Research continues at pace

As this challenging year draws to a close, the resilience and talent of HSRU colleagues and collaborators remains inspiring to me. In this newsletter, we illustrate that whilst COVID-19 is impacting all our lives, health services research continues at pace. Yes, some of the work is an immediate research response to the pandemic, but there are many enduring challenges that our health services will continue to face.

Craig Ramsay, Director

INCLUDE Ethnicity Framework tool completed

Completing the INCLUDE Ethnicity Framework was part of a group of projects which formed part of a rolling call for research proposals on COVID-19, jointly funded by UKRI and NIHR in response to the pandemic, and included research on treatments, vaccines and the spread of the virus, as well as specific calls on COVID-19 and ethnicity, and the wider impact of the virus on mental health.

The INCLUDE Ethnicity Framework is a tool that trial designers together with patient and public partners can use to make sure they think about factors that affect the involvement of all ethnic groups, such as disease, culture, the treatment being tested and trial information and procedures. It will also help people interpreting and reporting all trials, including COVID-19 trials, to make judgements about the applicability of trial results to all communities. This is particularly important for ethnic minority groups, which are very often under-represented in, and under-served by, health research.

Professor Shaun Treweek said ‘I am so pleased to see the Framework publicly available. It's been a great collaboration with input from lots of people representing many trial stakeholders, including of course ethnic minority groups. I think it will help to make trials better. It will be better still as we learn from people who use it, and refine it.’

A link to the Framework is now part of the NIHR Standard Application Form guidance.

The INCLUDE Ethnicity Framework can be found here and there is also a BMC blog.
Enhancing recruitment and retention of rural doctors in Scotland: a mixed-methods study begins

A new project, funded by the Scottish Chief Scientist Office, exploring the recruitment and retention of rural doctors in Scotland begins this month at the Health Services Research Unit. This project will be led by Professor Louise Locock, and Professor Jennifer Cleland (now at NTU Singapore). This research will use qualitative interviews to better understand the experiences, motivations and job preferences of generalist doctors in Scotland, particularly with regards to working in rural and remote areas, and in doing so gather information on factors which influence career decision making in relation to Remote & Rural working. The interview findings will be used to develop a Discrete Choice Experiment (DCE) survey. This will provide insight into the value of different factors behind doctors’ decisions on where they choose to work.

Providing healthcare for people in remote and rural areas is a priority for Scotland. This research will deliver insights for policy makers and practitioners in how to best recruit and retain staff in rural and remote areas in Scotland, findings that have the potential for wider impact across the UK, and beyond. Find out more here.

Platform to audit adherence to EAU guideline recommendations

HSRU and the Academic Urology Unit (AUU) are collaborating on two recently funded implementation science projects. Both relate to the implementation of ‘strong’ European Association of Urology (EAU) guideline recommendations. One is a Europe-wide audit of Androgen Deprivation Therapy (ADT) use in men undergoing surgery for localised prostate cancer. Initially this audit will give a clearer picture of the extent of ADT overuse (funded by the EAU Research Foundation) which will inform Jennifer Dunsmore’s PhD project looking at the reasons for ADT overuse and researching deimplementation strategies. The other study is a collaboration with the British Urological Researchers in Surgical Training (BURST) group and is an international audit and feedback trial aiming to increase the use of postoperative chemotherapy in eligible bladder cancer patients (funded by the Rosetrees Trust).

Elisabeth Kirchner

Elisabeth Kirchner joins HSRU as a PhD student. She will be investigating the personal, clinical and social impacts of longer waiting times on different groups of people, to support the most clinically effective and least harmful prioritisation.

Elisabeth grew up in Germany and left after school to study abroad. She studied Psychology and Psychological Research Methods at the University of Stirling before pursuing a PhD at the University of Aberdeen. Elisabeth’s aim is to become a researcher and lecturer one day. Find out more here.

