

Yorkshire and the Humber Mental Health Clinical Network

IAPT Providers' Network

Andy Wright, IAPT Advisor, Heather Stonebank, Lead PWP
Advisor, Sarah Boul, Quality Improvement Manager and Denise
Friend, Quality Improvement Lead

18 November 2020

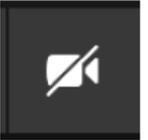
NHS England and NHS Improvement



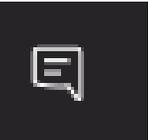
Housekeeping



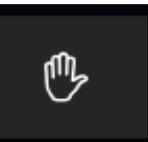
Please remain on mute throughout the session, unless invited to speak – thank you.



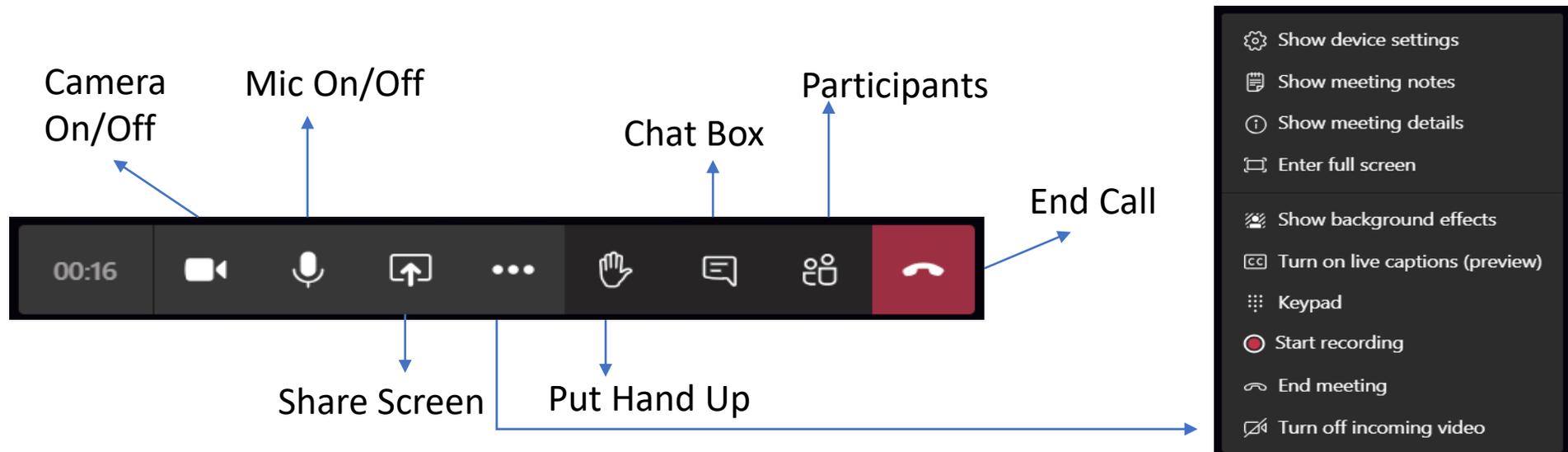
You are welcome to use the video function, however this occasionally causes bandwidth problems so you may wish to turn it off.



Whilst we will have an open conversation, please *feel free to use the chat box function* to ask questions or make comments.



If you would like to speak please use the “Put Hand Up” function and the moderator will come to you in due course.



Today's Agenda



Time	Title	Lead
10.00	Welcome, Apologies and Introductions	Andy Wright, Clinical Networks
10:15	Senior PWP Network Update and Feedback from Wellbeing Workshops	Heather Stonebank, Clinical Networks
10:30	Update on IAPT Leadership Training Offer	Andy Wright, Clinical Networks
10.40	IAPT Employment Advisors Update	Kevin Jarman, DWP
11.00	Tea and Coffee Break (5 minutes)	
11.05	Post COVID Psychological Support: Discussion	Sarah Boul, Clinical Networks / All
11.15	Centralised Recruitment Proposal	Marie Watkins, NHS England and NHS Improvement
11.40	Apprenticeships Update	Marie Watkins, NHS England and NHS Improvement
12:05	Digital IAPT and Opportunities for Regional Co-commissioning: Discussion	Andy Wright, Clinical Networks
12:15	Reflections on the Day and Any Other Business <ul style="list-style-type: none"> - IAPT Manual Updates - IAPT Counsellors - MBCT Training for HITs: https://sway.office.com/HzgPddwEOfWtZTM4?ref=Link 	All
12.30	Close	

Online Forum

A private online forum has been established to give IAPT Providers an opportunity to ask questions, share ideas and share best practice in a safe environment.

