



Collaboration for Leadership in Applied Health Research and Care (CLAHRC) Greater Manchester

# Setting the future research and service priorities for physical health care in serious mental illness

Executive summary

NIHR Collaboration for Leadership in Applied Health Research and Care (CLARHC) Greater Manchester

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# **Executive summary**

## Background

It is now well recognised that people with serious mental illness (SMI) suffer from significantly worse physical health than other people in the population. It is thought that a number of factors contribute to this inequality, including reduced healthcare access, the effects of some antipsychotic medications, as well as lifestyle choices. In recent years, researchers have started to turn their attention to this important issue, yet much more work needs to be done to help us to understand how to improve physical health care for people with SMI.

With so much work yet to do, we decided to undertake an exercise to help us to reach a consensus between key stakeholders on the top priorities for physical health and SMI. By setting the agenda in this way, we hope that this exercise will help to inform researchers and healthcare about what future work might be most beneficial to the people affected by these issues.

#### Methods

On the 9<sup>th</sup> April 2015, we held a workshop to bring together over 30 stakeholders who are concerned about physical health and SMI, including service users, carers, health professionals (including mental health nurses, psychiatrists, GPs, health psychologists), prescribers, decision makers and academics. Representatives attended from Manchester Mental Health and Social Care Trust, Pennine Care NHS Foundation Trust and Greater Manchester West Mental Health NHS Foundation Trust.

Invited participants who were unable to attend the workshop were asked to submit their key priorities via a link on the CLAHRC Greater Manchester website.

Through a series of group discussion and with reference to the priorities submitted online, 26 priorities were identified. Using voting technologies, which allowed delegates to view live scoring results, the **10 key priorities** in physical health and SMI were identified. Following this, group discussions and consensus voting exercises selected **the top 3 priorities** in physical health and SMI.

### **Findings**

The **Top 10** most important research and service priorities for physical health and SMI identified by our stakeholders are (presented in no particular order):

- How can we improve how well physical health is monitored by services?
- Who has responsibility for monitoring the physical health of people with SMI?
- What is the qualitative experience of hunger for people taking antipsychotic medication?
- How do we educate all members of the multidisciplinary team to deal with and understand physical health problems?
- How can psychiatrists and patients better collaborate to choose antipsychotic medication?
- How do we educate or help carers to deal with and understand physical health problems? How do we collaborate with families to support physical health care?
- How do we explore the reproductive and sexual health of service users in the consultation?
- What are the best commissioning structures to deliver physical health care?
- How can clinicians be supported to personalise interventions?
- Explore the feasibility of M-health technology to monitor physical health and weight gain.





Visual illustrators attended on the day to provide a graphic illustration of the process

The final **Top 3 priorities** selected from the 10 priorities as being most important are:

- What is the qualitative experience of hunger for people taking antipsychotic medication?
- How can psychiatrists and patients better collaborate to choose antipsychotic medication?
- How do we educate or help carers to deal with and understand physical health problems? How do we collaborate with families to support physical health care?

#### **Next Steps**

A copy of the executive summary will be sent to our partnering NHS Trusts (Manchester Mental Health and Social Care Trust, Pennine Care NHS Foundation Trust and Greater Manchester West Mental Health NHS Foundation Trust) to determine whether they wish enter in a matched funding partnership to take these priorities forward.