**Funding Source: Wellcome Trust grant**

**Proposed start date: 1 October 2022**

**Closing date for applications: 8 April 2022**

**Eligibility:** UK applicants only

**Department/School:** Health Sciences

**Supervisors:** Dr Claire Lawson (cl417@leicester.ac.uk), Prof. Sally Singh (sally.singh@uhl-tr.nhs.uk, ss1119@leicester.ac.uk), Dr Rachel Evley (rse7@leicester.ac.uk)

**Project Title:** Symptom, multi-morbidity and frailty burden in heart failure; perceptions, misconceptions and impacts on self-care behaviour – global ethno-economic insights using Real World Data.

**Project Description:**

Leicestershire Healthcare Inequalities Improvement 3-year PhD programme (LHIIP) funded by the Wellcome Trust has an exciting opportunity for a nurse, allied health professional or GP to undertake a full-time, 3-year PhD, to address health inequalities in cardiovascular care. All salary costs and consumables are included alongside funding for training and research costs.

In heart failure (HF), symptom perception by patients and clinicians, is key to optimising self-care management, which is the cornerstone of HF care, but poor symptom recognition and non-adherence to self-care are common. Key challenges include a high number of comorbidities and low health literacy, particularly those who are older, frail, deprived or from ethnically diverse groups. Based in our vibrant multi-ethnic region in Leicestershire, the successful applicant will join a supportive and interdisciplinary cohort to investigate the influence of symptom perception and comorbidities on self-care behaviours among different ethnic and socioeconomic groups, using real world data. Key stakeholder consensus will be to co-design an ethnically sensitive and integrated HF-comorbidity self-care plan. Supervision will be by nurse and AHP research leads and experienced methodologists in an outstanding training environment.

**References:**

1. Lippi, G., Sanchis-Gomar,F. Global epidemiology and future trends of heart failure. AME Medical Journal. 2020;5(0).

2. Lawson C et al. Risk Factors for Heart Failure; 20-Year Population-Based Trends by Sex, Socioeconomic Status, and Ethnicity. Circulation Heart Failure. 2020;13:e006472.

3. Lawson C et al. Trends in 30-day cause specific readmissions following hospitalisation for heart failure in England; impact of sex, socioeconomic status and ethnicity. Lancet Eclinical medicine. 2021; 38 (101008). doi: 10.1016/j.eclinm.2021.101008

4. Castellanos LR et al. Disparities in Cardiac Rehabilitation Among Individuals from Racial and Ethnic Groups and Rural Communities-A Systematic Review. J Racial Ethn Health Disparities. 2019 Feb;6(1):1-11. doi: 10.1007/s40615-018-0478-x. Epub 2018 Mar 13. PMID: 29536369.

5. Vanzella LM et al. Barriers to Cardiac Rehabilitation in Ethnic Minority Groups: A Scoping Review. J Immigr Minor Health. 2021 Aug;23(4):824-839. doi: 10.1007/s10903-021-01147-1. Epub 2021 Jan 25. PMID: 33492575.

 6. McDonagh T et al. 2021 ESC Guidelines for the diagnosis and treatment of acute and chronic heart failure: Developed by the Task Force for the diagnosis and treatment of acute and chronic heart failure of the European Society of Cardiology (ESC) With the special contribution of the Heart Failure Association (HFA) of the ESC, European Heart Journal, Volume 42, Issue 36, 21 September 2021, Pages 3599–3726

7. Riegel, B et al. A Middle-Range Theory of Self-Care of Chronic Illness. *Adv. Nurs. Sci.* **2012**, *35*, 194–204

8. Jaarsma T et al. Comparison of self-care behaviors of heart failure patients in 15 countries worldwide. Patient Educ Couns 2013; 92: 114–120.

9. Lee, K.S et al. Relationship between self-care and comprehensive understanding of heart failure and its signs and symptoms. *Eur. J. Cardiovasc. Nurs.* **2017**, *17*, 496–504.

10. Santos, G.C et al. Symptom perception in heart failure: A scoping review on definition, factors and instruments. *Eur. J. Cardiovasc. Nurs.* **2020**, *19*, 100–117

11. Ling RZQ et al.. Adherence to diet and medication and the associated factors among patient with chronic heart failure in a multi-ethnic society. Heart Lung. 2020 Mar-Apr;49(2):144-150. doi: 10.1016/j.hrtlng.2019.11.003. Epub 2019 Nov 16. PMID: 31744625.

12. Wu JR et al. A prospective, observational study to explore health disparities in patients with heart failure-ethnicity and financial status. Eur J Cardiovasc Nurs. 2017 Jan;16(1):70-78. doi: 10.1177/1474515116641296. Epub 2016 Jul 7. PMID: 27013334.

13. Vanzella LM et al. Barriers to Cardiac Rehabilitation in Ethnic Minority Groups: A Scoping Review. J Immigr Minor Health. 2021 Aug;23(4):824-839. doi: 10.1007/s10903-021-01147-1. Epub 2021 Jan 25. PMID: 33492575.

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14. Greene SJ et al. Comparison of New York Heart Association Class and Patient-Reported Outcomes for Heart Failure With Reduced Ejection Fraction. JAMA Cardiol. 2021 Mar 24:e210372. doi: 10.1001/jamacardio.2021.0372. Epub ahead of print. PMID: 33760037; PMCID: PMC7992023.

**Funding details:**

*Students on this programme will be supported by a generous funding package. This will include:*

* *Postgraduate research fee waiver at standard College of Life Sciences UK rates for three years of the PhD*
* *Wellcome Trust stipend covering your salary for all three years of the PhD*
* *Research grant for training, research and travel costs*

**Entry requirements:**

Applicants are required to hold/or expect to obtain a UK Bachelor Degree 2:1 or better in a relevant subject.

The University of Leicester [English language](https://le.ac.uk/study/research-degrees/entry-reqs/eng-lang-reqs) requirements apply where applicable.

This programme is open to:

* allied health professionals
* nurses
* midwives
* junior doctors
* general practitioners

Fellows recruited to the programme must be practicing healthcare professionals and be registered with a national professional regulatory body (e.g. the General Medical Council, Health and Care Professions Council) in the UK/Republic of Ireland.

Medical graduates must be registered on a UK/Republic of Ireland specialist training programme or must be a registered GP.

All fellows must have completed their undergraduate degree and be registered with the relevant professional body.

**Application advice:**

For full application advice and the link to our online application please go do: <https://le.ac.uk/study/research-degrees/funded-opportunities/leicestershire-healthcare-inequalities-improvement-dtp>

With your application, please include:

* CV
* Personal statement explaining your interest in the project, your experience and why we should consider you
* Degree Certificates and Transcripts of study already completed and if possible transcript to date of study currently being undertaken
* Evidence of English language proficiency if applicable
* In the reference section please enter the contact details of your two academic referees in the boxes provided or upload letters of reference if already available.

In the funding section please specify that you wish to be considered for **Wellcome Trust LHII DTP**

In the proposal section please provide the name of at least one or at most two of the projects you are interested in (please indicate title and name of supervisor).

Upload the Widening Participation form (found on the above link) to the proposal section

**Project / Funding Enquiries to :** **lhiip@leicester.ac.uk**

**Application enquiries to** **pgradmissions@le.ac.uk**

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