

# ORAL AND MAXILLOFACIAL TRAUMA CLINIC PSYCHOLOGY SERVICE ROYAL LONDON HOSPITAL

BAOMS ANNUAL SCIENTIFIC MEETING ACC, LIVERPOOL  
24TH JULY 2015

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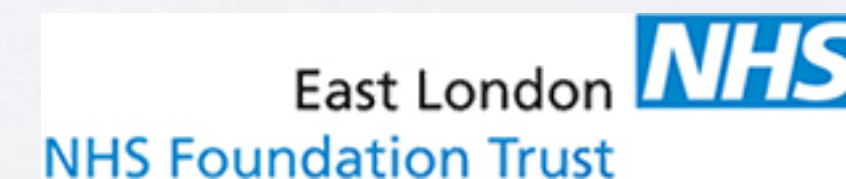
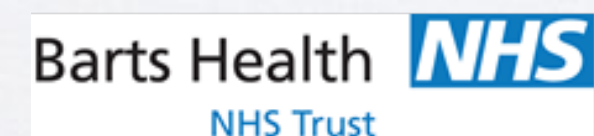
Professor Simon Holmes, Consultant Oral and Maxillofacial Surgeon

Dr Naomi Wilson, Chartered Clinical Psychologist

Dr Sarah Heke, Consultant Clinical Psychologist

Mr Chris Bridle, Consultant Oral and Maxillofacial Surgeon

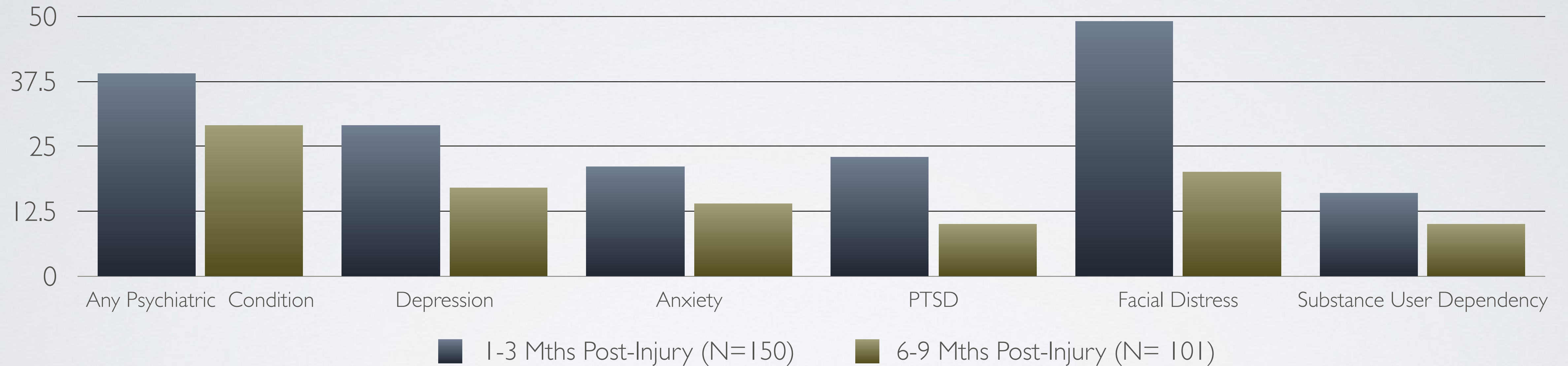
Ms Vicky Dain, Research Assistant



# BACKGROUND

- Innovative psychology service
- Two year research funding - prevalence of psychological morbidity

Percentage of Trauma Outpatients with Psychological Morbidity at 1-3 Months and 6-9 Months Post-Injury



- Health Foundation funding



# PSYCHOLOGICAL SERVICE

## ROLE OF THE CLINICAL PSYCHOLOGIST IN CLINIC

Screening Psychological Morbidity  
All Patients with Facial Injury

Targeting Symptomatic Patients  
Brief Assessment & Intervention; Risk Assessments/Management

Self-Help/Advice &  
Psycho-education

Signposting &  
Onward Referral

Carer Support

Liaison for Complex  
Cases

Consultation with  
Medical Team

Specialist Psychological  
Treatment

# PSYCHOLOGICAL PRESENTATIONS IN CLINIC

Domestic Violence

Aggression

Generalised Anxiety Disorder

Pre-operative Anxiety

Suicidality

Post-operative Trauma

Agoraphobia

Traumatic Brain Injury

Family Issues

Appearance Distress

Acute Stress Disorder

Substance Misuse


Post-Traumatic Stress Disorder

Depression

Obsessive Compulsive Disorder

Pre-existing Mental Illness



A woman with dark hair pulled back, wearing a black short-sleeved top and a dark floral-patterned skirt, is seated in a black office chair. She is looking towards the camera with a neutral expression. The setting appears to be a clinical or office environment. To her left, a white adjustable desk lamp is mounted on the wall. To her right, a white sink is mounted on a grey cabinet, with a hand sanitizer dispenser and a paper towel dispenser above it. The floor is a light-colored tile.

