Professional Doctorate in Health Research (DHRes)
A part-time doctoral programme
Prospectus
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Institute for Health and Human Sciences Research

As part of its research strategy the University of Hertfordshire has designated its high quality research areas as Research Institutes, bringing together research in cognate areas. In Health and Human Sciences, the research institute is made up of research groupings from nursing and midwifery, allied health professions, psychology, life sciences and community and social care. Some groupings are further constituted into Research Centres, such as the Centre for Research in Primary and Community Care (CRIPACC), several of which are brought together in the Health Research Institute building thereby enhancing opportunities for collaborative research and support for research students. The Doctorate in Health Research (DHRes) is an integral activity of the Institute.

The Strategic Health Authority of Bedfordshire and Hertfordshire supported the development of a Postgraduate Medical School across three universities of which the University of Hertfordshire is one. This benefits from the Clinical Trials Coordination Centre and from the Research Design Service for the East of England. The DHRes complements this programme of post-graduate medical education.

CRIPACC was set up in 1996 with core funding from the Department of Health. CRIPACC has built a high quality research base, initiating and undertaking research, forming alliances to collaborate in research, providing training in research methodology, and encouraging and disseminating evidence based health care within the area of primary care. Research focuses primarily on two strategic programme areas: Adolescent and Child Health, and Older People, and these areas are underpinned by work on women’s health, patient experience and public involvement, public health and health protection, and evidence based practice and health policy. The RAE outcome brought Nursing and Midwifery research at the University to world class standing. This means that our research outputs, research environment and support for research students in nursing and midwifery is recognised by peers as one of the leading departments in the UK. The Professional Doctorate is supported by the research professors and staff from CRIPACC.
What is a Professional Doctorate?

“A Professional Doctorate is a programme of advanced study and research which, whilst satisfying the University criteria for the award of a doctorate, is designed to meet the specific needs of a professional group external to the University, and which develops the capability of individuals to work within a professional context.”

The professional doctorate programme is a comparatively recent development within research education in the UK. Many academic and professional disciplines are now introducing specialist research degrees to meet the needs of practitioners. While the ‘traditional’ PhD is considered more suited to personal research for academic career purposes, with little focus on application of knowledge and skills to the employment context, the professional doctorate can provide industry, community or employment based research activity combined with advanced structured learning.

The development of professional research programmes has been boosted by the greater involvement in the Research Councils in research education, making clear that the emphasis in postgraduate research should be the process of research training rather than the outcome of the research. The introduction of CASE (Collaborative Awards in Science and Engineering) by the ESRC and the EPSRC has enabled science and social science research students to work in collaboration with business with both an academic supervisor and an industry-based supervisor. The Research Councils have indicated in the setting up of these awards that they favour more focused and practically oriented research programmes.

In 2002 the UK Council for Graduate Education published a report on professional doctorates supporting the move towards more professionally oriented research. The report identified the most significant differences between the PhD and the professional doctorate:

- Learning outcomes are clearly defined and focused on practice within the professional doctorate, whereas learning outcomes within the academic PhD are rarely explicitly formulated
- The professional doctorate programme and the thesis component of that programme are oriented towards particular professional practice (for example education, psychology, business administration, engineering or chemistry) which define (and constrain) the subject of study. Some professional doctorates have become entry requirements into the profession (for example, clinical psychology). The thesis component of the traditional PhD is wider ranging in scope and has as its objective generalist research training.
- The professional doctorate process will include a substantial portion of taught courses at advanced level as well as a thesis, while the traditional PhD will be assessed wholly on the thesis.
- Professional doctorates are likely to be cohort based, which allows ‘classes’ for the purposes of the taught component
- Admission onto a professional doctorate is likely to be subject to a period of professional practice as well as academic qualification, whereas admission to a traditional PhD programme often follows on from undergraduate or Masters level academic study

Professional doctorates and health

There is now a range of professional doctorate programmes available within the UK in the field of health. Outside the area of clinical psychology, the most common professional doctorates focus on nursing or nursing science. Additionally there are professional doctorates offered in health sciences, clinical practice, professional studies, health and social care, medical ethics, health services management, social services management and business administration (health). Health professionals are increasingly choosing to further their education and career opportunities by undertaking specialist advanced study.

