



# Welcome to the Research Forum 2022

Thursday, 31<sup>st</sup> March 2022 at thestudio, Leeds

[#LYPFTResearch22](#)



Time	Programme item	Presented by
08:30	Registration and refreshments	
09:15	Welcome	Max Henderson, LYPFT
	<b>Session Chair:</b> Dr Max Henderson, LYPFT	
09:30	<i>Community-based Behavioural Activation Training (ComBAT) for Depression in Adolescents</i>	Lucy Tindall and Emily Hayward, University of York
10:00	<i>The latest outputs from COMIC (Child Orientated Mental Health Intervention Centre)</i>	Ellen Kingsley, Megan Garside, Eleni Tsappis and Amelia Taylor, COMIC at LYPFT
10:30	<i>Fresh Start - Seeking to improve the support offered by the NHS, to people who self-harm.</i>	Max Henderson, Mat Harrison, Else Guthrie, LYPFT and Nav Kapur, University of Manchester
<b>11:00</b>	<b>Break (and poster viewing)</b>	
	<b>Session Chair:</b> Sarah Cooper, LYPFT	
11:15	<i>Why Mental Health staff should get involved in research</i>	Wendy Burn, LYPFT
11:45	<i>Parkinson's study</i>	George Crowther, LYPFT
<b>12:00</b>	<b>Lunch (and poster voting)</b>	

Time	Programme item	Presented by
	<b>Session Chair:</b> Dr George Crowther, LYPFT	
13:00	<i>New psychosocial intervention to support Independence in Dementia (NIDUS) programme: an update on our NIDUS-family and NIDUS-professional trials</i>	Claudia Cooper, University College London
13:30	<i>Empowering Better End of Life Dementia Care (EMBED-Care) programme: what we have learnt so far</i>	Professor Liz Sampson, East London NHS Foundation Trust
14:00	<b>Workshops</b>	
	<i>Workshop 1 Involving patients and public in research</i>	Chaired by Charlie Rust, LYPFT
	<i>Workshop 2 Embedding research into your career development</i>	Chaired by George Crowther, LYPFT
	<i>Workshop 3 Optimising recruitment</i>	Chaired by Sarah Cooper, LYPFT
<b>14:45</b>	<b>Closing remarks</b>	<b>Sarah Cooper, Head of R&amp;D</b>



# ***Why Mental Health staff should get involved in research***

**Presented by**

**Wendy Burn, LYPFT**



# **WHY MENTAL HEALTH STAFF SHOULD GET INVOLVED IN RESEARCH**

Professor Wendy Burn CBE

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# Contents

- About me and my research experience
- Some views on research
- Involving NHS staff in research, report from The Healthcare Improvement Studies Institute
- Funding of research
- Learning to undertake research

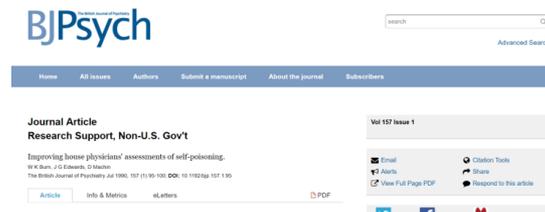
# A bit about me

- Medical school and psychiatry training in Southampton, completed training in Leeds
- Consultant in Old Age Psychiatry in Leeds since 1990, work 2 days a week in memory service
- First Head of Yorkshire School of Psychiatry
- Dean of Royal College of Psychiatrists (RCPsych) 2011-2016
- President of RCPsych 2017-2020
- Currently work for Health Education England 2 days a week



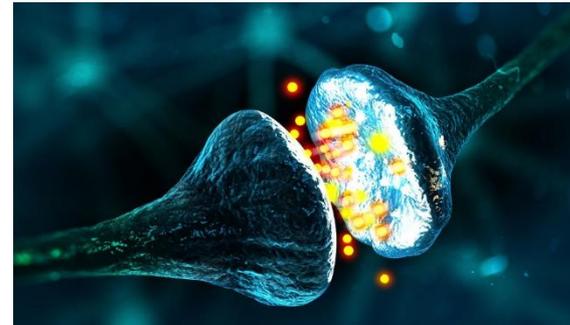
# My own experience in research

- At school bred mice to illustrate how fur colour is inherited
- For A level Biology trained worms which way to turn
- As a medical student project on migraine in diabetics
- Spent a year as a researcher as a psychiatric trainee
- Academic higher training post which included research but decided to be a clinician and then became heavily involved in education



# How have I benefited from my early research experience?

- An understanding of research methodology
- Improved ability to interpret research findings and use in clinical practice
- An interest in new developments
- Improved my CV!



