

Grant mapping analysis: a 'how to' guide



What is grant mapping?

- Grant mapping is a way of understanding the research landscape in a specific field such as palliative and end of life care.
- This grant mapping project used the Health Research Classification System (HRCS) data from the UKCRC Health Research Analysis to provide a snapshot of UK health-related research in 2014.
- We used the Palliative and end of life care Priority Setting Partnership (PeolcPSP), initiated by Marie Curie with the James Lind Alliance, to show how research grants from the HRCS dataset address the individual unanswered research questions.
- The findings of the analysis are published in the report *'Does current palliative and end of life care research match the priorities of patients, carers and clinicians?'*

Using the grant mapping analysis report

1. Identify question from the PeolcPSP report (e.g. a question relating to incontinence)

Palliative and end of life care Priority Setting Partnership (PeolcPSP)

- What are the best treatments for nausea and vomiting (including for people with bowel obstruction and those having palliative chemotherapy)?
- How is incontinence best managed in people who are approaching the end of life (including those with Parkinson's disease)?
- What are the best models of palliative care for people who have learning difficulties?
- What are the best models of palliative care for people who have mental health issues?

Support carers and families

- What are the best treatments for fluid retention in patients approaching the end of life?
- What are the best ways to prevent blood clots, deep vein thrombosis and pulmonary embolism for patients at the end of life? What is the role of low molecular weight heparin (LMWH)?
- Does respite for people caring for a family member or friend who is dying benefit the patient's care and the quality of life for both the patient and carer? What is the best way to provide respite?
- How can carers and families be encouraged to seek support for themselves at the right time?

How to search the HRCS dataset

2. Each of the PeolcPSP questions have a series of search terms. For example, the search terms for question 24 relating to incontinence are below:

24 How is incontinence best managed in people who are approaching the end of life (including those with Parkinson's disease)?

palliative, end of life, end-of-life, EOL, terminal, dying, end stage, advanced disease, incontinence, parkinson

- Each of the search terms were then searched in the HRCS dataset. For the word **incontinence**, for example, this only brought up **27 unique grant** abstracts from the 14,934 grants in the database.
- When the other search terms were applied, only **7 grants** remained which addressed the PeolcPSP question on incontinence.
- The search terms can be found in Appendix 2 of the report (on pages 45-54).

How to search the HRCS dataset

2. Each of the PeolcPSP questions have a series of search terms. For example, the search terms for question 24 relating to incontinence are below:

24 How is incontinence best managed when people are approaching the end of life (e.g. Parkinson's disease)?

life, EOL, terminal, dying, incontinence, parkinson

Interestingly, some of these grants highlighted the word incontinence because it was used as an exclusion criteria for a study. Many others related to incontinence issues in children or pregnant women.

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What do these the grants show?

3. On pages 20 & 21 of the report, the specific details of the funding for each question can be found. For example, the following can be seen for the 7 incontinence grants which relate to question 24:

Managing symptoms and medications	10	2	£39,833	1	£28,063	£23,918	4	7
	11	4	£871,292	4	£169,960	£1,041,252	14	16
	12	4	£232,539	5	£179,682	£412,221	17	12
	13	0	£0	0	£0	£0	0	2
	14	1	£6,000	1	£26,685	£32,685	0	1
	15	3	£927,069	6	£1,140,213	£2,067,282	20	18
	16	0	£0	1	£526,063	£526,063	3	1
	17	1	£29,685	0	£0	£29,685	5	5
	18	2	£63,647	2	£62,200	£125,847	3	3
	19	0	£0	0	£0	£0	2	0
	20	0	£0	1	£18,475	£18,475	1	2
	21	1	£39,116	0	£0	£39,116	5	11
	22	0	£0	0	£0	£0	4	1
	23	0	£0	1	£28,063	£28,063	1	1
	24	0	£0	2	£86,632	£86,632	1	4
	25	0	£0	1	£291,189	£291,189	5	1
	26	0	£0	1	£291,189	£291,189	5	1
	27	0	£0	2	£84,190	£84,190	6	7
	28	0	£0	1	£95,853	£95,853	14	26
	29	0	£0	1	£65,582	£65,582	0	0
	30	0	£0	0	£0	£0	3	1
	31	2	£520,446	7	£458,221	£978,667	25	34
	32	1	£73,144	0	£0	£73,144	0	1
33	1	£1,667	1	£77,844	£79,511	2	2	
34	0	£0	1	£90,000	£90,000	3	4	
35	0	£0	1	£96,909	£96,909	4	14	

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3. On pages 20 & 21 of the report, the specific details of the funding for each question can be found. For example, the following can be seen for the 7 incontinence grants which relate to question 24:

