



**Barnsley
Talking Therapies**

NHS Barnsley Talking Therapies

Formerly known as IAPT - improving access to psychological therapies

Rachel Ambler

Senior psychological wellbeing practitioner

Rhydian Templer

Employment Advisor

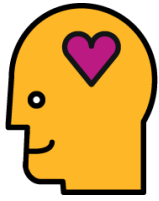
Zarah Khan

Senior Employment Advisor



for anxiety and depression

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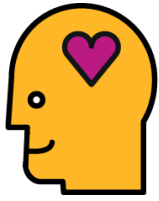
About our service

- The service was set up in 2008 as IAPT, it was re-branded nationally in 2023 to NHS Talking Therapies: for anxiety and depression.
- The team is based at Rose Tree Avenue, Cudworth
- We offer primary care talking therapies to people who have a Barnsley GP, are aged 16 + and have mild to moderate common mental health problems of Anxiety and/or Depression.
- We offer therapy face to face in various settings including our base, lift buildings, some community centres and Barnsley College. We also provide Virtual (MST) or over the telephone (step 2) sessions. We offer Courses, Workshops, Groups and Individual one to one treatment.
- We accept self-referrals online via our website / (potentially AI system in near future), over the phone or referrals from any professional involved in the person's care (with the person's consent).



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About our service

We offer a range of therapies to treat the following mental health conditions:

- Generalised anxiety disorder (GAD)
- Post Traumatic Stress Disorder (PTSD) single incident and complex
- Depression
- Body Dysmorphic Disorder
- Panic disorder (with or without agoraphobia)
- Health anxiety
- Phobias
- Obsessional Compulsive Disorder (OCD)
- Social anxiety



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Stepped care model – step 2

Focus of the intervention	Nature of the intervention
Mild to moderate depression; GAD; mild to moderate panic disorder; mild to moderate OCD; mild to moderate specific phobias.	NICE approved low intensity psychological treatments for: Less Severe Depression: Individual facilitated self-help, computerised CBT GAD: Individual non-facilitated and facilitated self-help, psychoeducational groups Panic disorder: Individual non-facilitated and facilitated self-help, psycho-educational groups, Agoraphobia package (for Panic with Agoraphobia) OCD: Brief Individual LICBT (including ERP) Phobias: Graded Exposure programs All problems = Understanding and Managing Wellbeing (psycho-education group)



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Stepped care model – step 3

Focus of the intervention	Nature of the intervention
<ul style="list-style-type: none">• mild to moderate or persistent depression that has not responded to a low-intensity intervention• initial presentation of moderate or severe depression• GAD with marked functional impairment or that has not responded to a low-intensity intervention• moderate to severe panic disorder;• OCD with moderate or severe functional impairment; BDD with mild – moderate impairment• PTSD.	<p>NICE approved high intensity psychological treatments for:</p> <p>Depression: CBT, Counselling for Depression and Couple Therapy for Depression</p> <p>Generalised Anxiety Disorder (GAD): CBT</p> <p>Panic disorder: CBT,</p> <p>Obsessional Compulsive Disorder / Body Dysmorphic Disorder (mild impairment): CBT (including ERP).</p> <p>Post Traumatic Stress Disorder (PTSD): Trauma-focused CBT, EMDR.</p> <p>Health Anxiety: CBT</p> <p>Unresolved Bereavement: Counselling</p> <p>Phobias – CBT</p> <p>Social Anxiety: CBT</p>



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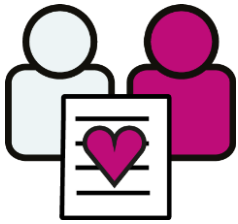
How we manage referrals

- Referrals come from GP's, any associated professional and self-referral.
- Clients can be advised of / directed to the BTT website and make a self-referral (AI led)
- We work collaboratively with the ICU unit at BHNFT, offering therapy and support to clients and staff
- We work jointly with Barnsley College where we offer a full Talking Therapies service to students aged 16+ and staff members.



