



South West
Yorkshire Partnership
NHS Foundation Trust



Barnsley IAPT

(Mental Health Access Team)



With **all of us** in mind.



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Background to IAPT

- Lord Layard and David Clark
- “the greatest revolution in British mental health in fifty years” *Sir Simon Wessely*
- “a world beating programme” *Nature editorial*
- “the world’s most ambitious effort to treat depression, anxiety and other common mental illness” *New York Times* feature (July 2017)

The IAPT Solution

- Increase the availability of effective (NICE recommended) psychological treatments for depression and all anxiety disorders by:
- training a large number of psychological therapists
- deploying them in specialized, local services for depression and anxiety disorders
- measuring and reporting clinical outcomes for ALL patients who receive a course of treatment (public transparency)

National IAPT Data - March 17

- **130,073 people were referred to treatment in March 2017**
- **This represents an annualised referral rate of 25.54% based on a denominator of 6.1m people estimated as having depression and/or anxiety.**
- **78,965 people entered treatment in March 2017, indicating an annualised access rate of 17.27%.**
- **The number of people moving to recovery in March 2017 was 24,907 meaning the recovery rate for people finishing a course of treatment was 51.7%. Reliable improvement - which measures whether there has been a reliable reduction in symptoms – was 66.3%,**
- **Waiting times surpassed the standard with 89.4% of people who completed a course of treatment within 6 weeks, and 98.9% within 18 weeks.**

Barnsley IAPT service - Step 2

- Provided by Psychological Wellbeing Practitioners
- 6-8 sessions of guided self help – CBT techniques
 - Behavioural Activation
 - Problem solving
 - Relaxation
 - Cognitive restructuring
 - Exposure
 - Sleep Hygiene
 - Psycho education
- Workshops – one off psychoeducational session
- Stresspac – 6 weeks of two hours Psychoeducational sessions
(listen, bring a friend – offered further treatment if required)

IAPT service - Step 3

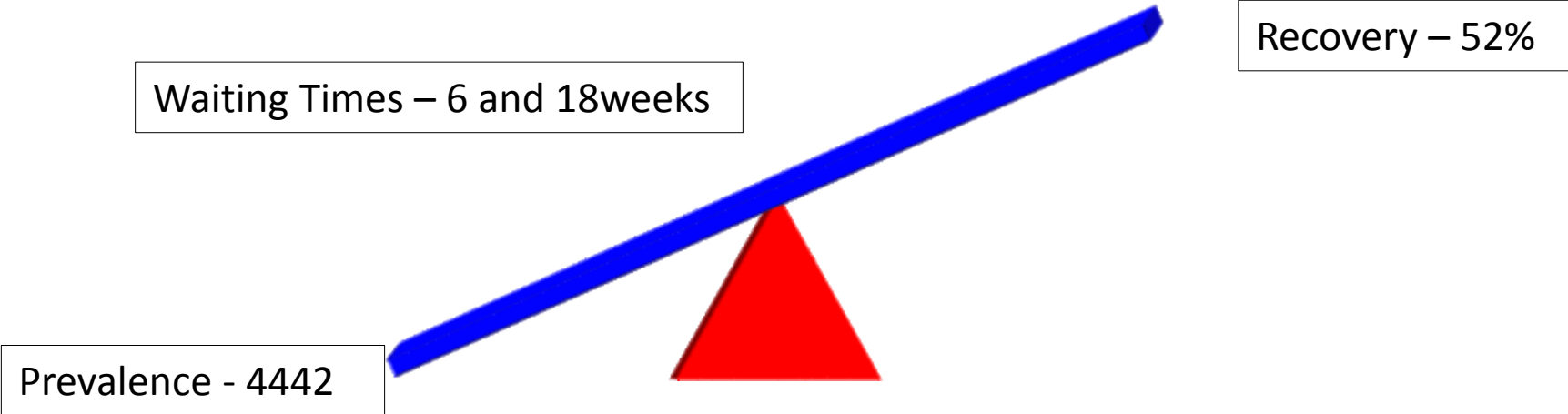
- Qualified Cognitive Behaviour Therapists
 - Cognitive Behaviour Therapy
 - Interpersonal Therapy
 - Eye Movement Desensitization and Reprocessing
- Counsellors
 - Counselling for Depression
- Psychologists
 - Comprehensive Psychological Assessments
 - Cognitive Behaviour Therapy
 - Cognitive Analytical Therapy
- Link Practitioners
 - Assess complex cases
 - Gate keep services
 - Link with other teams such as SPA

How to Access the Service

- Accept referrals from all health professionals, clients and carers
- The individual needs to consent
- Self referral - encourage where there is no risk - clients more motivated
- Ring base and ask to speak to Duty worker - 01226 644900
- Search Barnsley Mental Health Access Team – online referral form
- Give out leaflets
- Prescription pad
- Usual letter / referral form

