

## Annual Research Forum 2017

### Speaker information

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#### **'Structured lifestyle Education for People With Schizophrenia, Schizoaffective disorder and first episode psychosis (STEPWISE): a randomised controlled trial'**

##### **Abstract:**

**Authors:** Richard Holt; Rebecca Gossage-Worrall, Daniel Hind, Michael J Bradburn, Paul McCrone, Tiyi Morris, Charlotte Edwardson, Katharine Barnard, Marian Carey, Melanie J Davies, Chris M Dickens, Yvonne Doherty, Angela Etherington, Paul French, Kathryn Greenwood, Sridevi Kalidindi, Kamlesh Khunti, Richard Laugharne, John Pendlebury, Shanaya Rathod, David Saxon, David Shiers, Najma Siddiqi, Lizzie A Swaby, Glenn Waller, Stephen Wright.

**Background:** Obesity is two-fold commoner in people with schizophrenia than the general population, and this significant inequality has serious consequences in terms of physical health complications and premature mortality. We assessed whether a group-based structured education programme could support weight reduction in people with schizophrenia, schizoaffective disorder and first episode psychosis.

**Methods:** We recruited adults with schizophrenia, schizoaffective disorder or first episode psychosis from ten community mental health organisations in England. Participants were allocated to the STEPWISE intervention or treatment as usual in a 1:1 ratio using web-based randomisation stratified by site and time since antipsychotic initiation.

The 12-month intervention comprised four 2.5 hour weekly sessions of structured group lifestyle education, with further maintenance contact every two weeks and (booster) group sessions at 4, 7 and 10 months. The primary outcome was weight change after 12 months. A number of secondary outcomes were studied and a mixed-methods process evaluation was also included.

**Findings:** Between 10 March 2015 and 31 March 2016, we recruited 414 people, including 42 from Leeds & York (intervention 208, usual care 206). 341 (84.4%) participants completed the trial. At 12 months, weight reduction did not differ between groups (mean difference 0.0 Kg, 95% CI -1.6 to 1.7,  $p=0.963$ ); physical activity, dietary intake and biochemical measures were unchanged. The primary outcome differed widely between sites. STEPWISE was well-received by the participants and facilitators. The healthcare perspective incremental cost-effectiveness ratio was £246,921 per quality-adjusted life-year gained.

**Interpretation:** Participants were successfully recruited and retained in the RCT indicating a strong interest in weight management interventions; however, the STEPWISE intervention was neither clinically nor cost-effective overall. The results for the Leeds and York site were not representative of the whole group, however, and may warrant further exploration. Further research is needed to determine how to manage overweight and obese people with

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schizophrenia; in the meantime, clinicians should seek to optimise care on an individual basis, reviewing antipsychotic medication, giving tailored lifestyle advice and delivering adjunctive interventions where indicated (for example through using the Lester cardiometabolic tool).

#### Speaker bio:

**Dr Stephen Wright** is a consultant psychiatrist with the York & Selby Early Intervention Team, and locality Deputy Medical Director for Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV).



He continues to work as an Honorary Researcher with Leeds & York Partnership NHS Foundation Trust as the Principal Investigator for the Stepwise Trial and as an Honorary Senior Lecturer at the University of Leeds School of Medicine & Hull York Medical School.

He has a long-standing interest in adolescent and young person's mental health, particularly in early intervention, transition and student mental health. He is TEWV medical lead for Early Intervention Services and Clinical Advisor to the Yorkshire & Humber EIP Clinical Network, supported by NHS England. More recently, he was appointed as the Mental Health Clinical Lead for the Humber Coast & Vale STP.

He has been involved in a variety of research over the years, from molecular genetics to psychosocial studies. He has supervised many student and trainee research projects, some of which have led to publications and received awards. In addition to Stepwise, he is currently the Principal Investigator for one other multicentre programme study, SCENE, which is investigating the potential therapeutic benefits of improving people with psychotic disorders' social connections.