To register for the forum please follow the instructions below:

- Go to the Yorkshire and the Humber Clinical Network website here: www.yhscn.nhs.uk
- Click the orange 'forum' tab at the top right of the page
- Fill in the form on the right of the page
- In the interested network section, select "Adult Mental Health" from the drop down box and then in the categories section select "IAPT Providers Network Forum"
- Create a password
- Once registered, in approx. 1-2 working days you will receive an email to let you know you have access to the forum
- Log on to the forum and you should be able to see the heading 'IAPT Providers Network Forum' and all posts for this group.

Senior PWP Network Update and Feedback from Wellbeing Workshops

Heather Stonebank, Lead PWP Advisor, Yorkshire and the Humber Clinical Network

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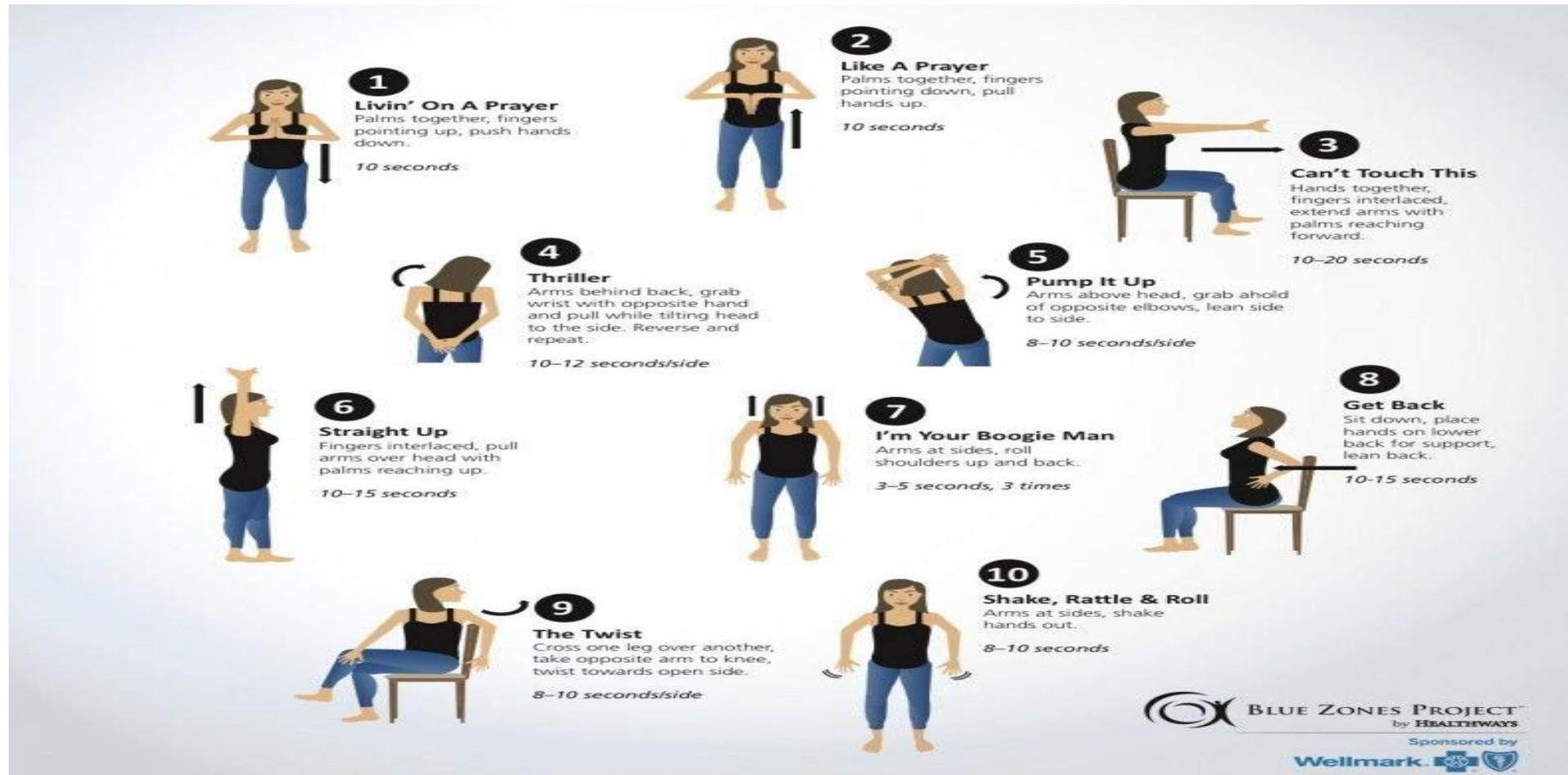
Today's Agenda