Professional doctorates and health

The University of Hertfordshire was the first professional doctorate programme in the United Kingdom to focus on the science of health research.

1 UK Council for Graduate Education, Professional Doctorates 2002
2 See Wilson, T, ‘The Professional Doctorate’ at http://information.net/uk/ProfDoc.html
3 UK Council for Graduate Education, Professional Doctorates 2002
The DHRes programme was developed in response to the emphasis within health care policy and practice on the need to develop a professional workforce that is based on sound evidence. In 2007 the recommendations of the Department of Health commissioned report chaired by Janet Finch ‘Developing the best Research Professionals’, recommended the development of clinical academic career pathways for nurses, midwives and allied health professionals. The DHRes offers a flexible pathway open to all health care professionals wishing to develop their career to doctorate level.

The emphasis of the DHRes is on professional research in practice, supported by residential expert workshops and classes in methodology and other research related topics. There is increasing need for health managers and practitioners within the health service to develop and advocate evidence based practice and to implement change in health service delivery. Health research has become an essential component of many professional roles subsequently health professionals have the opportunity to develop advanced research knowledge and skills to the benefit of the public.

It is now possible to study and apply, at an advanced level, a range of health methodological philosophies and techniques within a doctoral programme.

Who should do a DHRes?

The programme will suit those who are already engaged (or who have been engaged) in clinical or academic health practice, and for whom research is an aspect of their professional role. The programme will suit those who wish to acquire the knowledge and skills required for leadership roles within professional practice and health services management, especially those where a strong research component is required.

The programme will be particularly appropriate for professionals who wish to balance study with their professional practice. This doctoral route is more structured than the traditional PhD route and will appeal to students who would prefer to develop their research within a more structured framework.

The programme is designed for students who would enjoy working with a discrete and coherent cohort of fellow students for support and interaction.
The advantages of the DHRes programme

- The DHRes enables students to develop to advanced level a range of quantitative and qualitative research methodologies and research skills, and to apply these methodologies and skills in a substantial piece of research.

- The DHRes combines both supported learning on the science of health research methods and a programme of supervision leading to submission for a doctoral degree.

- The DHRes enables students to undertake doctoral study on a part-time basis, undertaking research which builds on, and is complementary to paid work.

- The DHRes encourages students to publish research papers as they proceed through the doctoral programme, so that they are able to develop a research publication history and a research reputation at the same time as gaining their doctorate.

- The DHRes provides the opportunity for students to undertake doctoral study as part of a cohort of students, all studying part time. Cohort study provides emotional and practical support over the six years of study. Cohort study also provides students with the motivation to complete the doctoral programme, and to complete in time with colleagues.

- The DHRes programme allows students to "step off" to submit for an MPhil if they feel that they cannot complete the doctoral programme.

Aims of the DHRes programme

The DHRes programme aims to explore the interaction of theory and practice in research best practice within the health professions. It aims to provide a programme of advanced generic training in health research methodology at doctoral level in the context of an understanding of health policy, ethics and the social context of health and illness.

The programme aims to support and assist in the development of a resource of health care practitioners who have the capacity to undertake autonomous research of national and international calibres.

It aims to promote research which is grounded in practice, which is cognisant of domestic and global constraints on research and practice, and which is compliant with research governance, law and ethics.

It aims to train researchers with the skills required to influence research and practice agendas, and to contribute to health improvement.

In particular, the doctoral programme aims to develop the following knowledge and skills:

- quantitative research methods including statistics, study design including surveys, RCTs, case control studies, quasi-experimental studies
- qualitative methods including epistemology, philosophical and theoretical frameworks, interpretivism, constructivism, grounded theory, ethnography, visual methods and discourse analyses.
- a critical understanding and appreciation of evidence based practice
- an understanding of the social, political and economic context of professional practice and health research
- the involvement of the public and patients in health research
- the skills of critical appraisal of published research
- the ability to formulate, conduct, report and disseminate independent research compliant with research law and ethics
- advanced analytical skills
- the ability to apply research findings to professional practice
- expertise in application for research funding
- the skills of writing, referencing and publication
- the skills of presentation of research findings to professional and lay audiences
- the skills required to work supportively in multidisciplinary teams
- the ability to formulate or contribute to the development of institutional and national health policy
- the theoretical concepts and generic skills to enable analysis and strategic development of the dynamic of the student’s field of practice.
- skills of professional management and leadership
Be realistic about why you are undertaking a DHRes

Make sure that you have thought through why you want to embark on a very long programme of study which might well put a strain on your job, your family relationships and your social life.

