Dr Ross White, Research Director, DClinPsychol Programme, University of Liverpool
June 2018

Clinical Service Research Investigation (CSRI) –
'Programme Methodology Framework'

Doctorate in Clinical Psychology (DClinPsychol) trainees at the University of Liverpool are required to complete a Clinical Service Research Investigation (CSRI) during the completion of the three year programme. The CSRIs are undertaken by trainees within the context of their clinical placements at NHS trusts.

The NHS operates a risk filter to decide which studies involving service users or their data should receive formal ethical review. This is based on a definition of a 'research' study[1]. Studies that fall within this definition receive formal ethical review, while those falling outside the definition are not reviewed. Among this latter category of studies are 'service evaluations' defined as an evaluation of a service without reference to a [professional] standard, and 'audits' that assess service performance relative to a [professional] standard. Most service evaluations and audits do not receive ethical review, although the R&D office of the relevant NHS trust does record the studies.

CSRIs conducted by DClinPsychol trainees tend to be either service evaluations or audits. Historically research and ethical governance of these projects was overseen by NHS trusts, and if the NHS determined that ethical opinion for a CSRI was not required then the University of Liverpool was satisfied that no further ethical opinion was required. However, changes in the ethics procedures at the University of Liverpool in 2016 meant that irrespective of the NHS ethical opinion, it was a requirement for DClinPsychol trainees to seek ethical approval from the University of Liverpool *Committee of Research Ethics* if the CSRI was gathering new data or using secondary data that were not anonymised. Unfortunately, this lead to delays in the completion of the CSRI projects (which have a 6-month window for completion). These delays risked damaging the good will that existed between the University of Liverpool and collaborating NHS trusts.

In May 2018, following a process of dialogue and consultation, Prof Louise Kenny (Executive Pro-Vice-Chancellor, Faculty of Health & Life Sciences, University of Liverpool) provided approval for a plan developed by Dr Ross White (Research Director, DClinPsychol programme, University of Liverpool) and Mr Roger Platt (Lay-member of the University Council/Chair of *Committee on Research Ethics*, University of Liverpool) to create a system that would negate the need for individual CSRI projects to receive ethical approval and avoid the risk of potential delays this might cause. In June 2018, the plan was subsequently approved by the chair of the *Committee of Research Ethics*. The plan stipulates the following 3 points:

---

[1] This definition is: 'the attempt to derive generalisable new knowledge by addressing clearly defined questions with systematic and rigorous method'; NHS Health Research Authority, 'Determine whether your study is research', http://www.hra.nhs.uk/research-community/before-you-apply/determine-whether-your-study-is-research/ [accessed 22 September 2017].

Dr Ross White, Research Director, DClinPsychol Programme, University of Liverpool
June 2018

1. The DClinPsychol staff team should write a specific 'programme methodological framework'. This would set out the experimental methods that will be used by the students in undertaking their CSRIs. The framework would last five years and could be amended if new methodologies arise. It would be approved by a specific group established by the Chair of the Committee on Research Ethics.

2. The University of Liverpool should not undertake any ethical review of individual CSRI projects before they commence. Rather they should rely on the NHS clinicians supervising the project to ensure that the ethical risks conform to Trust guidelines. This is based on the view that the students are NHS staff working within an NHS Trust environment, supervised by NHS clinicians. The CSRIs are essentially NHS projects undertaken to NHS norms, with the University receiving only a fully anonymised report of the findings.

3. Within the methodological framework, the University staff team would maintain a record of the CSRIs being undertaken. This would record details of the student; the supervising clinician; the NHS clinical psychological service(s) in which the study is being undertaken; and the title and study design being utilized.

In line with the agreed plan, the DClinPsychol programme team has:

A. Advised DClinPsychol trainees that they must check with the local NHS Trust R&D departments to determine whether the proposed CSRI meets the threshold for requiring NHS ethical approval. If it does, then the DClinPsychol trainee must submit the required application and await approval.

B. Produced this document to serve as a 'programme methodological framework', which provides examples of the methodologies employed by DClinPsychol trainees in the completion of their CSRIs (see Appendix 1). The CSRIs tend to be audits or service evaluations utilizing existing data or generating limited amounts if primary data. The data used can be quantitative and/or qualitative. This 'programme methodological framework' will be update in June 2023 to ensure that it continues to reflect the CSRIs that DClinPsychol trainees are completing. This amended version will be approved by a specific group established by the Chair of the Committee on Research Ethics.

