|  |  |
| --- | --- |
| Last updated: | 13/11/18  |

**JOB DESCRIPTION**

|  |  |
| --- | --- |
| Post title: | **Research Fellow** |
| School/Department: | Primary Care and Population Sciences |
| Faculty: | Faculty of Medicine |
| Career Pathway: | Education, Research and Enterprise (ERE) | Level: | 4 |
| \*ERE category: | Research pathway |
| Posts responsible to: | Professor of Medical Sociology and Healthcare Interaction |
| Posts responsible for: | Student co-supervision |
| Post base: | Office-based/Non Office-based (see job hazard analysis) |

|  |
| --- |
| Job purpose |
| The post holder will undertake research in accordance with the specified research project(s) under the supervision of the award holder and will develop a personal research funding application(s) to support the post holder beyond the term of this one year opportunity. The post will also involve management and engagement activities as appropriate for the stage of the successful candidate. |

| Key accountabilities/primary responsibilities | % Time |
| --- | --- |
|  | To develop and submit an application for a personal research funding and as part of this undertake a personal training programme. | 60 % |
|  | Regularly disseminate findings by taking the lead in preparing publication materials for referred journals, presenting results at conferences, or exhibiting work at other appropriate events. | 5 % |
|  | Collaborate/work on original research tasks with colleagues in other institutions. | 10 % |
|  | Carry out administrative tasks associated with specified research funding, for example risk assessment of research activities, organisation of project meetings and documentation. Implementation of procedures required to ensure accurate and timely formal reporting and financial control. | 10 % |
|  | Carry out occasional undergraduate supervision, or lecturing duties within own area of expertise, under the direct guidance of a member of departmental academic staff. | 10 % |
|  | Any other duties as allocated by the line manager following consultation with the post holder. | 5 % |

| Internal and external relationships |
| --- |
| Direct responsibility to Professor Geraldine Leydon. Internal: Working with academic GP, sociology, statistical, psychology, health economics, and administrative colleagues. External: Working with general practices, patients, patient representatives, other social scientists/conversation analysts and study advisory group members in other universities, as appropriate. |

| Special Requirements |
| --- |
| To be available to participate in fieldwork as required by a specified research project. To attend national and international conferences for the purpose of disseminating research results.To prioritise soliciting additional funding to support the role beyond the contract end.*Applications for Research Fellow positions will be considered from candidates who are working towards or nearing completion of a relevant PhD qualification. The title of Research Fellow will be applied upon successful completion of the PhD. Prior to the qualification being awarded the title of* ***Senior Research Assistant*** *will be given.* |

**PERSON SPECIFICATION**

|  |  |  |  |
| --- | --- | --- | --- |
| Criteria | Essential | Desirable | How to be assessed |
| Qualifications, knowledge and experience | An interest in pursuing primary care research in the UKAn excellent academic track record in relevant subject. PhD or equivalent professional qualifications and experience in discourse analysis/conversation analysis/discursive psychology/sociologyDetailed understanding and knowledge of conversation analysis/and its application to health care encounters Knowledge of research design and execution using conversation analysis | Teaching qualitative methods at undergraduate level and contributing to teaching at postgraduate levelExperience of writing research proposals/soliciting research funding | Application form/interviewApplication formApplication form |
| Planning and organising | Able to organise own research activities to deadline and quality standards | Experience contributing to organising conferences/academic colloquia/symposia | Application form/interview |
| Problem solving and initiative | Able to develop understanding of complex problems and apply in-depth knowledge to address them |  | Application form/interview |
| Management and teamwork | Work effectively in a team, understanding the strengths and weaknesses of others to help teamwork development | Able to/experience of supervising work of junior research staff, delegating effectivelyAble to contribute to Academic Unit management and administrative processes | Application form/interview |
| Communicating and influencing | Communicate new and complex information effectively, both verbally and in writing, engaging the interest and enthusiasm of the target audienceAble to present research results at group meetings and conferencesAble to write up research results for publication in leading peer-viewed journals | Experience of working proactively with colleagues in other work areas/institutions, contributing specialist knowledge to achieve outcomes | Application form/interview |
| Other skills and behaviours | Computer literature, including Microsoft office packagesCompetence with relevant data analysis software, for example Audacity software for the analysis of interactionAble to travel to other parts of the University or NHS primary care settings to develop research ideas, some of which may not easily accessible by public transport. Understanding of relevant Health & Safety issues e.g. collecting and analysing naturally occurring health care encounters Positive attitude to colleagues and students |  | Application form/interviewApplication  |
| Special requirements | Able to attend national and international conferences to present research resultsAble to prioritise grant writing for further personal (and other) research funding in the field of Primary Care and Population Sciences, Southampton University. |  | Application form/interview |

