

Centre for Health Services Studies

newsreview

New Director – new directions

Professor Stephen Peckham was appointed CHSS Director and Professor of Health Policy in July 2012, joining the centre from the London School of Hygiene and Tropical Medicine (LSHTM).

Stephen's appointment is a joint one; in addition to his role as CHSS Director, he holds the title of Professor of Health Policy in the LSHTM Department of Health Services Research and Policy. He also leads PRUcomm, the Department of Health Policy Research Unit in Commissioning and the Healthcare System and Joint Research Unit based at LSHTM, the University of Manchester and CHSS.

Stephen brings to CHSS more than twenty years of academic research experience and has previously also worked in local government and the voluntary sector. His main areas of research interest lie in health policy analysis, organisational and service delivery, primary care and public health. He has published widely on health and social policy and health services research with books on primary care, health and social policy and public health ethics. Stephen's current research is featured in newsreview including evaluation of new clinical commissioning groups, patient and public involvement in commissioning, exploring the public health role of general practice and evaluating health system change.

Stephen thinks these are exciting times to be leading CHSS. 'I believe we have the skills and expertise to meet the significant challenges facing the research community. I am looking forward to working with the team to build on and develop its existing high quality research, building collaborations with and enabling closer relationships between research, policy and practice'.

Professor of Work and Employment Sarah Vickerstaff, Head of School of Social Policy, Sociology and Social Research was equally



enthusiastic about Stephen's arrival: 'This marks a new chapter in CHSS and considerably strengthens the Centre's and the School's profile in the field of health services research'.

More information about Stephen's research portfolio and publications can be found on the CHSS website: www.kent.ac.uk/chss/about/staff/peckham.html

Also see page 4 for an interview.

The Centre for Health Services Studies is an international centre of excellence for health services research and research training. It draws together a wide range of research and disciplinary experience and undertakes commissioned research.

It has a portfolio of competitively funded health services research projects. CHSS is funded by the Department of Health to support research in the NHS in Kent, Surrey and Sussex.

Details of current CHSS vacancies and studentships can be found at:

www.kent.ac.uk/chss/about/vacancies.html

Facing the future – a new model of integrated care for dementia

Health Secretary Jeremy Hunt recently placed dementia care at the forefront of Government plans for the NHS, calling for improved care and announcing £50m in targeted funding. There are 670,000 people in the UK diagnosed with dementia and numbers are predicted to rise by 150% over the next four decades.

As part of a policy-driven health research portfolio. CHSS has been involved in several dementia studies, and Professor of Health Services Research Simon Coulton is currently leading a Kent team on statistical design for a randomised controlled trial of a new model of collaborative dementia care. The CARE-DEM trial is under way at several primary care sites between London and Kent in the South East, and Newcastle in the North East; testing how effective and cost effective it is compared with usual care. The project involves people with dementia of all ages who live independently in the community and have regular contact with an informal carer.

Simon Coulton commented: 'Evidence shows a real need in the UK for integrated, cost effective services to support people with dementia and their families to help them live independently for as long as they possibly can. CARE-DEM is designed to address this need by offering a coordinated care package led by a single health or social care professional who acts as designated care manager'.

The project, funded by the NIHR Health Technology Assessment programme, will fill a gap in UK evidence for the benefits of this approach; studies of collaborative care outside the UK have shown promising results.

For further information, contact Simon Coulton: s.coulton@kent.ac.uk

Adolescents and alcohol – uncovering the evidence



UK adolescents are among the heaviest drinkers in Europe. A significant gap exists in the evidence base around identifying and intervening with adolescent alcohol use in the UK however.

Professor Simon Coulton is currently involved in two major projects designed to discover more about consumption and associated problems. He said: 'Despite all the media coverage, not much is actually known about underage drinking in the UK, and particularly about the relationship between consumption and alcohol-related problems. Existing research does not take into account the impact of alcohol use at different stages of adolescence and we lack evidence on screening and effective interventions, making it difficult to develop effective strategies to reduce alcohol-related harm'.

