**Please ensure that this proposal is no longer than two A4 sides**. Thank you.

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| Host department:Cambridge |
| Project Title: Acceptance and rejection of primary care referrals for young people to mental health services: a mixed methods study |
| Proposed supervisory team: Names and areas of expertise to be included |
| Dr Robbie Duschinsky, Head of the Applied Social Sciences Group within the Primary Care Unit. Expertise: mental health research addressing the needs of children and young peopleDr Anna Moore, [Dept of Psychiatry, University of Cambridge]. Expertise: accessibility of mental health services for young people Dr Matt Woolgar, Lead for Psychology Services, National Conduct Problems Clinic, South Londonand Maudsley NHS Foundation Trust. Expertise: mental health assessment and referral pathways  |
| Potential for cross consortium networking and educational opportunities: |
| There is very strong potential for cross-consortium networking. Without being exhaustive, this includes research on research on mental health needs among young people at Bristol, Keele, QMUL and UCL; the stratification of mental health need and coordination of primary and secondary care at Bristol, Manchester and Southampton; satisfaction with mental health provision in primary and secondary care at Bristol, QMUL and Southampton; family mental health at Keele, Manchester and UCL; the sociology and epidemiology of mental health needs at Nottingham and Oxford; barriers to access to mental health provision at Bristol and Southampton; patients’ views on provision of primary and secondary mental health care at Bristol and Keele; primary care clinicians’ perspectives on mental health provision at Manchester and Southampton; and the mental health of underserved populations at Essex, Keele, Manchester and QMUL. Whilst both qualitative and quantitative methods have been used by researchers across the consortium, research on mental health has been characterised by particular strengths in mixed methods research, which the present study will continue. |
| Project description: |
| Even before the pandemic, dramatic increases had been seen in rates of long-term mental illness among young people in the UK. In the year leading up to the start of the pandemic the Children’s Commissioner reported a 35% increase in referrals, but only a 4% increase in the number of CYP seen by Child and Adolescent Mental Health Services (CAMHS). Since then referrals have more than doubled.Little is known about the demographic and service-level factors, the role of co-morbid physical illness, or the forms and extent of mental health need, in shaping what happens to a referral to secondary mental health care made by primary care, including whether the priority given to cases and how long patients stay on the waiting list. We also know little about the experience and response of young people and their clinicians in primary care to rejection of referral by CAMHS. Addressing these gaps in knowledge is important on several grounds, including understanding the coordination of primary and secondary mental health care, and discerning inequalities in service provision.This PhD will be embedded within a programme of research funded by NIHR on access to and the effectiveness of mental health provision for young people, with a focus on populations facing adversities, drawing on clinical records from Cambridgeshire & Peterborough NHS Trust (CPFT) and the South London and Maudsley NHS Trust (SLaM). The objectives will be to:1. Analyse referral documentation to explore factors that predict acceptance, rejection or acceptance only on re-referral to CAMHS from primary care
2. Examine factors that predict how long these patients remain on the CAMHS waiting list
3. Explore how GPs and practice staff respond to rejected CAMHS referral in their provision of care to young people
4. Explore how young people whose referral from primary care was rejected experienced and responded to this rejection

There would be considerable flexibility for the successful candidate to focus in greater depth on one or more of these questions, or to tackle all of them within the PhD. The successful candidate would join a supportive, multidisciplinary team working on related questions using these clinical records. This includes three postdoctoral researchers, four research assistants, two other doctoral students, and a study administrator. As such, the successful candidate will have available considerable research assistance and opportunities for collaboration and mutual support to help them in undertaking their research. This DTP project has been codeveloped with input from experts-by-experience of CAMHS provision as patients and/or as parents, who are co-Is on the wider NIHR study. Development of the project has also received input from the National Children’s Bureau (NCB), who will support the successful candidate in pathways to impact for policy and practice based on their research findings.  |
| Indicative project costs: The indicative research budget for each fellow is £20-25k.  |
| There would be no data access costs. There would be costs associated with payment for interview participants and transcription. Depending on final sample size, indicative costs: Participant honoraria £9,300; Transcription £3,700; Data management £1,200 |
| Training and development provision by host: |
| *Formal training:* As a mixed methods study, formal training would depend on the needs of the successful applicant: it would be expected that there would be training needs in at least some areas of the methodology, and in how to integrate findings from different methodologies. Supported by the supervisory team, the successful candidate would develop a bespoke training plan. Relevant modules available through the University of Cambridge Social Science Methods Centre include: Research ethics in the social sciences; Doing multivariate analysis; Further topics in multivariate analysis; Introduction to R; Factor Analysis; Propensity Score Matching; Qualitative Research Rigour; Doing Qualitative Interviews. The successful candidate would also be able to audit relevant courses within the University, such as lectures in medical sociology within the MPhil in Health, Medicine and Society. |
| *Informal training:* The successful candidate would be embedded within the Applied Social Sciences Group (ASSG), a very supportive and collaborative research team. The ASSG holds regular meetings focused on personal and professional development, in which colleagues share strategies and offer mutual support with potential challenges such as time management and career development. The ASSG includes several postdoctoral researchers who are former PhD students who mentor new members of the group. The ASSG in turn sits within the Primary Care Unit, which is a supportive environment for graduate students. Students are invited to present their work for instance at the weekly Unit tea meeting and the Qualitative Research Forum. They also have access to methodological support from the Primary Care Unit Methods Hub. The successful candidate will also access university graduate student training and seminars, e.g. in research design, making use of PPIE and preparing for viva.  |
| *PPIE:* The present proposal has been developed with input from experts-by-experience of CAMHS provision as patients and/or as parents, who are co-Is on the wider NIHR study. They will be available to support the successful candidate with developing the research study, refining research questions, selecting variables, ensuring the appropriateness of study materials, analysing qualitative data and dissemination. The Applied Social Science Group and NCB won a Diversity & Inclusion Award from Wellcome in 2020 for PPIE involvement in our work on young people’s mental health assessments. |