The whys and wherefores of integrated clinical academic training
The current Integrated Clinical Academic Training Scheme

Medical School
- MB
- Intercalated BSc
- MD/PhD
- Graduate Entry Medicine

Foundation Programme
- Academic Foundation Programme
- F1
- F2

Specialist Training
- Integrated Academic Training
  - Academic Clinical Fellowship
  - Clinical Lectureship
  - Clinical Training Levels
    - ST1
    - ST2
    - ST3
    - ST4 – ST8
  - In-Practice Fellowship
  - Personal Training Fellowship
  - Postdoctoral Award

Senior Position
- Research Professorship
- Senior Lecturer
- Senior Clinical Fellowship
- Continued Professional Development
- Consultant with Research Sessions
### National child mental health surveys

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<tbody>
<tr>
<td>1999</td>
<td>Base-line</td>
<td>S</td>
<td>D</td>
<td>Q</td>
<td>FU</td>
<td></td>
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<td>2004</td>
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<td>D</td>
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<td>FU</td>
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<td>2017</td>
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<td>Base-line</td>
<td>S</td>
<td>D</td>
<td>Q</td>
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<td>D</td>
<td>Q</td>
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**Agreed the survey content, respondent materials, fieldwork, processing the data, report writing and data archiving.**

**Commissioning department and data owner.**

**Sample design, questionnaire programming, fieldwork, weighting of the results and report writing.**
Point prevalence of impairing psychiatric disorder among British 5-15 year olds

<table>
<thead>
<tr>
<th>Disorder</th>
<th>1999</th>
<th>2004</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any psychiatric disorder</td>
<td>9.7</td>
<td>10.1</td>
<td>11.2</td>
</tr>
<tr>
<td>Conduct disorder</td>
<td>5.4</td>
<td>6.2</td>
<td>5.5</td>
</tr>
<tr>
<td>Emotional disorder</td>
<td>4.3</td>
<td>3.9</td>
<td>5.8</td>
</tr>
<tr>
<td>Hyperkinesis (~ADHD)</td>
<td>1.5</td>
<td>1.5</td>
<td>1.9</td>
</tr>
<tr>
<td>Autistic spectrum disorders</td>
<td>0.3</td>
<td>0.9</td>
<td>1.2</td>
</tr>
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</table>

n=10,438 | n=7977 | n=6219
Mental health related contact with education professionals in the British Child and Adolescent Mental Health Survey 2004

Tamsin Newlove-Delgado, Darren Moore, Obioha C. Ukoumunne, Ken Stein and Tamsin Ford
Patient Oriented Clinician Scientist fellowship
G108/615

Clinic cohort of primary school aged children recruited on acceptance of their referral to two CAMHS

• How might we assess clinical outcome in routine practice?

• What influences clinical outcomes?

• Identification of disorder, including a nested RCT of disclosure of the DAWBA

DAWBA completion feasible via internet for most
A few parents found it upsetting so support should be available
Most grateful for a system that helped organise their experience
Disclosure did not increase practitioner DAWBA agreement

No improvement in access to evidence-based treatment or clinical outcomes
My outcomes are worse because my team has to deal with........

Three reasons not fear routine outcome measurement:

• Regression to the mean
• Attenuation
• Psychological difficulties fluctuate over time
Strengths and Difficulties Questionnaire Added Value Scores: evaluating effectiveness in child mental health interventions

Tamsin Ford, Judy Hutchings, Tracey Bywater, Anna Goodman and Robert Goodman

- Data from 2004 BCAMHS survey
- Children with psychiatric disorder OR parents reported mental health related contact with GPs or a teacher
- Empirically derived to select the best prediction of parental SDQ total difficulties scores at follow up 4-8 months after baseline
<table>
<thead>
<tr>
<th></th>
<th>Outset</th>
<th>6 months later</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Change in CAMHS case</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SDQ Added Value score</strong> =</td>
<td>Predicted - Observed SDQ scores</td>
<td></td>
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</tbody>
</table>

\[
\text{SDQ Added Value Score} = 2.3 + 0.8 \times T1\text{Total} + 0.2 \times T1\text{Impact} - 0.3 \times T1\text{Emotion} - T2\text{Total}
\]
Influence of potential complexity factors

We tested:

- Type or severity of diagnosis
- Age and gender
- Poor physical health
- Maternal educational level
- Maternal anxiety and depression
- Family (type, function and size)
- Housing tenure
- Neighbourhood characteristics

Using stepwise linear regression, these factors explained:

- 35.9% of baseline SDQ scores
- 24.2% of follow up SDQ scores
- 0.6% of variance of the SDQ Added Value Score
Testing the SDQ AVS against trial data

<table>
<thead>
<tr>
<th>IY parenting group trial</th>
<th>Effect size</th>
<th></th>
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<tbody>
<tr>
<td></td>
<td>Predicted value</td>
<td>Added Value Score</td>
<td>Change score</td>
</tr>
<tr>
<td>Waiting list control arm</td>
<td>0</td>
<td>-0.03</td>
<td>0.35 *</td>
</tr>
<tr>
<td>Intervention arm</td>
<td>0.37</td>
<td>0.36</td>
<td>0.65 **</td>
</tr>
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</table>
Outputs
- 10 completed PhDs
- 2 foundation doctors, 6 ACFs, 3 CTFs, 2 ACLs, 2 interim fellowships
- Funding worth >£20 million (£3 million as PI)
- 153 papers

