, and I am just one member of a wonderful team, led by Professor Candy McCabe who is also responsible for Education at Dorothy House and is a registered nurse. Our Research Team includes a highly experienced Research Nurse and a Research Team Co-ordinator with a wealth of "in-house" knowledge from her previous Dorothy House role. We also currently have a BSc Psychology undergraduate student with us for a year on placement from the University of Bath. We began building our team in 2019 and it's fabulous that we now have so many different strengths and experiences between us, and we benefit from the rich knowledge and perspectives of one another.

Our team has lots of links to other local and regional organisations such as the Royal United Hospitals Bath NHS Foundation Trust, the University of Bath (where I completed my PhD – too many years ago to mention), the University of the West of England, Bristol, and Bristol Health Partners. We also receive excellent support from the BaNES, Swindon and Wiltshire Research Hub, and amongst other things, this has enabled us to link up with two neighbouring hospices to

understand the impacts of service changes we all had to make due to Covid-19. However, we are always seeking to extend our networks; between us we are members of local research groups, and we take every opportunity to engage with national organisations that support palliative and end of life care research, such as Hospice UK and Marie Curie.

Research has always been important to Dorothy House but, for me, this is such an exciting time to be involved. The last 18 months have been a whirlwind and we still have so many ideas about how we can encourage more staff to feel confident to be involved in research or to conduct research of their own. We are always on the look-out for clinical trials we can contribute to as an organisation, as well as working hard on our own projects and developing ideas for new ones. All of us are fully committed to Dorothy House's research continuing to go from strength to strength! I feel hugely fortunate to be in my role and to play my small part in supporting the exceptional care that Dorothy House provides. It's an amazing organisation and I'm exceptionally proud to say I work here.

# Regulatory updates

## HRA - Combined review

Combined review service, formerly called Combined Ways of Working (CWoW), is now the way all sponsors and applicants seek approval for new Clinical Trials of Investigational Medicinal Products (CTIMPs) and combined trials of an investigational medicinal product and an investigational medical device (IMP/Device trials).

The combined review was developed by the HRA and the Medicines and Healthcare products Regulatory Agency (MHRA), working closely with the National Institute for Health Research (NIHR), Clinical Research Networks and the devolved administrations.

Combined review offers CTIMP and IMP/Device Trial applicants and sponsors a single application route and a joined-up review, leading to a single UK decision in a faster overall timeline than the previous separate process.

Trials submitted through combined review will be automatically registered on ISRCTN Registry when given full approval.

Find out more about the combined review service here.

#### CPMS Release 5

CPMS Release 5 delivers a new look homepage, and 'click to expand' menu through which all CPMS pages can be accessed. While this new user-friendly gateway is initially only available to non-commercial users, the vision is to integrate commercial services in the future.

You can watch a short explainer video <u>here</u> for an overview of the new features and functionality that this release delivers.

# Research support

Would you like the Research Design Service (RDS) to review your draft application prior to submission?

The RDS Project Review Committee (PRC) provides an excellent opportunity for you to obtain detailed feedback on your draft grant application prior to submission to the funding body. The panel of RDS advisers and public contributors brings the benefit of seeing the proposal with "fresh eyes", replicating as far as possible the way the real funding committee will consider the application, and will provide detailed feedback and suggestions for improving the competitiveness of the application.

The PRC meets on the third Tuesday of each month - if you would like to arrange for your application to be reviewed, book early to secure a slot. Find out more <u>here</u>.

# Training and events

Research Design Service – South West

## Residential Research Retreat

Date: 13<sup>th</sup> to 15<sup>th</sup> September 2022 Where: Dillington House, Somerset

Do you have a great idea for research in health, social care or public health? Are you planning to apply for research funding? Do you need dedicated and supported time to develop your research study?

The Residential Research Retreat provides an opportunity for research teams to develop high quality research proposals suitable for submission to national peer-reviewed funding streams. The aim of the Retreat is to provide the environment and support to promote rapid progress in developing proposals over a relatively short period.

The Retreat is open to health, public health, and social care professionals and academic partners working within the South West. Applications to attend the Retreat should be submitted by a team of three to four people, ideally with varied research skills and professional backgrounds. Applications will be reviewed competitively, and places awarded to the most promising team proposals.

## Application deadline is 20th April 2022.

Find out more <u>here</u>.

## Funding opportunities

21/598 Health and social care outcomes and cost-effectiveness of assistive technologies

Closes: 1pm on 4 May 2022

The Health Technology Assessment (HTA) Programme is interested in proposals for the evaluation of assistive technologies provided by relevant local authorities to residents who live at home, on the basis of disability- or age-related needs, with the aim of promoting and maintaining independence. This could be 'low-tech' solutions, e.g. non-electronic devices and home adaptations that might be in use already without evidence regarding their effectiveness, as well as 'high-tech" systems, such as smart devices that facilitate telecare, which are market-ready, but not necessarily widely adopted.

Find out more here.

## Research for Patient Benefit - Competition 48

Closes: 1pm on 13 July 2022

The NIHR Research for Patient Benefit (RfPB) programme is inviting stage 1 applications for research proposals that are concerned with the day-to-day practice of health service staff, and that have the potential to have an impact on the health or wellbeing of patients and users of the NHS.

As a researcher-led programme, RfPB does not specify topics for research but instead encourages proposals for projects that address a wide range of health service issues and challenges. The programme aims to fund high quality quantitative and qualitative research with a clear trajectory to patient benefit.

It particularly encourages applications that have a strong element of interaction with patients and the public and that have been conceived in association with a relevant group of service users.

Find out more <u>here</u>.

BSW Research Hub: <a href="http://go.bath.ac.uk/bsw-research-hub">http://go.bath.ac.uk/bsw-research-hub</a>