



# Megaphone Online

May 2022

## the voice of Health Sciences' staff and students

### York moves into the top 10 in the UK for its world-leading research

The University of York has been ranked in the top 10 in the UK for the quality of its research, according to a prestigious league table. York has risen from 14th in 2014 to joint 10th in the Times Higher Education (THE) ranking of the Research Excellence Framework (REF) 2021. The Research Excellence Framework (REF) is a process of expert review used in the UK to assess research and its impact in the world. The first REF was conducted in 2014, replacing the previous Research Assessment Exercise (RAE)

The Department of Health Sciences, CHE, CRD and HYMS made a joint submission of our Health Services and Public Health research submitted to Units of Assessment 2 (UoA 2) as part of REF 2021. As a result, our research is ranked 6th in the UK for research power in the Times Higher Education ranking of the latest REF results with over 92% of our research rated as world-leading (4\*) for impact.

Patrick Doherty, Head of Department for the Department of Health Sciences said: "This is excellent news for all four departments who have historically worked very well together, so much so that over 90% of our research was categorised as interdisciplinary. We submitted the largest number of staff out of all University of York submissions with 92FTE (109 staff) almost doubling the number compared to REF 2014."

"In order to submit such a large number of staff we needed to also submit seven Impact case studies (ICS). ICS studies don't just happen overnight as they need to show how our published research influenced wider society over many years and evidence this through quantifiable metrics. This has been a key part of our research strategy since 2014 and it worked in our favour as we generated eight very strong ICS. UoA 2 research impact achieved a top quartile position in this REF which is something to celebrate."

"Overall, our UoA 2 health research submission has proved that a well-managed high volume inclusive submission can lead to high quality outcomes." We are delighted that our research environment and research impact, alongside our inclusive approach, has been acknowledged as world leading."

"Huge thanks goes to all our staff (academic, research and professional support) as it's through their combined efforts that we have done so well!"

#### In this issue:

- Graduation photos
- Meet Departmental Community Coordinators
- Swartz Rounds®
- Research News

## Graduation May 2022

Finally those graduates who had not had the opportunity to graduate in person could attend an on campus event in May. Thanks to everyone who sent in their photos of graduation.



# Student News



## Student News

### Departmental Community Coordinators (DCC)

Two new Departmental Community Coordinators have been appointed. Introducing Kirsten Murray (UG) and Dr Lula Kithome (PG)



“Hi my name is Kirsten Murray and I’m a first year undergraduate studying Adult Nursing.”

I’m super excited to start this role as the undergraduate Departmental Community Coordinator and bring students and staff together in the department. I’m hoping to help plan some great events for everyone in the coming months so look out for that. I’m looking forward to getting to know everyone.”



“My name is Dr Lula Kithome, I am a Kenyan with a background in medicine, currently a full time MPH student at the University of York and the present Department Community Coordinator (DCC).”

“My main role as the DCC is to build an inclusive community with the students in the Health Sciences department. This involves engaging with students through events and activities. So far, we’ve had a games’ night and an online social forum.”

“We plan on holding more events such as career fairs, social meet ups with tea and cake and have more social nights and game nights where students are free to engage with each other and create an inclusive, equal and diverse community.”

“I am excited to be serving in this role alongside the department reps to ensure all students feel included.”

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### PhD student selected to become a Cumberland Lodge Fellow



PhD student Nicola O’Donnell has been selected as one of nine UK PhD students to become a Cumberland Lodge Fellow for 2022-24.

The Cumberland Lodge Fellowship is a competitive opportunity offering doctoral students who are firmly committed to promoting social progress the chance to set themselves apart. Nicola will have the opportunity to deepen her understanding of pressing social issues from a cross-sector perspective, and develop valuable skills in public engagement, networking, communication and interdisciplinary working.

Nicola said: “I’m delighted to have been awarded this opportunity to enhance my skills. It is a privilege to represent the University of York and my funder, the Childhood Eye Cancer Trust, in a nationwide scheme.”

PhD Lead for the Department of Health Sciences, Dr Peter Coventry said: “This is a real achievement for Nicola and I’m really excited to hear how this opportunity progresses.”