C. Implemented a procedure (see Appendix 2- CSRI Project Registration Form) by which DClinPsychol trainees undertaking CSRIs are required to pass the following details to the DClinPsychol staff team:
   - Name of the DClinPsychol trainee completing the CSRI
   - Name of the supervising clinician;
   - The NHS clinical psychological service(s) in which the CSRI is being undertaken;
   - Title of CSRI
   - Study design being utilized in the CSRI

Dr Ross White, Research Director, DClinPsychol Programme, University of Liverpool
June 2018

Appendix 1

The titles and methodologies of recently completed CSRIs

1. An evaluation of a six-week coping skills group waiting list initiative in a Community Learning Disability Team clinical psychology service.

This clinical service research investigation (CSRI) was a service evaluation of a six-week coping skills initiative in a community learning disability team clinical psychology service. Several quantitative measures were completed pre- and post-initiative, and the changes in these measures were calculated.

2. An audit examining referrals received to a Learning Disability Service between September 2015 and September 2016

This audit investigated the characteristics of external and internal referrals for a Learning Disability Service between September 2015 and September 2016, with a retrospective audit of 1518 referrals performed. Data on the characteristics of referrals were obtained from weekly meeting minutes and the NHS patient record system.

3. A service evaluation of referrals in relation to service users who were behaviourally challenged across four-community learning disability teams.

This service evaluation aimed to explore the referral patterns regarding service users (SUs) who were behaviourally challenged across four Community Learning Disability Teams (CLDTs) within a local mental health Trust. Descriptive analysis was used to present data gathered from the CLDTs concerning the calendar year of 2016.

4. A Preliminary Evaluation of a Transforming Care Fast Track Pilot Site

This service evaluation investigated how service users have responded to their first six months of support from the Transforming Care Service, and make recommendations for future service development. A repeated measures design was used that focused on secondary quantitative data (routinely completed measures) from all service users receiving support from the service (n = 15).

5. Using an audit tool to establish baseline adherence to a Positive Behaviour Support model as documented within the care plans of a secure learning disabilities service

The current audit assessed the car plans utilized by a secure learning disabilities service before the implementation of a Positive Behaviour Support model to establish baseline adherence and implement targeted change strategies.

5. Evaluating the acceptability and effectiveness of a mindfulness-based group intervention for individuals in a secure learning disabilities service

This service evaluation explored the acceptability and effectiveness of a mindfulness-based group intervention, the 'Mindfulness and Self-Soothe Group' within an inpatient forensic learning disability setting. Participants (N=19) were adult males referred to the 'Mindfulness and Self-Soothe Group' during a 12-month period. Measures of anxiety, depression, and mindful awareness were completed by participants prior to and following the group.

6. The Transforming Care agenda: A service evaluation of admissions and discharges in two adult learning disability assessment and treatment units

This service evaluation investigated admissions and discharges in the two Learning Disability assessment and treatment (A&T) units within one NHS Trust between 30th November 2013 and 1st December 2016. A retrospective evaluation of 85 admissions was conducted. Data were collected from the NHS Trust IT and electronic patient notes systems.

7. A service investigation into the use of two screening measures in the assessment of autism spectrum disorder: Does the Autism-Spectrum Quotient and the Empathy Quotient predict diagnosis?

This service evaluation explored into whether the Autism-Spectrum Quotient (AQ) and the Empathy Quotient (EQ), screening measures that are routinely used in an Austistic Spectrum Disorder assessment service, predicted a diagnosis of autism spectrum disorder (ASD). The sample consisted of 31 people referred to the service. Participants' clinical records were reviewed to identify AQ scores, EQ scores and whether they had received a diagnosis of ASD following assessment.

8. Exploring how family members experience their involvement with the learning disability assessment and treatment unit in which their relative stays

This service evaluation explored how family members experienced the Learning Disability Assessment and Treatment Unit (ATU) in which their relative stayed. Qualitative methods were employed to explore family members' lived experiences. Four participants, all parents of service users, undertook semi-structured interviews. Interview transcripts were analysed using thematic analysis.