**JOB HAZARD ANALYSIS**

**Is this an office-based post?**

|  |  |
| --- | --- |
| [x]  Yes | If this post is an office-based job with routine office hazards (eg: use of VDU), no further information needs to be supplied. Do not complete the section below. |
| [x]  No | If this post is not office-based or has some hazards other than routine office (eg: more than use of VDU) please complete the analysis below.Hiring managers are asked to complete this section as accurately as possible to ensure the safety of the post-holder. |

## - HR will send a full PEHQ to all applicants for this position. Please note, if full health clearance is required for a role, this will apply to all individuals, including existing members of staff.

|  |  |  |  |
| --- | --- | --- | --- |
| **ENVIRONMENTAL EXPOSURES** | **Occasionally** (<30% of time) | **Frequently**(30-60% of time) | **Constantly**(> 60% of time) |
| Outside work  | 10% |  |  |
| Extremes of temperature (eg: fridge/ furnace) | 0% |  |  |
| ## Potential for exposure to body fluids | 0% |  |  |
| ## Noise (greater than 80 dba - 8 hrs twa) | 0% |  |  |
| ## Exposure to hazardous substances (eg: solvents, liquids, dust, fumes, biohazards). Specify below: | 0% |  |  |
| Frequent hand washing | 0% |  |  |
| Ionising radiation  | 0% |  |  |
| **EQUIPMENT/TOOLS/MACHINES USED** |
| ## Food handling  | 0% |  |  |
| ## Driving university vehicles(eg: car/van/LGV/PCV)  | 0% |  |  |
| ## Use of latex gloves (prohibited unless specific clinical necessity) | 0% |  |  |
| ## Vibrating tools (eg: strimmers, hammer drill, lawnmowers)  | 0% |  |  |
| **PHYSICAL ABILITIES** |
| Load manual handling | 0% |  |  |
| Repetitive crouching/kneeling/stooping | 0% |  |  |
| Repetitive pulling/pushing | 0% |  |  |
| Repetitive lifting | 0% |  |  |
| Standing for prolonged periods | 0% |  |  |
| Repetitive climbing (ie: steps, stools, ladders, stairs) | 0% |  |  |
| Fine motor grips (eg: pipetting) | 0% |  |  |
| Gross motor grips | 0% |  |  |
| Repetitive reaching below shoulder height | 0% |  |  |
| Repetitive reaching at shoulder height | 0% |  |  |
| Repetitive reaching above shoulder height | 0% |  |  |
| **PSYCHOSOCIAL ISSUES** |
| Face to face contact with public | 35% |  |  |
| Lone working | 30% |  |  |
| ## Shift work/night work/on call duties  | 0% |  |  |

**Research Fellow in communication research in primary care**

**Further Particulars**

**Post-doctoral applicants**

At post-doctoral level we expect applicants to have a track record in conducting research of relevance to primary care and in generating important research questions affecting primary care. We wish to attract applicants who have already started to lead health related research (as a co- or principal investigator) leading to high quality peer-reviewed publications.

Candidates must have: completed a PhD in an area of relevance that used conversation analysis; be able to demonstrate the capacity to generate research questions and designs appropriate for primary care; have seen research projects through to successful completion; have a publication record; and shown their capacity to attract research funding. The applicant will need to propose/develop a research project application related to one of the research themes of the Primary Care group and that is relevant to the overall focus on ‘health care communication and conversation analysis’. This will be submitted and used to fund the successful candidate beyond the one year of this SPCR Fellowship opportunity. The longer-term goal will be to develop a personal fellowship application (e.g. NIRH /ESRC).

Candidates will be expected to develop and agree a personalised training plan to enable them to progress to fully independent research leaders. There is no restriction on the number of years since completion of the PhD.

**Doctoral applicants**

Applications for this position will also be considered from candidates who are working towards a relevant PhD qualification or have just submitted their PhD. The title of Research Fellow will be applied upon successful completion of the PhD. Prior to the qualification being awarded the title of Senior Research Assistant will be given.

At doctoral level we expect applicants to have: an interest in pursuing primary care research in the UK; an excellent academic track record with a 2.1 or 1st class degree at Bachelor’s level; and the ability and motivation to pursue an independent research project. Ideally applicants should have: a relevant Master’s degree with a merit or distinction; a track record of publication of either papers in peer reviewed journals, reports, a dissertation, or other written material; and a track record of academic oral presentations such as seminars or conference presentations.