# Student News

## New Student Wellbeing Officer

Introducing Madeline Bentley, your new Student Wellbeing Officer. Madeline writes:



“Hi, I’m Madeleine and I’m your Student Wellbeing Officer.”

“I’m here to provide a space for you to discuss any concerns or struggles you may be experiencing while you are at University.”

“If you’re feeling stressed or worried, or struggling with your studies, feeling overwhelmed with your academic work, or if you’re experiencing a personal issue, a health issue, a relationship problem or financial concerns, I’m here to listen and to talk things through.”

“I provide support, information and guidance and can help you navigate the support available on and off campus.”

“If you are experiencing any challenges and you would like to speak to someone, please get in contact. I currently offer online Zoom, telephone appointments and face-to-face appointments.”

You can book an appointment with Madeline by emailing [madeleine.bentley@york.ac.uk](mailto:madeleine.bentley@york.ac.uk).

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## Department hosts A-cake-demic session

The Department took part in “A-cake-demic”, a joint event with YUSU and organised by our PG Department Rep, the UG and PG Departmental Community Coordinators.

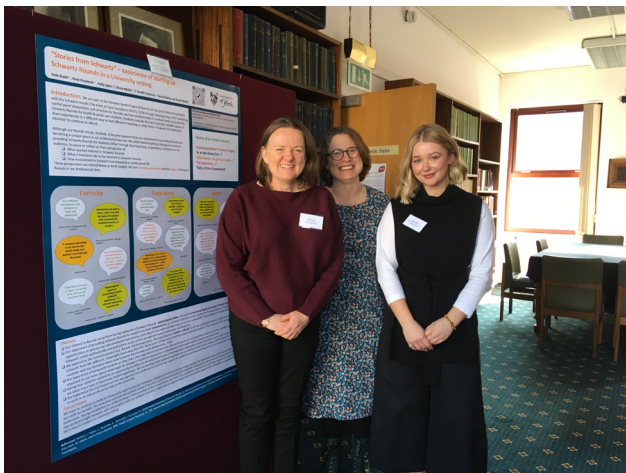
The event welcomed staff, student representatives, undergraduate and postgraduate students and learners who came along for a chat over coffee and cake.



# Schwartz Rounds® for Students - embracing storytelling to create a culture of compassion and belonging

As part of the Schwartz North Project (University of Liverpool & Point of Care Foundation (funded by HEE North)) we have been piloting Schwartz Rounds with health and social care students. Schwartz Rounds provide a structured forum where panelists tell stories about practice & the audience then share reflections that resonate with the social and emotional themes in the storytellers' experience.

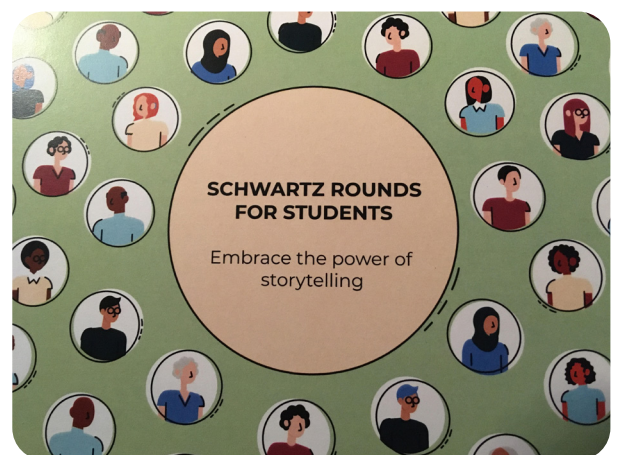
Kate Rudd, Rose Havelock and Olivia Walsh recently attended a national conference: Compassion at the heart of health and social care education: running student Schwartz Rounds in HEIs (Liverpool, 22<sup>nd</sup>-23<sup>rd</sup> March 2022). It was Olivia's first conference and she reports that "across the two days there was a series of workshops, a live Schwartz Round, a range of inspiring speakers, poster presentations, many opportunities to network with others with a shared enthusiasm for bringing Schwartz to Universities and in line with Schwartz values and ethos.....plenty of refreshments! "



A highlight for Olivia was our collaborative poster presentation, which reflected on what had sparked our curiosity for Schwartz, our experience of starting up Rounds, and the impact this has had on our professional lives. (picture L-R shows Kate Rudd, Rose Havelock and Olivia Walsh).