- Some other views on getting involved in mental health research

# A psychiatrist

- “It’s deeply rewarding to be part of discovering new stuff”  
Dr Graham Campbell, Psychiatrist



# His research

- Trial using dimethyltryptamine (DMT) to treat patients with Major Depressive Disorder
- DMT has been used as a recreational psychedelic drug
- Patients are given the drug followed by talking therapy



# An academic psychiatrist

- “Because research is the **ONLY** way of advancing treatments and improving outcomes for people with mental illness. And we have such a long way to go.” Professor Belinda Lennox, Oxford



# Her research

- Looked at antibodies against the N-methyl-D-aspartate (NMDA) receptor in psychosis
- 228 patients with first-episode psychosis
- 3% had NMDA antibodies compared with no controls
- Wasn't possible to distinguish patients clinically
- Now running a clinical trial of immunotherapy



# A pharmacist

- “Having now completed the PhD I can see a huge change in my perspective. My desire to ‘make a difference’ was fueled by my clinical experience and my understanding of the context of working within healthcare systems.” Dolly Sud, Pharmacist in Leicester



# Her research

- She looked at the role of pharmacy in supporting patients with physical health including side effects of medication
- Interviews with patients, carers, care professionals (including doctors and nurses) from both primary and secondary care, and pharmacists
- Focus on understanding the role of pharmacy and the provision of information about psychotropic medication and the effects of this on physical health



# A medical director

- “Research helps us be innovative, stimulated, effective and helps in recruitment and retention too” Dr Ananta Dave, Medical Director of Lincolnshire Partnership NHS Foundation Trust



# An academic psychiatric trainee

- “Because it’s fun! I asked my fellow Welsh Clinical Academic Trainees this and related stuff for a careers talk I was preparing. Here is a selection of responses” Dr Kim Kendall, academic trainee



# Her research

- Looked at people carrying at least one of the 12 copy number variants (CNV) associated with schizophrenia
- CNV carriers performed more poorly on cognitive tests than non-carriers
- Had reduced educational and occupational attainment
- Had increased risk of depression



# A patient

- “Because patients might want to!! Ages ago I was part of a drug trial. I felt useful!” A anonymous psychiatric patient.



- But do staff get involved in research?



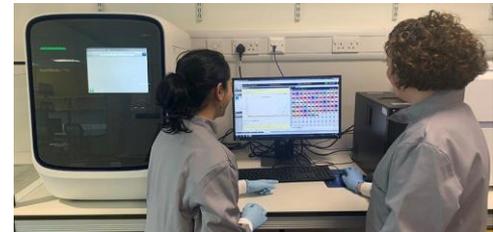
# Report from The Healthcare Improvement Studies Institute 2019

- Involving NHS staff in research
- Looked at literature and interviewed NHS staff



# Why do NHS staff engage with research?

- Personal interest in a topic
- A belief that research and evidence can improve the quality and safety of healthcare and patient outcomes
- A positive prior experience with research
- Career development, reputational or financial benefits
- Cultural expectations about research being part of the job



# How do NHS Staff engage with research?

- Agenda setting
- Designing projects
- Recruitment of study participants
- Data collection
- Data analysis
- Dissemination
- Evaluation



## Research on dementia and depression

**PATHFINDER** is a research study for people over 50 years old with a diagnosis of Alzheimer's or mixed dementia who are experiencing symptoms of depression or low mood.



**What is PATHFINDER about?**

This research study aims to find out if a new form of talking therapy called Problem Adaptation Therapy (PATH) can help people with dementia and their carers to find ways that they can change their environment and activities so

# What is the impact of NHS staff engaging with research?

- Impact on research studies: designing studies, recruiting patients, disseminating findings
- Impact on the wider research system: attracting funding, using research
- Impact on clinical practice: improving performance
- Impact on individuals: career progression, feeling fulfilled

# Challenges for NHS staff involvement in research

- Lack of time
- Lack of support from employer
- Lack of knowledge and skills
- Lack of confidence
- Funding



# Enablers for NHS staff involvement in research

- Formal roles such as research champions in provider organisations
- Clear guidelines and procedures for developing and implementing research
- Access to training in research methods for NHS staff
- Organisational leadership which values research activity



# Funding of mental health research

- UK invests approximately £115 million per year in mental health research
- UK institutions carrying out mental health research receive only 5.5% of the UK health research budget. Investment in cancer research is four times higher, at 19.6%
- Less likely to receive donations from the public



