



Innovation

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Editorial issue 44 Innovation

Welcome to the 44th edition of Innovation. My name is Sarah and I am the new Head of Research and Development for Leeds and York NHS Partnership Trust (LYPFT). Working remotely has meant a strange start to a job where I don't meet anyone in person and spend my days in my small home office on Zoom! Despite this, I have had a very warm and supportive welcoming.

I manage a team that have coped exceptionally well during a very difficult period when it would have been easy for research to be sidelined. This hasn't happened in LYPFT because all our research that had to be paused has now resumed and this is despite us continuing to support Urgent Public Health research in both our, and other, nearby Trusts. A massive thanks has to go to the hardworking Research and Development Team and other staff on the ground who have worked tirelessly to ensure we can continue to offer research opportunities to our service users.

Given the fact that research has played such a crucial role in solution for COVID 19, it is no surprise that health research is now more widely recognised by the general public. A recent [YouGov survey](#) has shown the public recognises the important part health research has to play in achieving medical advances although the effort required to do this is still not clearly understood. The CQC has also just published their [strategy](#) that puts research at the heart of what the NHS offers. Therefore, I think it is time to seize the moment. I have never known a time when research was more in the public eye; there has even been a recent story line in EastEnders!

Luckily, we have lots to celebrate at LYPFT and this is evident in the studies highlighted in this edition.

Studies such as the [I-SOCIALISE LEGO®-based therapy](#) that

seeks to establish an evidence base for Lego-based therapy used in schools with children with autism spectrum disorders. Louise Bryant and Amy Russell report on important research that looks at the way reasonable adjustments are made for patients with learning disabilities within a diabetes service. Their work is now available to view on a short film through Diabetes UK which can be found here: <https://www.youtube.com/watch?v=CNvCensR9UY>. In this edition we also cover the Child Orientated Mental Health Intervention Centre (COMIC) conference that happened earlier this year. The conference had speakers talk on a wide range of topics around child mental health and the article gives you a flavour of the work COMIC is currently supporting. In our last edition, we included a study on the findings of therapeutic relations with inpatients, this [short animation video](#) is now available that describes what the study was about and their key findings.

As we take tentative steps back into a 'new normal', let's celebrate those that deliver and participate in health research.

Sarah Cooper
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The experience of community mental health services with people who have long-term experiences of psychosis.

Introduction:

Over the past thirty years there has been a shift in the way in which we support people who have experience of psychosis. The recovery movement has facilitated a move from a palliative approach to care, to one that emphasises the possibility and likelihood of recovery. This aligns itself with a social constructionist approach to psychological distress as it provides a client-led understanding of someone's difficulties. This study aimed to explore people's experience of recovery orientated care within community mental health services, and to explore any changes that have occurred over-time.

Method:

A qualitative study was conducted using Interpretative Phenomenological Analysis. Seven individuals who have experience of psychosis and who have worked alongside services for five years or more were recruited from community mental health teams. Interviews were conducted via the telephone using a semi-structured approach.

Results:

Individuals reported a mixed experience of services that incorporated aspects of care that was aligned with a recovery approach but also captured experiences that could be considered reflective of more traditional services. Four super-ordinate themes were identified; 1) Grateful for connection; 2) Hesitant about being dissatisfied; 3) The unequal distribution of power and; 4) An indeterminable vulnerability.



Discussion:

Service-users benefited from a secure and connected relationship with professionals for which they were extremely grateful. They were less comfortable about criticising services however did describe elements of care that were oppressive and isolating. Furthermore, the balance of power continues to favour professionals, with a more equal relationship required if we are to facilitate recovery and empower service-users.

This was a non-portfolio study recruiting participants from LYPFT and Greater Manchester Mental Health NHS Trust. The project was undertaken as part of a Doctorate in Clinical Psychology.

Lucy Loftus, University of Leeds,
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REAL-D: REasonable adjustments for Learning Disability - Diabetes

The Equality Act 2010 requires that reasonable adjustments are made to healthcare services for people with a learning disability. There is little indication however that across the board most services have made the necessary adjustments or that if they have the service changes are having the desired effect.

This project aimed to understand; influences on take up, suggest possible solutions when there are barriers, and evaluate the impact of adjustments when they are made - using diabetes services for adults with a learning disability as a case study in primary care and community diabetes services. The research was funded jointly by the British Medical Association Scholarship Grant and by Leeds Community Healthcare Trust.

We interviewed 23 NHS staff, five of which were recruited through LYPFT, they were recruited across diabetes services primary care, community learning disability teams and health facilitation. We established what reasonable adjustments were being made, what was being recorded and identified the key barriers to successful barriers to reasonable adjustments and referral pathways for people with a learning disability. We observed 9 routine diabetes care appointments with people with a learning disability and interviewed the staff members and the patients separately after the appointment to gain their feedback on what did and did not work in practice.

We found that staff struggled to make reasonable adjustments that involved the whole team changing behaviour, like making double appointments and sending out easy read appointment letters. They were reluctant to alter patient's records to record a learning disability and/or to flag the need for reasonable adjustments. They identified further support with communication with patients and high quality visual resources as a key training need.

As a result of this research we created a series of training videos hosted on Diabetes UK's website www.diabetes.org.uk/learning-disability and launched them on twitter and at the Diabetes UK Professionals conference. In November 2019 we successfully bid for further RCF funding from LYPFT to create a new accessible resource on the complications of diabetes. The project, EDICT: Enabling Informed Diabetes Consent is finalising the design of the resource and it will be launched on the Diabetes UK website in the autumn.

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Trends in referrals to liaison psychiatry teams from UK emergency departments

Introduction

The number of people over the age of 65 attending Emergency Departments (ED) in the United Kingdom (UK) is increasing. Those who attend with a mental health related problem may be referred to liaison psychiatry for assessment. Improving responsiveness and integration of liaison psychiatry in general hospital settings is a national priority. To do this psychiatry teams must be adequately resourced and organised. However, it is unknown how trends in the number and type referrals of older people to liaison psychiatry teams by EDs are changing, making this difficult.

Methods

We performed a national multi centre retrospective service evaluation, analysing existing psychiatry referral data from EDs of people over 65. We described trends in the number, rate, age, mental health presentation, and time taken to assessment over a 7 years period.

Results

Referral data from 28 EDs across England and Scotland were analysed (n = 18,828 referrals). There was a general trend towards increasing numbers of people referred to liaison psychiatry year on year. Variability in referral numbers between different departments, ranged from 0.1 to 24.3 per 1000 ED attendances. The most common reasons for referral were mood disorders, self harm and suicidal ideas. The majority of referrals were assessed within 60 min, however there is variability between departments, some recording waits over 11h.

Discussion

The data suggests great inter departmental variability in referral numbers. Is not possible to establish the cause of variability. However, the data highlights the importance of asking further questions about why the differences exist, and the impact that has on patient care.

You can read the full report here: <https://onlinelibrary.wiley.com/doi/abs/10.1002/gps.5547>

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Other researchers:

Manimegalai Chinnasamy, Bradford District Care NHS Foundation Trust, Sarah Bradbury and Sarita Dasari, Humber NHS Teaching Foundation Trust; Laura Shaw, Tees Esk and Wear Valleys Foundation NHS Trust, Darlington, UK; Sara Ormerod and George Tadros, Birmingham and Solihull Mental Health NHS Foundation Trust; Alison Wilkinson and Angus Brown, Cambridgeshire and Peterborough NHS Foundation Trust; Rebecca Chubb, North Staffordshire Combined Healthcare Trust; Mazen Daher and Hugh Grant Peterkin East London NHS Foundation Trust; Pramod Kumar, Berkshire Healthcare NHS Foundation Trust; Andrew Gaskin, Eleanor Stebbings and Andrew Wells, South London and Maudsley NHS Foundation Trust; Karen Williams, 2gether NHS Foundation Trust; Justine Brennan Tovey, Cumbria, Northumbria and Tees Valley NHS Trust; Sunita Sahu, Oxleas NHS Foundation Trust; Roger Smyth, NHS Lothian; Hilary Kinsler and Stephen O'Connor, North East London NHS Foundation Trust; Ross Overshott, Greater Manchester Mental Health NHS Foundation Trust; Kehinde Junaid and Shweta Mittal Nottinghamshire Healthcare NHS Foundation Trust; Aparna Mordekar, Sheffield Health and Social Care NHS Foundation Trust; Jenny Humphries, Avon and Wiltshire Mental Health Partnership; Karen James, Hywel Dda University Health Board; Niall Campbell, Cheshire and Wirral Partnership NHS Foundation Trust; Robert West, University of Leeds; Elizabeth L Sampson, Barnet, Enfield and Haringey Mental Health Trust.



I-SOCIALISE LEGO®-based therapy

The I-SOCIALISE research study, a randomised controlled trial funded by the NIHR's Public Health Research (PHR) programme, recently came to an end. This was after very successfully recruiting to time and target thanks to its wonderful participants in Leeds, York, and Sheffield as well as the study teams in these areas.

