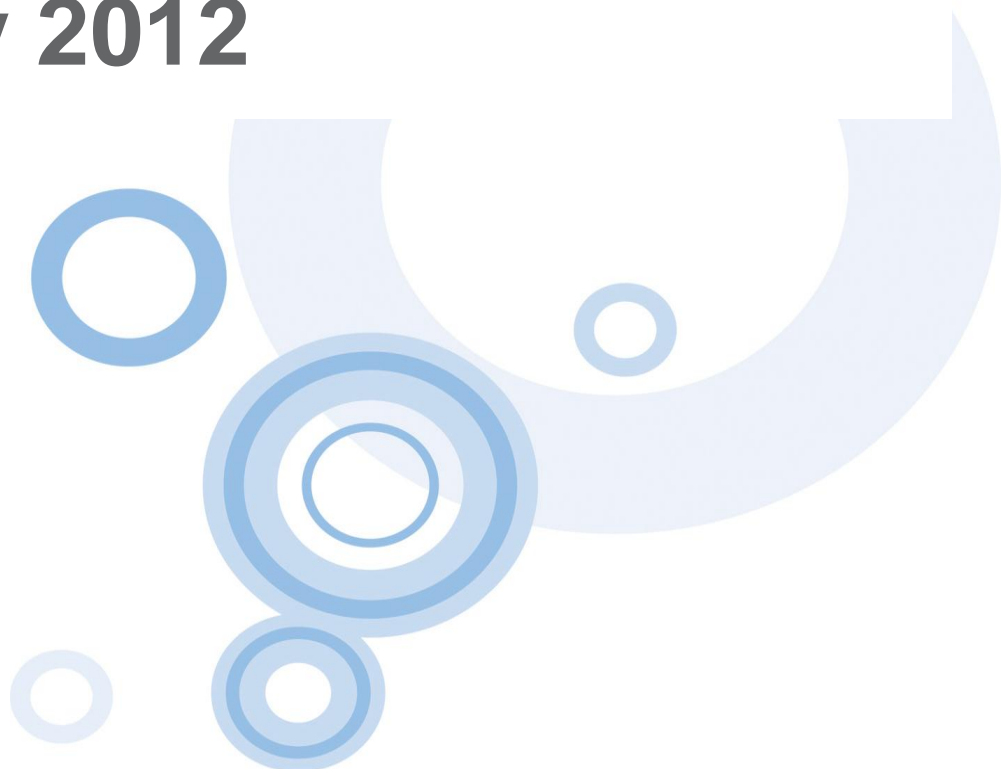


Psychological Therapies

Overview of the proposed changes to psychological therapy services in Lambeth, Southwark and Lewisham.

April/May 2012



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Introduction

Over the past year staff and service users from South London and Maudsley NHS Foundation Trust (SLAM) have been working together to improve 'care pathways' or the way people are referred into and move through services. This work is to make sure that people receive the right treatment and support at the right time, and also helps us to make best use of the money available.

Recently, we have been doing specific work on the psychological therapy services in Lambeth, Southwark and Lewisham. By psychological therapies we mean talking therapies such as psychotherapy or clinical psychology provided one to one or in a group. We are not currently working on changes to talking therapies and self-help provided through GPs and by self referrals and sometimes known as Improving Access to Psychological Therapies (IAPT).

We have developed a plan to change the way psychological therapies are provided in these boroughs:

- **Currently, there are several different services providing psychological therapies for residents of Lambeth Southwark & Lewisham. We are proposing that each borough will have one integrated psychological therapy service.**

Over the last 6 months we have had some feedback from staff, service users/carers, local organisations and health professionals about the planned changes. This feedback has helped us to identify particular areas where we need to do some more detailed work. During April & May we will be asking people with an interest in these services to help us develop the more detailed plans which we can use as we implement the changes. There will be an event in May where we can all work together on this.

This document aims to let people know what we are proposing and why. There will be information about how you can get more detailed documents on various aspects of the work. This document also includes a feedback form with a few questions for you to consider prior to the event on the 16th May (contact details are enclosed at the end of this document).