9. An evaluation of staff practices in utilising client outcome measures in a paediatric psychology service and development of standardised cross-departmental practice in collecting and using outcome data

This service evaluation investigated the use of outcome measures to evaluate clinical effectiveness in a paediatric psychology department. Within the field of clinical psychology, routine measurement and evaluation of psychological input is highlighted as a key tenet of good quality services (BPS, 2015). A survey was sent to all clinicians working within the paediatric psychology department at the time of recruitment. Sixteen participants (60% response rate) recorded their current use of outcome measures, described barriers, which hinder or prevent

routine outcome data collection and reported what they would find helpful from a more consistent approach across the department.

10. An audit of the transitions between CAMHS and adult services in a 14 - 18 team

This service evaluation investigated the transition from child-centred mental health services to adult-oriented mental health care in a Child and Adolescent Mental Health Service. Two cohorts of cases from a 14-18 team were identified and a case note survey was carried out using the electronic patient records.

11. A Qualitative research evaluation of monthly "making memories" trips

The purpose of this service evaluation was to examine the experiences of service users and carers attending monthly "making memories" groups in the North West of England. Five participants consented to take part in a focus group which lasted around one hour and twenty minutes. Discussions were audio recorded, transcribed verbatim and analysed by the researcher using thematic analysis. As outlined by Braun and Clarke, a six-stage coding process was involved in the analysis and development of themes (Braun and Clarke 2006).

12. An evaluation of psychological formulation training with clinical staff members in an older adult mental health service

This service evaluation investigated the effectiveness of training in psychological formulation provided to clinical staff members in an older adult mental health service. Participants completed a pre-evaluation questionnaire before the training, and a post-evaluation questionnaire once the training was completed. Data were analysed using demographic statistics in Microsoft Excel.

13. An evaluation of the Post Diagnostic Support (PDS) Groups, offered by two Older Adult Services, from a patient and carer perspective

This service evaluation aimed to review the PDS groups offered by two services from a patient and carer perspective. Respondents completed questionnaires before ('pre') and after ('post') their attendance at a PDS group.

14. An evaluation of the use of playback theatre with individuals experiencing dementia

The aim of this service evaluation was to evaluate how service users and their carers, living with dementia, responded to playback theatre, and to make recommendations for future service development. A focus group was conducted to determine the effects of the playback theatre workshop, and themes were derived from the data using thematic analysis (Braun & Clarke, 2006).

15. An Evaluation of the Eligibility Pathway in an Adult Community Learning Disability Service

Dr Ross White, Research Director, DClinPsychol Programme, University of Liverpool
June 2018

This service evaluation investigated a new clinical pathway was introduced in the specialist learning disabilities team aiming to create a more consistent, streamlined and transparent eligibility process. Data was collected retrospectively to evaluate the eligibility pathway. The evaluation aimed to review new referrals and their transition through the pathway, including the timeliness of the pathway and use of formal psychometric assessments.

16. A Service Evaluation of Suicidality in a Community Learning Disability Team

This service evaluation explored the number of people presenting with suicidality in an adult Community Learning Disability Team (CLDT) and to investigate the prevalence of risk factors. Dataset 1 was taken from incident reporting records from November 2016 – November 2017. Dataset 2 (n=88) was comprised of the CLDT's consultant psychiatrist's caseload. Basic demographics for the service (n=409) were also included.

17. An evaluation of the provision of Care and Treatment Reviews for People with Learning Disabilities accessing mainstream adult mental health inpatient services

The Transforming Care (TC) agenda (Department of Health, DoH, 2012b) introduced Care and Treatment reviews (CTRs) as business as usual from November 2015. Aims: This service evaluation aims to review the adherence to TC principles in adult mental health (AMH) inpatient settings in the National Health Service (NHS) Trust. A retrospective evaluation was conducted. Data was collected via the Information team from the NHS Trust IT system.

18. An Evaluation of an 8-Week Cognitive-Behavioural Chronic Pain Management Group

A Chronic Pain Management (CPM) Psychology Service had co-facilitated an 8-week cognitive-behavioural CPM group on six occasions. This service evaluation aimed to investigate its effectiveness on improving individual and service-level outcomes, whilst offering guidance for future service development. Service users (n=30) were assessed at 3 time points (pre-group, post-group and 3 months post-group) using 6 questionnaires (CES-D, PASS-20, SF-MPQ, TSK, HADS and ODI). Use of injections for pain relief, and attendance at primary care services and accident and emergency (A&E) departments, were also monitored (n=12).

