



## CLEAR Mental Health case study 2021

# Berkshire Healthcare NHS Foundation Trust

New dedicated trauma team reducing waiting times, improving patient recovery and offering new career opportunities

## AT A GLANCE

### CLEAR CHALLENGE

Long waiting times in the IAPT service, poor rates of patient recovery and problems with staff recruitment, retention and burn-out.

### KEY CHANGES

A new trauma only team, integration of the Enhanced Trauma Pathway into the Berkshire Traumatic Stress Service, more involvement of the community mental health teams and improved support for both patients and staff.

### FORECAST BENEFITS

Reduced waits for treatment, a better service for patients and improved staff morale and retention.

## THE CHALLENGE

Patients on the Enhanced Trauma Pathway (ETP) at Berkshire Healthcare NHS Foundation Trust (BHFT) were experiencing long waiting times and low recovery rates. Higher complexity patients were not being triaged effectively and staff and patients were struggling to cope with trauma work online. Recruitment and retention rates were poor and some staff were feeling overwhelmed by the difficult nature of the work and the high caseload.

## WHAT THEY DID

Clinicians from BHFT supported by the national CLEAR team conducted 27 interviews with frontline clinical staff, transformation and clinical leads and executives from IAPT, the Berkshire Traumatic Stress Service (BTSS) and the trust. A focus group was held with clinical staff and anonymised feedback from 17 patients was included in the project. Data from more than 20,000 new referrals to IAPT for the 12 months from June 2020 were analysed and the results were integrated with the qualitative data to pinpoint the main challenges to the service.

## CLEAR RECOMMENDATIONS

Three new models of care were recommended including the creation of a “trauma only” team within the ETP. The team would be able to handle 454 referrals a year and also give therapists the choice of working with complicated trauma patients.

The ETP should be integrated into the stress service to give staff access to specialist support, training and supervision. Psychologists working in the community mental health teams should become more involved, using their skills to treat more than 300 trauma patients per year to help reduce waiting times.

Staff should be supported with regular in-house training and “reconnection events” and there should be an extended assessment of 90 minutes for all clients referred to IAPT with moderate to severe depression. A series of interventions, such as help from a psycho-educational group and regular check-up calls, could be offered to support patients waiting for treatment.

## FORECAST IMPACT

A new trauma only team would open up a new career path as well as help reduce staff stress and burn-out. Continuity of care for patients would improve and there would be a potential cost saving for the trust because of improved staff wellbeing and retention and a cut in the number of re-referrals.

Integrating the ETP into the stress service would also help to improve staff satisfaction and retention. More complex cases would be seen within the specialist trauma service and overall patient outcomes and recovery rates would improve. This new integrated ETP pathway could process 454 referrals a year.

The combination of the new initiatives could increase patients' recovery rate from 32.9% to 50% (the national target) reducing the number of ETP sessions by up to 1,256 per year. This would have a significant impact on reducing waiting lists for the service.

Streamlining the assessment process could free up staff time and lead to a 33% increase in capacity which would help the service meet national waiting time targets of 75% patients having their first appointment in six weeks and 95% within 18 weeks.

“A very positive and impactful experience piloting the CLEAR methodology with our IAPT and perinatal mental health services”

Alex Gild, Deputy Chief  
Executive Berkshire Healthcare  
NHS Foundation Trust