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What happens next?

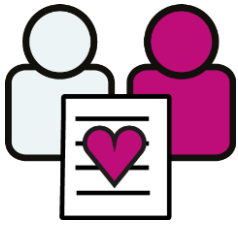
After referral:

- Clients' needs are identified on referral and any potential high risks will be triaged by a duty clinician. Onward referral may be made at this point if required.
- Clients are given access to 'choose and book' for a suitable 60-minute phone-based screening assessment within 1 week.



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What happens next?

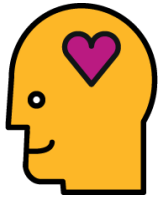
After assessment:

- Clients are considered for Talking Therapies treatment, as defined previously in the stepped care model
- Access to online cCBT, alternatively a psychoeducational course
- Signposting and/or referrals made to other services e.g. Social Prescribing, BSARCS, IDAS, CAB, Social Care, Barnsley Bereavement, Recovery college, Drugs and alcohol services, and any other 3rd sector services as appropriate to clients' needs

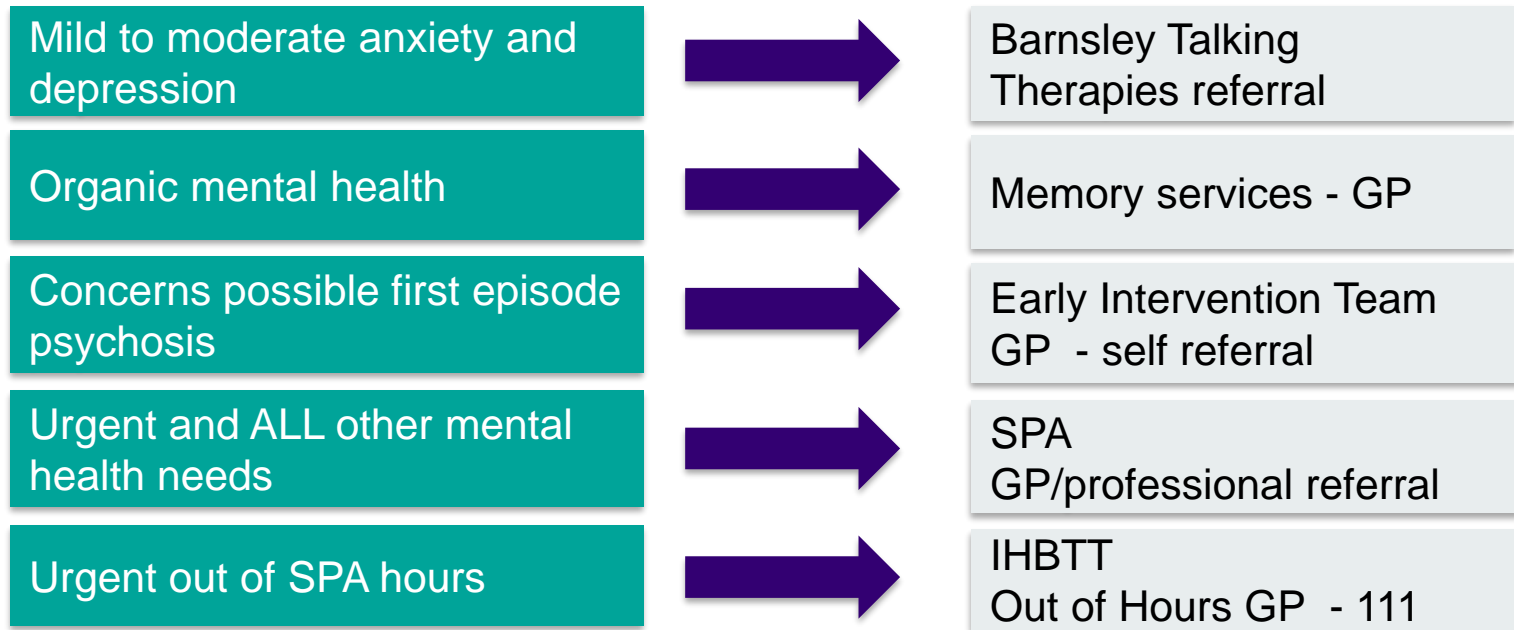


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Access to mental health service