Andrew Maclaren

Andrew joins HSRU from the School of Geosciences. Andrew’s research background is in Geography and his interest is in culture and everyday life, in order to engage with social, economic and political changes affecting everyday spaces and places. This has led to him developing extensive research, and teaching, experience in qualitative research methods as well as contemporary approaches to investigating people’s everyday experiences of spaces and places, particularly in rural Scotland. Andrew will be working with Professor Louise Locock on the Enhancing recruitment and retention of rural doctors in Scotland project. Find out more here.
The OPEN trial

Urethral stricture (a narrowing of the urethra) affects 1% of men. In the National Health System, initial treatment provided is urethrotomy. However, approximately, half of the strictures recur within four years. Options for further treatment are repeat a urethrotomy or open urethroplasty, but there is uncertainty about which treatment performs better. Urethrotomy is a minimally invasive technique whereby the narrowed area is progressively widened by cutting the scar tissue with a steel blade mounted on a urethroscope. Urethroplasty is a more invasive surgery to reconstruct the narrowed area.

The OPEN study was a multi-centre patient randomised trial conducted in the UK National Health System that aimed to address what is the best treatment for men with recurrent bulbar urethral stricture. The study randomised 222 men between 2013 and 2015 to receive either urethrotomy or urethroplasty. At 24 months post-randomisation, both treatments resulted in similar and better symptom scores. However, the urethroplasty group had fewer reinterventions.

The OPEN study was led by the late Rob Pickard (University of Newcastle) and the design and statistical analysis were led and conducted at the Health Services Research Unit. You can find out more about the trial by reading its publication out now in European Urology: https://www.sciencedirect.com/science/article/pii/S0302283820304309

In-home Tracking of glaucoma: Reliability, Acceptability, and Cost – The I-TRAC Study

Glaucoma is a common chronic eye condition and the second commonest cause of blindness in the UK. Glaucoma impairs mainly the peripheral vision (visual field). Patients need these check-ups for the rest of their lives. Hospital eye services are very busy, accounting for 10% of all NHS outpatient visits with over 1 million visits per year are for glaucoma patients.

Recent advances in technology mean it is now possible for glaucoma patients to monitor their disease at home. Home monitoring could mean patients requiring fewer hospital check-ups, whilst increasing convenience, potentially reducing costs and increase capacity for the NHS. However, we do not know if home monitoring is acceptable to people with glaucoma, or if home monitoring in the general glaucoma population is feasible within the NHS. I-TRAC will help answer this question through a mixed-methods feasibility project investigating the practicalities of home monitoring and the perspectives of glaucoma patients, Ophthalmologists, other NHS staff, and research teams running eye monitoring trials. The project is funded by the NIHR HTA Programme and is led by Dr Katie Gillies.

Find out more here.

Contact k.gillies@abdn.ac.uk  @GilliesKatie
**NEWS**

**Vikki Entwistle**

Vikki Entwistle has returned to the Unit as Professor of Health Services and Philosophy. She has academic homes within both the Health Services Research Unit (Institute of Applied Health Sciences) and Philosophy (School of Divinity, History and Philosophy).

As her joint appointment within the University of Aberdeen suggests, Vikki’s research and teaching are highly interdisciplinary. Broadly speaking, she uses philosophy and social research to understand and address problems relating to healthcare, public health and social justice.

We are delighted to welcome Vikki back to HSRU from the Centre for Biomedical Ethics at the National University of Singapore where she continues to hold a visiting appointment.

Find out more [here](#).

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**New short online course**

We are launching a free short online course ‘Patient and Public involvement (PPI) in Health Services Research’. The course is aimed at professionals working in or managing health research projects who would like to improve their understanding of patient and public involvement. Online learning will be supplemented with a practical and interactive session allowing opportunities to discuss challenges and experiences with leading experts in the field and fellow course participants.

More here: [https://www.abdn.ac.uk/hsru/news/14498/](https://www.abdn.ac.uk/hsru/news/14498/)

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**Recent publications**


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