The applicant will work to propose/develop a research project application related to one of the research themes of the Primary Care group and that is relevant to the overall focus on ‘health care communication and conversation analysis’. This will be submitted and used to fund the successful candidate beyond the one year of this SPCR Fellowship opportunity. The longer-term goal will be to develop a personal fellowship application (e.g. NIRH /ESRC).

**Primary Care and Population Sciences Academic Unit**

PCPS is an academic group of over 70 staff with an increasingly unified management and research strategy led by Michael Moore, Professor of Primary Care Research. Our constituent Groups are:-

• The Primary Care Research Group

• The Public Health Group

• The Medical Statistics Group

• The Health Economics Assessment Team (HEAT)

• The Qualitative Research Methods Group (QualMED)

• The NIHR RDS (Research Design Service) South Central.

Since 2008 the Primary Care Group (research-led by Professor Paul Little) has been a member of the NIHR School for Primary Care Research (SPCR). The Unit has attracted a wide range of funding, notably from NIHR (Programme Grants, Health Services Research, EME, Public Health Research, and Macmillan Trust. Several NIHR HTA trials and several programme grants are already underway, as well as robust stand-alone qualitative studies.

Researchers in population health from Primary Care and Population Sciences are working on a number of multi-disciplinary projects with other Faculties and Departments right across the University of Southampton. The University Strategic Research group (USRG) for Global Health has four Co-chairs from different departments, including Professor Paul Roderick in public health. More details of this USRG and the research projects can be found on the website.

Primary Care and Population Sciences has a thriving group of postdoctoral staff (clinical and non-clinical) and 20 postgraduate students. There is methodological expertise in qualitative methods, statistics, epidemiology, health psychology and health economics in the Unit.

We are a very diverse and vibrant Academic Unit with a broad range of research disciplines. To find out more, please visit our website:-

<http://www.southampton.ac.uk/medicine/academic_units/academic_units/primary_care_population.page>

The successful applicant will be supported by Professor Geraldine Leydon, Postdoctoral scientist Dr Catherine Woods (and other senior academics relevant to the chosen area of study) in developing a personal research and training programme. This will be based in the Primary Care and Population Sciences Academic Unit, but co-supervision or co-mentorship can be provided by academics from other academic units and Universities as appropriate to the research interests of the candidate.

**Key clinical research topics for the PMC group currently include:**

* treatment decisions in the management of acute self-limiting illness (including antibiotic prescribing strategies for common infections)
* asthma and COPD
* mental health (including delineating distress from depression, strategies to reduce antidepressant prescribing, and treating insomnia)
* kidney disease
* liver disease and alcohol use
* skin conditions
* early diagnosis and survivorship in cancer
* communication and the study of naturally occurring interaction across a range of illnesses, and
* the use of complementary and alternative medicines, examining specific effects and non-specific (placebo and contextual) effects.

**The group employs a range of methodologies including:**

* randomised controlled trials to identify clinical benefit, cost-effectiveness and predictors of response;
* cohort studies using routinely collected data (from the Clinical Practice Research Datalink and Hampshire Health Record databases) to identify outcomes in routine practice including uncommon complications;
* case-control studies to identify high risk groups;
* validation studies to assess the diagnostic value of clinical decision rules and near patient tests;
* qualitative studies of patient and practitioner decision-making including organisational factors affecting the implementation of research evidence;
* conversation analysis, and
* observational and questionnaire studies of help-seeking behaviour, treatment decisions, and adherence to treatment.

The group collaborates with a range of non-medical research scientists in multi-disciplinary projects.

Sixteen PhD students are currently being co-supervised by members of the Department which also hosts four post-doctoral fellowships.

**Primary Supervisor: Professor Geraldine Leydon** is a medical sociologist with qualitative research expertise. She has special interests in communication in a range of health care settings, antimicrobial research, cancer care and support, helpline/telephone based health services, and mental health. For her doctoral work supervised by Profs David Silverman and Judith Green she analysed outpatient oncology consultations, and during this period she attended the Advanced Conversation Analytic training programme at University College Los Angeles (UCLA) and later returned as a visiting fellow to work on Macmillan Cancer Support helpline calls and this resulted in training staff how to optimise their calls (SPeAK) with Dr Katie Ekberg. More recently she has used trial methodology to intervene using Conversation Analysis to improve the elicitation of patient concerns in general practice consultations, and analysed GP video recorded consultations to understand how multiple concerns are managed (EPaC Trial; SoCs) and how the internet features in contemporary consultations (HaRI). Currently she is focusing on a collaborative project (OPEN) with conversation analysts Dr Rebecca Barnes (Bristol), Dr Fiona Stevenson (UCL) and Dr Catherine Woods and other social scientists and clinical colleagues to explore prescribing practices in out of hours settings (including home visits, 111 call backs and primary care centres). She has been a recipient of a MRC Health Services Research Training Fellowship and an NIHR Postdoctoral Fellowship. She is content and linguistic editor for the Qualitative Sociology Review and Associate Editor in the topic of communication for BMC Family Practice.