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### **‘A Pilot Study Examining the Validity of the Local Nutritional Screening Tool (NST) within an Inpatient Mental Health and Learning Disability Setting in Comparison to Malnutrition Universal Screening Tool (MUST).’**

#### Abstract:

**Introduction and Background:** People with a mental illness and/or LD are at higher risk of obesity, malnutrition and serious health problems compared to the general population (Public Health England, 2013). Early detection of under and over nutrition is vital, with NSTs the most effective first line approach (NICE, 2012). Worldwide there are no validated NSTs for this population. As a result LYPFT developed a NST but never validated to understand reliability, specificity and or accuracy (NICE, 2012). The pilot study sets out to test validation.

**Methods:** A prospective cross sectional study comparing LYPFT NST against MUST and expert dietitians. Aim 100 research participants across 12 inpatient areas for a MH and LD over 1 week.

**Results:** 90 research participants and 31 staff recruited. Equal division across gender; mean age 46.5 years; majority white British (78.9%) and wide variety of MH and LD diagnoses.

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Results showed a high criterion validity ( $p=0.00$ ,  $r_s = 0.56$ ) between both NSTs with strong inter-reliability between staff and dietitians ( $P=0.00$ ,  $r=0.93$ ).

**Discussion and Conclusion:** The study highlighted a gap in nutritional screening for this population and a general lack of consensus on validation (Elia & Stratton, 2012). It gives assurance that LYPFT NST is reliability, specificity and accurate for this population in comparison to MUST but would recommend a larger sample size to be conclusive regarding validation.

#### Speaker bio:

**Jennifer McIntosh** MSc, PGCHE, BSc (hons), RD

Jennifer has over 20 years' experience working across a diverse range of dietetics with the last 16 years specialising in mental health. She has extensive experience within eating disorders, CFS/ME and was the clinical lead dietitian for the Leeds Care Group at LYPFT. Jennifer currently is employed by LYPFT whereby she has two roles as Specialist Dietitian within inpatient CAMHS and Allied Health Professional Lead for the Specialist and LD care group. She has published two chapters on the role of diet in CFS/ME within the Manual of Dietetic Practice, 5th Edition and Fighting Fatigue a practical guide to managing the symptoms of CFS/ME. Jennifer is has just completed her masters in Nutrition at Leeds Beckett University.

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### 'Development of the Brief Addiction Therapy Scale (BATS), a tool for evaluating treatment delivery'

#### Abstract:

Methods of evaluating practice in the addiction field have typically been designed to measure treatment fidelity in research trials. These determine the extent to which treatments are delivered according to the research protocol or manual and are important for supporting claims for treatment effectiveness. Treatments shown to be effective in research trials need to be delivered with fidelity in routine practice and this requires a measure to evaluate therapist practice. BATS aims to address this by providing a validated scale that applies to psychological therapies for alcohol and drug use problems. The development of BATS will be presented along with the first version of the scale. BATS provides a useful tool for training and supervision, and feedback from it has the potential to impact on therapist competence and patient outcomes.

#### Speaker bio:

**Helen Crosby** is a PhD student at the Leeds Institute of Health Sciences, University of Leeds. She was awarded a SSA PhD studentship and funding from Alcohol Research UK to develop the Brief Addiction Therapist Scale (BATS). BATS is a tool for evaluating treatment delivery in routine practice for alcohol and drug use problems. She has a background in psychology (BSc Psychology, MSc Health Psychology, PGCert Health Research), and experience of working in mental health. Helen has a track record of addiction research; for example, she contributed to the Addiction Research in Acute Settings (ARiAS) research programme, a programme of research funded by the NIHR Collaboration for Leadership in

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Applied Health Research and Care (CLAHRC). She has evaluated therapists' delivery of psychological therapies in clinical trials and smaller research projects. She has taught on the DipHE and BHSc in Addiction Studies at the University of Leeds. Helen's research interests include behaviour change, treatment fidelity, substance use, and digital addiction.