Targets

- Heavily Performance managed
- Data submitted and shared locally regionally and Nationally
- Recovery is deemed as being
 - 10 or above on the PHQ9 and below at the end of treatment
 - 8 or above on the GAD7 at the start of treatment and below at the end



Waiting Times – 6 and 18weeks

Recovery – 52%

Prevalence - 4442

Challenges

- Nov / Dec 16 we had a spike in referrals of approximately 300 – which sent us off track regarding entering treatment within 6 weeks and it was the beginning of April before we got back on track - calculated at discharge so this is only just showing data
- Moving to recovery has been difficult this past year – missing this by 5 -20 people which can equate to 5% drop in data – implemented everything suggested by NHS England at recovery workshops we attended – again early signs that this is now being reflected in data
- Worked closely with the CCG and NHS England Intensive support team who have said that the team is working hard and doing a lot of good work

NHS England - Action Plan

- Start of the project in 2008 we took 485 client off the long psychology waiting list
- We have never been able to reduce the wait for CBT below this figure
- IST have suggested a way forward to try and clear this backlog by introducing an Interim Pathway
- This will improve the service for clients and hopefully improve recovery figures further due to reduce wait
- This doesn't mean that people aren't being offered anything while they wait for one to one
- Quite a few of the people who have waited a while do so through choice

INTERIM AND NEW PATHWAY

- We have identified the CBT waiting list as a problem area.
- PWP and Counselling waiting lists are much improved after significant work this year
- The waiting list has been validated to ensure that clients present are on the appropriate list.
- CBT staff have chosen which pathway they would prefer to work
- Cut off of the 31st July agreed – total 467 for this pathway
- This will run for the next 6 months
- We have formulated an Interim Pathway and a New Business as Usual Pathway

Interim pathway - Clients before 31st July

- The Interim Pathway will consist of a dedicated number of staff who will purely work with clients on this pathway.
- The client will be offered an evidence based treatment protocol depending on their presenting problem. The protocol will comprise of a maximum of 12 sessions.
- When the protocol is completed the client will be discharged back to their GP's care.
- Recovery

New Pathway - *Business as usual*

- A client is screened by a PWP or Link Practitioner (as is now)
- If this screening identifies Step 3 CBT as the appropriate treatment the referral will be reviewed by the CBT assessment team.
- Clients on the CBT list will then be offered 1-2 sessions with a CBT therapist who will use these sessions to listen to the client's presenting problems and help the client formulate the problem, and discuss an appropriate treatment plan with the client, where the client can choose from the menu of options.
- Recent research shows that should improve engagement
- This plan may consist of 1:1 therapy with the CBT therapist, or it may be identified that a CBT group package is more/or as suitable for the client.
- If the client opts to enter Group Work, the therapist will agree what support the client would like whilst attending the group, for example - a 1:1 appointment at the half way point or at the end of the group. If the client does not enter recovery, the initial therapist will be able to offer an agreed number of sessions with the client to further help them explore issues not covered by the group and move towards recovery

Group Work

- We believe that group work offered to CBT clients is as effective as 1:1 for some problems, and has some benefits to the client such as understanding they are not alone with their difficulties and support from other group members along with facilitators to aid momentum to progress towards recovery, things that are not able to be offered at 1:1 therapy.
- Not a cheaper option
- Not like it is on TV
- No client will be placed in a group against their wishes or offered any ultimatums.
- We believe by introducing the notions of groups at this stage will help clients make a much more informed choice about their treatment, with more time to consider their options, as opposed to the previous offer of therapies at the screening stage.

Key Messages

- Self Referral - Prescription Pad
- Challenge clients who DNA / Cancel / Complete treatment
- Talking therapies not Counselling
- Therapy takes at least 6 sessions to start to work stick with it
- Consider IAPT when.....
 - Giving a sick note for stress
 - Evidence of mild to moderate depression or anxiety disorders
 - Considering prescribing antidepressants / sleeping or anxiety tablets
- Refer to SPA if high risk or more complex / long history
- Contact us if you need more leaflets
- Dispel the Myth re group work
 - Please talk to staff re anxieties – they can help

The Future

- Increase numbers into treatment from 16.8% to 25% by 20/21
- One third expansion of IAPT as we know it now
- Two third expansion into long term conditions
 - Diabetes
 - Chronic Heart Disease
 - Irritable Bowel Syndrome
 - Musculoskeletal
 - Medically Unexplained Symptoms
- Maintain Core IAPT
- Building pathways
- Co located

- Interested in looking how we build pathways please get in touch



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A large circular graphic composed of many small, overlapping blue brushstrokes that form a ring around a central white circle. The brushstrokes vary in length and direction, creating a textured, artistic effect.

**Thank You for
Listening
Any Questions?**

With **all of us** in mind.