

# The Care Pathway Enhancement Clinic at three years old: evaluating a Mental Health Mission-funded pilot mood disorder research clinic in the North East.

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## Introduction

**Background:** The Care Pathway Enhancement (CaPE) Clinic is a pilot mood disorder research clinic in Newcastle. It aims to bridge gaps in access to treatment<sup>1</sup>, enhance clinical trial recruitment<sup>2</sup>, and reduce barriers to research participation for patients in primary care<sup>3</sup>. Patients are triaged based on risk and trial suitability, and the clinic "holds" patients who are not under the care of a psychiatrist, further facilitating their involvement in research.

**Aims:** To evaluate the CaPE Clinic's impact on psychiatric research recruitment and local research infrastructure over the three years since it opened.

## Methods

Quantitative analysis of CaPE Clinic data since the clinic was established in February 2022.

## Results

### CaPE Referrals

The CaPE Clinic has conducted more than 190 assessments, resulting in over 60 successful randomisations. Referrals come through a number of routes including primary care, secondary care, Participant Identification Centres (PIC), self-referral and interface referrals who are picked up at secondary care triage meetings.

The duration of time that a patient is held by the clinic varies by outcome: patients participating in an intervention, such as psychotherapy or a trial, will be cared for by the clinic throughout. Otherwise, patients are discharged with recommendations following completion of any onward referrals.

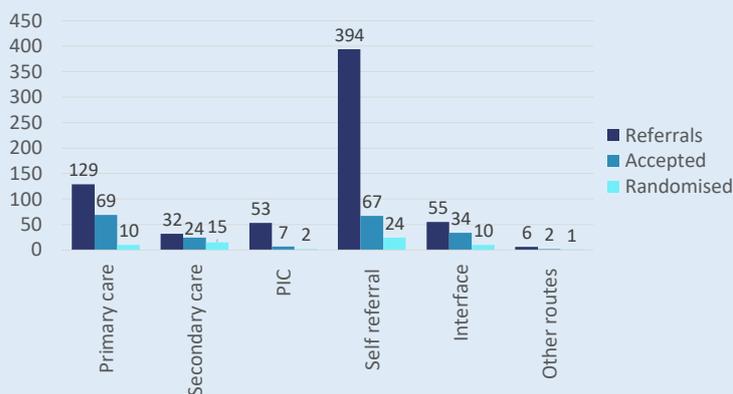


Figure 1. Number of referrals received, accepted and randomised for each referral route.

### Training opportunities for medical staff

The CaPE Clinic has trained 23 doctors in conducting pre-screening assessments, facilitated 6 doctors in entering the NIHR associate PI scheme and 3 in becoming new Principal Investigators.

### Clinical trial recruitment

The CaPE Clinic has successfully recruited to all completed trials: meeting or exceeding targets. Ongoing trials are projected to recruit to target on time.

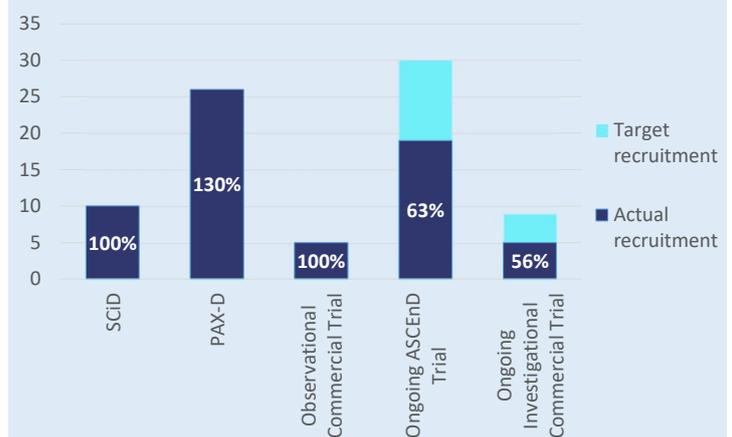


Figure 2. Recruitment for CaPE clinical trials, showing target recruitment, actual recruitment, and percentage of target recruitment.

## Conclusions

The CaPE Clinic model has enhanced recruitment to mood disorder clinical trials and supported clinical training, research engagement, and skill development. All completed trials linked to CaPE have recruited to time and target (current trials are on track). CaPE is directly developing local research infrastructure: encouraging industry and clinical-academic colleagues to deliver their studies locally. This aligns with NIHR and Office of Life Sciences objectives to better match study samples with eligible populations. Future work will assess representation of deprived groups in CaPE compared to historic research cohorts and mood disorder demographics to identify areas of service development.

### References:

- 1 – Day, E., et al., *A retrospective examination of care pathways in individuals with treatment-resistant depression*. *BJPsych Open*, 2021. 7(3): p. e101.
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- 3 – Mason, V., Shaw, A., Wiles, N., Mulligan, J., Peters, T., Sharp, D. and Lewis, G. (2007). GPs' experiences of primary care mental health research: a qualitative study of the barriers to recruitment. *Family Practice*, 24(5), pp.518–525. doi:<https://doi.org/10.1093/fampra/cmm047>.