The two studies follow on from the SIPS (Screening and Brief Intervention Pilot Study) research programme, which examined adults in health and criminal justice settings for the Department of Health.

SIPS Junior is a major programme funded by the NIHR and led by Kings College London, developing and evaluating early interventions for 10-18 year olds attending hospital emergency departments (EDs). The aim is to address the gap in research by targeting younger adolescent ED attenders. The study, looking at 5000 young people will have important implications and impact on the way adolescent drinkers are managed in ED, and on prevention of alcohol-related harm. Results will inform development of strategies and conclude with a pilot study of interventions to reduce use in this population.

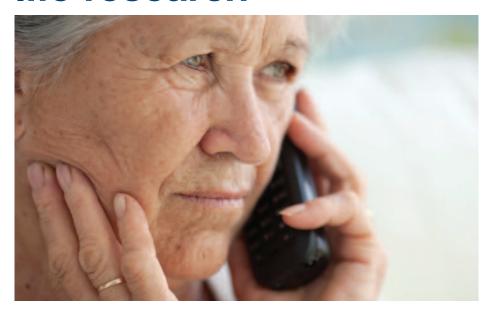
The SIPS Junior High project, funded by the NIHR Public Health Research Programme, aims to test the feasibility of conducting a research project in a high school setting with year 10 pupils (14-15 years old) and their parents, which aims to prevent and reduce hazardous drinking in youth. After completing a questionnaire about their drinking, pupils with positive scores are invited to join the study, a cluster randomisation of seven schools in North East England, involving them in different intensities of intervention.

Simon Coulton commented: 'The study seeks to address the lack of evidence on early identification of alcohol use. At the moment we know that educating children in a school setting has failed to demonstrate effectiveness in addressing the problems of risky drinking. Junior High will evaluate schoolchildren who are identified as drinking alcohol and follow them up at six and twelve months so that changes in behaviour across the study groups can be compared'.

Results of this pilot study will inform a larger scale randomised controlled trial in schools across the UK.

For further information, contact Simon Coulton: s.coulton@kent.ac.uk

Palliative and end of life research



Coordinating end of life care

Patients with incurable illness in the last months of life need access to a range of services, but evidence shows that currently these are poorly coordinated, with both duplication of and gaps in care.

CHSS Research Associate Laura
Holdsworth is working on a study to
evaluate the impact of a new project run by
Pilgrims Hospices in collaboration with local
NHS and social care partners. Project
Invicta aims to improve end of life care for
patients through an Electronic Palliative
Care Coordination System, improved patient
pathways, and a new 'navigation centre',
which patients, carers and local care

providers can call 24 hours a day for advice or assistance.

The study will assess the impact of Project Invicta, and particularly the navigation centre, on patients, carers, professionals and organisations involved, as well as evaluating the health and social care service use costs. The study will utilise a number of research methods, including a telephone survey with carers, interviews, observations, and a review of service use records. The study will also look at the implementation process of coordinated working between local health and social care providers.

For further information contact Laura Holdsworth: I.m.holdworth@kent.ac.uk

Hospice Patient Survey 2012-13

Twenty hospices around the UK are participating in the 2012/13 Hospice Patient Survey – the fifth in a series of surveys undertaken by CHSS in collaboration with Help the Hospices. Questionnaires about aspects of care and care quality have been designed to find out how satisfied patients are with hospice inpatient and day-care services.

CHSS Public Health Specialist Linda Jenkins is collating and analysing the data to produce reports for each hospice, showing how well it meets patients' needs. Linda said: 'The survey covers a broad range of topics from catering to observing spritual needs, from confidence in staff to end of life needs, and is a chance for hospices to identify any areas which might be improved'.

A full report of all the survey data will be available on the CHSS website in the autumn.