Do you wish to undertake doctoral study to learn the research skills you need to enhance patient care or service delivery? Or, do you feel it may enhance your CV and hence your career opportunities to open up a new career path? Are you studying to enhance your current job opportunities, or do you want a change of career and think that having health research skills will open up a new career path? Are you undertaking the programme because you have an interest in health research, because you want to further your knowledge, or because you want to demonstrate that you have the academic ability to work at doctoral level?

These are all quite valid reasons for going back to study, provided that you have done some preliminary thinking and research about whether this is the right programme for you.

There are other ways of developing learning and knowledge. It might be that a traditional PhD will give you greater flexibility in terms of both structure and content than the DHRes. It might be that a full time programme would suit you better than a part time programme. Look around at what is on offer across academic institutions. Ask other professionals in the health sector, especially those engaged in careers with a research component, to make sure you are undertaking the programme which will most suit your needs.

Be realistic about your long-term commitment to study

Taking on part-time doctoral study is a big commitment. You are committing much of your spare time for the next six years, and the closer you get to submission the greater the commitment that will be required. You should be fairly sure of your long term domestic and career plans before you embark on the programme. There are stepping off points, but the primary objective of the programme is to work towards submission to DHRes.

Make sure that your family and your employers are aware from the start of your time commitments. This is particularly the case in relation to the residential sessions as you will need to negotiate time off for attendance at these sessions well in advance. There are four separate three day residential sessions per year in the first four years, and two separate one day sessions in each of the last two years of the programme. Attendance at these sessions is essential.
Be realistic about the time commitment over each year

As well as the twelve days per year of residential sessions, there will be required independent reading and research between sessions. There will also be evaluations to write up in relation to each guided learning area, and assessments to progress from one phase of study to another. You will need to be in regular contact by email or in person with your supervisor(s), and this contact will increase as you get closer to submission.

Be realistic about becoming a student again

It can be quite daunting to move from being a respected, senior practitioner within your profession, to a student whose work is to be judged by others. You will be learning some entirely new skills, and expected to think in entirely new ways. You may find that your writing skills, which have been quite sufficient up until now, are insufficiently rigorous for a major piece of work worthy of peer-reviewed publication. You will need to develop enhanced organisational skills to cope with the demands of referencing, note keeping and storage of confidential information. You will need to develop new ways of learning, new skills of critical thinking and new mechanisms for imbibing, filtering and organising information.

A common feature of returning students early in their programme of doctoral study is a crisis of confidence about their own abilities. You will get over this, but it can be challenging having to reassess your skills in comparison with those of others, and to offer your skills up for assessment by others. You will need to speak up in seminars, formulate views on matters outside your area of practice expertise, and give seminar presentations to an audience of experts. These are all skills that you will need to take on a leadership role in the future. You will develop these skills as you proceed through the programme, but there will be a few testing moments at first.

Another common problem is underestimating the physical and psychological pressures of study, especially the pressures of submission dates. Most returning students have developed other lives and taken on other commitments – this means your study environment will be very different now than when you undertook study the first time round as a young student.

None of these are good reasons for backing out of study. The important thing is to be aware from the start that there will be good times and bad times. You will be able to seek help from your supervisor or guided learning facilitator when things get tough. You can also talk to your fellow students. This is one of the benefits of a cohort based doctoral programme over a traditional PhD programme – you will not be alone!

Background books that you might find helpful are:

How can I find out more about doctoral study?

There are now plenty of helpful guides to undertaking postgraduate research. Most of these focus on the traditional PhD rather than the professional doctorate, but the advice they give may prove useful for professional doctorate students too. It would be worth looking at one or two of these guides before you start or early on in your programme, (and then returning to it in your second year when it comes to formulating your research proposal).

See for example:

Some possible introductory reading includes:
To enter the programme:

The minimum academic qualification for entry to the programme will be an upper second degree or Masters degree from a recognised university.