Question	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
10	2	£399,855	0	0	£328,085	£925,9	0	0	0	0	0
11	2	£871,888	0	0	£169,960	£1,041,2	0	0	0	0	0
12	2	£179,682	0	0	£0	£412,2	0	0	0	0	0
13	2	£0	0	0	£26,685	£32,6	0	0	0	0	0
14	2	£0	0	0	£1,140,213	£2,067,2	0	0	0	0	0
15	2	£0	0	0	£526,063	£526,0	0	0	0	0	0
16	2	£0	0	0	£0	£29,6	0	0	0	0	0
17	2	£0	0	0	£62,200	£125,8	0	0	0	0	0
18	2	£0	0	0	£0	£0	0	0	0	0	0
19	2	£0	0	0	£18,475	£18,47	0	0	0	0	0
20	2	£0	0	0	£0	£39,116	0	0	0	0	0
21	2	£0	0	0	£0	£0	0	0	0	0	0
22	2	£0	0	0	£0	£0	0	0	0	0	0
23	2	£0	0	0	£0	£0	0	0	0	0	0
24	0	£0	2	0	£86,632	£86,632	1	4	0	0	0
25	2	£0	0	0	£0	£0	0	0	0	0	0
26	0	£0	0	0	£291,189	£291,189	5	1	0	0	0
27	0	£0	0	0	£84,190	£84,190	6	7	0	0	0
28	0	£0	0	0	£95,853	£95,853	14	26	0	0	0
29	0	£0	0	0	£65,582	£65,582	0	0	0	0	0
30	0	£0	0	0	£0	£0	3	1	0	0	0
31	0	£0	0	0	£978,667	£978,667	25	34	0	0	0
32	0	£0	0	0	£73,144	£73,144	0	1	0	0	0
33	0	£0	0	0	£79,511	£79,511	2	2	0	0	0
34	0	£0	0	0	£90,000	£90,000	3	4	0	0	0
35	0	£0	0	0	£96,909	£96,909	4	14	0	0	0

In 2014, there were no on-going research projects which proposed an intervention to address incontinence at the end of life.

A further five grants had indirect links to the question. This means that they may provide useful context to the question, but would not work towards answering it directly.

Two small research grants, with an annualised total of £86,632 together, had direct links to the research question. However, these did not propose a direct intervention.

Using the full grant mapping dataset

4. The full grant mapping dataset can be accessed at:

<https://palliativecarepsp.files.wordpress.com/2016/12/full-results.pdf>

- The link is provided on page 55 of the grant mapping report, along with a **user guide** on what the full dataset shows.
- For example, the results from question 24 relating to incontinence are highlighted below:

24	How is incontinence best managed in people who are approaching the end of life (including those with Parkinson's disease)?	0	£0		2	£86,632	<p style="color: #008000;">Managing Faecal Incontinence in people with advanced dementia resident in Care Homes a realist synthesis of the evidence (FINCH study) (University of Hertfordshire)</p> <p style="color: #008000;">ICONS: Identifying Continence OptioNs after Stroke (Lancashire Teaching Hospitals NHS Foundation Trust)</p>	1	£37,203	4	£167,694	£291,529
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Using the full grant mapping dataset

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<https://palliativecarepsp.files.wordpress.com/2016/12/full-results.pdf>

- The link is provided in the **user guide** on what to do next.
- For example, the results for the research highlighted below:

The titles of the grants are provided, along with the host institution, and a colour coded system that illustrates the source of the funding.

The full dataset also provides further information on the annualised amount spent in each of the indirect categories, as well as an overall total.

24	How is incontinence best managed in people who are approaching the end of life (including those with Parkinson's disease)?	0	£0	£86,632	Managing Faecal Incontinence in people with advanced dementia resident in Care Homes a realist synthesis of the evidence (FINCH study) (University of Hertfordshire)	1	£37,203	4	£167,694	£291,529
		2			ICONS: Identifying Continence Options after Stroke (Lancashire Teaching Hospitals NHS Foundation Trust)					

Example: what do the findings tell us about incontinence?

5. Two projects directly address incontinence in palliative and end of life care and both were government funded.
 - One grant focusses on dementia, and the other grant focusses on stroke.
 - From the titles of the grants, it is possible to find them in the HRCS dataset (accessible at www.hrcsonline.net):
 - The first grant is focused on faecal incontinence, looking at a systematic literature search on how to manage faecal incontinence for people with advanced dementia in care homes.
 - The second grant is looking at systematic voiding for patients with urinary incontinence following acute stroke.

Example: what do the findings tell us about incontinence?

6. Looking at the 'indirect' and 'weak' grants relating to question 24, there were 5 grants relating to incontinence:
- Two projects focussed on incontinence for people with multiple sclerosis.
 - One project focussed on Parkinson's, looking at urinary incontinence as a secondary objective of the project.
 - One project focussed on creating a voiding diary for older men experiencing urinary problems.
 - One project focussed on bladder and bowel issues to create a network.

The full list of 83 questions from the PeolcPSP

7. The 83 PeolcPSP questions can be found in Appendix 2 of the report on pages 45-54 and are separated into the following themes:
- Communication
 - Managing symptoms & medications
 - Support
 - Carers & families
 - Bereavement
 - Training and staff support
 - Service use
 - Care coordination
 - Accessing services
 - Place & type of care
 - Understanding dying

Feel free to dive in and search for a topic, condition or issue that is of interest to you!

For information please contact:

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