Background

Where are we now – what we offer now in psychological therapies

Psychological therapies provided by SLAM are for people who have relatively severe and long term problems with their mood or relationships. You usually access these therapies either through your GP or a mental health worker. These therapies are for a limited period of time, which can be from a few months to a couple of years. Psychological therapies can be offered within a group setting or within a one to one setting. The psychological therapies (modalities) that we currently offer consist of:

- Psychodynamic/Psychoanalytic Therapy
- Cognitive Behavioural Therapy (CBT)

- Cognitive Analytic Therapy (CAT)
- Family/Couple/ Systemic Therapy
- Trauma Therapies – e.g. Eye Movement Desensitisation and Reprocessing (EMDR)
- Dialectical Behavioural Therapy (DBT)
- Mindfulness Based Cognitive Therapy (MBCT)

Full details of these therapies can be found at:

<http://www.psychotherapy.slam.nhs.uk/Home/TypesofTherapy/tabid/510/Default.aspx>

These therapies are generally delivered by psychologists and psychotherapists. Both are trained in carrying out assessments and offering psychological therapies to service users. Psychologists are generally based in Community Mental Health Teams (CMHTs) working alongside nurses, social workers and psychiatrists. Psychotherapists are generally based in stand alone teams on hospital sites.

Psychological therapies are currently provided in a range of settings across Lambeth, Southwark and Lewisham. Please see the map and table 1 below for where these are currently offered.

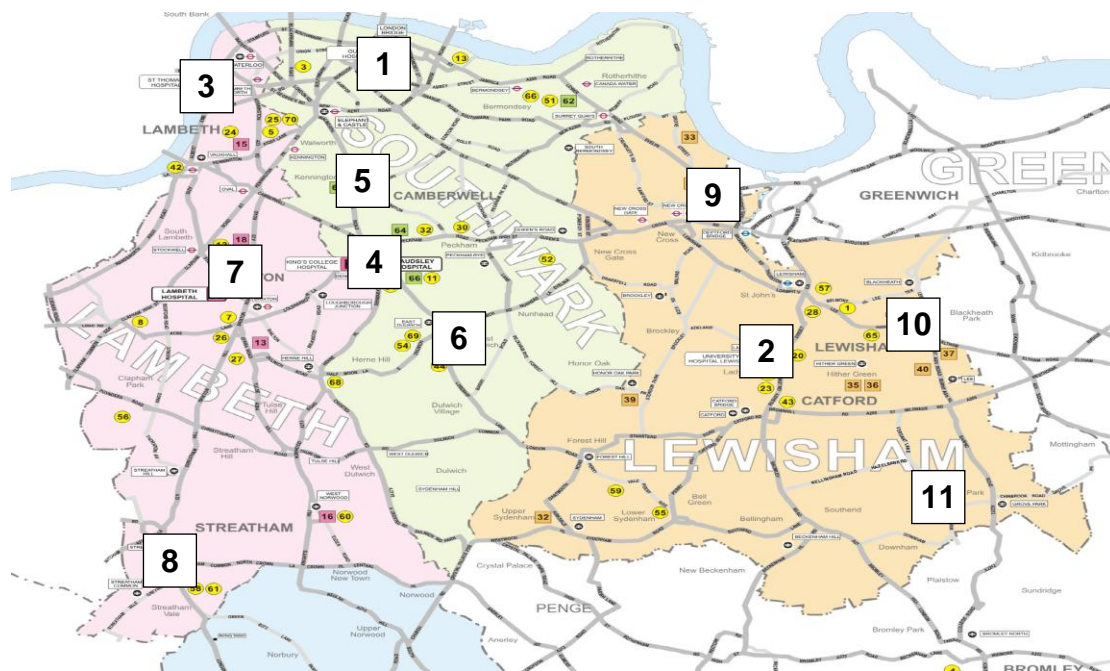


Table 1

Key – number relating to service	Service
1	Coordinated Psychological Therapies Service (CPTS) – Guys Hospital Southwark
2	Lewisham Integrated Psychological Therapy Service (LIPTS) – Ladywell unit Lewisham
3	St. Thomas' Psychotherapy Service – Lambeth
4	Maudsley Psychotherapy Service (MPS) and Traumatic Stress Service (TSS)
5	Community Mental Health Team (CMHT) North Southwark
6	CMHT South Southwark
7	CMHT North Lambeth
8	CMHT South Lambeth
9	CMHT North Lewisham
10	CMHT East Lewisham
11	CMHT South Lewisham

How the model was developed

In the spring of 2011 we held some workshops where staff, service users & carers were invited to help with the design of care pathways for people with problems related to mood, anxiety or personality disorder. The work from these sessions formed the basis of the current proposals by identifying best clinical practice and how we needed to improve the services.