A victim of domestic violence who sustained a brain injury talks about her experience of being injured almost 2 years ago. She recently met with a Clinical Psychologist in clinic and was symptomatic for Post-Traumatic Stress Disorder.



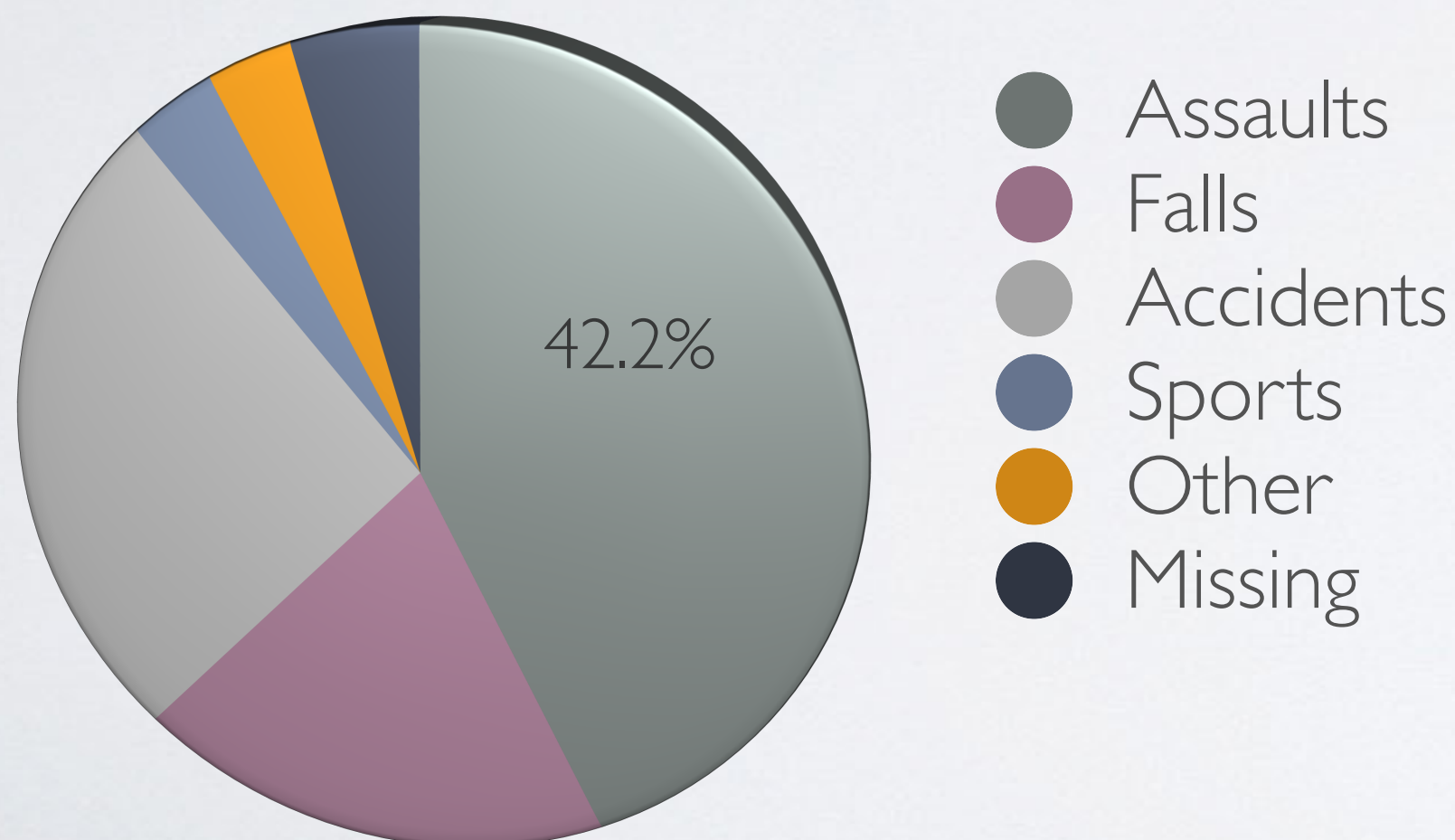
# OUTCOMES TO DATE

- N = 507 Oral & Maxillofacial Trauma patients screened at 9 months (73.6% Male and 26.2% Female)

