

Society for Academic Primary Care
South West Regional Conference 2025

31st March - 1st April University of Oxford



SW SAPC Workshops

All workshops will take place simultaneously at 17.45 - 18.30 in the indicated room

Seminar Room 1

Simon de Lusignan (University of Oxford): Developing primary care professionals to be data custodians: Why high-quality primary care data quality and virology sampling are needed to inform health protection in an age of increased patient access to records

Abstract

This interactive session, will be delivered by the Oxford-RCGP Research and Surveillance Centre (RSC) a collaboration of University of Oxford, the Royal College of General Practitioners (RCGP), and UK Health Security Agency (UKHSA). Together, they will explore the critical role of high-quality primary care data and virology sampling in infectious disease control. Emphasising the transformative impact new technology, innovative research and patient-centred health protection strategies on population health.

Data Quality - Coding is caring

Participants will examine how clinical coding and robust data underpin effective health protection, and contemporary risks to data quality. The session will showcase how primary care data combined with sampling has spotted pandemics, demonstrated when infections are endemic and organisms leap from animal to human.

Practical advice will be offered to help GPs and healthcare professionals improve coding practices, enhancing data accuracy and public health responses.

Patient-Centred Health Protection Strategies

Delegates will hear how collaborative research initiatives—supported by the Oxford-RCGP RSC—have strengthened local and global health resilience by informing evidence-based public health policy. Key areas of discussion will include the role monitoring vaccines effectiveness in infectious disease prevention, with a focus on improving patient education to boost vaccine uptake and trust.

Research Insights

The session will highlight research that has driven evidence-based policymaking and innovation from the Oxford-RCGP RSC. We will examine the transformative power of robust data in respiratory disease research, with a focus on projects addressing COVID-19, influenza, and the RSV. This is against a background of progressively increasing patient access to their computerised record.

We will showcase advancements in using technologies for rapid patient recruitment, including; Third Infectious Intestinal Disease Study (IID3), recruited over 6,000 participants in six months, and 9,000 in nine.

Interactive Engagement

We will describe community initiatives and how high quality records can form part of patient-centric health protection. Customised messaging from a trusted healthcare professionals and prompts a times of potentially vaccine preventable illness can have impact.

Attendees will leave with practical tools and strategies to enhance clinical coding and improved understanding of the available tools RSC processes to enhance national efforts in health protection and disease prevention.

SEMINAR ROOM 4

Jo Butterworth (University of Exeter): *Enhancing equality, diversity and inclusivity in the academic primary care workforce*

Abstract

Background: Our academic primary care workforce often have common research or clinical interests, however, the membership of our departments are diverse in many ways. By nurturing inclusivity in our academic primary care departments, we can ensure that people's differences are seen as a benefit, and that their perspectives are shared.

To do this, we need to treat all colleagues equally, and ensure that they have fair access to opportunities, resources and support. This workshop is an invitation to

- share best practice,
- highlight challenges,
- explore solutions
- when seeking to ensure equality, diversity and inclusivity (EDI) in the academic primary care workforce.

Methods: We aim to create a safe space in which to address these objectives during a \sim 90-minute workshop.

We will use visual tools such as an image of a 'thinking head', to be annotated by attendees in real time, allowing attendees to add hypothetical information about what a member of an academic primary care team may 'see', 'hear', 'say', or 'think' in respect of issues relating to EDI, without the need to volunteer specific information about themselves, their departments or their colleagues.

When considering solutions, we will use 'thinking hats' to encourage workshop attendees to provide a broad, collective perspective, by tailoring their individual perspectives to the label on their 'hat'. Labels will include 'positivity' and 'pessimism', as well as 'logic' and 'creativity', for example.

We will finish with a ranking exercise, to prioritise the challenges and solutions that arise from the activities described above.

Output: We will produce a blog, to be hosted on departmental webpages and disseminated via the SAPC newsletter.

Conclusion: Ensuring EDI in the workplace is likely to increase the creativity and productivity of individual teams, and therefore the academic community as a whole, and lead to better problem- solving and decision-making around primary care research priorities.

SEMINAR ROOM 5

Jessica Smith (The Lancet): Meet the editor of The Lancet's new journal, The Lancet Primary Care

The Lancet Primary Care is a new journal dedicated to publishing research and opinion that can guide the effective delivery of primary care in the 21st century and facilitate its fundamental role as the first point of contact between people and the health-care system. Jessica Smith will briefly introduce the aims and scope of the journal and provide an overview of the range of content types that the journal will publish. A question and answer session about the new journal will then follow.

Seminar Room 6

Debra Westlake (University of Oxford): 'Coming here has completely changed my life': Storytelling as a method for exploring the benefits of prescribing cultural activities in the TOUS study (Tailoring cultural offers with and for diverse older users of social prescribing)

Abstract

Social prescribers link people to activities or services in their community to improve wellbeing. Cultural sector activities can form part of a social prescription. They have been shown to offer a range of benefits, including distraction, and enjoyment, self-expression, social connection, cognitive stimulation, physical benefits and the opportunity to learn new skills. However, studies reveal lower engagement in traditional cultural sector activities among older individuals from ethnically minoritized backgrounds, a disparity which may be attributable to a lack of culturally relevant offerings or limited awareness among social prescribers of inclusive options.

The TOUS study is a realist evaluation exploring how to make cultural activities accessible and appealing to older adults from diverse communities. These activities, which may or may not be part of social prescriptions, can be tailored to specific ethnic groups or be universal. This realist evaluation includes Storytelling (Old Fire Station, Oxford), a participatory approach suited for capturing transformative experiences by enabling storytellers to identify meaningful change. Storytelling is based on an oral tradition familiar to a number of communities and is aligned to cultural sector activities which produce art based on lived experience.

Early findings from stories we have collected indicate that a broker, a hook, and an opportunity are necessary to overcome barriers to inclusion. When older people felt safe, trusted providers and peers, found activities meaningful, and felt empowered, they were more likely to engage and continue to attend. Collaborative work helped them to open up, leading to emotional release and self-discovery. This boosted confidence, sparked motivation, and encouraged learning. In some cases, it resulted in transformative healing. The experience also fostered meaningful social connections that continued beyond the sessions.

This workshop will explore how Storytelling surfaces the benefits of cultural social prescribing for older adults from ethnically minoritized groups. It will involve small and larger group work. Attendees will learn about the Storytelling method and its role in generating meaningful recommendations for social prescriptions. Those attending will gain knowledge about techniques of story collection and will analyse fragments of stories from our data. The session will culminate in participants' reflections on Storytelling in research.