A new psychological therapies service model was developed by a steering group which met between September and November 2011. The group included staff representatives covering a broad range of experience and expertise. During this period, a 'service user advisory group' was kept informed and discussed the proposals at their monthly meetings.

Why do we need to change?

Service users and commissioners have informed us that they want a better quality service and have identified some particular issues:

- There are several different services providing psychological therapies in Lambeth Southwark & Lewisham. At the moment the way people are referred to particular services can be confusing for service users and for staff who make the referrals, and some people do not get to the service they need for a long time. Commissioners think it is inefficient to have several services in each borough doing similar or overlapping things and wish to see therapy provision well integrated with other local pathways of care.
- Some services have not been good at demonstrating their effectiveness and commissioners want better evidence that we are providing the right treatments and that they are working.
- Commissioners also want services delivered in line with principals of co production which promotes equality and reciprocity between professionals and users of the service. Service users have given us feedback to say that they do not like having repeated assessments, and going through a lengthy process to get the therapy that they need.

Quality, Innovation, Productivity and Prevention (QIPP)¹

The government expects all existing services in the NHS to operate at reduced cost to release money for investing in new services. Existing services need to be more creative and efficient in the way they deliver effective services so that they can make these savings. Therefore, we need to think about innovative ways of providing psychological therapies within the resources available to us. We need to meet the needs of our local population as well as complementing and enhancing the services that are provided by the Local Authority (LA) and the 'third sector' (non-profit making organisations).

¹ QIPP is a large scale transformational programme for the NHS, involving all NHS staff, clinicians, patients and the voluntary sector and will improve the quality of care the NHS delivers whilst making up to £20billion of efficiency savings by 2014-15, which will be reinvested in frontline care.

Currently the services we (MAP CAG) offer to the local residents cost more than we are being paid to provide them (cost pressures). Therefore we have to redesign our psychological therapy services, as well as other services, to ensure that they are as cost efficient, effective and innovative as possible.

How do we improve quality within the reduced resources we have?

The NHS commissioners have asked us to provide borough based psychological therapies in partnership with Local Authorities (LA) and the third sector. There has also been general agreement, from service users, about the proposed model for one integrated service in each borough, allowing more streamlined assessments and referrals. The proposed psychological therapy service, an Integrated Psychological Therapy Team (IPTT) will work closely with our CMHTs. In doing so there will be better integration of health and social care needs by having;

- A single point of access to services – a framework for medical, psychological and social needs to be addressed in an integrated approach. This will enable services to respond flexibly to a broader range of issues than have been addressed by psychological therapy services up to now.
- An integrated and holistic assessment and care/treatment plan – covering medical, psychological and social needs.

At the moment, some service users with high levels of need do not get psychological therapies that might help them because when distressed they present risks which need to be managed by CMHTs, which often have limited skills in delivering psychological treatments. We expect that CMHTs will be able to work much more closely with IPTTs in future than the current psychotherapy services can.

