



Welcome to the Relationships in Good Hands (RIGHT) Trial newsletter.

With this and future newsletters we hope to keep you up to date with the progress of our randomised controlled trial of Dyadic Developmental Psychotherapy (DDP). Please pass it on to others in your team who may be interested. If you received this via someone else and would like to receive it yourself, please email Verity to be added to the mailing list.

June 2021

Progress update

We are now 6 months into the 17-month long Phase 2 of the trial. The primary focus of work in recent months has been getting recruitment up and running in the 3 Phase 2 sites. The table below summarises progress thus far.

Site	Eligible Families Referred	Families Recruited	Families Randomised
Oxfordshire	5	3	2
AdoptionPlus (Central Beds and Hertfordshire)	0	0	0
Lanarkshire	4	3	3
Total	11	5	5

We are delighted to say that we are starting to see trial participants come in in two out of our three sites. After a slow start, with lots of tricky issues to consider, we are getting regular referrals in most of our partner centres. We would love to ramp things up a bit, and to get things started in our Adoption Plus site so please stay in touch if you have any families you would like to discuss.

Health economics

The trial has lots of elements and Health Economics is one of them. Eleanor Grieves from the Health Economics sub-team writes:

The first phase of the work has focused on identifying the appropriate resource use items and data requirements at each site/service context, exploring the existing data systems, developing data collection forms/tools and establishing a process for extraction and collection of data prospectively in for the Phase II feasibility trial.

The economic evaluation asks does DDP offer value for money compared with services as usual? Importantly, this is **not** about which is the cheapest or which has the greatest effect but rather it is about how much more (or less) are 'we' paying, for how much more (or less) benefit? To calculate this, health economists need to collect data on outcomes and resource use for both DDP and SAU. Given the intervention's cross-sectoral impact - not just the NHS and Social Services - we are collecting this data from a societal perspective to also include other professionals (for example, in education) as well as costs to the family (for example, their time interacting with services, time off work, childcare). To this end, we have finalised a questionnaire to be completed by families/carers in both groups to measure the extent to which outcomes and resource use are impacted upon by the intervention - both positively and negatively. We will also be working with sites to establish a process of best capturing the delivery of the DDP in terms of time, frequency, intensity – or who does what? - when? - and how often? We are currently piloting a data extraction form with one site. This will allow us to establish the processes around prospective data collection during Phase 2 and 3.

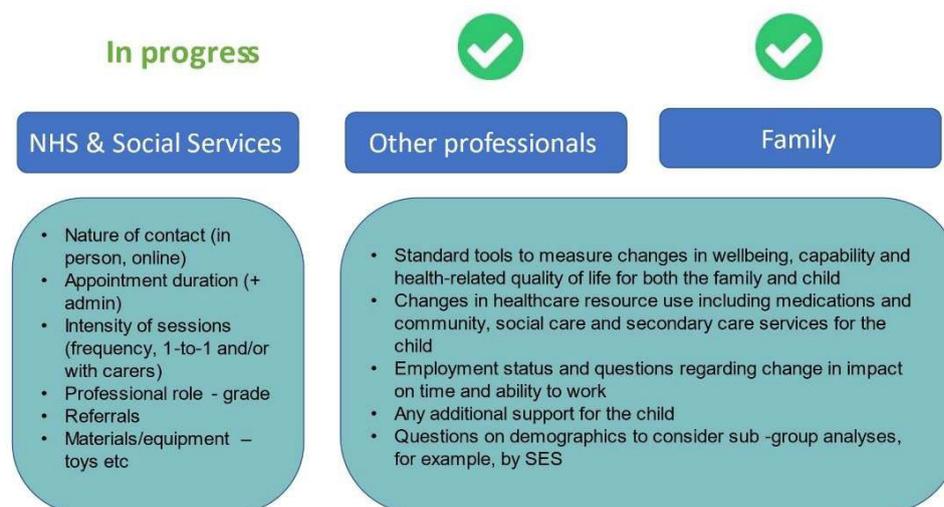


Figure 1: Resource use elements to be captured for economic evaluation

Finally, the qualitative interviews and mapping of services at each site undertaken during this first phase of the research will feed into early-stage economic modelling. This is to ensure that as well as fully capturing the DDP intervention in each of the three service contexts as well as services as usual delivery and referral pathways to additional services – we can start to explore the potential cost-effectiveness of the DDP in each of the three settings in both the short term but also model what impact on outcomes and resource use we might expect to see over the longer term.

Meet the research nurses:



Since the last newsletter, two research nurses have joined the team. Caroline Carlisle and Annette Franczuk contact families referred to us to talk about the trial and consent them if they would like to take part. They then carry out a series of baseline assessment measures with both parent and child that will be used to assess the progress made over the twelve months of participation. They have been helping us to iron out the teething problems of carrying out these assessments remotely.

Caroline writes:

"I started nursing when I was 17 years old and it has been a wonderful experience throughout my life. The work is so varied and flexible and the opportunity to meet and work in so many areas keeps me on my toes! I have worked as a research assistant and research nurse with with the MRC/ SPHSU at The University of Glasgow for the past 8 years on a part-time basis. It has been great to combine this with clinical work and also with supervising the next generation of senior nurses working towards their Master's degree.

The RIGHT Trial is a very privileged opportunity to work alongside some great researchers, and to spend time with amazing families who care for children, sometimes with very complex needs. Working remotely on the Trial has meant developing IT skills and troubleshooting 'on the hoof'! I particularly enjoy undertaking the less structured aspects of the Trial, such as the semi-structured

interviews. The openness and trust placed by the participants during the interview is often very humbling, and their 'stories' and lived experience of being a parent are incredible"

Annette says:

"I've been a research nurse since 2007 often in parallel with my NHS work. I have worked on a variety of studies, mostly with MRC/CSP SPHSU at Glasgow university but also with the Laser suite at the Canniesburn Centre in NHSGGC. Trials I have worked on have been in a variety of settings: community based, in schools, workplaces, football stadiums, prisons, hospitals and many in people's homes. My last NHS role was with a children and families health visitors team and the knowledge and skills from this post have been very useful to me in a number of studies.

I enjoy the variety in the work and the variety of people. I enjoy the relationship that's built with participants at the beginning of a study and then when you go back after some time, especially after an intervention and hear the participants' experience. I never forget the fact that it's voluntary participation in research studies and the time and information they share with us is precious, so I'll always be as flexible as possible with their appointments.

What has struck me about the RIGHT study is the trust the participant place in us. They trust us to be kind and supportive when speaking with their children who are vulnerable and often anxious. That trust is something I very much appreciate."

Partner spotlight: ATTACH Team



"The ATTACH team have been using DDP informed practice as the foundation of our service for many years. Clinically we have been aware of the benefits of this approach for children, families and our colleagues, however we are aware that despite a clear theoretical framework there is little empirical evidence to support this approach. We therefore seized the opportunity to

contribute to this developing evidence base.

We are a multi-disciplinary therapeutic team (Clinical Psychologists, Senior Practitioners in Social Work, and an Educational Psychologist) working with adoptive, special guardianship and foster care families in Oxfordshire.

Our work uses an understanding of attachment theory and developmental trauma to understand the needs of children who have been neglected or abused and who no longer live with their birth parents"

Claire Holdaway, Lead for the ATTACH Team, says: *"Having worked using DDP informed practice for many years and having witnessed the transformational impact the principles of DDP can have for so many of the families we work with we are delighted to be part of the first RCT of this important and relevant therapeutic approach"*

What is randomisation?



Our trial uses randomisation to ensure that the trial is not biased by the way participants are selected for either DDP or services as usual. Helen Minnis, our Principal Investigator, has recorded a short video "Why is it wise to randomise?" explaining why randomisation is so important. You can watch it here:

<https://www.youtube.com/watch?v=gnisBvnNWjE>

We hope that you all have a lovely summer and get to enjoy some time off.

If there are things you would like to see covered in a future newsletter, please let Verity Know (verity.westgate@psycho.ox.ac.uk)

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