

**Digital Technology for Mental Health: Asking the right questions**  
**#digitalMHQ**

**Steering Group meeting 6**  
**Wednesday 7th June 2017, 2.00pm - 3.30pm**  
**Via Teleconference**

**Attending (alphabetical order):** Victoria Betton, Kathy Chapman, Sophie Dix, Katherine Easton, Iris Elliott, Toto Anne Gronlund, Chris Hollis, Thomas Kabir, Paul Radin, Mat Rawsthorne, Sandra Regan (Chair), Liz Rye, Lucy Simons.

**Apologies:** Debbie Butler, Rachel Churchill, Chris Packham.

**Action points**

No.	Action point	Who	Due by	Status
11.	Ideas for further funding to be discussed with LS	ALL	Ongoing	Ongoing
42.	Lucy and Thomas to liaise over workshops with children and young people.	LS/TK	April/May 2017	Ongoing
60.	Andre to provide a short paper with options for how the final workshop could use online methods for Sandra to take to the JLA team.	AT/SR	April/May 2017	Complete
61.	During the development of the COPE database, additional uncertainties from the literature will be captured. We will also review the uncertainties from other mental health PSPs for relevance.	AT/LS/KE	June - Sep 2017	
62.	Append evidence checking document to the protocol and revise Section 5 to update methods of data management. Circulate to the SG for comment and sign off by the end of June.	LS/AT/ALL	June 2017	complete

63.	All SG members asked to send LS a list of networks they have sent information about the survey to.	ALL	June 2017	complete
64.	Lucy will close the survey on Wednesday 5th July 2017	LS	July 2017	complete
65.	Lucy and Andre to produce a short report on the outcomes of the Tweet Chat	LS/AT	July/Aug 2017	
66.	Lucy, Liz and Paul to produce a short report on the format and outcomes of the workshops to gather uncertainties.	LS/LR. PR	July/Aug 2017	
67.	First draft of the taxonomy for the questions to be discussed at the next steering group meeting.	LS/AT/ KE/CH /LR/D B/MR	June/July 2017	
68.	A plan for how to respond to questions that are already answered and those which are out of scope but useful will need to be developed	LS/ALL	Sep 2017	
69.	Consider incorporating comparative analysis of our sample with any reference data for assessing representativeness	CH/LS	Aug/Sep 2017	

## Notes of the discussion

### 1. Welcome, apologies and introductions

Sandra welcomed everyone and reminded us of ways of working for teleconferences.

Before moving onto the formal agenda, Sandra said how sorry she was to be resigning as a JLA advisor, it had not been an easy decision, but she knew how important it is to have a really good level of engagement from the advisor and with her new post as PPI Manager at the Mental Health Biomedical Research Centre in Oxford, she knew she wouldn't be able to offer us that. Toto Anne Gronlund will be taking over from Sandra as our advisor. Chris Hollis congratulated Sandra on her role and thanked her for her contribution and energy to the PSP. He also said he was looking forward to working with Toto.

During the round of introductions, Toto explained how she had joined the JLA in spring 2017. She was recently retired from NHS, where she had mainly worked in areas relating to information and technology - her most recent role had been at NHS Digital. She was also supporting a JLA PSP on heart failure.

### 2. Notes of last meeting and actions not covered by the agenda

Actions not carried forward on the agenda for this meeting:

4. Review uncertainties from other mental health PSPs - Sandra suggested this should be taken forward at the same time as we search for for uncertainties from the literature (**action point 61.**)

**33.** Section 5 to to be revised and amended. This would be addressed with the evidence checking appendix, plus an update by Lucy on the methods of data management. Agreed to amend and circulate to the Steering Group for comment and sign off by the end of June 2017 (**action point 62.**)

Minutes of meeting on 19th April were accepted as correct.

### **3. Update on survey and gathering questions**

#### **(a) Update on survey response and demographic range**

Lucy ran through Paper 2 - the demographic report, highlighting any changes to previous trends. Ideas for addressing gaps or low response rates were discussed as we went through the report. Sandra noted the importance of capturing all the efforts the SG have put into promoting the survey and getting the levels of engagement we have achieved. It would be important to report on all the networks and supporting organisations (**action point 63.**) Compared to other PSPs the range and breadth of people responding is good - including on the spread across the devolved nations, ethnic groups and professional backgrounds.