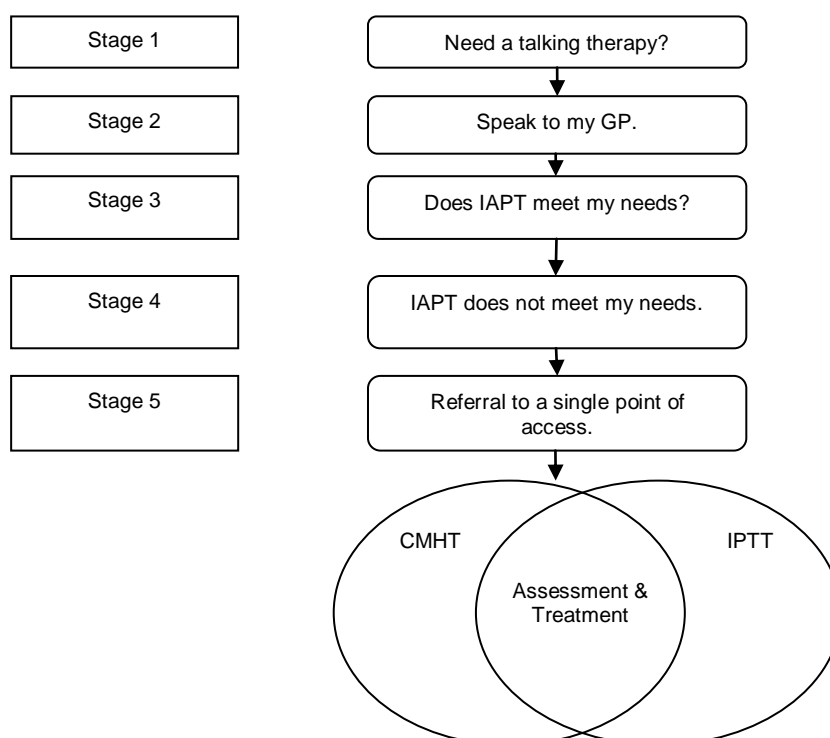
We also need to be creative with how we deliver therapies. At the moment, psychological therapies are delivered in a way (time limited individual and group sessions) that is not suitable for everyone in need. There are models for providing care in other boroughs and Trusts which we want to learn from and adapt for Lambeth Southwark and Lewisham. We will develop a peer support/group coordinator role which will be responsible for developing a range of groups and peer support systems. These systems will also support 'signposting' for service users to alternative services or help in navigating around internal systems. These services can be an alternative to a formal treatment or be used whilst a service user is waiting for a more formal psychological therapy.

The proposed new model

An integrated psychological therapies team (IPTT) will be developed in each Borough. Integrated means that all treatments for psychological therapies are provided by a single team with a single point of access, offering a range of treatments (modalities).

The borough IPTT will provide all specialist psychotherapies required by NICE² guidelines for people with anxiety, depression, personality disorder, and post-traumatic stress disorder (PTSD). In addition, other modalities of therapy may be provided as part of clinical studies, on the basis of evidence other than that already included in NICE guidelines, or for other specific purposes, where agreed by the managers of the service and by commissioners.

Following the care pathway work and service user feedback the proposed care pathway for psychological therapies will look like this.



² National Institute of Health and Clinical Excellence

Staffing

We currently employ 76 staff in psychological therapies. Some of these staff are part time, therefore these 76 staff equate to 47.36 full/whole time equivalent (wte) staff. Following the staff consultation we plan to run our services with it is proposed that there will be a reduction of 8.02(wte) posts, a reduction from 47.36 wte staff to 39.34 wte staff. We have also developed a trust wide 0.8 wte systemic/family therapy post – totalling 40.14 staff.

Current staffing in psychological therapy services

Service	wte
CPTS	4.41
Southwark Psychology (CMHT)	4
LIPTS (Lewisham)	4.6
Lambeth Psychology (CMHT)	3.8
St Thomas' Psychotherapy (Lambeth)	9.05
MPS	13.13
TSS	8.37
Total	47.36

For the location of the psychological therapy services see the map on page 4.

Proposed staffing in Psychological therapy services

Service	WTE
Lambeth Integrated Psychological Therapy Team (IPTT)	15.1
Southwark and Central IPTT	12.18
Lewisham IPTT	12.06
Total	39.34
Systemic Therapist + 0.8 WTE	40.14

Staffing costs

Borough	Current staffing cost (£)	Proposed IPTT staffing cost (£)	% Difference
Lambeth	1,496,334	1,190,919	- 20.41%
Southwark	1,272,646	994,603	- 21.85%
Lewisham	1,025,564	910,522	- 11.22%
Totals	3,794,544	3,096,044	- 18.41%

Proposed Activity changes

At present our services provide 'activity data' to commissioners which describe the amount of work the services do. These data are based on counting the number of individual or group therapy sessions. With the development and restructuring of an 'overlapping' integrated psychological therapies team (IPTT) it has been agreed with commissioners that the 'psychological therapy' activity may reduce, for both

assessments and treatments in Lambeth and Southwark (but not in Lewisham) by up to 10%. However, we expect that in future 'activity' will not be measured solely as individual or group sessions in a psychological therapy service but will reflect the wider range of options we wish to deliver, including long term supportive groups, and treatments delivered by psychologists or by CMHT teams with the advice or supervision of psychotherapists. These forms of activity are either not taking place at present, and will increase, or are not counted in current activity data. Changes in activity in the services will be closely monitored.

