

Engagement by Design

**PenCLAHRC - NIHR
Collaboration for Leadership in
Applied Health Research and
Care for the South West
Peninsula**

Report of the High Level Group
on Clinical Effectiveness

Chaired by Professor Sir John Tooke

A report to Sir Liam Donaldson
Chief Medical Officer

Problem:

There is substantial
variation in clinical
practice

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Summary

Variation results from:

- Lack of robust evidence for many key clinical and policy questions
- Patchy implementation of existing research evidence (and insufficient evidence about how best to drive implementation)

Comparison: Corticosteroids versus placebo or no treatment

Outcome: RDS

Study	Expt n/N	Ctrl n/N	Peto OR (95%CI Fixed)	Weight %	Peto OR (95%CI Fixed)
RDS (all babies)					
AUCKLAND 1972	49 / 532	84 / 538		23.1	0.56 [0.39,0.80]
BLOCK 1977	5 / 69	12 / 61		2.9	0.34 [0.12,0.94]
MORRISON 1978	6 / 67	14 / 59		3.3	0.33 [0.13,0.87]
GAMSU 1989	7 / 131	16 / 137		4.2	0.45 [0.19,1.05]
PAPAGEORGIU 1979	7 / 71	23 / 75		4.7	0.28 [0.13,0.63]
TAUESCH 1979	7 / 56	14 / 71		3.4	0.60 [0.23,1.52]
AMSTERDAM 1980	11 / 64	17 / 58		4.3	0.51 [0.22,1.18]
DORAN 1980	4 / 81	10 / 63		2.5	0.29 [0.10,0.88]
TERAMO 1980	3 / 38	3 / 42		1.1	1.11 [0.21,5.83]
US STEROID TRIAL	42 / 371	59 / 372		17.3	0.68 [0.45,1.03]
SCHMIDT 1984	17 / 49	10 / 31		3.4	1.11 [0.43,2.87]
MORALES 1986	30 / 121	63 / 124		11.5	0.33 [0.20,0.56]
PARSONS 1988	3 / 23	3 / 22		1.1	0.95 [0.17,5.21]
CARARACH 1990	1 / 12	0 / 6		0.2	4.48 [0.07,286.51]
CARLAN 1991	1 / 11	4 / 13		0.8	0.28 [0.04,1.97]
GARITE 1992	21 / 40	28 / 42		4.0	0.56 [0.23,1.34]
KARI 1994	35 / 95	45 / 94		9.2	0.64 [0.36,1.13]
SILVER 1995	43 / 54	34 / 42		3.0	0.92 [0.34,2.52]
Subtotal (95%CI)	292 / 1885	439 / 1850		100.0	0.53 [0.44,0.63]

Chi-square 16.53 (df=17) Z=7.18

RDS in babies born <28 weeks

xPAPAGEORGIU 1979	2 / 2	7 / 7		0.0	Not Estimable
AMSTERDAM 1980	2 / 4	6 / 8		31.4	0.36 [0.03,4.08]
DORAN 1980	3 / 11	5 / 16		68.6	0.83 [0.16,4.33]
Subtotal (95%CI)	7 / 17	18 / 31		100.0	0.64 [0.16,2.50]

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NIHR Collaborations for Leadership in Applied Health Research and Care

- Collaborative partnerships between university and surrounding NHS organisations, focused on improving patient outcomes through conduct and application of applied health research.
- Undertake high-quality applied health research focused on the needs of patients and support the translation of research evidence into practice in the NHS