For further information contact Linda Jenkins: I.m.jenkins@kent.ac.uk

Helping parents to plan the best palliative care

CHSS Reader in Applied Health Research Jenny Billings, is leading a project to evaluate a palliative care tool developed with Kent and Medway Children and Young People's (KMCYP) Palliative Care Network.

The Advance Care Plan Tool allows families to plan and agree end of life care for children, including any decisions which may be needed about resuscitation.

The tool has been adapted for use locally with the approval of South Central Strategic Health Authority and is currently in use at Ellenorlions Hospice and by nurses within the East Kent community. The evaluation will identify the main strengths of the tool, so these can be built on, and highlight any weaknesses or areas where change may be necessary.

The project uses a mixed methods approach, with a quantitative assessment of how the tool is being completed, alongside qualitative interviews and focus groups with families and professionals. Service users have been actively involved in the design of the project which reports later this year, and a workshop will be held with professionals from the research sites to explore how the results can be taken forward. The aim will be to move towards a standardised and robust planning tool which can be put into practice

For further information contact Jenny Billings: j.r.billings@kent.ac.uk

Pilgrims Hospices

in the coming

years.

CHSS recently welcomed Amy-Jo Lynch,
Research Facilitator for Pilgrims Hospices
in East Kent. She will have a working base
at CHSS, and we look forward to her
developing
research around
palliative and
end of life care



Polyclinics and alternatives – new approaches for coordinated primary care

Many NHS patients, particularly older people, have complex health conditions needing treatment from several sources at once, such as general practice, community nursing, social services, pharmacy, and hospital outpatient departments.

New NHS systems have been introduced in recent years to coordinate the complex care needs of these patients so they can access the support they need to maintain health and continue independent living. New approaches include GP-led health centres, 'case management' (where a community matron or other professional coordinates a patient's care) and 'polyclinics'. Polyclinics are outpatient clinics housing doctors and nurses with some acute services.

CHSS Director Stephen Peckham is part of a research team examining the different approaches organisations use to integrate and coordinate patient care. The three year project, funded by NIHR, is headed by Professor Rod Sheaff (University of Plymouth), Professor Mark Exworthy (Royal Holloway), Dr Richard Byng (Peninsula Medical School) and Professor John Ovretveit (Karolinska Institute, Sweden).

The project will discover which approaches work best to improve service coordination, and discover how NHS professionals and services can overcome difficulties to strengthen coordination and integration. The team are interviewing patients, doctors and health and social care staff, to see what factors help coordinate care. The project will also examine the Swedish coordinated system as a good model for the NHS.

The project will report in summer 2014.

www.netscc.ac.uk/hsdr/projdetails.php? ref=09-1801-1063

Coming back to his roots.....

CHSS Director Stephen Peckham talks to newsreview about his new role, revealing a fascinating Canterbury connection along the way...

Welcome Stephen, what made you decide to come to Kent to lead CHSS?

Several factors, but the biggest incentive was the chance to lead a renowned health research unit in an institution with such a strong social science base. I have good connections with the school (SSPSSR) and its excellent reputation was a key factor. Canterbury is a beautiful city and the campus views, transport links and Kent's 'European University' status were all plus points. And since I arrived, everyone has been so friendly and welcoming, not just in CHSS but across the whole University.

You have a very impressive cv, what are you most proud of in your career so far?

I have strong beliefs, and a commitment to healthcare services delivery, so I'm proud and happy to work in applied health services research where there's real impact. Becoming Director of CHSS was a very proud moment! A high point was success in the 2010 competitive programme to lead the DH Policy research unit PRUComm - (see page 5). I am also very proud of my past involvement with voluntary organisations like Brooke Advisory Centres in the 1990s and CAB, where I was a vice chair. My journey into health research began in the voluntary sector and my background gave me a 'real world' perspective, reinforced by valuable experiences like PCT board membership.

And what do you hope to achieve at CHSS?