Kate was delighted to be invited to co-facilitate a World Café workshop for HEI's new to running Schwartz Rounds. Kate managed to keep a lively conversation flowing at her table for two hours (!) sharing experiences regarding preparing panelists, crafting stories and themes for Rounds.

An animation 'explainer' about Rounds was also launched at the conference. Andrew Ferguson (2<sup>nd</sup> year Mental Health Nursing student) was a member of the co-production group. Andrew reflects on his contribution; "the most important thing for me is to develop an understanding of compassion and belonging. So for me, listening to others, even when those experiences are sometimes difficult, is an essential part of my learning. Attending Schwartz Rounds for Students gives me a better insight, so I was very happy to support this project." This animation is now a valuable new resource that will be used nationally to promote Schwartz Rounds for Students.



The conference was a great opportunity to profile achievements with Schwartz Rounds at York and we left feeling re-energised and inspired with plans about continuing with this initiative in the future.

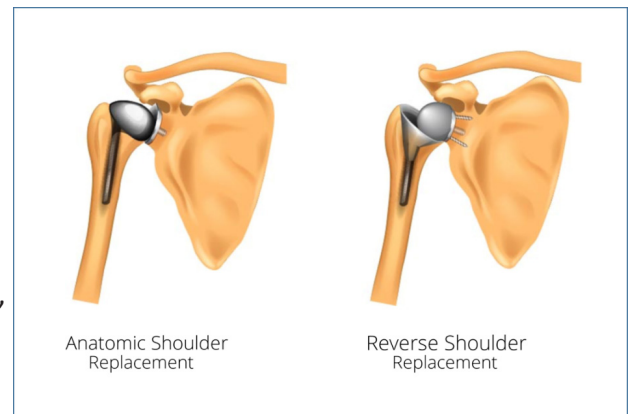
Further information: [Point of Care Foundation- Schwartz Rounds](#)  
Contact: [dohs-schwartzrounds@york.ac.uk](mailto:dohs-schwartzrounds@york.ac.uk)

### RAPSODI – putting shoulder replacement research into motion

Researchers at York Trials Unit have been awarded a £2.1m grant by the National Institute for Health Research (NIHR) Health Technology Assessment (HTA) programme to undertake a randomised controlled trial comparing ‘anatomical’ shoulder replacement with ‘reverse’ shoulder replacement surgery in older adults with osteoarthritis.

The research is in collaboration with Wrightington, Wigan & Leigh NHS Foundation Trust, the University Hospitals of Leicester NHS Trust, The University of Manchester, Nottingham University Hospitals NHS Trust and two Australian universities (Deakin University, The University of Queensland). We aim to recruit 430 patients aged 60 and above with painful osteoarthritis across at least 28 sites in England, Wales and Northern Ireland who need a shoulder replacement. A parallel study is being undertaken in Australia. Recruitment is due to start in September 2022.

Patients will be randomly allocated to having either an anatomic total shoulder replacement or a reverse total shoulder replacement. An anatomic total shoulder replacement requires the tendons around the shoulder to be working normally and retains the normal anatomy of the shoulder joint. In contrast, a reverse total shoulder replacement switches the anatomy of the shoulder around, with the ball attached to the shoulder and the socket attached to the arm instead (see diagram of the two replacements right).



Surgeons are increasingly using reverse replacement in people over 60 years because they believe that people recover more quickly and are less likely to need a revision surgery due to problems with the rotator cuff. But there is no robust evidence on which is better for patients and their recovery or which is most cost-effective for the NHS. Osteoarthritis is a painful, debilitating condition that affects up to a third of individuals over the age of 60. The findings of this research will have the potential to inform surgical management of osteoarthritis of the shoulder in older people in the UK and internationally. We will also undertake interviews to explore patients’ perceptions of acceptability of the two types of shoulder replacements, and their experiences of recovery, within and across trial groups.