She also noted how valuable it was that people are routed from the front page of the survey to more information or straight to the survey - this shows that we are achieving a conversion rate of about 35% of people who land on the survey which is good compared to other sectors.

A number of ideas for promoting the survey were noted:

- State of Mind - sporting organisation works with Rugby and Football players
- AHSN involvement leads
- Call for participants website

A time lag was noted between contacting people within organisations who then disseminate information about the survey to their members and networks. It was decided that we will publicise the closure date as 30th June but actually close the survey five days later (5th July) to allow for those receiving the information late (**action point 64**).

#### **(b) Using Twitter to gather questions**

Andre had worked with Vanessa Garrity of @WeMHNurses (one of the WeCommunities on Twitter), who had agreed to host a Tweet Chat about the project as part of their calendar of Tweet Chats. The purpose of the Tweet Chat was two-fold (i) to experiment with Twitter as a method to gather questions and (ii) to see what impact it has on survey responses. Lucy and the rest of the MindTech team had supported this by providing the background information for the WeMHNurse website and taking part in the Tweet Chat on Monday 5th June, 8-9pm. It had been facilitated on the night by Mark Brown. Lucy reported that she had enjoyed the chat and found working with WeMHNurses a very positive experience.

Twenty nine other people had participated during the Chat and it was possible to categorise all participants as having either personal experience of mental health problems, a professional/clinical role or both. Issues raised by the Tweet Chat were similar to those coming through the survey. No specific questions were submitted, rather people raised issues or discussed their experience. Responses to the survey did not appear to increase during or after the Tweet Chat.

**POST MEETING NOTE:** While there was not a discernable impact on the survey responses during or immediately after the Tweet Chat, there was good engagement in the week leading to the Tweet Chat - 177 people landing on the first page (compared to an average of 140 per week overall). This was also considerable higher than the week of the Tweet Chat itself (44 people landing on the front page). Therefore, it is likely that the promotion of the survey by partners prior to the Tweet Chat did result in an increase in survey responses.

Sandra thought that we needed to report in detail on the Tweet Chat as it was a new approach to PSPs and others would be interested in learning from this PSP's experience. It should include the breakdown of who took part, the number of issues generated and how these were similar or different to the survey (**action point 65**). Lucy reported that Vanessa had agreed to host the chat as a favour to the PSP. Ordinarily, WeCommunities charge for hosting chats for other organisations and this is currently £950. Victoria was keen that the report consider how this method could be optimised for future, for example by directing people more explicitly to the survey.

### **(c) workshops**

The Steering Group had been keen to include some face to face workshops to gather questions because of the likelihood that people responding to the survey would feel confident with digital technology and therefore those who might be less comfortable might be missed. Members had identified groups who may not respond to an online survey but would be more likely to raise issues through direct discussion. Two workshops had taken place and two further ones were planned.

Liz had held a workshop with the People's Forum in Leicester, which was a group of people with personal experience of mental health problems and carers. Lucy had attended the National Young People's Mental Health Advisory Group in London. Both had followed a similar format of showing the film, holding a group discussion and circulating printed copies of the questionnaire for completion on the day. They reported that the workshops had been engaging and valuable - people had valued the opportunity to contribute, raised relevant issues and submitted questions (which Lucy had entered into the survey). The same process is proposed for the two forthcoming workshops at the Involvement Centres at Nottinghamshire Healthcare NHS Foundation Trust. Paul has facilitated the links for these workshops and will be running them with Lucy.

Again, Sandra emphasised how important it was to report on the workshops - the approach taken was novel to the JLA and it was important to describe the process, reflecting on it and capture the learning from this (**action point 66**).

Thomas and Lucy are continuing to liaise to see if joint workshops for this PSP and the children and young people's mental health PSP will be possible within timelines that suit both PSPs (**action point 42**).

### **4. Plan for drafting the categorisation framework for the questions**

As there was no obvious existing taxonomy to apply for the data management, Lucy reported that a bottom up, iterative content analysis was planned to develop a bespoke framework to organise the questions - the guiding approach would be developing this through multi-perspective discussion and consensus. Lucy and Kat had discussed how to start this process and it was suggested that a local

meeting in Nottingham with the Data Management sub-group would be useful to discuss and further develop this framework. It was planned to have a draft framework ready for whole group discussion at the next Steering Group meeting (**action point 67**). Advice from Toto may be sought during these early stages on the level of granularity required to adequately manage the questions.