A new environment is both challenging and exciting, and I want to build on the reputation and foundations already at the Centre so that CHSS is recognised much more as a centre of excellence that people want to be associated with. If I can achieve that, then I will treat it as a success.

So what do you see as the biggest challenges you face in this role?

Great changes and challenges lie ahead in the NHS and social care. Add in the raft of changes in higher education and it adds up



to a potent cocktail. But I think change is good for research and offers opportunities for researchers. A major difficulty we face is increasingly fierce competition for funds to carry out our research, but our location here in Kent and strong partnerships we have built offer good opportunities and potential.

Could you tell us something about Stephen Peckham before CHSS and what makes you tick?

I've lived most of my life in Southampton, apart from student days and time working away. I am married with three grown up children and am a keen walker and cyclist, so we're looking forward to getting out and exploring Kent. I love music and hope to get back to playing electric guitar once I have found a place to settle and stopped commuting.

And anything else you would like to share with us?

Well I have an interesting connection with Kent. My ancestor John Peckham was a 13th century Archbishop of Canterbury. His tomb is in the Cathedral, so it's nice to be close to an interesting part of family history and the Peckham family had a long tradition of naming the eldest sons John. This wasn't carried on by my parents though!

That's an impressive pedigree Stephen! We wish you every success at CHSS.

PRUComm – Policy Research Unit in Commissioning and the Healthcare System

PRUComm, the Commissioning and **Health Systems Policy** Research Unit. is one of several policy research units funded by the Department of Health and is a collaboration between the London School of **Hygiene and Tropical** Medicine, the Department of Primary Care at the University of Manchester and the

Centre for Health Services Studies at the University of Kent.

Directed by Professor Stephen Peckham at CHSS working with Associate Directors Dr Kath Checkland (University of Manchester) and Dr Pauline Allen (LSHTM), the unit brings together experts in the study of health services, organisations and commissioning to develop high quality research.

PRUComm's research programme examines the functioning of health systems, focusing on organisations such as the NHS Commissioning Board and regulators in systems management, and local commissioners' role in shaping and managing care provision. The Unit's primary aim is to support the Department of Health in developing commissioning for health and wellbeing, sustaining high quality and effectiveness and developing strong links



with policy makers, health regulators, NHS managers and practitioners.

Stephen Peckham commented: 'The unit has completed initial research on the development of clinical commissioning groups and is reviewing the evidence on clinically-led commissioning. We are also examining healthcare contracting in the English NHS, supporting the Department of Health's commissioning policy group'.

'We will have done our job well if we can help all the players in this vast process to get the best out of commissioning for their organisations, but most of all for patients and the public who are the key focus. Hopefully, we can offer tools to make the process easier', Stephen said.

For more information about PRUcomm, www.prucomm.ac.uk/

Making a difference – improving Public Health through General Practice

The coalition Government has committed to increasing the public health role of GPs and other primary care staff, but what contribution do GP practices make to improving public health? Every year 250 million general practice patient consultations take place and interest is growing in the role of general practice in health promotion and disease prevention. Relationships between surgery staff and patients offer opportunities to promote individual and family health, but range and type of activity delivered across practices and localities can be very varied.

In a recently completed project, CHSS Director Stephen Peckham has been reviewing UK evidence on public health in general practice to see how they contribute to health improvement. The research team interviewed practitioners, patient groups and representatives of professional doctors' and nurses' organisations, and synthesised data to discover potential areas for further research priorities. The project report will be available shortly.

www.netscc.ac.uk/hsdr/projdetails.php? ref=09-1001-52

Commissioning for Long Term Conditions – hearing the voice of and engaging users (EVOC)

The government has been encouraging the development of choice for people with Long-Term Conditions (LTC), but there are questions about whether they have a voice and are able to engage in the commissioning process. There is little evidence about what processes and mechanisms patients and the public use to make their voice heard. CHSS Director Stephen Peckham is currently leading a four year NIHR-funded project assessing how commissioners can best support and engage with people with LTC to develop the most responsive local services.