Patients will be followed up for two years after their surgery. The primary outcome is shoulder function using the Shoulder Pain and Disability Index. Secondary outcomes include function, health-related quality of life, complications following surgery, and mortality. The data collected will eventually be linked to the National Joint Registry for longer term follow up on revision surgery. We will also combine our results with the Australian study.

RAPSODI is being co-led by Chief Investigators Prof Ian Trail at Wrightington and Prof Joe Dias at Leicester and by Prof Catherine Hewitt and Dr Catriona McDaid at York Trials Unit.

# Behavioural Activation for Low mood and Anxiety in Male NHS Frontline Workers: The BALM programme



Mental health issues account for nearly a quarter of all NHS staff absences indicating that the healthcare system is currently unable to effectively 'help the helpers'. Male frontline staff are at increased risk of stress and burnout, and developing mental health conditions. The risk was heightened during the recent pandemic indicating a need to intervene early for this group.

Traditionally, frontline NHS workers operate in 'a pull your socks up' culture where individuals are expected to be resilient and stronger than the general population. Male frontline workers are less likely to acknowledge work-related stress. Moreover, they are less likely to seek help. Suicide rates among male frontline NHS workers are disproportionately high.

Behavioural Activation is an effective treatment that can be used as an early intervention to help stop these difficulties getting worse. It is particularly suited for adaptation as a gender-sensitive intervention because of its practical, action-oriented strategies that are consistent with a strengths-based masculinities approach aiming to reinforce men's sense of autonomy, control and independence.

The aim of the first part of the programme is to develop a self-help Behavioural Activation e-booklet tailored specifically for men who are working on the NHS frontline. As part of this, we will talk to men from different NHS frontline jobs to ensure the e-booklet is designed in a way that is helpful and appealing to them. The programme is unique in that it will focus not just on clinicians but also on men working in diverse roles such as estates and maintenance.

In the second part of the study, we will evaluate how effective the intervention is. We will recruit 45 men at risk of low mood or anxiety who are working on the NHS frontline. Personal coaches will be trained to guide them through the e-booklet. We will evaluate the intervention both quantitatively and qualitatively measuring their mood and/or anxiety and interviewing 20 of them as well as their coaches to find out how useful they found it.

Funded by Movember the programme runs from 2022 to 2024, in partnership with three NHS Trusts: Tees Esk and Wear Valleys, York Teaching Hospitals and North West Ambulance Services. Professor Paul Galdas and Professor Dean McMillan are co- chief investigators. The project is led by Dr Kate Bosanquet alongside two researchers Heidi Stevens and Katie Webb with administrative support from Katie Carlisle. The wider research team includes leading experts in health from Hull York Medical School and Keele University.

Follow us on Twitter: @BALMprogramme

[www.balmprogramme.co.uk](http://www.balmprogramme.co.uk)



# Successful recruitment to a feasibility study supporting young people experiencing mild to moderate depression in community settings



Researchers from the Mental Health and Addictions Research Group (MHARG) in the Department of Health Sciences have successfully recruited 20 young people to take part in a feasibility study to test a newly adapted intervention based upon Behavioural Activation (BA).



This feasibility study forms part of a 5-year research programme called ComBAT, which stands for Community-based Behavioural Activation Training for Depression in Adolescents. Funded by the National Institute for Health Research (NIHR) and led by Professor Lina Gega, ComBAT will develop, deliver, and evaluate Behavioural Activation (BA), a brief psychological therapy, for young people aged 12-18 with mild to moderate depression. BA is based on one key principle: that enjoyable, purposeful, and meaningful activities can lift our mood, energise us and stimulate our

interest and pleasure in day-to-day life. BA involves identifying, scheduling, completing, and monitoring day-to-day activities that are emotionally rewarding and connect with things and people that are important to young people. Previous research has demonstrated BA's efficacy in supporting adults experiencing depression and that it is a promising intervention for children and adolescents when delivered by mental health specialists.