19. Evaluation of a training course to raise awareness of people with learning disabilities in an acute hospital

A one-day training course was developed to raise awareness of individuals with a learning disability in hospital settings. This was then delivered to staff at an acute hospital. An evaluation form gathered trainee's opinions of the training. This service evaluation analysed the feedback from the service evaluation forms. Method: 44 evaluation questionnaires consisting of four questions, which were collected during 2016 and 2017 were analysed. Thematic analysis (Braun and

Clarke, 2006) was completed on the three questions, which required a written response.

20. An Audit of Transitions out of Children and Young Peoples Mental Health Services (CYPMHS) including Children with Learning Disabilities

The importance of an effective and well-managed transition from Child and Adolescent Mental Health Services (CAMHS), or Learning Disability (LD) CAMHS to adult services has been increasingly recognized. However, there are still major shortcomings within transition for young people. This audit project reviewed transition and the discharge protocols employed by the service. A further aim was to establish which transitions from CAMHS to adult services (or primary care) adhered to existing guidelines as set by the Commissioning for Quality and Innovation. This data was compared to the previous six-month audit data, to further develop the transition process within the locality and wider trust. All young people aged 16 years and over who had been discharged from CAMHS and LD CAMHS over a six-month period were included.

21. The Adverse Childhood Experiences (ACEs) Questionnaire: A Consultation with Individuals with Learning Disabilities to Develop an Accessible ACEs Questionnaire for Use in Learning Disability Services

This Clinical Service Research Investigation (CSRI) describes a consultation with individuals with learning disabilities to develop an accessible Adverse Childhood Experiences (ACEs) Questionnaire for use in Learning Disability Services. The questions are based on the Centers for Disease Control and Prevention Short ACEs Tool (Anda, Butchart, Felitti, & Brown, 2010). Two focus groups with individuals with learning disabilities were facilitated by a Clinical Psychologist and Assistant Psychologist from an NHS Community Learning Disability Team in the North West. The facilitators utilised a semi-structured interview to discuss the ACEs Questionnaire and develop recommendations on how to make it more accessible for individuals with learning disabilities. The focus groups were recorded and transcribed, and thematic analysis using a Scissor-and-Sort Technique (Stewart & Shamdasani, 2014) was used to generate recommendations for the adapted version.

22. Preliminary Evaluation of Co-Produced Drop-In Service for Adults Diagnosed with Asperger Syndrome, Carers and Others Identifying with the Condition

A North West NHS Asperger Service facilitated the collaboration of a service user and carers' group to develop a 'Drop-In' service aimed at individuals with a diagnosis of Asperger Syndrome, those identifying or associated with Asperger's and carers. The Drop In's aim is to promote wellbeing, and to be a preventative intervention for mental health difficulties associated with Asperger's, social isolation and carer burden consistent with Department of Health guidelines for service development. This service evaluation aimed to evaluate the current Drop-In, explore individual's motives for attending and identify areas for improvement. A cross-sectional descriptive study was conducted using a co-produced questionnaire that included a mixture of open and closed questions.

8

Dr Ross White, Research Director, DClinPsychol Programme, University of Liverpool
June 2018

This was completed by a self-selecting sample of attendees at the Drop-In (n=32). The author compiled the anonymous questionnaire data, coding open responses into a form suitable for quantitative analysis. Descriptive statistical analysis was then completed.

Appendix 2

CSRI Project Registration Form

This form should be completed by DClinPsychol trainees in advance of the commencement of the CSRI projects and submitted to Emily Joseph (Research Administrator)

Date:

Name of the DClinPsychol trainee completing the CSRI:

Name of the supervising clinician:

The NHS clinical psychological service(s) in which the CSRI is being undertaken:

Proposed title of CSRI:

Study design being utilized in the CSRI:

Have you have discussed the proposed CSRI with the relevant NHS Trust R&D department to ascertain whether NHS ethics is required:

YES/NO (please circle)

Is NHS ethics required:

YES/NO (please circle)

Signature of relevant Year Group Research Tutor to approve the CSRI: