Psychological Therapy Services in Lambeth, Southwark & Lewisham

Overview: Where stakeholder feedback has influenced plans - July 2012

During the development of the new integrated psychological therapy services in Lambeth, Southwark & Lewisham, stakeholders have been involved in a number of ways as outlined in the following reports:

- 'Report on Stakeholder Involvement in the proposed changes to psychological therapy services in Lambeth, Southwark & Lewisham April/May 2012' June 2012
- 'Involving stakeholders in the development of the proposed changes to psychological therapies services' April 2012
- 'Find Out/Talk About Involvement Report following stakeholder meeting' November 2011 Copies available contact: Alice Glover details below

Detailed below are some examples of how the feedback has informed the model and the detail of how the model will be delivered:

In developing the original proposal – Spring/Summer 2011	
Feedback	How the plans were influenced
It can be difficult to reach appropriate psychological therapy treatment	The 'integrated' model, bringing psychotherapy and psychology services together with closer working with community mental health teams will reduce duplication and increase communication between services resulting in a more direct pathway for service users.
Some people undergo multiple assessments before reaching the appropriate therapy	The single point of access was developed to reduce the number of assessments
Consulting on the original proposal November 2011 – March 2012	
Feedback	How the plans were influenced
there should be a continued emphasis on providing evidence based treatments, but also scope for developing new support opportunities and better links with community support	The revised proposal is intended to create a structure which allows for the flexibility to deliver a range of models and to introduce & develop new modalities, researching them overtime. The revised proposal develops the detail of the 'peer support' post to include signposting to community resources & supporting the development of group work including waiting list groups.
Concerns about the level of staffing in Lambeth in particular	The revised proposal outlines how the staffing structure was reviewed and changed on the basis of the feedback and discussions with commissioners. Level of staffing in each borough reflects the level of funding by commissioners.
there should be greater understanding of the detail of what was proposed and further opportunities for involvement	A period of further involvement was undertaken during April & May

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Use of the feedback received during April & May is ongoing as service specifications and operational policies are developed. The following examples have been incorporated into the work to date.

Developing the detail of the proposal – April/ May 2012		
Feedback	How the plans were influenced	
Request for more flexible availability of services	The operational policy identifies an aspiration to move from working hours of mon – fri 9 – 5 to mon – sat 8 am – 8 pm	
Request for a shift in thinking about the 'assessment', presenting and developing it more as a 'consultation' rather than a 'test that has to be passed'	The draft service specification identifies the assessment to include 'consultation'.	
Ideas about improving the experience of waiting for therapy	These have been included in the operational policy: Telephone contact, Bibliotherapy / preparation, Drop-in sessions, E-mail up dates, Peer support activities	
More collaboration with primary care services to make sure that the right service is reached quicker	The operational policy identifies clearly how primary care mental health services (IAPT, GP's) will work together. GP referrals to stand alone therapy will be screened by IAPT services who will also participate in the single point of access discussions about individual cases.	
The need for clear, consistent and transparent referral processes so that referrers and service users know what to expect	Each Integrated Psychological Therapies service will work with its local partners (IAPT, GPs, Community Mental Health Teams) to develop referral formats that fit with local practice, but which ensure consistency across the boroughs	
Ideas about how people would like to be kept informed and involved	 An involvement action plan has been devised on the basis of this feedback and is now being implemented: Briefings have been written and disseminated by the user advisory group A workshop has been arranged on developing an outcomes frameworks Working groups on patient experience 	
The importance of clear information about people can expect from the service	A working group has been set up to develop information for service users and other stakeholders throughout the pathway	

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