As part of ComBAT, the team will adapt BA so that it can be supported by a wider group of professionals in schools and other community settings, such as young people's charities, youth justice services and social care. It is hoped this will enable young people experiencing mild to moderate depression to be able to access timely early intervention to prevent their symptoms worsening. So far, 20 young people have been recruited from local CAMHS services of the study's sponsor Tees, Esk & Wear Valleys NHS Foundation Trust (TEWV), E-ACT Academies, a school-based wellbeing service, and Redcar & Cleveland Mind. Professionals within these services have received training in delivering the newly adapted BA and receive regular supervision from the research team.



The next step is for the team to undertake a national randomised controlled trial (RCT) to assess the clinical and cost effectiveness of BA in comparison to usual care, and its acceptability from the perspectives of young people receiving it and professionals delivering it. To keep up to date with ComBAT's progress you can visit the study website at [www.combatdepression.org](http://www.combatdepression.org). The team also provides regular social media updates through Twitter at @ComBAT\_Trial\_UK.

### BASIL Study Update – Recruitment’s Closed!



The BASIL (Behavioural Activation Social IsoLation) programme of research was designed in response to the COVID-19 pandemic. It aims to evaluate the impact of a brief behavioural activation intervention, delivered remotely, in mitigating depression and loneliness in older people with long-term health conditions during the pandemic.



The BASIL trials programme has progressed well. The pilot trial started in April 2020, and recruitment opened to the main trial (BASIL+) in February 2021. We are delighted to announce that BASIL+ closed to recruitment at the end of February 2022 with 435 participants! We recruited participants from 11 sites across England and Wales. Sites included NHS Trusts, GP practices and Age UK.

BASIL+ is still ongoing with participant follow ups and delivery of intervention sessions across some sites. Currently follow up rates are around 80% for 1 month and 3 month follow ups, and 12-month follow ups recently commenced.

None of this would have been possible if we were unable to adapt our recruitment and study processes due to the restrictions and limitations the COVID-19 pandemic caused with the stay-at-home order. We had to quickly adapt the study processes and trial design to accommodate for remote delivery. This included setting up the

study to enable telephone and online consent and delivering the support intervention by telephone or video call. Therefore, to ensure a positive experience for our participants despite the changes, we worked closely with our existing patient and public involvement (PPI) members. In addition to the PPI members, we also worked closely with our Lead Clinical Research Network and Research Ethics Committee to enable the efficient and successful delivery of the trials.

The key areas that required adaptation included recruitment methods, consent methods, remote intervention delivery and data collection. Information about the studies was sent out by general practices using a secure postal platform. Potential participants then had the information to read at home where they could complete a consent form online if interested or have a telephone discussion about the study with a researcher and the informed consent process could be completed verbally. Once consent had been completed either online or verbally, the baseline questionnaires were then completed over the telephone with a researcher. If the participant was then randomised into the intervention group, the intervention was delivered either over the phone or via a video call, with the booklet for the session having been sent them securely in the post beforehand. For data collection at the follow up time points, the questionnaires were completed online. A participant could either do this themselves after being sent a link by a researcher, or it could be completed over the phone with a researcher who would input the responses.

The Basil trials programme is the largest mental health intervention study to be conducted during the pandemic to investigate depression and loneliness. Findings from the pilot trial were published in PLOS MEDICINE and suggested that loneliness was reduced for participants receiving the BA intervention at 3 months. We have also recently published the BASIL+ protocol paper in PLOS ONE that explores the background, rationale, objectives, and methodology of the trial.

Keep up to date with BASIL research on:

Twitter: @BASIL\_Research

Website: <https://sites.google.com/nih.ac.uk/basil>

BASIL+ Protocol Paper available at: <https://journals.plos.org/plosone/article/authors?id=10.1371/journal.pone.0263856>

BASIL C-19 Pilot Paper available at:

<https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1003779>

## Research News

### Departmental Research Conference for ECRs: Save the date

Sarah Masefield and Kate Mooney have received funding to hold an in-person Departmental Research Conference on 13<sup>th</sup> July 2022 for early career researchers (including PhD students).