**Services work together to meet people's need so will redirect.
If not sure, please ring and ask.**



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Employment Advice Service Offer



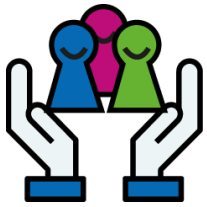
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- Clients can request a referral for EA from a clinician, at any time, once registered with the TT service, providing there is no risk identified.
- Once assessed by the EA team as eligible, clients are contacted by an EA, generally within 2 working days
- EA's carry out a thorough initial assessment with the client to identify employment needs and goals.
- Provided a total of 10 EA sessions, usually a fortnight apart (possibility to extend on a case-by-case basis).
- Structured reviews of support efficiency are carried out periodically throughout, or as required.
- Clients who do not require psychological support within BTT and only require employment support can be signposted to a variety of external employment support provisions.



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Employment Advice Service Offer



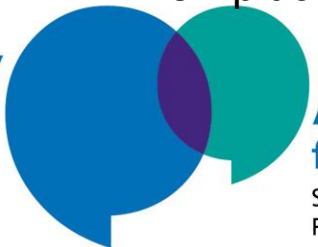
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What we can offer

- Establishing job and career goals
- Identifying training and education needs
- Create a structured plan that puts clients in control of their employment journey
- Support with CV, covering letter, job searching, application and interview skills
- Explaining disclosures, requests for support and gaps in employment to employers
- Supporting employers to make reasonable adjustments
- Supporting clients to manage their health and relationships in work

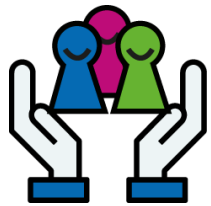
What we can't offer

- Long term employment support
- Tribunal support (employment or benefit)
- Legal advice
- Completing benefit forms
- Workplace qualifications or training



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Benefits of NHS Barnsley Employment Advice in Talking Therapies



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■ Enhanced Clinical Outcomes

- Client's odds of reaching clinical recovery, 2.54 times greater compared to those who only received therapy.
- Increased levels of confidence, assertiveness, and motivation, leading to better overall mental health and problem-solving skills.
- Positive impact on reducing levels of anxiety and depression symptoms by the end of therapy.

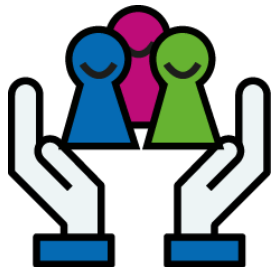
■ Positive Employment Outcomes

- Client's unemployment at the start of therapy - positive impact on entering the labour market. Clients already working - helped with job retention and navigating workplace difficulties, such as requesting reasonable adjustments.
- Clients who remained employed, the average number of days of productivity loss due to working while sick decreased significantly over 12 months with support.
- Support also led to "softer" outcomes - improved relationships at work and successful adjustments to job roles and responsibilities.
- Faster Job Attainment: Clients tend to attain employment faster, hold jobs longer, and work more hours



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Benefits of NHS Barnsley Employment Advice in Talking Therapies



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▪ Systemic Benefits

- Research in England found that completing a course of NHS TT associated with a sustained improvement in labour market outcomes, including increased likelihood of paid employment and higher earnings.
- People who completed a course and are now in employment are likely to need less support from mental health services in the future, including fewer hospital admissions.
- Freed-up Therapist Time: By having a dedicated employment adviser, therapists can focus more directly on providing psychological treatment, potentially reducing waiting times and therapist burnout.

In essence, the most recent research confirms the value of an integrated, holistic approach, where addressing employment issues is seen as a key component of mental health recovery, offering both personal and economic benefits.



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Questions Welcome

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This document has been produced by the Trust NHS
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