## 'Developing the Quality of Curiosity: an Evaluation of the NSCAP Infant Mental Health Course'

### Abstract:

**The course:** The Infant Mental Health (IMH) is a 10 week CPD course with 3 monthly follow-up consultations. The training offers a practical and theoretical introduction to the foundations of emotional, cognitive and personality development in babies and young children in the context of their primary relationships.

**Evaluation aims:** The evaluation aimed to assess the extent to which the course impacted on practitioner's work practice.

**Methods:** From January 2017, a mixed methods design was used to collect feedback from course participants at the start of the course, end and at 3 months follow-up a. Evidence of impact was also collected from previous courses' participants.

**Findings:** Practitioners reported more frequent, routine use of observation skills and reflection on the meaning of parent-infant interactions within the workplace. The group learning experience had created the space for them to reflect on clients' needs, assimilate theoretical concepts, develop critical self-reflection skills and broader theoretical and practical understandings of perinatal mental health work.

The learning was experienced as transformational, leading to new ways of seeing, understanding and therefore the ability to change workplace behaviour.

**Conclusions:** The experiential and practice-focussed nature of the course enables the content to be more readily translated into everyday work practice.

### Speaker bio:

**Dr Lerleen Willis** is the Research & Development Lead at the Northern School of Child & Adolescent Psychotherapy, Leeds (hosted by LYPFT). Her role includes the oversight of research & evaluation activity for NSCAP's training and clinical services as well as leading the teaching of research methods on the Professional Doctorate in Child & Adolescent Psychoanalytic Psychotherapy (D.Ch.Psych.Psych.). Previous research and development roles were based in Public Health where she completed a number of evaluation and research skills training projects.

Lerleen's academic background is in language teaching, sociolinguistics and occupational psychology.

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**Sumi Cannon** is a Psychoanalytic Child and Adolescent Psychotherapist at the Northern School of Child and Adolescent Psychotherapy (NSCAP) in Leeds, NSCAP is an NHS training facility. Prior to NSCAP Sumi worked in CAMHS for 17 years.

Sumi is the Early Years and Parenting Lead for Under 5s at NSCAP and the program lead for the Effective, Intensive Early Intervention course in Infant Mental Health.

Sumi is a tutor on the Psychoanalytic Observational Studies Master's program; she has a particular interest in naturalistic baby observation as a relationship-based intervention and in developing the quality of observational skills in professionals working in early years.

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## ‘Supporting Carers of People with a Personality Disorder’

### Abstract:

The NICE Guidelines for Borderline Personality Disorder (2009) indicate that families and carers of individuals with BPD experience high levels of psychological distress. Families have suggested that information about the diagnosis, care and treatment is important in addition to gaining support from other carers. There is limited evidence relating to the effectiveness of such support. Leeds Personality Disorder Services has developed a carers' group which aims to provide education about personality disorder and to support carers in thinking about what caring for someone with a personality disorder might entail.

The group was evaluated utilising standardised questionnaires measuring satisfaction, personal wellbeing and knowledge & understanding of personality disorders. The results indicate that carers were very satisfied with the group. They had developed an improved understanding of the nature of personality disorder and reported experiencing improved personal wellbeing. This was a small pilot study and as such may not be generalizable to a wider group of carers, and as such more data is being collected from ongoing groups. The presentation will be co-facilitated by a carer who will share their experience of attending the group.

### Speaker bio:

**Dr Ruth Sutherland** is a Clinical Psychologist and Cognitive-Behavioural Psychotherapist. She trained at Leeds University and has worked in a range of services before joining Leeds Personality Disorder Services in 2014. She is passionate about improving services for individuals who have experienced significant trauma, and whose experiences and needs have often been poorly understood by mental health services.

