

CLEAR Mental Health Case Study 2021

South West Yorkshire Partnership NHS Foundation Trust

Increasing access to IAPT services and improving staff retention

AT A GLANCE

CLEAR CHALLENGE

More than half of the referrals did not meet the IAPT criteria, leading to treatment delays and a high workload, impacting on staff retention and recruitment

KEY CHANGES

A standardised treatment pathway, enhanced screening for new referrals, additional informal peer-peer supervision and community education

FORECAST BENEFITS

Reduction in waiting times, earlier signposting to other services for those who don't meet the criteria and increased access among target patient groups

THE CHALLENGE

Kirklees Improving Access to Psychological Therapy (IAPT) service operated as two distinct teams, north and south, until they merged in 2021, which resulted in difficulties aligning ways of working.

Many patients were having problems accessing the care they needed, with 51% of referrals not meeting the criteria for treatment. This was impacting on patient experience, including delays in care. The service was also not meeting national access targets.

At the same time, it was facing challenges with staff recruitment and retention because of workload pressures, lack of career progression and a high demand for practitioners elsewhere.

WHAT WE DID

Trust clinicians seconded onto the programme conducted interviews, informal discussions and focus groups to gather data on the key issues within the service. Key points from the qualitative data were grouped into themes.

Referral records were analysed between April 2019 to March 2021. This showed there were a total of 17,553 referrals, with 8,507 patients treated and 9,046 discharged with signposting after their first assessment. The project team then set about exploring solutions to the challenges raised.

CLEAR RECOMMENDATIONS

A standardised treatment pathway was recommended for the merged teams and an enhanced screening process for new referrals.

Psychological wellbeing practitioners could carry out further engagement with GPs to ensure they are clear on the conditions that could be treated within the service.

Literature promoting the service could be distributed to youth centres, colleges and places of worship and meetings held with community and religious leaders to raise awareness of the service and build trust.

Separate formal and informal peer-based supervision could improve staff wellbeing and an online staff group could help them feel more supported and less isolated.

More detailed data collection, such as type of illnesses and source of referrals, would allow gaps in care to be identified.

FORECAST IMPACT

The recommendations would reduce waiting times and increase access among target patient groups. Based on a potential 50% reduction in incorrect referrals, 2,500 hours a year would be freed up increasing treatment time available.

Clarity around the remit of the service and earlier enhanced screening would ensure patients, who do not meet the criteria for IAPT treatment, are signposted to the correct services sooner. A standardised treatment pathway would streamline processes, save practitioners' time and help drive improvements in staff morale and retention.

Additional supervision, training opportunities and an online support group would improve morale, professional development and encourage staff to stay in their roles.

Wider promotion
of the service
and community
engagement
with drop-in
sessions would
raise awareness
of the help
available and
build trust