Lewisham		Southwark		Lambeth	
0% reduction =		10% reduction =		10% reduction =	
Assessments (A)	Treatments (T)	A	T	A	T
389	6,180	395	4,650	298	10,044

The new IPTT and the MAP Assessment and Treatment (A&T) teams will have an integrated approach in carrying out many of the functions, which they currently do separately. These will include the following:

- 'Triaging' the referrals – to ensure the most appropriate assessment, signposting and treatment is offered.
- Making sure that the appropriate 'level' of assessment is carried out. The profession and grade of the assessor will depend on the complexity of the service users' presentation. Assessments may include joint assessors for more complex cases. All assessments will have a therapeutic element to them, providing a psychologically informed offer of treatment to everyone rather than for a few.
- A 'stabilisation and/or re-ablement pathway', within a therapeutic relationship will be offered to most service users initially – which will be tailored to individual needs (social, psychological and medication), which will be time limited, within a recovery and a self management approach. Service users presenting in crisis are not seen by psychotherapists in the current system and typically only access psychological treatments after lengthy delays. In future the IPTT will provide advice at a much earlier stage in people's presentation; ensuring treatment is directed more quickly to people in the greatest need.
- New approaches and joined-up ways of working with the 3rd sector, the local authority and other agencies will be developed to ensure the most appropriate level of treatment is offered to service users. These may include
 - Group work
 - Peer support – 1:1 and group peer support
 - Reablement and stabilisation work – recovery focused, self management, and to develop social inclusion and systems/support networks – supported by a Recovery and Support/Staying Well Plan.
- Entry to a specific treatment pathway and/or a personalisation pathway (for social care support) will only be offered to service users that have been assessed and have met the needs criteria to receive it.

- It is envisaged that the joint capacity of the service will be able to accommodate the current psychological therapy activity, less 10%, by having a systematic approach of working effectively and efficiently. The more skilled and experienced workers will assist others to run groups, to supervise and mentor other staff in being 'therapeutic' in their assessments and treatments. The service will continue to train honorary staff and other trainees.
- The service has a DBT specialist/trainer – so all staff will eventually be able to offer DBT appropriate therapy/treatments to service users. Further training and clinical specialists posts will be developed to enhance the calibre of the staff to ensure quality assessments and treatments are offered within the Maps of Medicine and NICE guidance.
- The CAG will develop IT systems so we can capture accurate data with regards to assessments, treatments, modalities and outcomes.

Feed back on the proposed new model

Consultation and involvement with service users and public

1. A service user advisory group was kept informed of developments and supported a stakeholder meeting in November 2011.
2. During November & December 2011, specific feedback was sought about the proposal from service users/carers. A meeting for service users and carers was held on 21st November 2011 and individual feedback was received via email, telephone or face to face conversation.
3. The proposal was discussed at Southwark MIND user Council, at the Lewisham Joint Consultative Board and at the Lambeth Living Well Collaborative
4. In February 2012, the proposal was revised in the light of feedback from the staff consultation and mindful of service user feedback to date
5. Following a meeting with the boroughs LINKs (Local Involvement Networks) in February, we extended our consultation on the proposed changes. We collaborated with Southwark and Lambeth LINKs to run public meetings and give people access to a jargon light version of the revised proposal. Lewisham LINK promoted the consultation and made available the jargon light document. The document was also available on the SLaM website.
6. The proposal was discussed at the Trustwide Involvement Group meeting which aims to oversee involvement across Trust activities.
7. On March 29th 2012 staff representatives from the services met with managers and representatives from the service user advisory group to consider the process and feedback to date and to plan next steps.

8. Plans for continued involvement include a 'working together' event on May 16th 2012 for all stakeholders to contribute to the detailed plans, and an ongoing working group on May 16th 2012 to develop & measure quality indicators for the new services.