Ruth is particularly interested in the delivery of supervision, consultation and training for staff in order to develop a psychologically-informed approach to working with people with personality difficulties. Ruth is the service lead for Service User and Carer Involvement and is working to increase co-production in service design and delivery. Ruth is an experienced group facilitator and has recently led on the development of groups for carers of people with personality disorder. Ruth is attempting to learn to speak French, and loves cats, music, travel and sci-fi.

**Alice Holland** lives with her partner who has borderline personality disorder. She is also a support worker for people with complex needs. Her experiences of personality disorder in her personal life are very different to those in her professional life.

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Alice attended the Carers' Group to better understand her partner's mental health and gain new insights in how to support them. She feels there is a need to improve awareness and understanding of personality disorder. She has struggled to explain it to friends and family in the past but has found that a combination of lived experiences and theory work well. Alice is now co-facilitating Carers' Groups as an Expert-by-Experience alongside staff from Leeds Personality Disorder Services.

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### **'Current and Potential Future Research: An overview of research in Liaison Psychiatry in Leeds'**

#### **Abstract:**

Not received yet.

#### **Speaker bio:**

**Else Guthrie** Not received yet.

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### **'The influence of familism, willingness to care and preparedness on carer outcomes: The Caregiving HOPE study'**

#### **Abstract:**

**Authors:** Sahdia Parveen, PhD; Gary Fry, PhD; Richard Fortinsky, PhD; Val Morrison, PhD; Jan R. Oyeboode, PhD

As the population continues to age, an increasing number of family members will be required to provide care for relatives with dementia. However, little is known about how willing and prepared individuals are to provide care; additionally, service providers often assume that family members are willing to provide care. The aim of this study is to explore how changes in the sense of obligation, willingness, and preparedness influence south Asian and white British carers' wellbeing. A cohort of 717 family caregivers completed a questionnaire exploring cultural obligation, willingness to care, preparedness, carer gain, burden and anxiety and depression. Ethnicity was found to have an impact on cultural obligation, willingness, preparedness and carer outcomes. Preparedness was found to be a significant determinant of caregiver outcomes. In addition 10 south Asian and 10 white British carers have participated in in-depth interviews. The main themes to emerge from initial interviews include: carer motivations and willingness to provide emotional, instrumental and nursing care and preparedness for diagnosis, seeking information and services, coping with behavioural problems, selecting a care home and end of life care.

#### **Speaker bio:**

**Dr Sahdia Parveen** is a senior research fellow at the Centre for Applied Dementia Studies at University of Bradford. She has an interest on the impact of culture on dementia care. Sahdia is currently leading the Caregiving HOPE study.

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**‘Let’s talk about...sex: An exploration of Healthcare Support Workers (HCSWs) views and experiences in relation to the sexual health needs of people with serious mental illness (SMI) on inpatient wards.’**

**Abstract:**

**Background:** People with SMI have been shown to be at higher risk of developing physical health problems as compared to the general population. On average, people with a severe mental illness (SMI) die 15-20 years earlier than the average population (Davies, 2014). Whilst the assessment of the physical health is improving, one area that is often neglected is sexual health (Hughes et al, 2015). Much of the current research focuses on the experiences of mental health nurses in addressing the sexual health needs of people with a SMI. This research suggests that high workloads, feelings of embarrassment and a lack of routine sexual health assessment are factors in the failure to meet this need. There is no research into the experiences of Healthcare support workers who are responsible for delivering a range of therapeutic activities and care.

**The aim of the study:** To investigate the experiences of Healthcare Support Workers (HCSW) when they address the sexual health needs of people with serious mental illness on inpatient wards.

**Methodology:** A non-experimental qualitative study was carried out within Leeds and York Partnership NHS Foundation Trust which is a specialist mental health and learning disability service across Leeds, Yorkshire and Humber region. A convenience sample of HCSW was chosen and five participants were recruited. Data was collected through face-to-face interviews, recorded and transcribed. Data was analysed using thematic analysis following the Framework Approach to generate themes and core concepts.