The aim of the conference is to build back and develop the Department's ECR community after 2 years of home working conditions, which has changed and in many ways limited the opportunities for interaction, research dissemination and researcher development within the department. These circumstances will have particularly impacted the PhD students and staff starting joining the department from 2020. It aims to provide these opportunities by bringing together ECRs across the different research groups to showcase the amazing and diverse research going on in the department and participate in researcher development activities.

If you are an ECR at grades 5, 6 or 7 or a PhD student in any year, please save the date in your calendar. They will be sending out more details in the next few weeks.

We are also looking for ECR representatives from the following research groups to join our planning committee to help lead and organise the conference: cancer epidemiology; York trials unit and stats; and cardiovascular health.

If you are interested in joining the committee or finding out more, please email [sarah.masefield@york.ac.uk](mailto:sarah.masefield@york.ac.uk) or [kate.mooney@york.ac.uk](mailto:kate.mooney@york.ac.uk).

This initiative is one of the UKRI/Research England Enhancing Research Culture Departmental Awards distributed by the University.

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### Physiotherapy Research Society host annual meeting

Jayanti Rai, PG Health Research and Statistics Student writes: "The Physiotherapy Research Society hosted their 40th Annual Scientific Meeting - Creating a Culture Change, at University of Kent, Canterbury in April."

"Creating a Culture of Change" is about the creating a culture and shifting culture of the departments and the organisations to become friendlier towards the clinical academics."

"Clinical research has been increasing as a specialism, and we anticipate continued expansion in the future years. The opportunity to organise one of the most important scientific conferences will undoubtedly motivate current and future generations to continue to progress in creating fertile grounds for research to improve care pathways."

"The conference was well received as it was the only face to face physiotherapy conference of the year till date in the U.K. The highlights of the day was five keynote speakers' clinical research journey, which was very inspiring, oral and poster presentations and delegates' enthusiasm."

### COVID-19 has left GPs struggling around the world, new study show

The pandemic left many GPs around the world feeling depressed, anxious and in some cases burned out, a review of global studies has revealed. The review, published in the British Journal of General Practice and led by the University of York, also found that women doctors in primary care reported more psychological problems, whilst those who are older reported greater stress and burnout.

Researchers reviewed research literature and identified 31 studies evaluating the impact of COVID-19 on the mental health and wellbeing of doctors in primary care.

Healthcare systems vary across countries and this review identified only three studies of GPs working in the UK. Studies used a wide variety of measures to assess psychological wellbeing and lacked measurements from before the pandemic, which makes comparisons difficult.

There were, though, common themes highlighting the difficulties faced by doctors working in primary care settings (similar to NHS GPs) around the world.

Sources of stress during the pandemic included changed working practices, exposure to COVID-19 and inadequate PPE, information overload, lack of preparedness for the pandemic, and poor communication across health sectors.

The studies demonstrated an impact on primary care doctors' psychological wellbeing, with some also experiencing a fear of COVID-19 and lower job satisfaction. A third of the studies also explored physical symptoms - with GPs reporting migraines and headaches, tiredness and exhaustion, sleep disorders and increased eating, drinking and smoking.

One UK study which focused on GPs with symptoms of long COVID found GPs felt 'let down' and expressed frustration at the lack of support and recognition for the condition.

Study author, Dr Laura Jefferson from the Department of Health Sciences said: "Many GPs have reported stress and burnout over recent years, which is potentially damaging not just to doctors themselves, but also to patients and healthcare systems.

"The COVID-19 pandemic has presented additional challenges for GPs, including rapid change, risks of infection, remote working, pent-up demand and reductions in face-to-face patient care."

"While there has been a tendency for research like this to focus on hospital roles, there was a need to synthesise evidence and explore factors associated with GPs' mental health and wellbeing during the pandemic. This is the first systematic review exploring the psychological wellbeing of primary care doctors during the COVID-19 pandemic."

Seven studies reported statistically significant differences in outcomes for women GPs, including higher stress levels, greater reporting of burden, burnout and anxiety. Older age was associated with higher stress levels in three studies.