Working with patient groups, voluntary organisations, commissioners and service providers, the team are undertaking case studies of different approaches NHS organisations take in funding services, and how three LTC patient groups (diabetes, rheumatoid arthritis and neurological disorders) engage with health and social care agencies.

Stephen Peckham said 'We are working closely with local NHS staff organisations to explore the key problems in developing services that patients can make choices about, tracking developments over two years to help identify the true impact of patient involvement on service design and patients. We will develop guidance for funders highlighting the most effective approaches to supporting, enabling or regulating involvement across health and social care funders and providers to ensure the best patient outcomes'.

The project, a collaboration between the University of Hertfordshire and the London School of Hygiene and Tropical Medicine, will report its findings later this year.

www.netscc.ac.uk/hsdr/projdetails.php? ref=08-1806-261

Other CHSS research in progress...

IVF and the welfare of the child – CHSS research report findings

A summary report is now available from this project assessing the impact of changes in the legal framework surrounding fertility clinics' assessments of prospective parents. http://blogs.kent.ac.uk/parentingculturest udies/files/2012/06/Summary_Assessing -Child-Welfare-final.pdf

Health Counts Survey: A health & lifestyle survey of adults in Brighton & Hove

Understanding the life stages of adults in East Sussex and what motivates lifestyle choices. Do people feel in control of their health? A survey report is due soon.

Managing uncertainty within NICE technological appraisals: the nature and impact of the 'social features' of decision-making

An ESRC-funded study investigating the process of National Institute for Health and Clinical Excellence (NICE) team decision-making.

Does repeated vestibular stimulation induce lasting recovery from hemispatial neglect?

Funded by the MRC, a collaboration between University of Kent Psychology School, CHSS and East Kent Hospitals to help stroke sufferers with a visualspatial impairment.

Biologising parenting: Neuroscience discourse and English social and public health policy

Two year research project looking at the influence of neuroscience discourse on English social and public health policy around parenting.

Details of all CHSS current and past research is available on our website: www.kent.ac.uk/chss/services/projects/index.html

New contract for RDS South East – good news for region's health and social care researchers

The National Institute for Health Research (NIHR) has renewed its funding to CHSS and the Universities of Surrey and Brighton to manage the NIHR Research Design Service South East (RDS South East) for a further five years. As part of a national network of ten university-based RDS centres in England, the RDS South East provides a free service to individuals seeking funding for applied health and social care research from open national peer reviewed funding programmes.

The new contract will enable health and social care researchers to continue to benefit from specialist support in formulating research proposals. This includes advice on identifying an appropriate funding stream, statistics, health economics, qualitative methodology, and support for patient and public involvement in research.

Professor Dame Sally C Davies, Chief Medical Officer and Chief Scientific Advisor at the Department of Health, said: 'The NIHR is transforming research in the NHS to improve the diagnosis, treatment and prevention of disease. It is very important that researchers applying for NIHR funding access the services provided by the RDS so that they can submit their best applications'.

Co Director of the RDS South East, Bridget Carpenter said: 'The award is great news. Over the last five years, we have built an excellent team who deliver really effective support. Advice is informed, confidential – and completely free. The new contract provides an opportunity to carry on working with academics and clinicians to develop high quality research applications that will ultimately benefit patients and improve health'.

For more information about RDS SE, or to apply for support, visit: www.rds-se.nihr.ac.uk/

Help for schoolchildren with physical disabilities

An innovative project to improve the confidence and skills of teachers and parents of children with physical disabilities through a postural care training programme is well under way.

Previous research has highlighted that lack of knowledge and low confidence levels in providing postural care may hinder therapeutic goals. This can affect the child's posture, function and well-being. The education programme addresses these issues by recruiting parents and teaching staff to a six-week intervention, including training to increase understanding and knowledge of postural care, and one-to-one support from physiotherapists and occupational therapists. The intervention is being rolled out across Kent, Surrey and Sussex. Participants' knowledge of and confidence in providing postural care is assessed both before and after participation in the project, which is funded by the NIHR Research for Patient Benefit Programme.