Consultation with staff

The psychological therapies proposed service model was also discussed with staff at a workshop on 14th November 2011. This was attended by 70 members of staff. A statutory formal consultation was held, with staff, from 9th December 2011 to the 16th January 2012. Within this period we held 5 team/group consultation meetings and 33 individual consultation meetings. We received 84 responses to the formal consultation, mainly from staff, but also from service users and other professional organisations. Following these responses a revised proposal for psychological therapies was sent to staff on 21st February 2012

Themes from the consultation with staff, service users & members of the public:

- General agreement about the proposed model for one integrated service in each borough, welcoming more streamlined assessment & referral.
- Need for more detailed work on aspects of the model: - specifically
 - Single point of access
 - Pathways through community and non statutory services
 - Activities targets
 - Management of risk
- Concern about the impact of the reduction in funding in Lambeth & Southwark: - & the need to continue to provide a range of types of therapy, including support to 'honouraries'.
- The need to develop a workable, balanced & appropriately skilled staffing structure with adequate supervision capacity.
- Equalities & Access Issues – the need to ensure that bme communities are reached by the new model and appropriate targeted group support is maintained.
- Noting the importance of developing good monitoring / feedback / outcome reporting systems, to oversee & track changes in quality/demand/outcome in the new service.
- A request from service users & wider stakeholders for more detailed information about the specific proposed configurations in each borough service and to be kept informed and involved in the future process of developing the services, using a variety of methods, involving wider stakeholders and borough by borough.

A more detailed document: **‘Involving stakeholders in the development of the proposed changes to psychological therapies services’** is available on request. (Supplementary document no. 7)

Equalities Impact Assessment (EIA)

In restructuring our service and making changes to them we have a legal obligation to carry out an EIA. We have therefore carried out an EIA for the proposed changes to psychological therapies in all of the 3 boroughs. These have also been assessed by members of the MAP CAG service users’ advisory group.

In summary; we have concluded that there will be a positive impact on access to psychological therapy services for people from a black and minority ethnic (BME) communities. BME communities have historically been under represented in their use of psychological therapy services, it is expected that by bringing the process of referral for all psychological therapies into a single pathway, the more representative levels of access currently achieved by CMHTs and by IAPT services will be delivered within psychological therapy services.

The proposals will also have a positive impact on service user empowerment and involvement through the implementation of peer support models.

We have also assessed that the proposal will have a neutral impact on other equality groups. However, we have stated that the impact of the change will be subject to a regular review. Activity data for referrals and treatment against ethnic group, age, sexuality and gender will be carefully monitored against current baselines. User experience data will be scrutinised to elicit further impact change.

The service user advisory group will remain central to the ongoing management and monitoring of the psychological therapy services. Full EIA assessments will be available on the event day.

Ways to give feedback, get involved & stay involved:

For more information:

If you would like more information about the proposals there are a number of supplementary documents – see contents page - page 2.

These documents are available on the SLaM website:

<http://www.slam.nhs.uk/media-and-publications/latest-news/changes-to-psychological-therapies.aspx>

Alternatively, you can discuss your information needs by contacting:

Alice Glover – Patient & Public Involvement Lead:

Tel: 020 3228 0959 email: alice.glover@slam.nhs.uk

To give ideas & feedback about the proposals

By email: alice.glover@slam.nhs.uk

By phone: 020 3228 0959

By post:

Psychological Therapies 113 Denmark Hill, The Maudsley Hospital, Denmark Hill, London, SE5 8AZ – SAE enclosed

Views & ideas received before the 16th May can be fed into the discussions at an event on the 16th May

To be involved in shaping the new services:

There is an event on the **16th May 2012** 1.30 – 4.30 (lunch from 12.30)

Cambridge House, Addington Square, Camberwell, SE5 0HF

'Working Together to Shape Psychological Therapies'

If you:

- Have experience of using psychological therapy services
- Support people who may use these services (as an individual or as an organisation)
- Work in psychological therapy services or make referrals to them

Then we would like to invite you to join us in shaping the new services. Booking essential.

At the event, we will work in small groups with some of the themes (page 11) that have been identified through the consultation to date (see above).

