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| Host department: UCL |
| Project Title: Supporting diagnostic decision making for mental health conditions in primary care: Developing and evaluating a virtual patient tool for current and future primary care clinicians |
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| Proposed supervisory team: |
| Primary Supervisor: Dr Jessica Sheringham (UCL), Dr Ruth Plackett (UCL)  Second supervisor:Dr Charlotte Archer (Bristol)  Other members of the supervisory team: TBC and can be appointed depending on expertise required.  The supervisors offer expertise in mental health, digital health, primary care, digital intervention design and evaluation, mixed methods and public health. |
| Potential for cross consortium networking and educational opportunities: |
| There are excellent opportunities for collaboration and learning:   * Departmental e-health research group * PhD students across UCL e.g. Qualitative Research methods group; Methodology groups * NIHR ARC North Thames * NIHR School for Primary Care Research (national) and NIHR Three Schools (NIHR Schools for Primary Care, Public Health and Social Care) Mental Health Programme. * Collaborations with universities training medical, physicians associate and pharmacy students across the UK and internationally * Working with the Society for Academic Primary Care (SAPC) and the NIHR Mental Health Incubator to access networking and training. |
| Project description: |
| Mental health problems have been increasing in the UK, particularly among young people, for the past few decades and more people are seeking help from primary care to address mental health concerns. However, the presentation of mental health symptoms can be complex and presents diagnostic challenges for these health professionals. Timely identification and support of mental health needs can prevent problems escalating and need for further intervention.  In the past, research and training resources have been targeted towards primary care doctors. Primary care now encompasses a range of clinicians involved in diagnosing and supporting those with mental health concerns including doctors, nurses, pharmacists and physician associates. There is a gap in training resources for these groups.  eCREST [electronic Clinical Reasoning Educational Simulation Tool] an online patient simulation training tool, was initially developed for medical students to support clinical reasoning skills. It has interactive simulated patient cases, using videos of patient actors with common symptoms. Learners seek information about the ‘patients’ to reach diagnostic and management decisions, with opportunities to reflect and review on their ideas. (Kassianos, et al., 2020; [eCREST: a novel online patient simulation resource to aid better diagnosis through developing clinical reasoning.](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7410110/))  It was tested with final-year medical students in UK medical schools demonstrating good efficacy and receiving positive feedback from student testers about its value as an educational resource in improving clinical reasoning skills (Plackett et al., 2020; [Online patient simulation training to improve clinical reasoning: a feasibility randomised controlled trial](https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-020-02168-4)). Since then, it has been used with pharmacists and physician associate students but no cases relating to mental health have been developed and evaluated. Given the increased demand on primary care for mental health support and the complexity of presentations, more training for a range of primary care clinicians on managing patients presenting with these conditions could significantly improve patient care and mental health outcomes.  The supervisory team will work with candidates to develop the project aims and objectives related to this area and according to their own interests. The PhD may include a review of diagnostic challenges for mental health problems, exploration of how different professionals reach diagnostic judgements to inform the design of clinical cases, development and evaluation of clinical cases to train primary care physicians diagnostic making skills. A range of methods could be used for evaluation, including mixed methods approaches to understand the acceptability, efficacy and mechanisms of the tool. |
| Indicative project costs: |
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| Training and development provision by host: |
| *Formal training:* A wealth of doctoral training opportunities exists for PhD candidates at UCL. Bespoke training specific to the candidate needs and professional development will be identified. This may include training in literature reviews, designing and evaluating digital interventions, mixed methods research and co-production. |
| *Informal training:* Successful candidates will be encouraged and supported to take up informal training opportunities such as shadowing, and attendance at methodology workshops and seminars, across the Universities. UCL Institute of Epidemiology and Healthcare offers career development support and runs an early career researchers’ group to connect and support PhD students. There is a large, motivated and supportive community of PhD students at the Research Department of Primary Care and Population Health (PCPH). |
| *PPIE*: PCPH has an Expert by Experience panel, and PPI recruitment can also be more targeted. The candidate will be encouraged and supported to establish new links and to access the many PPIE training opportunities at UCL and Bristol. |