

ASSOCIATE PROFESSOR

Job Title:	Associate Professor in Health Economics
Department:	Department of Global Health and Development
Faculty:	Faculty of Public Health & Policy
Location:	15-17 Tavistock Place, London
FTE:	0.4
Grade:	G8
Accountable to:	Dean of Faculty through the Head of Department
Job Summary:	<p>Applications are invited for a health economist to work across three projects in economic evaluation and cost estimation for health-related services. The postholder's role will include managing and conducting cost data collection and cost-effectiveness analysis for harm reduction strategies for people who misuse drugs in the UK, and co-leading a project focused on data analysis to estimate cost functions for TB and HIV services globally.</p> <p>The postholder will be supervised by Prof Anna Vassall and will be part of the Global Health Economics Centre, a world-leading group of over 100 academics working on a diverse portfolio of health economics research. The postholder will also have the opportunity to affiliate with relevant centres at LSHTM (including the Tuberculosis Centre, the AMR Centre and the Centre for Mathematical Modelling of Infectious Diseases).</p> <p>The successful applicant will have a PhD in health economics, expertise in economic evaluation and cost function estimation, and sufficient relevant experience in the subject areas of TB/HIV and harm reduction. Further particulars are included in the attached job description.</p>

General Information

The London School of Hygiene & Tropical Medicine (LSHTM) is one of the world's leading public health universities.

Our mission is to improve health and health equity in the UK and worldwide; working in partnership to achieve excellence in public and global health research, education and translation of knowledge into policy and practice.

Staff and students are committed to helping create a more healthy, sustainable and equitable world for everyone, because we believe our shared future depends on our shared health.

We embrace and value the diversity of our staff and student population and seek to promote equity, diversity and inclusion as essential elements to improve health worldwide. We believe that when people feel respected and included, they can be more creative, successful, and happier at work. While we have more work to do, we are committed to building an inclusive workplace, a community that everyone feels a part of, which is safe, respectful, supportive and enables all to reach their full potential.

To find out more please visit our [Introducing LSHTM page](#).

Our Values

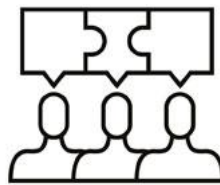
Our values establish how we aspire to achieve our mission both now and in the future - demonstrating what it means to work and study at LSHTM. Please visit our [LSHTM Values page](#) for further information.



**Act with
integrity**



**Embrace
difference**



**Work
together**



**Create
impact**

Faculty Information

The School is divided into three academic faculties, of which the Faculty of Public Health & Policy is responsible for research and teaching in the policy, planning and evaluation of health programmes and services. Its interests are both national and international, encompassing industrialized and low and middle-income countries. The Faculty has three research departments:

- Global Health and Development
- Health Services Research and Policy
- Public Health, Environments and Society

In the Faculty there are about 50 Professional Services staff members, and 280 academic staff drawn from a variety of disciplines including medicine, statistics, epidemiology, sociology, economics, anthropology, operational research, psychology, nursing and history. Each department is responsible for its own research. The School has adopted a rotating system of management for its academic departments and faculties. The management of a department is under the control of the Department Head, appointed by the Director for a period of three years in the first instance. The Faculty Head is appointed in a similar manner but for an initial period of up to five years.

The Faculty of Public Health and Policy is responsible for organizing a one-year Master's course in Public Health, which allows students to take either a general MSc in Public Health, or to follow one of several more specialized streams: Health Services Management, Health Promotion, Environmental Health or Health Services Research. The Faculty also jointly teaches the MSc Public Health in Developing Countries and MSc Control of Infectious Disease (with the Faculties of Infectious and Tropical Diseases and Epidemiology and Population Health), and MSc Health Policy, Planning and Financing (jointly with the London School of Economics). Master's courses are organized in a modular format across the whole School. One of the growing areas of Faculty teaching is distance-based learning, with MScs in Public Health and Global Health Policy. In 2019/20, over 370 students were registered for our face-to-face Masters programmes and 1367 students were registered for distance learning MScs.

The Faculty has also reorganized and expanded its research degree (MPhil/PhD; DrPH) training. Currently there are about 164 students and 36 staff members registered for a research degree.

