Welcome!

Welcome to 2015! We would like to take this opportunity to welcome you all back to work and hope you have all had a wonderful Christmas and New Year. There are lots of exciting developments to come for IMPARTS this year, and we are excited to be able to update you with our progress since September and plans for the year! This issue will provide an update on screening developments and noteworthy news from both within IMPARTS and across the services using IMPARTS. We’re also very pleased to include a guest contribution, kindly provided by Dr. Mark Turner and Karina Jackson from St. John’s Institute of Dermatology, describing the psychological support model they use at St. John’s.

IMPARTS Screening Developments

There are 23 services across King’s Health Partners now using IMPARTS screening to collect patient reported outcome data. The Musculoskeletal Physiotherapy and Neuroendocrine Tumor teams started screening in September and we are pleased to welcome them onboard. The number of patients completing IMPARTS continues to grow every month; approximately 500 patients are screened every month, and over 5,000 patients in total have used IMPARTS. This means that 5,000 people have received integrated mental and physical health care, and the numbers are ever-increasing!
Developing Psychological Support in Medical Dermatology at St. John’s Institute of Dermatology, Guy’s and St. Thomas’ NHS Foundation Trust
Dr. Mark Turner (Clinical Psychologist)
Karina Jackson (Nurse Consultant)

At St John’s Institute of Dermatology we have started to develop psychological support in response to research, policy, and local audit highlighting substantial unmet need. The development of this support was facilitated by the motivation of the medical dermatology tertiary clinic teams including the recruitment of a team psychologist and the IMPARTS project.

In our Psoriasis, Eczema and Hidradenitis Suppurativa clinics we now routinely screen for anxiety, depression and dermatology-related quality of life as minimum and as part of integrated GSTT policy & IMPARTS protocol. Staff have also had training on the recognition and handling of these difficulties as seen in these specific populations as the foundation of a flexible stepped-care model of psychological support that is ongoing in its development.

Our stepped-care model now includes: disease-specific self-help material, referrals into primary care psychology, specialist psychological assessment and individual and group therapy options, and referrals to liaison psychiatry. Our current plans to further develop this model include a peer support group for our patients with ongoing rolling access to match the needs of their inflammatory skin disease. Our model, in keeping with NICE guidance, is shown below.

In summary, research, policy, audit, and IMPARTS data all highlight the need for a psychology service in the medical dermatology department. We believe that our developing psychology service is working well due to the important combination of: systematic screening, a team psychologist, staff training, integrated trust policy/ and IMPARTS protocols, and a flexible stepped-care model.
IMPARTS facilitating research

IMPARTS is, first and foremost, a service-development tool; aiming to improve the integration of mental and physical healthcare provision. However the routine collection of patient reported outcomes provides exciting research and audit opportunities. Data are collected covering various aspects of mental health, physical health, and health behaviours, providing broad scope for cross-sectional research. The frequent follow-up of patients screened using IMPARTS also provides exciting scope for longitudinal study designs. This can all be done without the need for ethical approval as IMPARTS has generalized approval for IMPARTS-collected data to be used for research purposes. A brief application to our patient-led oversight committee is all that is required to use IMPARTS data for research purposes. See our website for more information!

IMPARTS seminar: Health behaviours and behaviour change interventions.

Our next seminar will focus on health behaviours, and behaviour change interventions in research and clinical practice. The seminar will be held between 2pm and 5pm on Thursday February 26th, 2015, at Denmark Hill. Susan Michie, Professor of Health Psychology at University College London and the Director of the UCL Centre for Behaviour Change will be the keynote speaker at this event. This is a fantastic opportunity to hear one of the world-leaders in behaviour change talk about her seminal work. Visit our website to book your place at this free event!