The approach suggested was supported by Sandra and Toto. Toto offered to join the local meeting for this, if the group thought that would be helpful. Sandra noted that the framework might be an additional output from the PSP which could be reported and be useful to others.

As a group we still need to decide what to do with questions where there is an answer. One suggestion is to put together a FAQ/myth buster. Questions were raised on where to put it once developed. It could go on the PSP web pages but we also needed to target the people and groups who have asked the questions (**action point 68**).

Chris Hollis speculated that we may get a substantial set of questions which are out of scope but are still good questions - if they are tractable and unanswered then it will be important to capture these and pass on to others who may be in a position to address them (**action point 68**).

Chris Packham, had raised an issue via email prior to the meeting. He was interested in whether the JLA applied any sort of Equality Impact Assessment to the responses rates to the survey. He wanted to know if representativeness of our target population would be taken into account. Sandra reported that from a JLA perspective, it was about the wide range of people responding and the ability to track the methods used to reach this range and demonstrate this, rather than an aim for quotas or target numbers. Sandra was content that we had done our best to reach as wide a range of people as possible. In terms of reporting the PSP, we can do that level of analysis if we choose to, but we need to decide whether this is priority for us and how much resource to put into it. Chris Hollis suggested it may be useful to report on the demographics of people with personal experience and see if any reference data is available for comparison with our sample (**action point 69**).

## **5. Review the evidence-checking strategy**

Andre and Rachel had drafted a summary of the evidence checking strategy (paper 3). As there was no time to consider the report in detail, Steering Group members will be given the opportunity to read, ask questions and agree it, before it is appended to the protocol. This will be included in the process to revise and sign off section 5 of the protocol (**action point 62**).

A few other issues were raised:

- The practicalities of carrying out the plan as described for the COPE database - Lucy updated the SG on this under item 6.
- Confirming why this approach is needed - getting a good grasp of the evidence (especially systematic reviews) and link these to emerging questions to see where overlap or there are gaps.
- While reviewing the literature, we need to extract any research recommendations to enter as questions into the question database.
- The literature may provide answers to quite specific questions, while those emerging from the question gathering may be more broad - we'll need to decide whether there is sufficient evidence to say a question is answered.

## 6. Timeline for data analysis and evidence checking

Lucy had drafted a week by week timetable for the data analysis and evidence checking (paper 4a) across June through to early September. This had been drawn up once some additional resource from MindTech had been identified to support these project tasks. She explained that the opportunity for extra support on the project had come about after staff changes at MindTech and it would have a clear focus on the indexing of the Mendeley database and coding the questions once the framework has been agreed. To give us best chance to meet the timeline of the final workshop in early Dec, we need to make good progress on data management and evidence checking over the summer months and this additional support will help move us towards this. Steering Group members expressed support for this development.

## 7. Any other business/Steering Group meeting schedule

Lucy raised the scheduling of the final workshop. Young people at the workshop had expressed an interest in participating, but would only be available to attend if it took place at the weekend. Views were sought on the pros and cons of weekend versus weekday for the final workshop. Thomas noted that the DepressionARQ had held their workshop on a Saturday and had struggled to engage clinicians to attend. This trade off was acknowledged and discussed. Some Steering Group members would not be able to attend at the weekend due to family commitments. Most members, who expressed a view, thought that a week day would be preferable,

Sandra recapped the main features of the final workshop:

- all day, 10am-4pm,
- format is large group sessions and small group breakout sessions, but do consider the 'beyond the room' options
- aim for 24-30 people plus facilitators, 50% patients/carers, 50% professionals
- recruitment approach needs to be agreed-
  - o could be open recruitment, for example, send an expression of interest to 2000 people, and then select from those who respond;
  - o purposive recruitment, target those who responded to survey or some other target group

### Steering Group schedule 2017

The next meeting will be a face to face meeting at the Mental Health Foundation on Monday 10th July, 10.30 - 3.30pm.

Meeting type	Date	Location
Face to face	Monday 10 <sup>th</sup> July	MHF, London
Teleconference	Wednesday 6 <sup>th</sup> September	14:00 – 15:30
Face to face	Tuesday 17 <sup>th</sup> October	MHF, London
Teleconference	Monday 13th November	11:15 – 12:45
Final prioritisation workshop	November/December	TBC