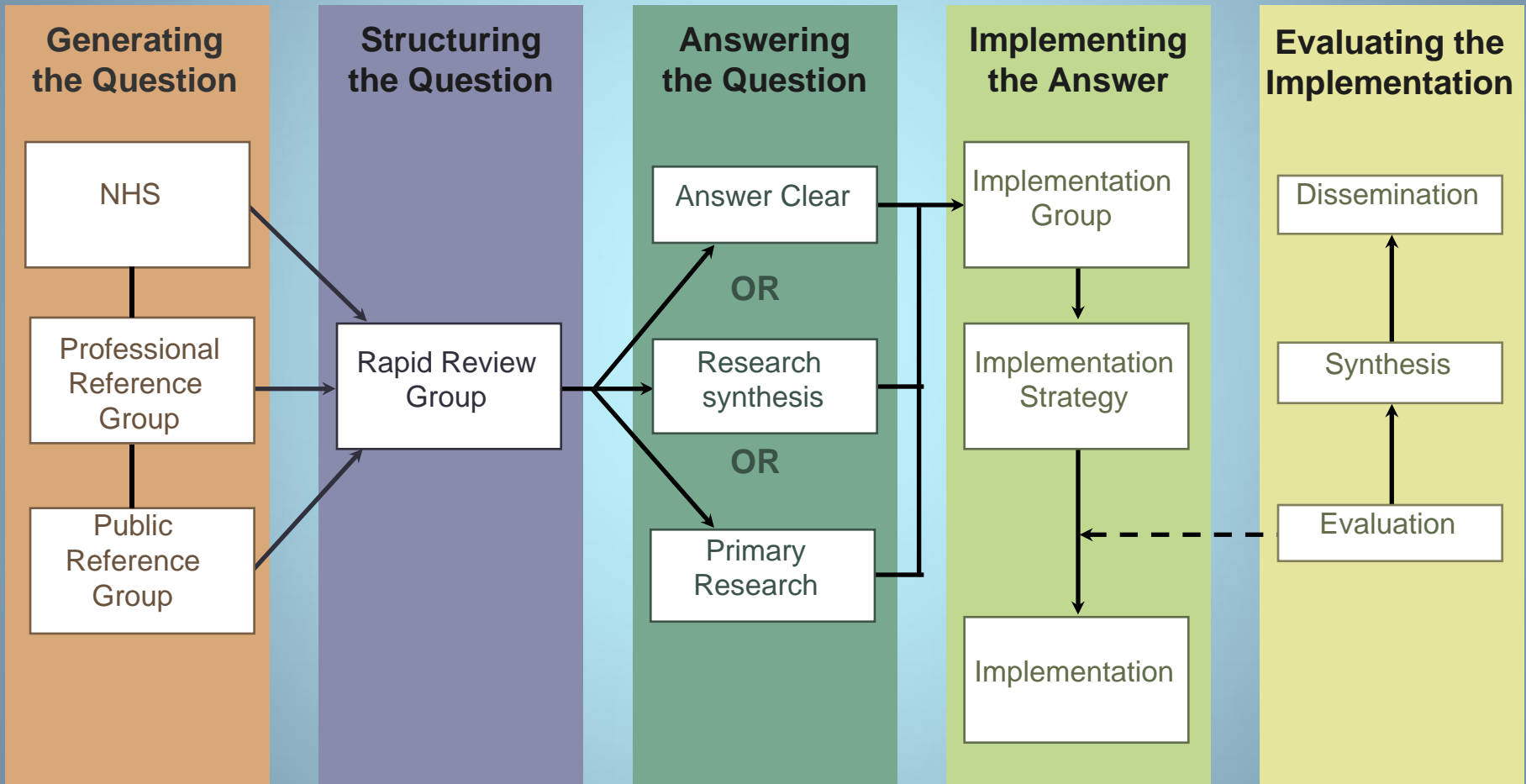
Southwest Peninsula Clinical Research Collaboration

Established 2005

- 14 NHS organisations
- Peninsula College of Medicine and Dentistry
- Parent Universities

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Prioritisation



Use of resources

- **“Infrastructure”**
 - **to produce grant applications which:**
 - **Are methodologically excellent**
 - **Answer questions of real importance to the NHS**
 - **Have necessary preliminary work completed**
 - **to underpin implementation and conduct of research**
 - **Develop local implementation science capacity**
 - **Develop local capacity to utilise research evidence in decision making (and generate and conduct high quality research)**

Use of resources

- **Fund some “unfundable” evaluations**
 - **Of the overall initiative**
 - **Of specific interventions e.g. Culture Club, Kasebook**
 - **Some aspects of evaluation of implementation strategies**
- **Spread across institutions and geography**

Prioritisation

- Prevalence/incidence and health and resource impact.
- Potential for health gain.
- Tractability of the research question.
- Appropriateness of the local environment to address the question.
- Fit with local strategy

