

Health and social care

Faculty of Health and Wellbeing

Research is co-ordinated through the Health and Wellbeing Research Institute and delivered through five research centres.

- Centre for Health and Social Care (CHSCR)
- Centre for Sport and Exercise Science (CSES)
- Centre for Sport Engineering Research (CSER)
- Sport Industry Research Centre (SIRC)
- Biomolecular Sciences Research Centre (BMRC)

How to apply

For Health applicants please email a <u>postgraduate application form</u> to <u>rea.smith@shu.ac.uk</u> by 12 noon on Friday 29 January 2016.

Where English is not your first language, you must show evidence of English language ability to the following minimum level of proficiency: an overall IELTS score of 7.0 or above, with at least 6.5 in each component or an <u>accepted equivalent</u>. Please note that your test score must be current, i.e. within the last two years.

For full details on the eligibility criteria, see: www.shu.ac.uk/studentships/eligibility

Selection process

Interviews will take place in the week commencing 22 February 2016.

Applicants are required to give a short 10-15 minute presentation followed by an interview. Interview panel members will include the postgraduate research tutor and a prospective director of studies. Where travel to Sheffield is not possible, interviews may be conducted by Skype or conference call.

Research Areas

Project H1:Investigating patient experiences of breast (or trunk) oedema following breast cancer treatment: An evaluation of the impact on psychological wellbeing, quality of life and ability to cope

Breast cancer is the most common malignancy in women with 1.67 million cases diagnosed worldwide in 2012. More women are surviving breast cancer hence are living with the side effects of treatment. Breast and axillary surgery has the propensity to cause breast oedema, with incidence estimated to range from 9.6%-57%. Breast oedema rarely features in radiotherapy patient information of any format. Hence patients may be unprepared for the development of this side effect. Despite substantial research into arm lymphoedema we currently do not know the impact breast (or trunk) oedema has on patient mental wellbeing and ability to cope. The aim of the project is to examine patient experiences of breast oedema through qualitative inquiry, to better understand the impact on patient physical functioning, mental wellbeing and ability to cope. Outcomes of the research would enable the development of appropriate care strategies, and suitable training resources to improve care giver knowledge and understanding of the condition.

For enquires contact: <u>h.probst@shu.ac.uk</u>

Project H2: Keeping people out of hospital:- analysis of the (wider / personal) healthcare drivers of A&E admissions and how to reduce them

This is a data driven project to apply sophisticated analysis methods to interrogate local health data. Its focus is on unplanned admissions to hospital, mainly through Accident & Emergency. Previous work in the field has identified this as being an important potential source of savings for the NHS. A patient with an unplanned admission is likely to be more ill, need more procedures and have a longer stay. Although some admissions are due to accidents, other research concludes that previously unrecognised or poorly managed health problems are key to high rates of unplanned entry to hospital. Although several UK research groups link healthcare data from multiple sources, their analytics are conventional public health methods. This project uses advanced statistical and data mining techniques. We expect to provide new insights on groups of patients which are more likely to have unplanned admissions and which analytical techniques work best in this context.

For enquires contact: s.kelly@shu.ac.uk

Project H3: Supporting patient health behaviour change by primary care teams: A patient centred approach to clinical encounters

Summary: The PhD research will examine the efficacy of developing the capabilities of both patients and professionals in promoting health behaviour change to manage long-term health conditions (LTCs). There is an increasing demand on primary care teams to deliver lifestyle behaviour change interventions and advice (e.g. physical activity, diet change, alcohol and smoking cessation) yet there is scant support and training available to ensure this is delivered in an effective manner. This PhD research will develop and implement an approach in primary care tailored to empowering and enabling patients to increase their autonomy and independence toward lifestyle adaptations.

For enquires contact: j.breckon@shu.ac.uk

Queries

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