The minimum practice requirement for entry to the programme is three years of relevant professional practice including individuals who have experience working in a health field.

The DHRes is a part-time doctoral programme. Expected time from enrolment to submission for the degree of DHRes is six years (with a maximum time of eight years). Some students may be able to complete in a shorter time, particularly those students who are not working full time or students who already have a publication or research record.

The programme requires commitment to attendance at residential sessions. Students undertaking the programme will need to negotiate these attendance times with their employers (and their families).
The residential aspect of the course is a vital element of the doctoral programme. The benefits of studying in a residential setting are multi-factorial; it provides time away from the demands of the workplace and home life and enables students to get to know and support each other throughout their time on the programme. It also enables students to attend evening sessions and participate in any group work set in the evenings, and therefore to complete the full doctoral research programme.

How much time will I need to commit to the residential sessions?

Much of the guided learning and research supervision will take place during residential sessions, when all students undertaking the DHRes programme will meet together with staff and supervisors.

Attendance at these sessions is essential to the programme.

The residential requirements will be:

Phase One (years one and two)
4 X 3 day residential blocks in each year for the purposes of guided learning and supervision

Phase Two (years three and four)
4 X 3 day residential blocks in each year for the purposes of guided learning and supervision

Phase Three (years five and six)
2 X 1 day sessions each year for the purposes of assistance in the preparation of the submission for DHRes and for supervision

In addition to these residential sessions there will be face-to-face meetings with the research supervisor, particularly in Phase Three, to be negotiated between the student and supervisor.

The residential sessions will normally run from 9.30am on Wednesdays to 3.30pm on Fridays. They are usually held in September, November, March and May.

Where will the residential sessions be held?

The residential sessions will be held at the High Leigh Conference Centre close to the University which will provide en suite accommodation, dining rooms and a bar. The High Leigh Conference Centre with map and address may be visited at http://www.cct.org.uk/high-leigh/venue

Will I need to pay extra for the accommodation costs?

The costs of accommodation and scheduled meals are charged in addition to the University course fee. Meals outside the conference centre and drinks purchased from the bar are to be met by individual students.
How much time will I need to commit to independent study outside the residential requirements?

In between the residential sessions you will be expected to undertake independent reading and learning, as well as individual research for your submission for the doctoral award.

You will be given set reading to prepare for the residential sessions so that you can engage in fruitful discussion in the seminar sessions. You will be expected to present papers and respond to papers presented by other students on the programme.

In relation to each guided learning area you will be expected to prepare materials for evaluation. The evaluation requirement may take the form of an essay, a presentation, preparation of a video or analysis of data. You will be asked to submit two evaluations per year in the first four years of the programme. These evaluations will eventually form part of your submission for your doctoral award.

Every second year you will be required to undergo an assessment to determine the extent of your progress and to determine whether it is appropriate that you move on to the next phase of the programme. This will require preparation of a short report leading to a viva.

Throughout the later part of the programme you will progress with your own research leading to your submission for the award of DHRes. This will require a considerable time commitment for collection of data, analysis of data and writing up of the submission.

On average you will need to commit the equivalent of at least one full day’s study per week (over a calendar year) to keep up with the requirements of the programme.

Will I have access to the materials I will need for independent study and research?

You will have full access to materials in the Learning Resources Centre (LRC) in the University of Hertfordshire.

You will also have access to the University on-line resources, including subscription access to journals. These on-line resources can be accessed from your home (or work) computer.

As a doctoral student you will be able to use the LRC’s inter-library loan service to access materials in other libraries.

You may also have access to your local university or health service libraries. Your research supervisor will help you arrange access to any sources you need for your research.
Components of the programme
Core and optional guided learning areas:

Core learning areas address research methodologies, research ethics and research context. Options are chosen from a list of specialist areas as appropriate to the professional practice of the student.

Learning will be evaluated in a range of ways, to include essays, critical literature reviews, reports and presentations. Assignments will not be given grades, although students will be given constructive feedback on their evaluations. However the evaluations will form a component part of the assessment process to determine whether the student can progress to the next phase of the doctoral programme.

Assignments within individual learning areas are expected to form part of the final submission for the award of DHRes, either as dissertation chapters or as work submitted in support of the thesis.

Students will be encouraged to revise and submit their assignments for publication as they proceed through the doctoral programme.

A substantial piece of professionally focused research

The research begins with training in research methodologies in the first two years of the programme and training in the formulation of the research proposal in the second year, and leads to a submission for examination for the award of DHRes at the end of the programme.

A submission must contain a written document (dissertation) that presents and defends a thesis. A thesis is an intellectual position capable of being maintained by argument.

A submission may also contain other works on which the thesis and its defence are based.

The dissertation will contain a maximum of 60,000 words, but where the submission contains substantial other supporting work, it is envisaged that the dissertation will be considerably shorter.
The programme is made up of three phases of study, each of two years.

In the first phase, students will be expected to work at or above the level of MRes. In the second phase students will be expected to work at or above the level of MPhil. In the third phase students will be expected to work at doctoral level.

To progress from one phase to the next, students will be required to undergo a successful assessment. The assessment will consist of a viva or meeting with an assessment panel, based on a submitted report. The report is expected to be of the order of 1,000 words (with a maximum of 6,000 words) and will include details of learning area evaluations and the student’s reflections on research progress so far. The assessment team will include a panel member external to the programme.

The phases are as follows:

**Phase One**

*Year 1*

Health Research Methodologies and Research Ethics 1 (with a focus on qualitative research) (core learning)

AND

The Social, Political and Economic Framework of Health Research (core learning)

*Year 2*

Health Research Methodologies and Research Ethics 2 (with a focus on quantitative research) (core learning)

AND

Research Proposal Development (core learning)

Assessment to progress to Phase Two of the programme.

**Phase Two**

*Year 3*

Advanced Research Methodologies 1 (Qualitative Research) or Advanced Research Methodologies 2 (Quantitative research) (core learning)

AND

One Option

AND

Supervised research

*Year 4*

Research Workshops

AND

One Option

AND

Supervised research

Assessment to progress to Phase Three of the programme.

**Phase Three**

*Year 5*

Supervised research towards submission

*Year 6*

Supervised research and writing up of submission

Submission for DHRes examination

**DHRes Programme Timetable**
## Guided Learning Areas

<table>
<thead>
<tr>
<th>Health Research Methodologies and Research Ethics 1</th>
<th>The Social, Political and Economic Framework of Health Research</th>
<th>Health Research Methodology and Research Ethics 2</th>
<th>Research Proposal Development</th>
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### Health Research Methodologies and Research Ethics 1

This learning area offers students an opportunity to engage with the craft of qualitative research.

The learning area aims to inform students about a range of different qualitative methods and applications; to locate such methods and applications in the context of theoretical perspectives; and to develop students’ practical skills in the use of methods and analysis techniques.

**On completion students will be able to demonstrate an understanding of:**
- the basic types of qualitative methods and their appropriateness to different kinds of research
- a critical awareness of the theoretical issues associated with the design, conduct and analysis of research methodologies, and of their limitations
- sensitivity to the political, personal and ethical issues associated with the conduct of qualitative research in a range of circumstances
- knowledge of the practical aspects of conducting qualitative research including analytical skills appropriate to material generated by qualitative methods

**Knowledge of such matters as:**
- what is qualitative research
- designing qualitative research
- entering the field
- the interview
- focus groups
- participant observation
- qualitative analysis
- whose definition of the world counts?
- dissemination

This learning area will be evaluated by means of a tape-recorded piece of fieldwork (interview, focus group or observation), together with a critical discussion and reflection presented in a 5,000 word essay.

### The Social, Political and Economic Framework of Health Research

This learning area is designed to enable students to meet the key intellectual objectives of a professional doctorate including an appreciation and understanding of the social, political and economic factors which impact on health and illness, health service delivery and health research.

A key objective of this learning area is to enable students to develop the theoretical knowledge, methodological expertise and analytical skills to explore critically in relation to their own emerging programme of study:

- definitions of the social, political and economic framework
- key developments in social theory
- the shifting policy and professional landscape in which service users and providers are located
- methods for understanding how policies are initiated and enacted
- concepts of health, inequality and shifting societal and governmental positions on inequalities and health
- relationships between formal and informal policies; national and international political agenda; professional boundaries and ideologies
- formulations of the patient and the state, and individual rights and responsibilities for health and illness

The learning area will be evaluated by a 6,000 word essay exploring the social, political and economic factors which impact on an aspect of health, illness or service delivery. Students are encouraged to select an area relevant to their professional interest and/or emerging programme of research.

### Health Research Methodology and Research Ethics 2

This learning area introduces students who are unlikely to have a mathematical background to statistical concepts and procedures.

**The area aims to:**
- enable students to develop and apply introductory and intermediate statistical principles and techniques within the necessary ethical context
- enable students to demonstrate understanding of the differing quantitative collection approaches in the development of data collection tools
- enable students to understand the different types of quantitative study designs, their purposes and their strengths and weaknesses
- to enable students to understand and apply univariate and bivariate parametric and non-parametric data analysis

The learning area will include study of research methodologies and ethics within the quantitative paradigm:
- summarising, graphing and tabulating data
- the concept of probability
- prevalence, incidence and issues around sampling
- overview of different quantitative study designs
- introduction to questionnaire design
- how to decide what statistical analysis to perform
- hypothesis testing
- concepts
- assumptions and how to check them
- how to interpret results
- the concepts of correlation and regression
- introduction to SPSS

In addition, the students will learn about a range of research designs from a quantitative perspective including surveys, RCTs, case controlled studies and quasi-experimental designs.

Evaluation of this learning area requires the student to create a proposal for a quantitative study that requires analysis using specified techniques. Further, the student is required to interpret the results of an analysis of a quantitative study which will be provided to them.

### Research Proposal Development

This learning area brings together the learning undertaken in the preceding areas to enable students to develop a coherent research proposal that can be used as a basis for their doctoral dissertation, and which could be adapted to apply for funding from a recognised national funding body for health research.

**The area aims to:**
- develop students’ knowledge of sources of funding for health research within the context of national and local R&D priorities
- to equip students to develop a coherent, concise and scientifically justifiable proposal for a research study that can be used as a basis for a doctoral thesis
- prepare students in the skills required to meet the criteria for funding by a recognised national funding body for health research
- develop knowledge and understanding of such issues as:
  - formulating a research question
  - turning ideas into research questions that meet the national and local R&D priorities
  - reviewing the literature and developing a rationale for proposed research
  - sources of funding for health research
  - writing the research proposal
  - issues of access and approval (meeting the needs of funding bodies, research governance, ethical approval, peer review etc)

Evaluation of this learning area will involve the preparation of a 5,000 word evaluation which will contain a research proposal that meets the criteria for funding by a recognised national funding body for health research. This 5,000 word evaluation will also include a critical discussion of how the proposal would be adapted for submission to a recognised national funding body for health research.
Advanced Research Methodologies

Students will choose either Advanced Research Methodologies 1 or Advanced Research Methodologies 2.

Advanced Research Methodologies 1 (Qualitative Research)

This learning area builds on ‘Health Research Methodologies and Research Ethics 1’.

The area aims to:
- provide students with an opportunity to engage with a wide range of qualitative data analysis techniques, tools and strategies.
- consider how to interpret and analyse qualitative data sets from different theoretical perspectives and approaches.

Develop knowledge and understanding of such issues as:
- the art of interpretation
- reflexivity and data analysis
- dealing with data – recording and coding social life
- using computers in qualitative analysis
- credible qualitative research
- ethics and analysis
- presentation and dissemination
- politics and programme evaluation
- influencing the policy process

Evaluation of this area will require a coherent and justified 6,000 word analysis of a small scale qualitative data set.

Advanced Research Methodologies 2 (Quantitative Research)

This learning area builds on ‘Health Research Methodologies and Research Ethics 2’.

The area aims to:
- enable students to develop and apply advanced statistical principles and techniques within the necessary ethical context
- enable students to demonstrate an understanding of the differing quantitative collection approaches in the development of data collection tools
- enable students to understand, plan and apply multivariate analysis

Develop knowledge and understanding of such issues as:
- power calculation to ensure sample size
- factor analysis
- regression analysis, including non-linear regression, logistic regression
- multi-level modelling (MLM) including hierarchical regression and structural equation modelling
- use and knowledge of statistical packages including SPSS and SAS

This learning area will be evaluated by production of a power calculation using appropriate nominal data, and secondary analysis of publicly available data using the techniques of factor analysis, regression and MLM.