This research study looked into the clinical and cost effectiveness of LEGO®-based therapy for children and young people with autism spectrum disorders (ASD) in mainstream school environments as compared with usual support from school and community services. LEGO®-based therapy is a group social skills intervention designed for children and young people with ASD. Originally created by a paediatric neuropsychologist in the US, its popularity in the UK has increased a great deal in recent years. Its focus is on creating fun and playful social interactions through group building of LEGO® models, a toy with which many children are intrinsically motivated to play. Groups are usually run with three children and an adult trained in the intervention who facilitates and lightly guides the session rather than running it in a directive way. The children take on one of three roles: (1) the engineer, who reads out the instructions to the group (2) the supplier, who finds the correct pieces based on the instructions from the engineer (3) the builder, who builds the model based on the instructions from the engineer and the pieces from the supplier.

Recruitment began in October 2017 and continued until April 2019, with follow-ups running until April 2020. A total of 260



children and young people took part with their parent or guardian and an associated teacher or teaching assistant. A number of outcome measures were completed by participants randomly allocated to both the intervention arm and the control arm so that we could see the effect of LEGO®-based therapy as compared with usual support. Cost effectiveness and acceptability of the intervention were also investigated, along with intervention delivery fidelity to the intended delivery method.

The full report of this study has been written and submitted to PHR. Results will be available once this is published in the PHR journals library which will likely be in the coming year. Results are also currently being written for submission to an open access journal and will be available shortly.

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18th Annual Child Mental Health Research Network Day

The 18th annual child mental health research network day was held online over 2 days by the Child Orientated Mental Health Intervention Centre (COMIC) team, the 2 days brought together professionals with a keen interest in developing child friendly mental health interventions. This was the first time the conference had been held online and it proved to be a great success.

Professor Lina Gega...

...from the University of York opened our first day, welcomed everyone in attendance and introduced our BSL interpreters for the day.

Professor Barry Wright...

...head of the COMIC research team, kicked things off with an overview of the COMIC mission and hopes for the future including some exciting grant applications. The team are passionate about working with children and young people to empower and support their wellbeing.

Next up...

...was Trial Co-ordinator, Ellen Kingsley, presenting the preliminary results from the I-SOCIALISE trial. This is a school based RCT evaluating how effective LEGO-based therapy is for improving social and emotional competence in children with Autism Spectrum Disorder.

Emma Standley and Leah Atwell...

...from the COMIC team presented next on how they adapted the Autism Spectrum Social Stories in Schools Trial 2 (ASSIST2) in response to COVID19. It was very impressive to see how the team adapted to home working and overcame challenges such as school closures and collecting data online.

It was then back over to...

...Barry Wright to present the preliminary findings from the Alleviating Specific

Phobias Experienced by Children Trial (ASPECT). This is another RCT conducted by the COMIC team comparing One Session Treatment with Cognitive Behavioural Therapy for treating phobias in children and young people.

After a quick break...

...Research Assistant Emily Hayward, presented the qualitative results from the ASPECT study. The study explored the experiences of the study participants and clinicians who took part in the trial.

Up next...

...Consultant Child and Adolescent Psychiatrist Dr Clare Fenton presented a plan of research into clinical recommendations for distraction techniques or alternatives to self-harm in young people.

Dr Jon Stott...

...a Clinical Academic Fellow in the COMIC team, spoke about his systematic review of the association short non-coding RNAs and Autism Spectrum Disorder.

Our final presentation...

...came from our chair, Professor Lina Gega. Lina provided us with an overview of her research on Community-delivered Behavioural Activation Training (ComBAT) for adolescents suffering from depression. We look forward to hearing more about this trial in the future!

Network Day

Days 26th and 27th April 2021. Hosted by COMIC. Brought together researchers and health professionals for deaf and hearing children. This was a success!



Day 2 of the conference...

...focused on research with deaf children and interventions to improve attachment problems in children. Dr Cat Teige from the COMIC team kicked things off with an overview of the day ahead. Cat is the research programme manager for the team and oversees grant applications for future research funding.

First up...

...was Research Fellow, Megan Garside. Megan provided a great overview and results from the systematic review of early support interventions for parents of deaf infants.

Next...

...Research Assistant Hayley Carrick, presented an overview of research exploring the impact of the Coronavirus pandemic on the mental health and wellbeing of deaf children and young people across the UK.

After a quick tea break...

...we were joined by Dr Abigail Gee who presented findings from a qualitative study exploring young hearing people's

experiences of supporting communication for their deaf parents in healthcare settings using British Sign Language.

Presenting next was...

...Assistant Psychologist, Rachel Hodgkinson. Rachel provided an outline of the results from a comparative study of the presenting profiles of deaf and hearing children and young people with an existing diagnosis of Autism.