The research concluded that policy and infrastructure are needed to support GPs and further research is needed to explore gender and age differences; identifying interventions targeted to these groups.

# Massive expansion of regional health database to help researchers unlock new insights into blood cancers

Researchers at the University of York have expanded a unique regional cancer database, which will help clinicians understand more about conditions such as leukaemia, lymphoma and myeloma. The expanded database will allow researchers at York's Haematological Malignancy Research Network (HMRN) to compare the health of patients with blood cancer to similar people in the general population who are cancer-free.

With 180,000 new cancer-free cases now added to the database, the researchers say these comparisons will help them discover more about how blood cancers relate to other conditions and illnesses, as well as the impact of treatment. The people in the database live in the Yorkshire & Humberside region covered by HRMN.

Served by 14 hospitals, HMRN's population of 4 million people is broadly representative of the UK as a whole (in terms of sex, age, socio-economic indicators and healthcare). Researchers say that although the database is regional, the results are applicable across the nation.

Each year in the UK around 45,000 new patients are diagnosed with blood cancer. By looking at the cancer cohort and a non-cancer cohort side-by-side, researchers and clinicians can track patterns of severe medical conditions and healthcare activity, allowing them to uncover important connections and areas where extra monitoring and care may be needed.

Around 2,500 patients are diagnosed with a blood cancer each year in the HMRN region, and all of these are included in the database, regardless of their age, sex, or treatment. This vital information is shared with researchers, clinicians, patients and commissioners to give them the best picture of these diseases across the population.

Professor Eve Roman, Director of HMRN and of the Epidemiology and Cancer Statistics Group at the University of York said: "This expanded database is a fantastic resource, allowing us to compare the health of those who have blood cancer to those who do not – both in the years before cancer is diagnosed and the years after. It provides an unparalleled opportunity to address real questions of concern to clinicians, patients and researchers.

"So far, many of the findings have been striking and unexpected. We are currently examining longer-term health looking, for example, to see whether the health of patients successfully treated for cancer ever returns to the level it would have been, had they not had cancer."

Professor Russell Patmore, lead clinician at HMRN, and consultant in haematology and Medical Director for Clinical Support Services at Hull University Teaching Hospitals NHS Trust, said: "The HMRN database is already recognised as one of the best sources of information on people with blood cancer in the world. This expansion takes things to a whole new level, opening up many avenues for research that will ultimately benefit patients.

"Modern therapy is dramatically improving outcomes but little is known about the long-term impacts of treatment on health. This is especially important as many treatments are now being given on a continuous basis and often to older patients who may be especially vulnerable to toxicities that impact on their quality of life. Our cancer-free cohort will allow us to explore this and provide answers that would never be available from clinical trials."

HMRN is a collaborative project involving University researchers and NHS clinicians. It is supported by a programme grant that is approximately £5 million from Cancer Research UK and Blood Cancer UK.

### Digital Up-skilling in people with Severe Mental Ill Health (SMI)

Research Assistant Olivia Taylor writes: Myself and Lauren Walker held an interesting PPIE meeting at the Quaker Meeting House in Sheffield, to discuss ideas for a digital technology training package using Learn My Way for people with severe mental ill health (SMI).

#### Why did we do this?

People with severe mental illness (SMI), such as bipolar or psychosis spectrum disorders, face health inequalities and increased levels of physical illness like diabetes and heart disease.

During the COVID-19 pandemic, health services like GP and hospital appointments have been done over the phone and online, which is likely continue into the future. Some people with SMI may not have the digital equipment or the digital skills needed to access health supports and services online which puts people with SMI at risk of even more health inequalities. This is known as the digital divide.

The digital divide can mean not having enough access to digital technology, not having enough digital skills or struggling with motivation. Health inequalities may be even worse when people with SMI have physical illnesses as well, for example diabetes, as support and self-care is becoming more digital.

#### What have we done so far?

Survey 1 – Understanding the digital divide this was done to understand how big this divide is. This survey asked about people's ability to access the internet whether this is via a phone, tablet, or computer, and if they used data or WiFi. We found that most people were able to access the internet (around 80% or 8 out of every 10 people), despite this over 60% did not use the internet or only used it in a limited way during the pandemic restrictions.