The project lead is Dr Eve Hutton (EKHUFT and Canterbury Christchurch University).

Co-investigators are CHSS Health Psychology researcher Dr Kate Hamilton-West, CHSS qualitative researcher Annette King, CHSS researcher Sarah Hotham and Dr Terry Pountney (Chailey Heritage Clinical Services).

Annette King said: 'This is a partnership project which draws on clinical and academic expertise and crosses the worlds of health and primary school education. In designing the project we have benefited from an excellent advisory group, comprising parents of children with postural care needs and special needs advisors. So far, we have had very good interest in the training, particularly from schools with children with postural care needs. We hope that if effective the programme can be used more widely in schools and in therapy services'.

For further information contact Sarah Hotham: S.Hotham@kent.ac.uk

An illustrated guide to postural care written by Dr Hutton is available at http://tinyurl.com/7zxukyo

CHSS selected publications 2012/13

2012

Milne A, Brigden C, Palmer A P & Konta E (2012) The intersection of employment and care: evidence from a UK case study. *European Journal of Social Work* ISSN 1369-1457 (Print) 1468-2664 (Online)

Butler C, Holdsworth L M, Coulton S & Gage H (2012) Evaluation of a hospice rapid response community service: a controlled evaluation. *BMC Palliative Care*, 11(1) pp. 11-16. ISSN 1472-684X

Jenkins L M, King A & Brigden C (2012) Evaluation of Stroke Association's Life After Stroke Services in Eastern & Coastal Kent. Centre for Health Services Studies, 102 pp.

Peckham S (2012) Slaying sacred cows: is it time to pull the plug on water fluoridation? *Critical Public Health*, 22 (2) pp. 159-177. ISSN 0958-1596

Bates A (2012) Promoting participation and involvement in appearance research. In: Rumsey N & Harcourt D, eds. *The Oxford Handbook of the Psychology of Appearance*. Oxford Library of Psychology, Oxford University Press, pp. 658-672. ISBN 9780199580521

Coulton S, Newbury-Birch D, Cassidy P, Dale V, Deluca P & Gulvarry E et al. (2012) Screening for alcohol use in criminal justice settings: an exploratory study. *Alcohol and Alcoholism*, 47(4) pp. 423-427. ISSN 0735-0414

Fox C, Crugel M, Maidment I, Auestad B H, Coulton S & Treloar A et al. (2012) Efficacy of Memantine for agitation in Alzheimer's dementia: a randomised double-blind placebo controlled trial. *PLoS One*, 7(5)

Peckham S (2012) Now we need a framework for action. *HealthcarePapers*, 12 (2) pp. 60-64. ISSN 1488-917X

Hotham S, Sharma D & Hamilton-West K E (2012) Restrained eaters preserve top-down attentional control in the presence of food. *Appetite*, 58 (3) pp. 1160-1163. ISSN 0195-6663

Peckham S, Mays N, Hughes D, Sanderson M, Allen P & Prior L et al. (2012) Devolution and Patient Choice: Policy Rhetoric versus Experience in Practice. *Social Policy & Administration*, 46 (2) pp. 1992-218. ISSN 0144-5596

Miller R, Parkhurst J, Peckham S & Singh R (2012) A qualitative study of HIV testing and referral practices of private hospital doctors treating patients with TB in Chennai, India. *The International Journal of Health Planning and Management*, 27 (2) pp. 180-191. ISSN 0749-6753

Gilburt H, Burns T, Copello A, Coulton S, Crawford M & Day E et al. (2012) Assertive community treatment for alcohol dependence (ACTAD): study protocol for a randomised controlled trial. *Trials*, 13 (19)

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Klein A (2012) Policing as a causal factor – a fresh view on riots and social unrest. *Safer Communities*, 11 (1) pp. 17-23. ISSN 1757-8043

Kouimtsidis C, Raynolds M, Coulton S & Drummond C (2012) How does cognitive behaviour therapy work with opoid dependent clients? Results of the UKCBTMM study. *Drugs: Education, Prevention & Policy*, 19 (3) pp. 253-258. ISSN 0968-7637

Lee E, Macvarish J & Sheldon S (2012) Assessing Child Welfare under the Human Fertilisation and Embryology Act: Summary of findings. September 2012. University of Kent, 8pp.