Helen Phillips from COMIC then gave us the final results from the Diagnostic Instruments for Autism in Deaf children Study (DIADS). The DIADS study modified 3 different Autism assessment tools to be appropriately used with deaf children.

Our final 2 presentations...

...came from Elaine Amoah (UCL) and Eleni Tsappis (COMIC). Elaine presented the results of a survey of current practice in the UK for 0-13 year old children with or at risk of attachment problems. Eleni continued to discuss 2 systematic reviews of interventions to improve attachment problems in children.

The 2 days were a fantastic opportunity for researchers, clinical staff and anyone with an interest in child mental health research to learn and network.

On behalf of the COMIC team, we would like to thank all of our attendees, presenters, organisers and BSL interpreters for helping to make this fantastic event. If you would like to learn more about COMIC and the work we do please visit our website <https://www.comic.org.uk/> or if you have any questions please email us at research.comic@nhs.net.

See you next year!

1,516 men

aged 40-54 died by **suicide** in 2017, nearly a **quarter** of the deaths by suicide in the UK

Our findings suggest...

Services working with you



You should be offered a **range** of support that is **meaningful** to you, your needs and preferences

Safer prescribing



If you have a **physical health condition**, services might ask you to discuss the best plan for **managing your medication**

Asking for help



If you feel uncomfortable seeking help, you should be able to access information on **local informal sources of help**

Psychological therapy



You should be offered therapy – a **chance to talk**, take **practical steps** to help you address your risks

Consent for Contact for research

What is Consent for Contact for research?

Consent for contact is about empowering you to decide if you would like to be contacted about opportunities to take part in mental health research.

Research can benefit participants directly but also improves the lives of thousands of people every year.

What type of research could I be involved in?

The aim of research in the Trust is to find out more about health conditions in children, adults and older people.

There are different types of research you may be invited to take part in. Some may be looking into the cause of health conditions others may be finding out if new treatments and therapies can improve people's health. All research you are invited to take part in has been ethically approved and is safe to run in the NHS.

Taking part may involve talking about your own experiences, completing a questionnaire, or trying out a new talking therapy, or treatment. Participation may include face to face meetings with a researcher or via phone or video call. Taking part is usually in addition to your current treatment plan and should not affect care you currently receive.

Sometimes there are incentives such as vouchers or cash to thank you for your time.

What happens if I agree to consent to be contacted?

Staff in the Trust will flag your agreement on your electronic medical record. We will review your medical record to assess your suitability for current research opportunities for example your current symptoms or medication. If you are eligible to take part in research we will contact you with further information and ask if you would like to take part – you can then choose to decline or accept. If there is no research suitable for you at the moment you may not hear from us until there is.

Can I change my mind?

You can change your mind at any time; you don't have to give a reason and this won't affect your current care. We will make a note on your medical records so that we avoid contacting you in the future. Your care team may still approach you about specific research they feel may be beneficial, or may ask about your interest in being contacted in the future so you have the opportunity to agree at another time.

For more information to help you decide you can contact the research team:

Phone: 0113 85 52387

Email: research.lypft@nhs.net

Website: www.leedsandyorkpft.nhs.uk/research

Supporting independence at home for people with dementia



Supporting independence at home for people with dementia

Would you be interested in helping us?

We would like to invite family or friends who support someone living with dementia to try out a new intervention (NIDUS-family) to help people living with dementia stay independent and remain at home.

What will happen if I take part?

- ▶ You will have the opportunity to discuss the study and ask questions.
- ▶ You will be asked to complete questionnaires with a researcher at the start of the study and then 6 & 12 months after the initial call.
- ▶ If you are offered NIDUS-family, a researcher will explore what is important to you and the person you support, help develop strategies with you and signpost you to services. This might include support with getting out and about, staying healthy and safe, improving sleep, help at home and making future plans.
- ▶ We will offer you £60 in vouchers to thank you for taking part.

If you are interested in hearing more please contact...

Alice Locker

Leeds and York Partnership NHS

Foundation Trust

Email: alice.locker@nhs.net

Tel no: 07980 958455



Funded by
Alzheimer's
Society

Research partners



Homeside - Partnership in dementia care



Homeside

Partnership in dementia care

A research study exploring Music and Reading for
People with Dementia and their Caregivers

About the study

If you have a diagnosis of dementia, or live with someone with dementia, you may be interested in participating in this research project.