**Findings:** Nine themes emerged from the thematic analysis of the participants accounts of their experiences of supporting the sexual health needs of people with SMI: 1. Defining sexual health, 2. Service user engagement, 3. Inpatient setting, 4. Experiences, 5. Feelings, 6. Unique perspectives, 7. Hierarchy, 8. Role and responsibilities and 9. Improving the situation. From these themes, four core concepts; 1. Acute inpatient environment, 2. Barriers, 3. HCSW role, standards and competencies and 4. Improving the situation were developed.

**Conclusions:** This study has shown that sexuality and sexual health is an issue on inpatient mental health wards. The experiences of HCSWs are similar to that shown in previous research amongst mental health nurses. HCSWs reported many barriers to addressing sexual health needs such as feelings of embarrassment and a lack of knowledge. The study found that sexual health was not addressed in a coordinated or systematic way, which is concerning as HCSWs take direction from registered staff. Sexual health is often not addressed in a MDT approach which threatens to undermine the holistic way that mental health is assessed. HCSWs were found to be on the periphery of the decision making process even though they are an integral part of the workforce delivering a lot of the therapeutic interventions.

**Speaker bio:**

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**Matthew Osborne** is a Health Improvement Specialist within the Healthy Living Service. He manages the Healthy Living Advisors along with supporting health and wellbeing initiatives across the Leeds Care Group. His role is jointly funded by Leeds Public Health to promote physical health within LYPFT. Matthew previously worked as a primary teacher before entering the NHS. He has worked in Derbyshire Community Healthcare Trust and Southwest Yorkshire Foundation Trust supporting whole school approaches to improving health and wellbeing. Matthew has recently completed a master's degree in Public health at the University of Sheffield. His interest in the sexual health needs of people with SMI stem from his role as Principal Investigator on the RESPECT trial and previous development work in Sex and Relationships Education curriculum materials for schools.

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### 'The Child Oriented Mental health Intervention Centre (COMIC)'

#### Abstract:

In January 2018 COMIC was launched at a conference. This is the Child Oriented Mental health Interventions Centre and Barry leads this collaboration between the University of York and the Leeds and York Partnership Foundation NHS Trust. This focuses on developing an evidence base for child friendly interventions in mental health, an area which is greatly under-researched. Barry will be discussing some of the research the team are undertaking.

#### Speaker bio:

**Barry Wright** is Chair of Child Mental Health at the University of York and works clinically with deaf children who have complex mental health problems. He is Clinical Lead of the National Deaf CAMHS.

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### 'Not another tool kit! Co-designing the evaluation of digital rehab and recovery'

#### Abstract:

Evaluation of digital interventions is often focused on the implementation of an app or digital tool to a service or cohort of people. mHabitat were funded via two NHS England streams to support digital aspects of LYPFT redesigned rehab and recovery team pathways of care. The interventions included installation of Wi-Fi, use of an app, training and also issuing of free devices to assessed service users. This presentation will look at the approach used for the multiple interventions, the challenges and sustainability issues raised during the project. mHabitat also developed a web based toolkit aimed at clinical teams who were seeking to carry out in-house evaluations for sustainability of business as usual interventions.

#### Speaker bio:

**Alicia Ridout**, Deputy Director mHabitat, is an Occupational Therapist with experience across NHS, private healthcare, higher education and 3rd sector. She is Deputy Director and Clinical Safety Officer for mHabitat, an innovative digital NHS service which is part of LYPFT.

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She is CAHPO Digital Innovator 2017 and lead for award winning MindWell-Leeds. Alicia sits on the Royal College of Occupational Therapists (RCOT) Conference Development Team. A visiting fellow at the University of Leeds Yorkshire Centre for Health Informatics, she also chairs an MRC research advisory group. She has published research and completed a project focused on the occupational impact on working carers exploring ill health prevention in 2015 funded by RCOT.

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