**Research Fellow Catherine Woods:** The candidate will also work closely with Dr Woods. Catherine completed her doctoral research (supervisory team: Dr. Geraldine M. Leydon & Prof. Paul Drew) which was a qualitative examination of how callers to a leading cancer helpline in the UK requested assistance about their various practical, emotional and medical problems; and how call-handlers managed these requests – focussing specifically on the challenging aspects associated with providing healthcare over the telephone. Dr. Woods primarily utilises qualitative methods to understand various aspects of health and illness. She has received specialist training in Conversation Analysis (CA) from the University of York and University of California, Los Angeles (UCLA), and many of her research projects focus on understanding and improving communication for both patients and healthcare practitioners using this methodology. Her recent research projects are centred on developing communication skills training for patients and practitioners to encourage shared understandings about the appropriate use of antibiotics in the treatment and management of common infections.

**Other senior members of primary care:**

**Professor Michael Moore** is a part-time general practitioner in Salisbury. He is active in the local Integrated Clinical Research Network, he was the RCGP National Clinical Champion for Antibiotic Stewardship 2012-15, and is a member of the government advisory board for antimicrobial stewardship (ARHAI) His research interests include minor illness with a focus on antibiotic sparing strategies, depression, obesity and chronic liver disease.

**Professor Paul Little** was a work package leader for the GRACE project (EU network of excellence for respiratory infection research linking basic laboratory science with clinical practice), and Chief Investigator (CI) on the DESCARTE multi-centre cohort study of complications of upper respiratory infections in 14000 patients. He is also leads studies for the development and trial of web based behavioural interventions for obesity and hypertension and for a large multicentre project to develop clinical prediction rules for cancer (the CANDID study).

**Professor Tony Kendrick** has carried out research into mental health problems in primary care for 25 years, the results of which have influenced NICE guidelines and performance indicators in the GP contract QOF for depression and schizophrenia. He is Chair of the NIHR GP Academic In-Practice Fellowships Panel and a member of the NICE QOF Clinical Indicators Advisory Committee (since 2009). He chaired the NICE guideline development group on identification and care pathways for common mental health disorders and is a member of the NICE depression guideline development group. His current research includes patient-reported outcome measures in depression, delineating distress from depression (with **Senior Research Fellow Adam Geraghty**), and strategies to reduce antidepressant prescribing.

**Professor Mike Thomas**’s research interests centre on respiratory disease management in community settings. He has a particular interest in dysfunctional breathing and the effectiveness of breathing exercises in the treatment of asthma. He is an associate editor of the journals Thorax and the Primary Care Respiratory Journal, Chief Medical Officer of Asthma UK, the Research Chairman of the International Primary Care Respiratory Group, and an expert advisor on several NICE evaluations and to the MHRA.

**Associate Professor Hazel Everitt** is a former NIHR clinical lecturer (CL). She has research interests in the management of acute infections, irritable bowel (leading the HTA funded ACTIB trial with King’s), and insomnia, with Little, Moore, and Baldwin in psychiatry. She is co-supervising three PhD students and is co-author of the Oxford Handbook of General Practice.

**Associate Professor Miriam Santer** is also a former NIHR CL. She is particularly interested in self-management support for acute and chronic conditions, including childhood eczema, gout, and acute respiratory illnesses. She is evaluating the RfPB funded SPaCE (Supporting Parents and Carers of children with Eczema) web-based intervention with Little and Yardley, and leads the HTA funded BATHE (Bath Additives for the Treatment of cHildhood Eczema) trial with Bristol, Cardiff and Nottingham. She is co-supervising two postgraduate students, is also involved in GRACE, and collaborating with Nottingham on vitiligo research and with Keele, Oxford & Nottingham on gout.

Transferable skills courses are available and we have an active peer support and education group with in excess of 50 members which provides support (REACH: Research Education Advice and Communication in Health). A training programme in general and specialist qualitative / micro-analytical skills will be funded through this SPCR Fellowship Award.

**Teaching and Administrative Duties**

The post holder may be asked to contribute from time to time to the provision of undergraduate education in the Faculty of Medicine. They would be encouraged to attend relevant education training programmes.

**For further information** regarding the appointment, please contact Professor Geraldine Leydon (G.M.Leydon@soton.ac.uk) or Catherine Woods (catherine.woods@soton.ac.uk)