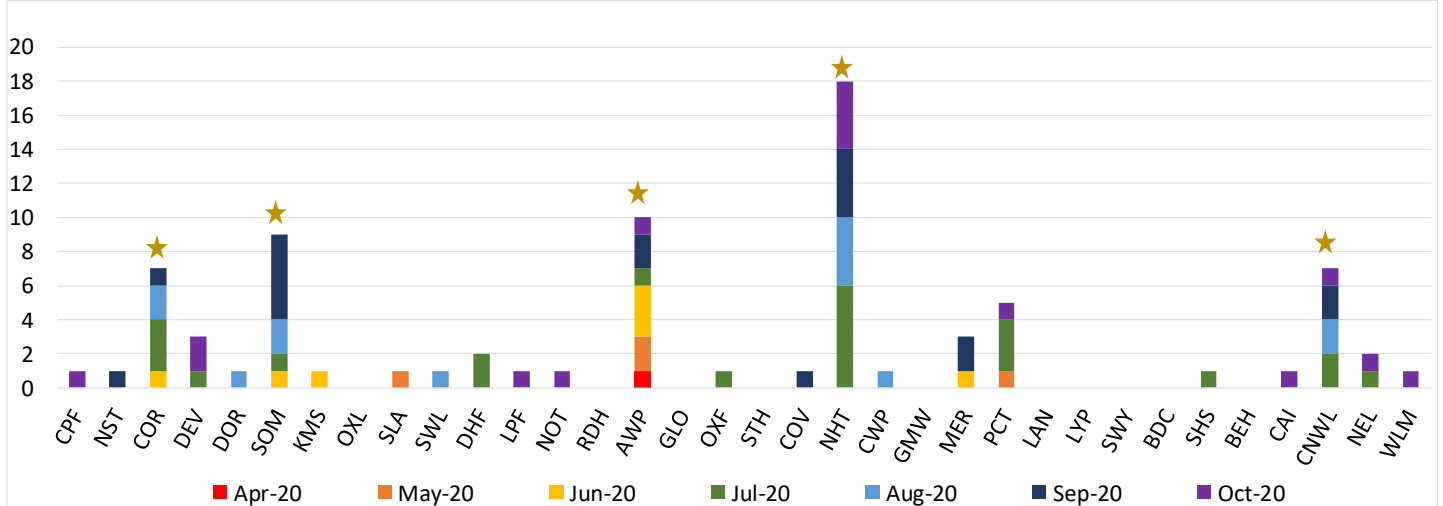




### SINAPPS

#### PPiP2 recruitment figures in re-opened sites (April - October 2020)



### Updates

We are excited that most SINAPPS2 sites have now reopened and are ready to recruit! PPiP2 sites have been restarting recruitment too. Thank you for your continuing efforts to work in new ways. The graph above shows recruitment over the last six months. PPiP2 researchers who have been successful in recruiting despite difficult circumstances have kindly shared their experiences. Find out more on the next page.

### Reaching clinicians

We would like to present at consultant meetings or academic teachings at as many sites as possible. We are encouraging PPiP2 researchers to find out about these and book a slot to present. SINAPPS2 senior colleagues would be happy to give a talk about the role of the neuroimmune system in psychosis to increase awareness and inspire clinicians to test their patients in PPiP2.

### Involving clinicians on wards

It is vital we urgently try to actively involve clinicians, particularly junior doctors, in PPiP2 recruiting from the wards. PIs could help researchers meet them and explain how they can help us with the identification of potential participants and the collection of samples. We can provide certificates to those who have helped with the study. Please email [louise.wright@psych.ox.ac.uk](mailto:louise.wright@psych.ox.ac.uk)

### We can help you recruit!

Because of reduced capacity at many sites, we would like to help to recruit PPiP2 participants. Our team has access to the majority of participating Trusts and we can remotely consent referred participants over the phone and post blood kit to clinicians to obtain samples. Please let us know if we can support your team by contacting referrals.



## PPiP2 Researcher's experiences during COVID-19 pandemic



We've picked the brains of PPiP2 recruiters who have been particularly successful these last few difficult months. Their recruitment strategies described below suggest working together with clinicians could be more efficient than screening medical records.

### Clare Davey (Avon and Wiltshire Mental Health Partnership NHS trust)

We noticed an uptake of interest in PPiP2 during the Covid pandemic, with a number of unusual cases being referred, and doctors contacting the team more regularly. A number of doctors did their GCP training which allowed them to consent and take bloods, after confirming eligibility us. I confirmed with the study team that bloods can be taken for clinical purposes, where informed consent or consultee consent is not possible; but the test is needed to inform clinical care. In these cases myself or the doctors approached the service users later to gain retrospective consent at a time when they were able to engage. Good communication with the doctors has been central to the new processes and responding in a timely manner has been my main goal. We deliver kits to the Drs and do all the background work; liaising with the study team, screening, CRFs, GP letters, etc. My challenge has been adjusting to feeling less in control, as I am now not always the person gaining consent or sending the bloods. Fostering good relationships with the Drs has been important to allow any blips to be discussed and sorted out. We are lucky to have access to the electronic notes system, and a large number of teams and services to engage with. Being able to provide the Drs with certificates from the study team was great, as they appreciate this for CPD purposes. The goal is now when the Drs rotate they will discuss the opportunity to be involved with PPiP2 with the new Drs and we can continue the work.

### Alicia Long (Somerset Partnership NHS Foundation Trust)

"It has worked so well running weekly research clinics on the wards. We restarted these last month after setting them just before Lockdown. Being on the wards regularly is great because staff are expecting me now in their morning meetings and know that I will be approaching patients. I think I used to just spend too much time over-screening so now I just make sure they meet the essential criteria and check with clinicians that they have at least moderate PANSS symptoms and then approach people straight away. I usually say 'I'm working with your doctor on a study that can rule out other reasons for being unwell' and then go into more depth.

[alicia.long@somersetft.nhs.uk](mailto:alicia.long@somersetft.nhs.uk)

### Chetan Lakhani (Northamptonshire Healthcare NHS Foundation Trust)

NHFT has been proactive in recruiting participants to the PIPP2 study since July 2020. The strategy adopted to recruit has consisted of the PI and Specialist Registrars based with the Northamptonshire Service for the Treatment of Early Psychosis (N-STEP), screening patients for suitability for the study and consenting. The pool of patients are derived from newly referred patients to the NSTEP service and those that have formerly been with the NSTEP team but have unfortunately relapsed. Prior to the commencement of the study the whole NSTEP Team was informed about the study by a Research Nurse based with NHFT Innovation and Research Department. The NSTEP Team have shown great enthusiasm in recruiting and assisting in the procedures for the PIPP2 study and have also linked in with Consultants and other staff working within inpatient services to make them aware of the study and promote recruitment.

[chetan.lakhani@nhft.nhs.uk](mailto:chetan.lakhani@nhft.nhs.uk)

### Bianca Hinds - Walters (Central North West London NHS foundation Trust)

Recruiting for PPIP2 has been a very creative journey. Faced with many services and of late COVID-19 restrictions, has meant that recruitment very rarely is a hard and fast rule. On arriving at the ward I usually asked to speak with the nurse in charge, if they're not available then I just ask to speak with another Nurse. We review the board together, with them identifying the diagnosis and suitability of service users. Once confirmed I then ask for a health care assistant to introduce me to the service user. Freeing up the Nurse to return to their duties. Once introduced, the HCA will then leave me to introduce the study to the service user.

[b.hinds-walters@nhs.net](mailto:b.hinds-walters@nhs.net)

## CONTACTS

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