

ODDESSI NEWS

Newsletter with updates from the ODDESSI Research Programme

News in Brief

- *****BIG NEWS***** On the 31st January we presented ODDESSI progress to date to our funder, the National Institute of Health Research (NIHR). They were impressed with everyone's hard work and our exciting plans, and gave us their approval to continue to the second stage of the research programme. Huge congratulations to everyone for this achievement.
- On the 21st March we presented our research plans to Bangor NHS Ethics Committee. They gave us some useful advice and commended us on the quality of our application.
- Shaira Hassan, our Research Assistant in NELFT has had her last day working on the project. She has been instrumental in the success of the feasibility trial and we wish her all the best for the future.
- The Principal Investigators from all sites are meeting at UCL for a workshop day on the 24th April to continue preparations for the trial.

Sailaa's shout-outs

If you have a shout-out for anyone involved in ODDESSI (e.g. TAU teams, peers, other OD practitioners, support staff, researchers, and clients) email Sailaa at Sailaa.Sunthararajah@nelft.nhs.uk

Tofunmi Aworinde and Victoria Akinyooye, Clinical Studies Officers in NELFT, for their very high quality work on our primary outcome measure in the feasibility trial.

Euan Mackay, for saving the day by agreeing to facilitate a focus group at the Open Dialogue training at short notice.

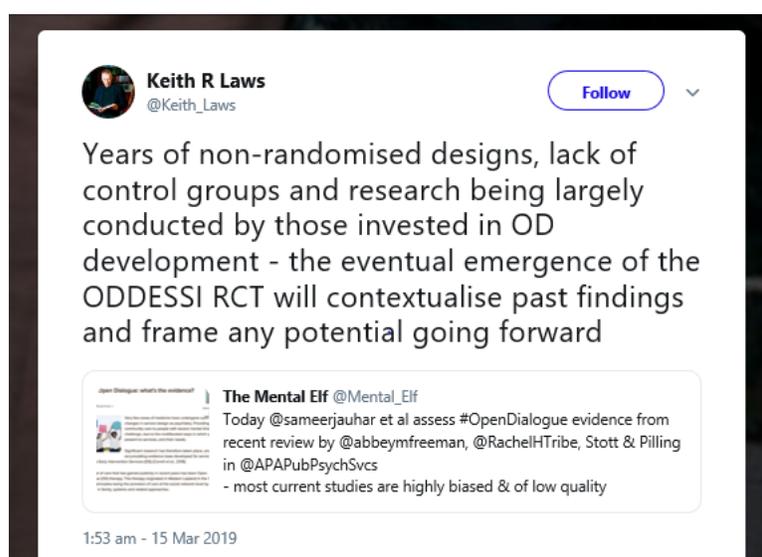


Photo: Twitter conversations about Open Dialogue evidence and ODDESSI

Talking about the evidence-base for Open Dialogue

There has been a lot of interest and conversation around the evidence for Open Dialogue in recent weeks. A review of the evidence base for Open Dialogue led to a commentary suggesting that further Open Dialogue research might not be justifiable until after the ODDESSI study.

Skeptical voices regarding the OD evidence base have been around for the past few years as a counterpoint to the enthusiasm that has led to OD being so well known. The main thrust of criticisms seems to be regarding outcomes in early onset psychosis along with methodological issues such as small samples with unclear selection criteria, and non-randomised designs. Some people have argued that the rates of recovery are no different to those found in usual treatment, or that the principles of OD are already valued within the NHS, but cannot be implemented, as they are unrealistic.

The current evidence for OD being an effective treatment for psychosis may need strengthening, but I would argue that mental health services treat people suffering from distress for a variety of reasons. The Care Quality Commission has found that people are unhappy with services if they feel they are not being seen enough, not involved in treatment decisions or that their personal circumstances aren't taken into account. Perhaps the positive feedback we have had from service-users has been due to these needs being met within the Open Dialogue care that they have received.

Marcus Colman, ODDESSI Research Assistant in KMPT



Photo: Charmaine and her son exploring Sweden by husky

What are fidelity and adherence?

As you may be aware, Mauricio Alvarez from UCL has been visiting ODESSI trial sites and doing interviews with members of crisis teams, community mental health teams, and Open Dialogue teams. We are using these interviews to measure **'fidelity'**, a research term which, in brief, means 'how well a mental health service is able to deliver what they intend to deliver'. This may be having the amount of staff that you need, and having caseloads and response times that are appropriate for your service.

Open Dialogue practitioners have also been audio-recording network meetings and for Melissa Lotmore at UCL. We will use these to monitor **'adherence'**: if network meetings adhere to Open Dialogue principles. In a clinical trial of a medication, it is important to check if participants are actually taking the medication. Similarly, in this trial of Open Dialogue, we will need to see if Open Dialogue is being delivered as intended.

Thank you to everyone who has agreed to be interviewed, and to those who have recorded a network meeting. We will be having a final push for recordings of network meetings for the feasibility trial in the coming weeks.

Spotlight on: Charmaine Harris

The 'spotlight on' feature will include an interview with someone who is involved in the ODESSI research programme. This time we managed to catch Charmaine Harris for a brief chat during her very busy week delivering Open Dialogue training at High Leigh Conference Centre. If you would like to suggest a person (or volunteer yourself) to appear in this feature please email Kat (Trial coordinator, UCL) on k.clarke@ucl.ac.uk or any of the ODESSI research team.

Hello! I'm Charmaine, I am one of the Trainers on the Peer-supported Open Dialogue (POD) Training. I also work in East London Foundation Trust (ELFT) specialising in peer support, and as an Open Dialogue Peer Practitioner in North East London NHS Foundation Trust (NELFT) as part of the ODESSI research trial.

In ELFT, I work as a peer support lead at the Service user Outreach Service (SOS) team which covers City and Hackney. SOS is a needs-adapted Peer Supported Open Dialogue service. Last year my colleagues went on the POD training to support in the setting up of a crisis service for users and their support networks. SOS was recommissioned again this year. Within NELFT, I have a similar role but also have been heavily involved in helping to develop and integrate the 'P' within POD. We all have experience (of some sort) of mental health distress, and therefore we are all capable of connecting with the people that we support in some way. I believe the peer element of Open Dialogue helps to allow openness and lessen pathologising.

Before I came to the NHS, I worked as Deputy Director for a Charity that my nan had set up, so I had big boots to fill! I hid my personal experience of mental health and felt very isolated working at such a senior level and battling illness. It was a psychiatrist that motivated me to become involved with working in the NHS. He said that I am really good at talking and people could benefit from hearing my voice, vision and lived experience. This started my career in social inclusion, service user involvement and engagement, working towards developing a collective voice for service users. I then joined the Recovery College as a peer trainer. That's how I met Russell (Razzaque) four years ago and got involved in the POD training, I completed my mentorship training and returned as a lived experienced academic, focusing on my specialism in peer work before joining as the 5th POD trainer.

In my spare time, I am involved in activism and social justice work in areas very closely related to my career. Outside of that, I love to spend time with loved ones, travel, and be with nature, focusing on living and being present. Recently, I went to Kiruna in Sweden and stayed in the ice hotel with my son we went on a husky tour, which was absolutely amazing! (see photo).

Thank you for taking the time to read the ODESSI newsletter. We will be uploading future newsletters and information about the study to our website, so check back at any time for updates. **To find us go to www.ucl.ac.uk and search for 'ODESSI'**