Main methods
- Summarising the existing evidence with systematic reviews
- Secondary analyses of large datasets and “big data”
- Developing and testing interventions
- Mixing and integrating methods
Supporting Teachers And childRen in Schools

A trial of the Incredible Years® Teacher Classroom Management programme

Tamsin Ford, Rachel Hayes, Sarah Byford, Vanessa Edwards, Malcolm Fletcher, Stuart Logan, Brahm Norwich, Will Pritchard, Kate Allen, Matthew Allwood, Poushali Ganguli, Katie Grimes, Lorraine Hansford, Bryony Longdon, Shelley Norman, Anna Price, Obioha C Ukoumunne

This project was funded by the NIHR Public Health Board. The views expressed are not those of the NHS, NIHR or the Department of Health.
Intervention
- What - a customised curriculum containing components on:
  - Building positive relationships with students and being a proactive teacher
  - Teacher attention, coaching, encouragement and praise
  - Motivating students through incentives
  - Decreasing inappropriate behaviour - ignoring and redirecting
  - Follow through with consequences
  - Emotional regulation, social skills and problem solving training
- How is the intervention delivered:
  - Experiential learning (observe, discuss, rehearse, reflect)
  - Sessions are timed to ensure adequate time for new practices to be developed and embedded
  - Peer support
  - Collaborative learning
  - Expert facilitation and support

Mechanisms of change for Teachers
- An improved focus on the child’s perspective and their individual needs
- A more reflective practice
- Proactive responding
- Improved self-regulation
- An understanding of positive cycles of reinforcement
- A sense of validation

Context
- Wider government policy, curriculum changes, government priorities and educational policies
- OFSTED
- School policies and strategies
- School leadership structure
- School culture
- Social and economic demographic of school
- Teachers’ level of experience
- Teachers’ roles within school
- Flexibility of group leaders to adapt to each group
- Group demographics
- Group dynamics

Short Term Outcomes
- Teacher
  - Self-confidence
  - Reflective practice
  - Wider knowledge and use of classroom management strategies
  - Emotional regulation
  - Proactive reinforcement
  - Proactive behaviour management
  - Teacher stress
- Child
  - Disruptive behaviour
  - Happiness in school
  - Readiness to learn
  - Pro-social behaviour
  - Emotional regulation
- Class
  - Clear understanding of expected behaviour
  - Positive environment
  - Pro-social behaviour

Shared Outcomes
- Improved teacher-child relationships
- Improved teacher-parent relationships
- Positive school behaviour management policies and systems

Long Term Outcomes
- Staff and Schools
  - Improved staff retention
  - Reduce absenteeism and presenteeism
  - Improved mental health
- Children
  - Improved health and self esteem
  - Reduction in later risky behaviours
  - Improved long term attainment
- Society
  - Savings in health, social care and criminal justice
Baseline
80 schools
1 teacher from each
Measures – teacher, child & parent
Classroom observation (25%)

Randomisation

Intervention group
Receive TCM course; 6 session over 6 months

Control group
Teaching as usual

1st follow up
All schools
Measures – teacher, child & parent
Classroom observation (25%)

1st academic year
October

2nd follow up
All schools
Measures – teacher, child & parent

2nd academic year
Feb/March

3rd follow up
All schools
Measures – teacher, child & parent

3rd academic year
Feb/March
STARS trial Summary

- **Small** but statistically significant improvement on **teacher reports of child mental health** at 9 months, also **peer relationships** and **prosocial behaviour**

- Those with **poorer mental health improve more** on teacher report

- **Sustained** improvements in **classroom behaviour** and **concentration**

- **Cost-effective** in the short to medium term?

- Interaction between **baseline mental health** and **academic progress** but no impact overall

- Observations (only on 25%) suggest **changed teacher behaviour** and **improved child compliance**

- **No impact on teachers’** mental health, professional self-efficacy and burn out, **parental** or **child** reports

- Process evaluation: most impact on **teacher pupil relationships** & effects might increase in **subsequent years** or by **training more staff**
Improving Behaviour in Schools

Six recommendations for improving behaviour in schools

Use classroom management strategies to support good classroom behaviour

Effective classroom management can reduce challenging behaviour, pupil disengagement, bullying and aggression.
Live is for living
Resources

- [https://acmedsci.ac.uk/grants-and-schemes/mentoring-and-other-schemes/INSPIRE](https://acmedsci.ac.uk/grants-and-schemes/mentoring-and-other-schemes/INSPIRE)
- [https://blackwells.co.uk/bookshop/product/9780198735564?gC=5a105e8b&gclid=CjwKCAjwy42FBhB2EiwAJY0yQsQSVRjGv_t31HqC02neyMYX9l0hnD5SS304GrmerWdXnMlvq3HNRxoCYwYQAyD_BwE](https://blackwells.co.uk/bookshop/product/9780198735564?gC=5a105e8b&gclid=CjwKCAjwy42FBhB2EiwAJY0yQsQSVRjGv_t31HqC02neyMYX9l0hnD5SS304GrmerWdXnMlvq3HNRxoCYwYQAyD_BwE)