Global Health Economics Centre (GHECO)

The Global Health Economics Centre (GHECO) is one of the largest academic groups of health economists within the UK and globally. GHECO conducts health economic research, education and policy translation in order to improve health and wellbeing in the UK and worldwide; working in equitable partnerships globally to achieve excellence in the field of health economics. GHECO recognizes that health economic research is intrinsically a multi-disciplinary endeavour, bringing together economists, epidemiologists, policy analysts, statisticians, modellers, psychologists, philosophers and those interested in different disease areas and health systems.

Department of Global Health and Development (GHD)

The department conducts novel and policy-relevant research and training that concerns health issues with a global reach, predominantly from the perspective of low- and middle-income country development. There are approximately 150 staff and 100 research degree students, with total grants funding of over £35m spread over a range of funders including research councils, UK and overseas charities, the European Union, Department for International Development and others. Academic Staff come from a wide range of disciplines including; economics, epidemiology, mathematics, law, politics, social policy and policy analysis, sociology and anthropology and are grouped into two units and a number of thematic research groups.

PROJECT INFORMATION

This post is structured to split time working across three projects focusing on economic evaluation and cost estimation for health-related services.

SiPP (Safe Inhalation Pipe Provision)

Over 180,000 people use crack cocaine in England. Crack which can be smoked or injected, can cause serious health harms. People who use crack (PWUC) are vulnerable to infectious diseases, acute injuries and long-term respiratory problems.

Engagement with this marginalised population is a challenge as UK drug treatment services have little to offer PWUC. Although services for people who use drugs can provide the equipment needed for safe injecting, supply of equipment to reduce risk when smoking crack is prohibited by law. This means most PWUC make the pipes they use to smoke crack from unsafe materials (increasing respiratory harm), share their pipes (blood borne virus & COVID-19 transmission risk) or inject drugs rather than smoke them (high risk for HIV, hepatitis C, & bacterial infections). Research, from countries such as Canada where crack pipe provision is legal, show that safe inhalation interventions increase PWUC engagement with services and reduce pipe sharing, drug injecting and related health harms.

The SiPP (Safe inhalation pipe provision) intervention has been developed with PWUC and with input from service providers. It consists of a kit with heat -resistant glass pipe, risk reduction information, and tailored training for service providers. The SiPP kit will be provided to PWUC for six months in three areas (Avon & Somerset, Nottingham & the West Midlands) reflecting different patterns of crack use and service provision. The study team will work with four drug treatment services and four peer-led networks to deliver SiPP.

The economic evaluation of the intervention will use a conceptual economic model to fully explore and reflect on the potential relationships between determinant aspects of a condition / disease

and associated identifiable and measurable outcomes. The latter could potentially include factors such as HCV transmission, the (longer term) harmful effects of using homemade pipes, Covid-19 transmission risk and reductions in injecting drug use. The broad methods include a review of existing or closely-related (economic and theoretical) models associated with crack use and studies that link reported changes in behaviour / health engagement / safer drug taking practices to longer term outcomes.

iHOST (Improving Hospital Opioid Substitution Therapy)

People who use illicit opioids (PWUO), such as heroin, are over-represented in urgent and emergency admissions. Late presentation with complications from injecting-related infections and injuries is common, yet retention in hospital care is low. This is a serious problem, associated with: reliance on ambulatory care, complex admissions, unplanned hospitalisation, discharge against medical advice (DAMA), readmission, surgical intervention and high NHS costs. The iHOST project will optimise, test and evaluate a toolkit to support hospitals to implement and embed evidence-based practice for optimal management of PWUO in collaboration with community drug treatment services. The toolkit comprises: 1) A 'My Meds' card. A prototype card has been developed with PWUO. This provides information for hospital staff to prioritise and expedite medicines reconciliation, including blank fields for OST prescriber and pharmacy contacts. 2) A helpline for patients and providers run by the charity Release. 3) An online training module for staff in hospital Accident and Emergency (A&E), acute admissions, and high burden hospital wards. 4) A 'best practice' hospital policy template. 5) An iHOST 'champion' to support sustainability post intervention.

The economic evaluation of the iHOST project will evaluate the total costs of the toolkit, and the unit cost per reduction of DAMA and reduction of emergency hospital readmission within 28 days of discharge.

CAPTURE (Cost Analysis for Prioritizing TB and HIV Resources Efficiently)

The CAPTURE project is a two-year investment from the Bill and Melinda Gates Foundation, aiming to improve locally driven priority setting by HIV and TB programs, leading to more efficient and equitable HIV and TB prevention and care programs. The project is structured in five concurrent workstreams; each workstream is focused on analysis of existing and readily available costing data to identify generic principles for data collection or use, as well as specific methodological guidance and data collection tools. Combining these aims we will develop guidance and tools for sourcing, adjusting, and applying cost data that is accessible for analysts and decision makers. We envision application of these resources to be supported with future work focused on building capacity in health economics and modelling in LMICs, particularly in sub-Saharan Africa, and therefore will produce these outputs consulting closely with analysts and users of TB/HIV cost data in LMICs. These users include local economists, government staff working in HIV/TB programs and technical assistance and academia working on the allocative efficiency of HIV and TB programs.

ASSOCIATE PROFESSOR

The portfolio of duties outlined below will vary in accordance with the academic expectations of the role and any additional role to which you are formally appointed, which may be varied from time to time, and agreed at your annual Performance and Development Review (PDR).

Job Description

Main Activities and Responsibilities

Knowledge Generation

1. To deliver high quality research & scholarship in your field of study, individually and in collaboration with others, by developing and maintaining a research grant portfolio from good¹ research funders, publishing peer-reviewed outputs, generating and securing (where relevant) intellectual property, and evaluating teaching practice;
2. To participate in doctoral student supervision and examination;
3. To lead and manage research teams and promote and ensure compliance of self and others with good practice in relation to the conduct of research, the ethics policy, inclusivity, and other relevant LSHTM policies;
4. To support the development of early-career researchers;
5. To manage a team of researchers advancing methodology around economic evaluation of social, behavioral, and health interventions
6. To manage and support researchers conducting data collation, analysis and write-up relevant to economic evaluation.
7. To carry out data collection, analysis, and write-up relevant to economic evaluation of harm reduction strategies
8. To lead reports for key stakeholders as well as manuscripts for peer-reviewed journals

Education

1. To deliver high quality, inclusive education and assessment in relation to your specific subject and within the broader area covered by your department and disciplinary field;
2. To contribute to the improvement of the quality and inclusivity of LSHTM's education, by participating in the development and review of new and updated learning and teaching materials or approaches, and/or improving assessment practices, and/or improving aspects of the student experience;
3. To support educational leadership and management by active participation in Faculty and Programme or curriculum leadership roles, as appropriate, and by

¹ Good research funders are: Research Councils; Government Departments; NIHR; National and overseas charities recognised by HEFCE for QR; Overseas research councils or equivalent including NIH; EU; other agencies (eg NGOs, commercial companies) supporting commissioned research that is consistent with LSHTM's mission and meets LSHTM's cost recovery targets

collaborating with professional services staff both centrally and in the Faculty office in carrying out relevant administrative processes;

Internal Contribution

1. To demonstrate good internal citizenship by undertaking PDRs and promoting staff development, and by participating in the recruitment, mentoring and support of more junior colleagues as appropriate;
2. To participate in the activities of LSHTM committees and undertake a leadership or administrative role at LSHTM/Faculty/Department/MRC Unit level, as appropriate;
3. To proactively demonstrate LSHTM's EDI goals in your work and behaviour;

External Contribution

1. To demonstrate good external citizenship by linking with and supporting appropriate external organisations;
2. To promote knowledge translation and enterprise by exploiting academic knowledge beyond academia;

Professional Development and Training

1. To keep up-to-date with the latest research/thinking in your academic field and with changes to pedagogic practice within LSHTM and more generally;
2. To undertake and successfully complete the mandatory training required by LSHTM appropriate to the role;

General

All academic staff are free within the law to question and test received wisdom, and put forward new ideas and controversial or unpopular opinions, to enable LSHTM to engage in research and promote learning to the highest possible standards.

All staff at LSHTM are also expected to:

1. Act at all times in LSHTM's best interests;
2. Treat staff, students and visitors with courtesy and respect at all times;
3. Comply fully with LSHTM policies, procedures and administrative processes relevant to the role including when acting as Principal Investigator, accepting academic, managerial, financing and ethical responsibility for a project;
4. Uphold and support LSHTM's values (as set out in the LSHTM Strategy);
5. Act as ambassadors for LSHTM when hosting visitors or attending external events;

Academic Expectations

All academic roles have a statement of academic expectations attached to each level. Please ensure that these have been read and understood. For further information please refer to the [Academic Expectations page](#).

The above list of duties is not exclusive or exhaustive and the role holder will be required to undertake such tasks as may reasonably be expected within the scope and grading of the role.

Role descriptions should be regularly reviewed to ensure they are an accurate representation of the role.

Person Specification

This form lists the essential and desirable requirements needed by the post holder to be able to perform the job effectively.

Applicants will be shortlisted solely on the extent to which they meet these requirements.

Essential criteria:

1. A doctoral degree in a relevant topic.
2. Expertise in health economics and economic evaluation of health services
3. A consistent and significant track record of attracting research grant income, including salary recovery, from major research funders (PI, co-PI or leadership within a large proposal such as work-package lead).
4. A track record of contributions as lead and co-author to peer-reviewed outputs, as expected by the subject area/discipline in terms of types and volume of output; significant contributions to at least four outputs within the most recent 5 years that are at least internationally excellent².
5. Proven ability to work independently, as well as collaboratively as part of a research team, including experience of supervising and supporting junior researchers and non-academic staff and proven ability to meet research deadlines.
6. An understanding of the strategies for improving equity and inclusion in research and/or learning and teaching.
7. Some experience of doctoral degree supervision.
8. Proven ability to build collaborative research relationships with external researchers and/or institutions, or industry (where relevant).
9. Evidence of ability to deliver high quality research-informed teaching.
10. Evidence of excellent interpersonal skills, including the ability to communicate effectively both orally and in writing.
11. Relevant experience co-designing research methods and co-producing research with global partners
12. Extensive experience in empirical cost analysis for HIV and/or TB, including large scale primary data collection and econometric estimation of cost functions
13. Experience in economic evaluation of harm reduction services for people who misuse drugs

Desirable Criteria

² i.e. of a quality that would be rated highly in assessments of research quality such as those done by UK government, and in peer review processes used by funders

1. Teaching qualification (or Fellow/ Senior Fellow of HEA).
2. Experience of building and leading a research team.
3. Experience of innovation in teaching delivery and assessment and/or senior teaching management such as Programme Director, Exam Board member, Periodic Review panel member.
4. Demonstrable evidence of improving equity and inclusion in research and/or learning and teaching.
5. Experience of engagement with national and/or international research and/or policy advisory bodies.

Salary and Conditions of Appointment

The post is fixed term until 30 November 2025 and part-time 14 hours per week, 0.4 FTE. The post is funded by the Bill and Melinda Gates Foundation and NIH and is available from 1 April 2024. The salary will be on the Academic scale, Grade 8 scale in the range £62,028 - £71,192 per annum pro rata (inclusive of London Weighting).

The post will be subject to the LSHTM terms and conditions of service. Annual leave entitlement is 30 working days per year, pro rata for part time staff. In addition to this there are discretionary "Wellbeing Days". Membership of the Pension Scheme is available.

LSHTM has a Hybrid Working Framework, which alongside agreed service requirements, enables teams to work more flexibly (if the role allows), promoting a greater wellbeing and work/life balance.

Application Process

Applications should be made on-line via our [jobs website](#). Applications should also include the names and email contacts of 2 referees who can be contacted immediately if appointed. Online applications will be accepted by the automated system until 10pm of the closing date. We regret that late applications cannot be accepted. Any queries regarding the application process may be addressed to jobs@lshtm.ac.uk.

The supporting statement section should set out how your qualifications, experience and training meet each of the selection criteria. Please provide one or more paragraphs addressing each criterion. The supporting statement is an essential part of the selection process and thus a failure to provide this information will mean that the application will not be considered. An answer to any of the criteria such as "Please see attached CV", "Yes" or "No" will not be considered acceptable and will not be scored.

Please note that if you are shortlisted and are unable to attend on the interview date it may not be possible to offer you an alternative date.

Asylum and Immigration Statement

LSHTM will comply with current UKVI legislation, which requires all employees to provide documentary evidence of their legal right to work in this country prior to commencing employment. Candidates will be required to email a copy of their passport (and visa if applicable) to HR prior to their interview and if appointed will be asked to bring the original documents in to be copied and verified before their start date.

This role does not meet the minimum requirements set by UKVI to enable sponsorship under the skilled worker route. Therefore we cannot progress applications from candidates who require sponsorship to work in the UK.

Date amended: Jan 2024