# Global funding for mental health research

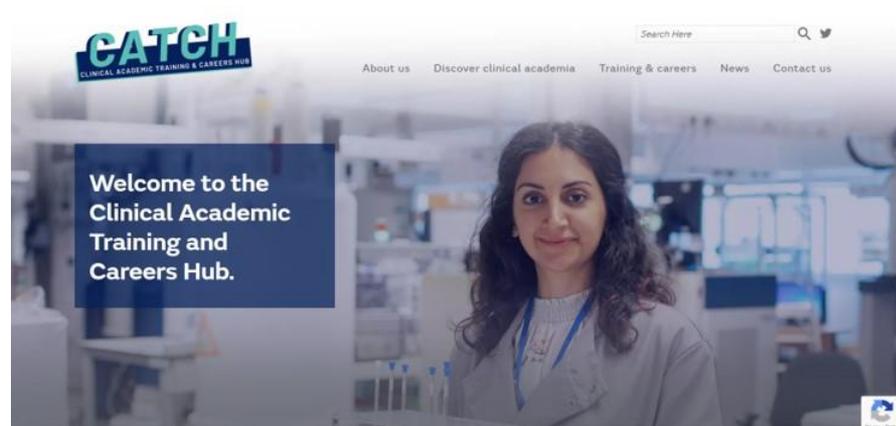
- Study on global funding
- Looked at Dimensions Database from 2015-2019
- It has data from 500 global funders and 5.4 million searchable grants
- Mental illness represented 4% of the total research investment
- Mental illness accounts for 20% of global disease burden





# Training to become a researcher

- Clinical Academic Training and Careers Hub CATCH  
<https://www.catch.ac.uk/>
- Multidisciplinary
- Lots of information



# Academic training pathway for doctors

- Academic Foundation Training Programme: 4 months academic time
- National Institute for Health Research (NIHR) Academic Clinical Fellowships: 25% academic time
- Complete PhD
- NIHR Clinical Lectureship: 50% academic time



# RCPsych Faculty of Academic Psychiatry

- Established to provide a focus for people with a major interest in academic psychiatry
- Open to all members
- International congress
- Prizes and awards
- Advice



# LYPFT Library

- Building is closed but the work goes on
- Provides literature searches, articles and supports projects
- Training on Zoom or Teams, new catalogue of information skills training starting in April  
<https://www.leedslibraries.nhs.uk/courses/>
- Email: [libraryandknowledgeservices.lypft@nhs.net](mailto:libraryandknowledgeservices.lypft@nhs.net)



# Summary

- We should all be involved in research
- Increases our knowledge and understanding
- Makes our work more interesting
- Leads to personal satisfaction and career development
- Will improve what we can offer to our patients



- Thanks for your attention
- Wendy.burn@nhs.net
- Twitter @wendyburn





# ***Parkinson's study***

**Presented by**

**George Crowther**

UNDERSTANDING AND IMPROVING  
OUTCOMES FOR PEOPLE WITH  
PARKINSON'S DISEASE IN THE  
GENERAL HOSPITAL.

George Crowther, Max Henderson,  
Jeremy Cosgrove, Amelia Taylor, Pamela Turpin.

**Parkinson's disease (PD)**





## WHAT IS IT LIKE TO HAVE PD IN HOSPITAL?

- 2 x likely to have a prolonged admission.
- 2.5 x more likely to die.
- 2 x more likely to fall.
- 5 x more likely to have develop delirium.
- 3 x more likely to have an adverse drug event.



Identify aspects of hospital care that predict poor outcomes in PD admissions and understand the reasons for them from the perspectives of healthcare professionals.

# DESCRIBE

We will describe the outcomes of people with PD admitted to LTHT over a 2 year period including; length of stay, morbidity, mortality, falls, adverse incidents, readmission within 30 days and changes in social care arrangements on discharge.

# COMPARE

We will compare outcomes for patients admitted to different areas of the hospital, e.g. acute medicine, orthopaedics.

We will compare outcomes for patients admitted to hospital for different reasons, in particular whether it was directly related to their PD or not.

## LEARN\*

In areas of the hospital where people with PD have different outcomes, we will go beyond the data to explore healthcare professionals' views on the challenges of providing care to PD patients in that environment.

SO WHAT NEXT?

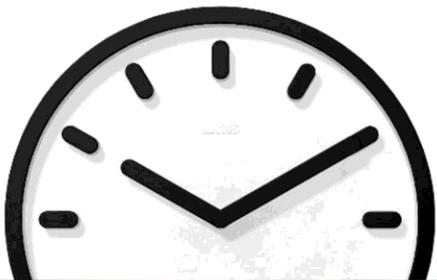


advancing  
neurological  
research

# ferblanc



- 2 years worth of data.
- A very big spread sheet....
- 713 patients.
- 1157 Admissions.



## WHAT DO WE KNOW SO FAR?

- 108 (9.3%) died in hospital.
- 208 (18%) died in hospital or within 30 days of discharge.
- 211 (18%) readmitted.
- 246 (22%) had a change of accommodation precipitated by the admission.

SO WHAT NOW?





## LEARN\*

In areas of the hospital where people with PD have different outcomes, we will go beyond the data to explore healthcare professionals' views on the challenges of providing care to PD patients in that environment.

## LESSONS LEARNT FOR TRUST RESEARCH PRACTICE

- Ease of and importance of big data.
- Collaboration with our neighbors.
- Opportunities to get involved.
- Potential now to use our own 'big data' - Akrivia.

QUESTIONS?

[georgecrowther@nhs.net](mailto:georgecrowther@nhs.net)



**Time for lunch!**