Prior L, Hughes D & Peckham S (2012) The discursive turn in policy analysis and the validation of policy stories. *Journal of Social Policy*, 41 (2) pp. 271-289. ISSN 0047-2794

Peckham S & Hutchinson B (2012)
Developing Primary Care: The contribution of Primary Care Research Networks.

Healthcare Policy, 8 (2) pp. 56-70. ISSN 1715-6572

2013

Leichsenring K, Billings J R & Nies H, eds. (2013) Long Term Care in Europe – Improvements in Policy and Practice. Palgrave Macmillan, Basingstoke, 416 pp. ISBN 978-1137032331

Billings J R (2013) Improving the evidence base. In: Leichsenring K, Billings J R and Nies H, eds. Long term care in Europe – improving policy and practice. Palgrave Macmillan, Basingstoke, pp. 299-324. ISBN 9781137032331

Billings J R, Carretero S, & Kagialaris G et al. (2013) The Role of Information Technology in LTC for Older People. In: Leichsenring K, Billings J R & Nies H, eds. Long-Term Care in Europe: Improving Policy and Practice. Palgrave Macmillan, Basingstoke, pp. 252-277. ISBN 978-1137032331

Holdsworth L M & Ruppe G (2013) Palliative care within long-term systems: beyond end of life? In: Leichsenring K, Billings J R & Nies H, eds. *Long-Term Care in Europe: Improving Policy and Practice*. Palgrave Macmillan, pp. 278-299. ISBN 978-1137032331

Kaner E, Bland M, Cassidy P, Coulton S, Dale V & Deluca P et al. (2013)
Effectiveness of screening and brief alcohol intervention in primary care (SIPS trial): pragmatic cluster randomised controlled trial. *British Medical Journal*, 346. ISSN 0959-8138

Williams K & Hamilton-West K E (2013) University students' help-seeking intentions for the symptoms of meningitis: An application of the Theory of Planned Behaviour. *Health Psychology Update*, 22 pp. 3-8. ISSN 0954-2027 (In press)

Diane Arthurs

As Centre Administrator, Diane is first point of contact for general enquiries. She is responsible for managing research budgets and CHSS finances, as well as staffing matters, facilities management and communications.

Erica Gadsby

Erica joined CHSS in 2012 as a Research Fellow. She has worked in the voluntary sector as a 'Health Initiatives' Development Worker, and for Picker Institute Europe as a health policy/systems researcher.

Sarah Hotham

Sarah is a CHSS Research Associate. Her research focuses on individual differences in eating behaviour.

Julie Rowe

As Research and Innovation Officer for KentHealth, Julie is based in CHSS as the main link between the University of Kent and external collaborators.

John Sherington

John joined CHSS in 2012 as a Statistician and Research Advisor for NIHR RDS SE. John has extensive experience in the pharmaceutical industry and public sector.

www.kent.ac.uk/chss/about/staff/

Farewell...

Peter Aspinall Julian Childs Sylvia Francis Peta Hampshire Maria Kalli Susan Kenyon

And to Addictive Behaviours Group staff:

Andy Ashenhurst Joanne Davey Adrian Bonner Laura Gamble Margherita Grotzkyj-Giorgi Sam Hain

We wish them all the very best for the future.

Staff at CHSS

Diane Arthurs

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Please see the CHSS website for details of current and previous research and publications

www.kent.ac.uk/chss



Centre for Health Services Studies