

'Seizing the opportunity to apply- using the CLAHRC NWC Internship to develop a National Institute for Health Research (NIHR) Doctoral Research Fellowship application'

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The Internship

Aim: to develop a successful NIHR fellowship application for submission in 2017. The Doctoral Research Fellowships (DRFs) are generous and prestigious personal awards that provide funding to undertake a PhD and personal development programme allowing individuals to advance towards an independent research career. This internship differs from others in that a research project is not completed as part of the programme. To apply for an NIHR fellowship three key elements have to be developed and this internship has allowed time and academic support to address:

The Project

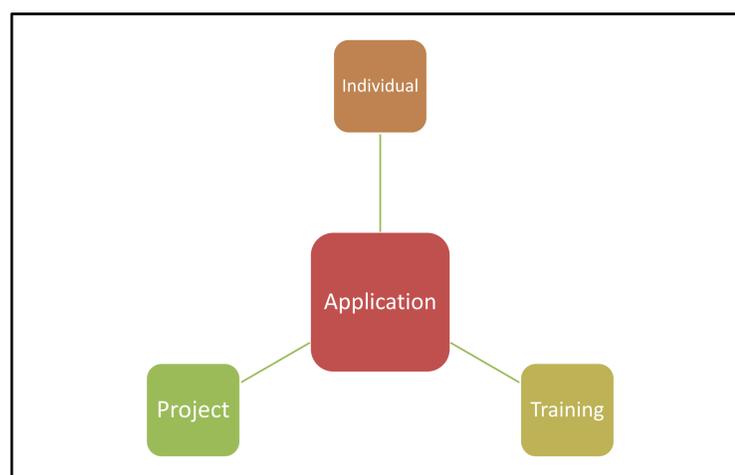
- Design a meaningful research project ensuring that patient and public are involved in all aspects of the process.

The Individual

- Demonstrate that the individual although early in their research career shows outstanding potential as an independent researcher of the future.

The Training

- Devise a customised research training programme reflecting the individual's talents and training needs.



Patient REported Factors Impacting on eXperience and outcomes after stroke (PREFIX)

The research project will be focused around factors that impact on patients' experiences of discharge from hospital following an acute stroke.

Discharge priorities in healthcare are based around preventing delays, reducing costs and risk awareness and could make presumptions about patient's needs and requirements without fully taking into account contextual factors and patient priorities.

Understanding of need/ priorities at this crucial stage of the patient's journey (immediately before, during and after discharge) could impact on multiple outcomes (such as readmission rates, adherence with secondary prevention, quality of life and mood). Lack of understanding or not addressing these needs/ priorities has the potential to widen health inequalities within this population.

Disparity between healthcare professional and patient/carer priorities could further impact on experience and outcomes.

Why it matters

There is currently unacceptable variation in local performance of discharging adults (House of Commons 2016).

Stroke survivors often have lasting disability and/or other complex needs that impact their engagement with and experience of care.

It is recognised that the care planning should be shaped by the wider contexts of people's lives and social relations (Francis Report 2013). However we do not currently understand the impact of these factors on experience and outcomes after stroke.

This project will aim to address this by:

- Identifying contextual and patient factors that impact on experience and outcomes.
- Distinguish specific characteristics that have the potential to increase inequalities in experience and/or outcome.
- Utilise findings to be able to improve patients' experience and outcomes and reduce disparity in discharge planning after stroke.

References

- Great British Parliament House of Commons Committee of Public Accounts. Discharging older people from acute hospitals: twelfth report of session 2016-17. London: Stationery Office. 2016.
- Francis R. Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry. Volume 1. London: The Stationery Office, 2013

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