Survey 2 – the Essential Digital Skills (EDS) framework was used to assess the level of digital skills for people with SMI. 42 out of every 100 (42%) people with SMI lack Foundation digital skills, whereas in the general population only 16 in every 100 (16%) lack Foundation digital skills.

Foundation skills are basic skills such as handling passwords and using device settings. If people are not able to do these things, then there is a high risk that they are or will not be able to access to necessary services.

Changes at government and local council level and support through the NHS could make sure that people have access to key services and have opportunities to develop digital skills and confidence.

The Good Things Foundation have created free online courses for beginners to help people develop digital skills. Learn my Way <https://www.goodthingsfoundation.org/learn/learn-my-way/>.

This training has been used a lot to help people with technology and digital skills. People with SMI may need more support to access and begin the training though, as mental health symptoms like feeling paranoid and lack of motivation can make access to training and support a lot more difficult. Support around the training could help with confidence and not feeling isolated when learning a new skill.

We wanted to know how to help people with SMI access this training.

# Research News

## **The workshop**

In preparation for the meeting welcome packs were posted out to each attendee.

We hosted a hybrid meeting which had three attendees in person from Sheffield, York and Barnsley and two attendees join via zoom, all of who had a great deal of knowledge about living with physical and mental health issues either from their personal experience or from being a carer.

The workshop was interesting and brought together great ideas for a digital training package.

## **The Outcomes**

An introduction was given about the digital divide and the Learn My Way training package. Together the group discussed the ways in which a digital training course may be most useful to them or someone with SMI. The most important points for supporting a person with SMI access digital training were:

- Introduction – Having an introduction the topic.
  - Location – Venue and locality is important.
  - Who – someone with understanding of digital training and mental health issues.
  - Group size – a small group.
  - Useful supports/resources – e.g. a workbook
  - Safety and online scams – really important.
  - The essential Digital Skills (EDS) framework – useful for the start of training and the end of training.
  - How to measure the success – confidence, usefulness and abilities.
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# Staff News

## Hello

We wish a very warm welcome to new members of staff who have joined the department recently, these include: Ruth Hall, Patricia Darcy, Katie Webb, Heidi Stevens, Sheridan Stead, Anthony Wishart, Emma Standley, Rachel Ellison, Ginie Harrison, Hilary Seavers, Matthew Lemon, Isabel Soler-Randerson, Karen Innis, Dea Nielsen, Gillian Parkinson, Bernadka Dubicka, Melanie Barnes and Grace Greenwood.

## Goodbye

We also wish a very fond farewell to those who have left the department over the last few months, including: Donna Barnett, Ian Hamilton, Jacob Losh, Alison Chatten, Jackie Martin Kerry, Sagarmoy Phukan, Morgan Clarke, Belen Corbacho, Alexandra Dean, Alison Foster Lill, Daniel March, Leanne Jackson and Steph Prady.

## Baby news

Congratulations to:

Victoria Fisher who welcomed a baby boy Theodore in March.

Michelle Watson who welcomed a baby girl, Aurelia Eleanor Watson in April weighing 8lb 12.5oz.

## Congratulations

Congratulations to Ally Chadwick who married Beth in April.

Congratulations to Bex Hudson Tandy and Alison Smalley who won 1<sup>st</sup> prize for their poster at the annual Learning and Teaching Forum conference in March.



## Department of Health Sciences Book Club

The next meeting of the Health Sciences Book Club takes place on 29th June from 12pm-1pm via Zoom. For more information email Sophie Godfrey ([sophie.godfrey@york.ac.uk](mailto:sophie.godfrey@york.ac.uk)). There's also a Slack channel to communicate on - #dohs-staff-book-club. Details of the chosen book and the meeting will be on this channel.

If you would like to make a submission to future editions of Megaphone, please contact Jane Milsom ([jane.milsom@york.ac.uk](mailto:jane.milsom@york.ac.uk) or tel 01904 321392).