## Psychological interventions received

- 70% aged 18-40 years
- Ethnically diverse population

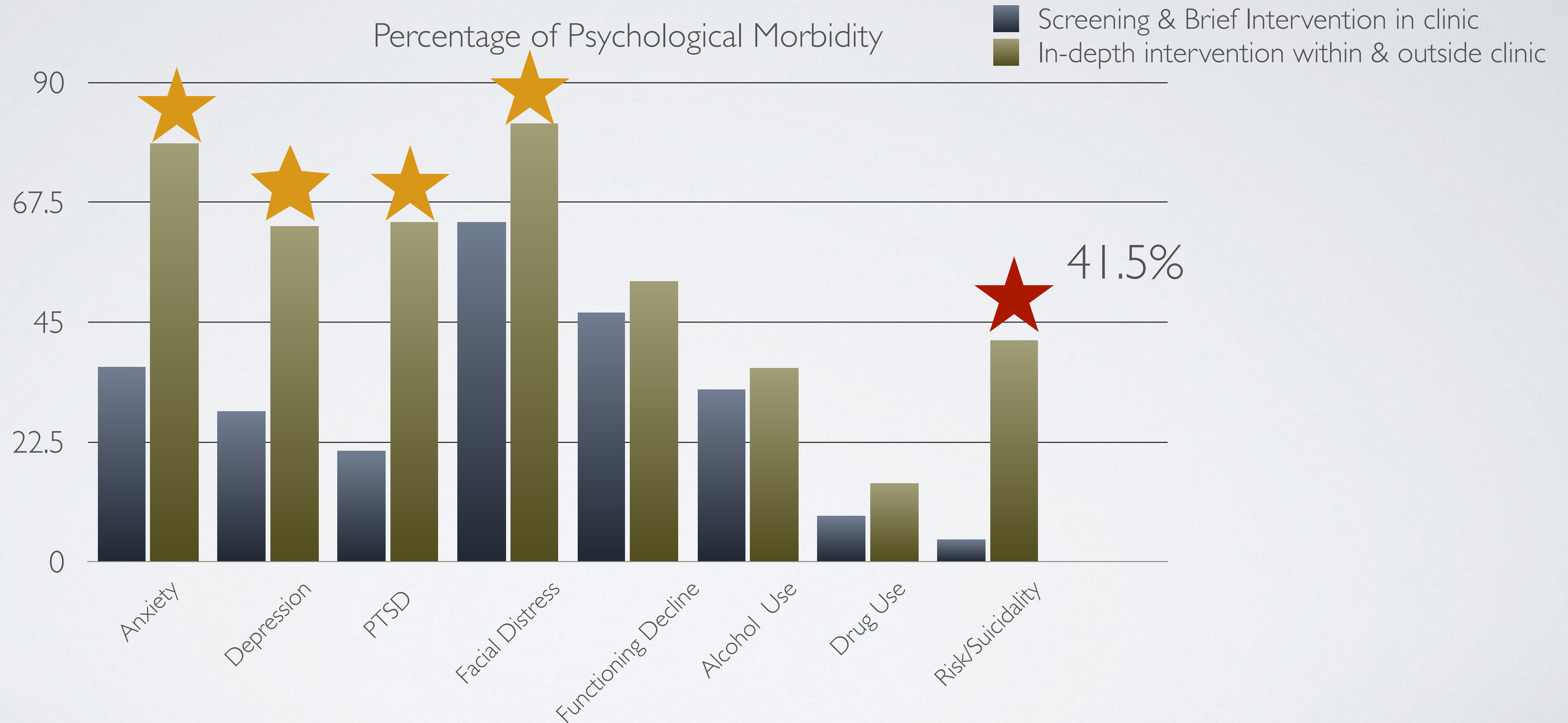
Source of Injury




Percentage of outpatients	Level of Psychological Intervention
10.5%	Screening only
61.5%	Screening Brief intervention in Clinic
22.7%	Screening In-depth intervention in Clinic and Onward Referral
0.6%	Extending liaison outside Clinic Complex/Establishing mental health care pathway
3.4%	Specialist Psychological Treatment with Clinical Psychologist outside Clinic
1.4%	Screening only



# PSYCHOLOGICAL MORBIDITY ACCORDING TO TREATMENT NEED






A man with dark, wavy hair is sitting in a blue chair, looking thoughtfully to his right. He is wearing a blue and white striped long-sleeved shirt and grey trousers. His hands are clasped together near his chin. The background is a plain, light-colored wall. A red fabric is draped over the chair to the right.

A patient who sustained a brain injury 9 months ago presented in clinic with PTSD, substance misuse, disinhibited behaviour and self-harm. His parents worked in the medical profession and were extremely concerned when he had written a suicide note. He talks about his experience of meeting with a Clinical Psychologist in clinic.



A man with short brown hair and glasses, wearing a blue and white vertically striped short-sleeved button-down shirt, is sitting in a white chair in a clinical setting. He is looking slightly to his right with a neutral expression. The background is a plain white wall with some medical equipment and a green container visible on the right side.

Consultant Oral and Maxillofacial Surgeon, Professor Simon Holmes talks about the need for psychological provision in clinic.



# WHERE NEXT?

- Seeking funding from commissioners for ongoing service provision
- Extending links with major charities - Changing Faces and Headway Brain Injury
- Training medical team on psychologically informed care across clinic
- Working beyond trauma clinic with other sub-specialities within Oral and Maxillofacial Surgery?