Participants with dementia and their caregivers will be randomly assigned to either a:

- Music programme
- Reading programme
- Control group (no programme)

The reading and music programmes are designed to be delivered by family caregivers, who will receive training in their own home either face to face or online according to their circumstances

Get involved

NO PRIOR READING OR MUSIC SKILLS REQUIRED

We are recruiting participants now! Get involved to help us explore the benefits of music and reading for people with dementia.

Contact

Please contact the research team for further information or to register your interest:

Name Lisa Hackney
Phone 07980 95679
E-mail lisa.hackney1@nhs.net

or visit www.aru.ac.uk/homeside



a.r.u. | Cambridge Institute for
Music Therapy Research

RecruitmentFlyer_V3-2; 29/03/2020; IRAS 260067



Finding the Evidence - training dates for your diary

The Library and Knowledge services team are currently delivering information skills training courses remotely. The team are delivering one-to-one training to request this you will be required to complete a training request form <https://www.leedslibraries.nhs.uk/courses/one-on-one-request.php>.

The following courses are free to all Trust staff.

Cochrane library training

This course focuses on the skills required to search the Cochrane Library effectively to retrieve high quality evidence to support work and study.

Critical appraisal

This course focuses on why it is important to appraise journal articles, how to go about doing this, and how to get further help.

Current awareness

Aimed at staff who wish to set up and use email and RSS alerts and feeds to support their practice or professional development.

E-journals and e-books

Aimed at staff who wish to use e-journals and e-books to support their practice or professional development.

Google and beyond

Aimed at staff who wish to gain skills in searching Google for information to support their work, practice or professional development.

Healthcare databases

This course focuses on searching healthcare databases.

NHS OpenAthens account

Aimed at staff who wish to better understand their Athens account and learn about the e-resources that are available to them.

You may also be interested in accessing the introduction *videos below:

Critical Appraisal

Literature Searching

BMJ Best Practice

Royal Marsden Manual

Anatomy Resources

Journals A-Z

Browzine

Kortext

Registering for an NHS

OpenAthens Account

TRIP Database

These videos can be found here: <https://www.leedslibraries.nhs.uk/training/training-videos>

*Please note Library and Knowledge services do not accept the responsibility for the content of these videos which have been produced by suppliers and external organisations.

For more information about any of our library courses; visit www.leedslibraries.nhs.uk/home/

National Institute for Health Research (NIHR) funding opportunities

The NIHR Clinical Research Network Portfolio is a database of studies that shows national clinical research study activity. Clinical trials and other well-designed studies involving the NHS, funded by the NIHR, other areas of government and non-commercial partners are automatically eligible for portfolio adoption. Studies that are adopted on to the portfolio can access infrastructure support and NHS service support costs to help with study promotion, set-up, recruitment, and follow-up.



The Research Design Service (<https://www.rds-yh.nihr.ac.uk/>) provides guidance and support that you will need to access when making an application for NIHR funding. They also provide funding to enable service users, carers and the public to contribute to the development of your research bid.

Funding stream	Deadline
Health Services and Delivery Research	Commissioned (Stage 1) - 05 Aug, 1pm
EME, HTA, HS&DR and PHR	Commissioned - 02 Sept, 1pm

Funding streams:

- 1. Efficacy and Mechanism Evaluation (EME):** Researcher-led and aims to improve health/patient care. Its remit includes clinical trials and evaluative studies.
- 2. Health Services and Delivery Research (HS&DR):** Funding research to improve the quality, effectiveness and accessibility of the NHS, including evaluations of how the NHS might improve delivery of services. It has two work streams, researcher-led and commissioned.
- 3. Health Technology Assessment (HTA):** Funds research to ensure that health professionals, NHS managers, the public, and patients have the best and up-to-date information on the costs, effectiveness, and impacts of developments in health technology.
- 4. Invention for innovation (i4i):** Funds research into advanced healthcare technologies and interventions for increased patient benefit in areas of existing or emerging clinical need.
- 5. Programme Grants for Applied Research:** To produce independent research findings that will have practical application for the benefit of patients and the NHS in the relatively near future.
- 6. Public Health Research (PHR) Programme:** Funds research to evaluate non-NHS interventions intended to improve the health of the public and reduce inequalities in health.
- 7. Research for Patient Benefit (RfPB):** Generates research evidence to improve, expand and strengthen the way that healthcare is delivered for patients, the public and the NHS.

For further details about funding opportunities through the NIHR, visit: www.nihr.ac.uk/about-us/how-we-are-managed/boards-and-panels/programme-boards-and-panels/

Contact us R&D

Innovation is a newsletter for sharing and learning about health research. This includes information about projects being carried out in your area. As such we welcome any articles or suggestions for future editions.

For more information please contact:

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