Research Workshops

This learning area is designed to enable students to consolidate critical research skills and develop understanding of areas specific to their programme of research. The workshops are flexible and contingent on students’ emerging theoretical, methodological and substantive interests and developing research skills. Learning strategies include a combination of self-directed study and a series of lecturer and student facilitated workshops in health research.

Previously students have elected to:
- critically engage with theoretical approaches in the health and social sciences
- further develop practical research skills
- explore methods of public involvement in research
- develop expertise in computer-aided qualitative analysis
- write conference papers and prepare abstracts and posters
- consolidate time management and study skills
- present emerging theoretical, methodological or ethic issues to fellow students and academics.

This learning area is not evaluated but students are required to deliver an evening presentation to DHRs peers and, are supported and encouraged to submit a paper for peer-reviewed publication.

Options

The options offered include:
- The Sociology of Health and Illness
- Decision-making within Health Practice
- Evidence Based Practice and Systematic Reviews
- Health Psychology
- Research in Context
It may be that the pressures of time and the commitment to study and research prove overwhelming after you have proceeded some way on the programme. It may also be that you no longer work in an area of health practice which supports your doctoral research.

The structure of the DHRes programme will enable you to "step off" the programme and submit for another research degree. After fours years of study you can choose to write up and submit for the degree of MPhil.

The MPhil, unlike the DHRes, does not require that the research be located within professional practice. Neither do they require that you produce work that makes a significant contribution to the science of health research or be worthy of peer-reviewed publication.

The expected size of the submission for MPhil will be shorter at approximately 40,000 words.
"As a midwifery lecturer I really wanted my research to be grounded in practice rather than education. The professional doctorate offered me the opportunity to do this as well as guiding me in the research process. It takes a ‘step by step’ approach which is extremely helpful when trying to balance the demands of studying for a doctorate whilst also working full time. I really value the individual support offered by the academic team and the peer support from fellow students as we share our work and experiences. This approach helps me to stay focused on the project and keeps me on track; particularly valuable when undertaking such a long period of study over a number of years."

Cathy Hamilton, Senior Lecturer, School of Nursing and Social Work

"I had been looking at doctorate programmes for some years, but could not find the programme that felt right. I also needed my employer’s support to fund the programme and allow me the time to devote to it. The DHRes ticked the right boxes for me, no doctorate programme is going to be easy, but the structure of the DHRes lends itself to those who are continuing professional practice whilst studying. The supportive nature of the cohorts and the residential teaching blocks mean that you are sharing your journey with others."

Mary Buckland, Head of Social Care, Mental Health Division

"I thoroughly enjoyed the DHRes; I acquired comprehensive research knowledge within a collegial environment as learning with like-minded colleagues is one of DHRes’s greatest assets. The Guided Learning Areas helped me to develop critical analysis and reflection, a sound knowledge base and justification for each aspect of my doctoral research. Most importantly, the DHRes encouraged me, as a children’s nurse, to critically reflect upon the enhancement of children’s health and wellbeing from an academically informed professional and practical perspective. It was an excellent opportunity to develop my knowledge and skills; my learning, both in depth and breadth, has been immense and formed the ‘bedrock’ to my research. I would absolutely, and unhesitatingly, recommend the course."

Dr Lisa Whiting, Professional Lead, Children’s Nursing

"I looked around at PhD’s and couldn’t identify a suitable traditional PhD that fitted within the context of my work, both as a Consultant Nurse and as a committed researcher. It was important to me that the undertaking of a significant period of study leading to a doctoral award should be related to an aspect of my work and be of benefit to the patients to whom I provide clinical care, whilst developing my research skills. I had not previously heard of a ‘professional doctorate’, but after reading about this programme that involved structure through guided learning the DHRes appeared to offer a perfect solution, which was genuinely exciting."

Ken Spearpoint, Consultant Nurse, Resuscitation
Fees and How to Apply

Fees
The current fee for the programme and for the residential component is updated annually on the DHRes website.

How to Apply
Application forms
For an application form for the DHRes please contact:

Kim Haynes
Administrator, DHRes
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