For more information about the event and/or to book a place, please contact:
Sandra Rutland: Tel: 020 3228 2466 Email: sandra.rutland@slam.nhs.uk

To keep updated & involved as the services are developed

If you would like to be kept informed about how the services develop, please contact Alice Glover – Patient & Public Involvement Lead:

Tel: 020 3228 0959 email: alice.glover@slam.nhs.uk

As the new service is developed a group of people with experience of using services will work alongside staff to oversee systems for quality and outcomes are developed. If you are interested in joining this group, please contact Alice Glover – contact details above

Thank you

Simon Rayner

Head of Pathway – MAP CAG – April 2012

If you require this information in your language, or in other formats, such as audio or large print, please contact Damian Cassidy on 020 3228 3655.

Jargon buster

Care pathway

A standard way of giving care or treatment to someone with a particular diagnosis.

Clinical Academic Group (CAG)

A SLaM operational unit which brings together all the clinical services, research and teaching which takes place within a particular area (such as psychosis or addictions). Psychological therapies services come under the Mood Anxiety and Personality (MAP) CAG.

Commissioner

An organisation which determines what health and social care services should be provided for local people and which then commissions and allocates funding for other organisations to provide them. This could be a Primary Care Trust (PCT) or local authority.

Cost Pressures

A cost pressure is where the cost of providing a service is more than the amount received in payment.

Equality Impact Assessment

An equality impact assessment involves assessing the likely or actual effects of policies or services on people in respect of disability, gender and racial equality. It helps us to make sure the needs of people are taken into account when we develop and implement a new policy or service or when we make a change to a current policy or service.

IAPT

The Improving Access to Psychological Therapies (IAPT) programme aims to improve access to talking therapies in the NHS by providing more local services and psychological therapists. IAPT services have now been set up across the NHS.

The IAPT Services help people, aged 18 and over, cope with depression and/or anxiety. IAPT services provide a range of therapies including one to one, group, and home-based online support programmes.

Modalities

There are many different kinds of therapy; these different kinds of therapy are referred to as modalities.

NICE

The National Institute for Health and Clinical Excellence (NICE) was set up in 1999 to reduce variation in the availability and quality of NHS treatments and care - the so called 'postcode lottery'.

NICE's evidence-based guidance helps identify about which medicines, treatments, procedures and devices represent the best quality care and which offer the best value for money for the NHS.

Personalisation

Personalisation is a Government led national policy to ensure everyone who uses support should have the choice and control to shape their own lives and the services they receive.

The system puts the individual at the centre of the process and allows them to choose the service providers they use and the manner in which they receive support. The aim is to make services more personal and tailored to individuals needs.

Reablement

A period of support to regain independence by learning, or re-learning, skills for daily living. Reablement may involve the use of focused support and therapy to help people regain daily living skills and become able do things for themselves after an illness or accident. It can also include the provision of equipment and aids to help people live more independently.

Service User Advisory Group

This group of people have experience of using services for mood, anxiety and personality disorder. Several members of the group have direct experience of using psychological therapies.

Third Sector

The 'third sector' is the term used to describe the range of organisations that are neither public sector nor private sector. It includes voluntary and community organisations (both registered charities and other organisations such as associations, self-help groups and community groups), social enterprises, mutuals and co-operatives.

Triaging

Triage is the process of determining the priority of patients' treatments based on the severity of their condition.

SLaM

Shorthand for South London and Maudsley NHS Foundation Trust, providing mental health services across Lambeth, Southwark, Lewisham & Croydon

Feedback form

Do you understand what is being proposed with the reconfiguration of the psychological therapies?

Do you need further information to understand what is being proposed in psychological therapies? If so what information would be helpful?

Do you believe the changes that we are making will improve psychological therapies? If so, what do you believe they are?

Are there any other things we need to consider to improve the service?

Do you have any other comments that you would like to make?

You may want to comment on the themes we will be discussing on the 16th May?

Themes: the need for more detailed work on aspects of the model: - specifically

- Single point of access
- Pathways through community and non statutory services
- Activities targets
- Management of risk

Please provide us with your contact details so we can send/speak to you about the information that you require.

Name:

Tel number:

Address

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