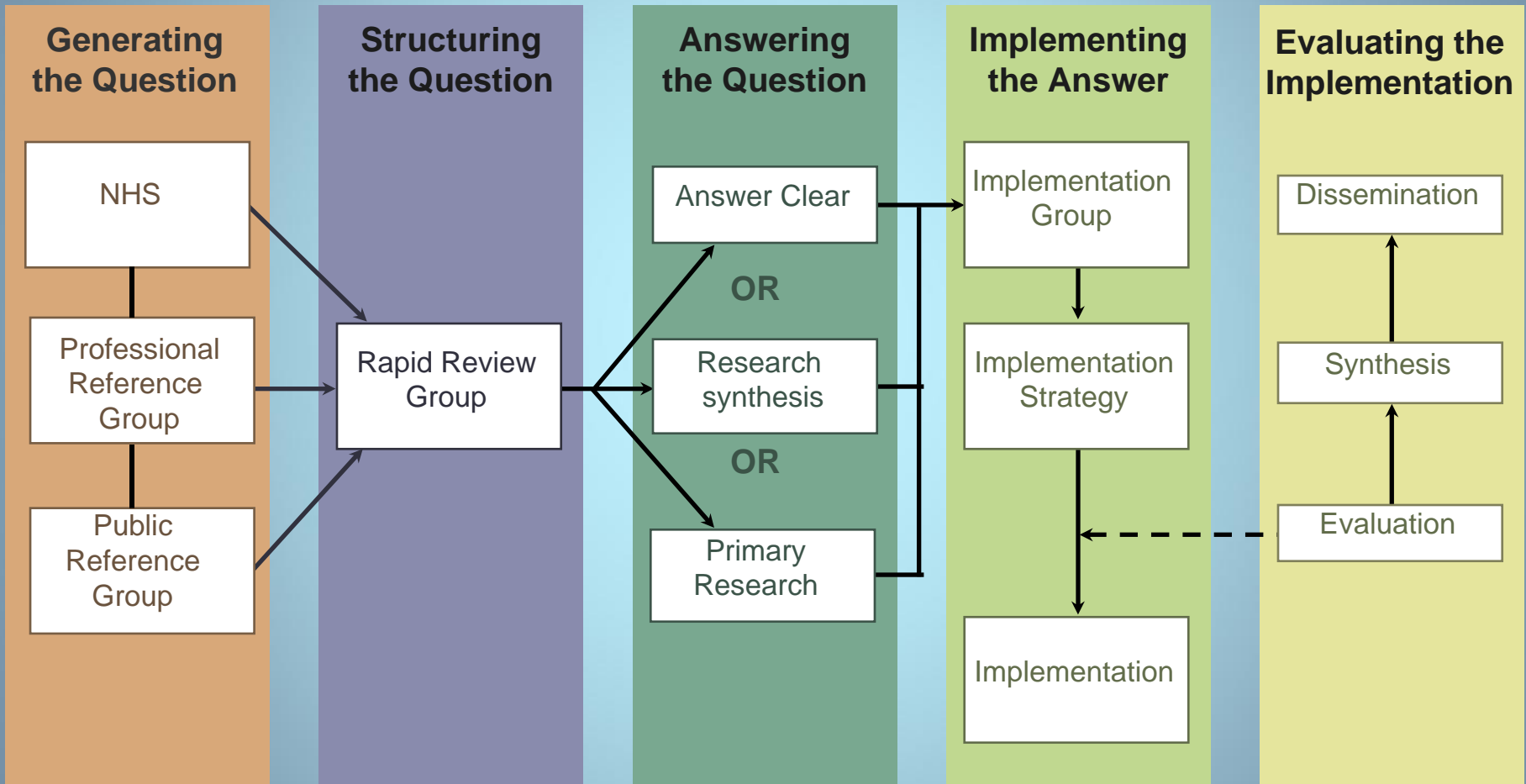
Current activities

First wave projects:

- Depression
- Childhood obesity
- Falls in the elderly
- Venous thrombo-embolism

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Prioritisation



Falls in the elderly

Burden in the Peninsula:

- 2000 hip fractures/year
- 400 deaths
- 20% of survivors require long term residential care
- NHS costs > £50 million/year
- £7-10 million extra residential care costs

Falls in the elderly

Existing evidence:

- NICE guideline 2004
- Multi-factorial interventions for those at risk of falling

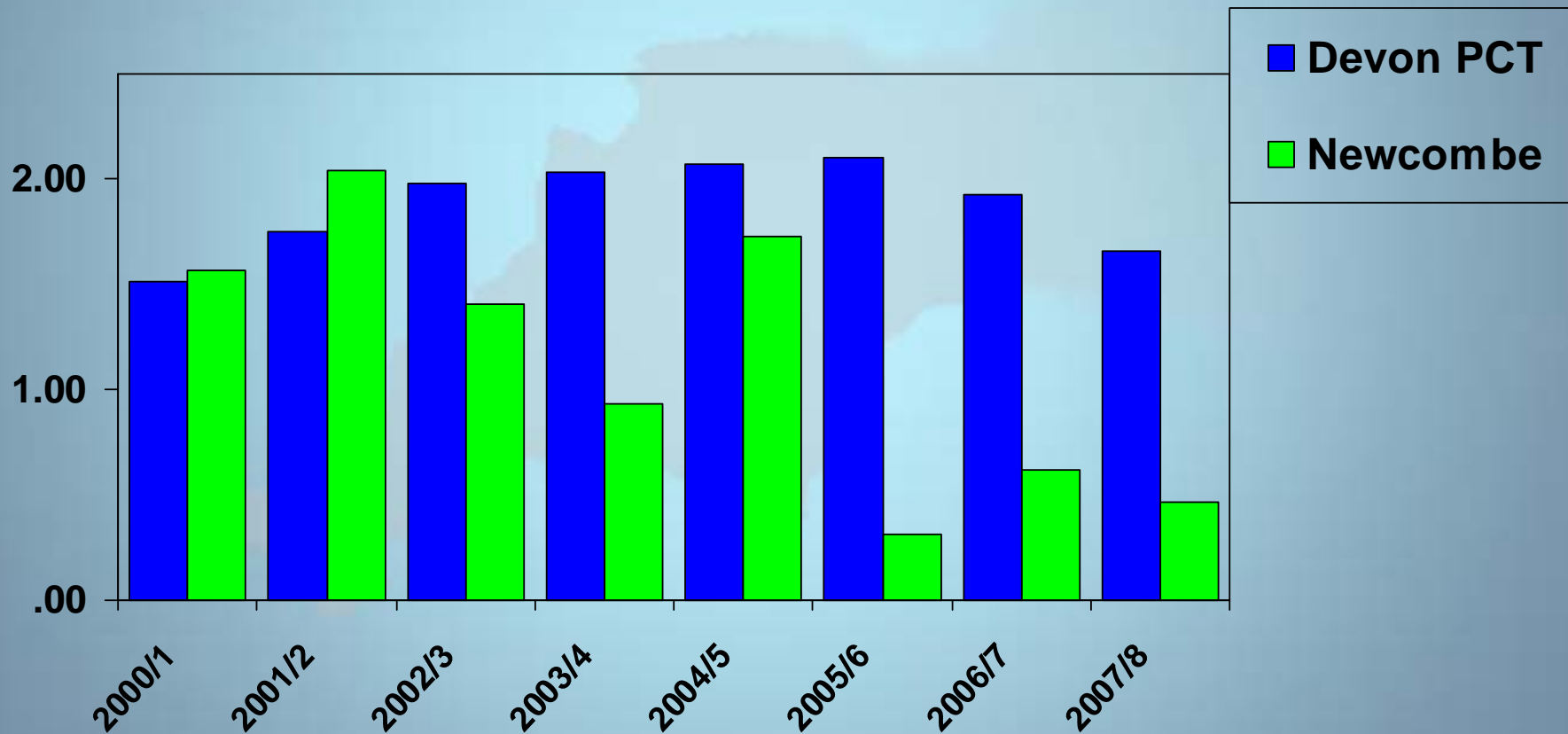
- SIGN guideline
- Include Vitamin D and calcium

Falls in the elderly

Newcombes practice:

- Identification of “house-bound” and those who fall (ambulance and MD meeting)
- Algorithm-based management of risk
- Prophylactic Vitamin D and calcium
- Voluntary sector strength and balance training
- Regular review of residential homes

neck of femur (annual admissions/1000 popn)



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