Time	Item	Title	Lead
10.00	1	Welcome, Apologies and Introductions and Checking In	Andy Wright, Clinical Networks
10.20	2	Wellbeing Exercise – Desk Exercises	Sarah Boul, Clinical Networks
10:30	3	Adaptations and Opportunities: Part 1 – Group Supervision and Remote Working	Poppy Danahay, North Yorkshire IAPT / All
11:00		Tea and Coffee Break (5 minutes)	
11:05	4	Adaptations and Opportunities: Part 2 – MS Teams Live and Supporting Trainees	Heather Stonebank, Sheffield IAPT / All
11:35	5	IAPT Wellbeing Workshops Feedback and Discussion: what next with your learning?	Andy Wright, Clinical Networks / All
11:55	6	IAPT Preceptorships	All
12:05	7	IAPT Leadership Training Offer Next Steps	Andy Wright, Clinical Networks / All
12:15	8	Any Other Business and Checking Out - Digital IAPT: https://www.nice.org.uk/about/what-we-do/our-programmes/nice-advice/improving-access-to-psychological-therapies--iapt-submitting-a-product-to-iapt	All
12:30		Close	

Wellbeing Exercise - Desk Exercises

Looking after our physical wellbeing is as important as looking after our mental wellbeing. Below are a few simple exercises you can do throughout the day to relieve some of the discomfort you may experience whilst being sedentary at home:



Adaptations and Opportunities: Part 1 – Group Supervision and Remote Working

Poppy Danahay, North Yorkshire IAPT / All

NHS England and NHS Improvement



Adaptations and Opportunities: Part 2 – MS Teams Live and Supporting Trainees

Heather Stonebank, Sheffield IAPT / All

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IAPT Wellbeing Workshops Feedback and What next with your learning?

Andy Wright, Clinical Networks / All

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IAPT Wellbeing Workshops

The recent wellbeing workshops “Using supervision to increase staff engagement and reduce stress and burnout” for step 2 and step 3 IAPT staff with responsibility for supervision **aimed to:**

- Help senior staff understand organisational and personal factors that might decrease staff engagement and increase the risk of burnout and to take action to prevent this.
- Give staff practical skills and a solid theoretical grounding in this area and includes current thinking about the challenges that remote working has brought to services and additional thinking about supporting ethnic minority staff.
- This was a 2 part course delivered in September 2020 by Dr Andrew Beck.

Attendees of the Wellbeing Workshops		
Supervisor Level	Part 1	Part 2
Step 2	56	44
Step 3	58	56

Evaluation Feedback

- An overwhelming majority of delegates indicated the workshops:
 - Improved their understanding of burnout and engagement
 - Helped them to develop practical skills
 - Was facilitated effectively
 - Provided the opportunity to reflect on their own practice and levels of burnout or engagement

Discussion Points

1. What did you find most useful from the workshop and what could we have done to make it even more valuable?
2. How will the learning be implemented and integrated into your service?
3. How will learning from the implementation be shared?
4. What future workshops would benefit your practice?

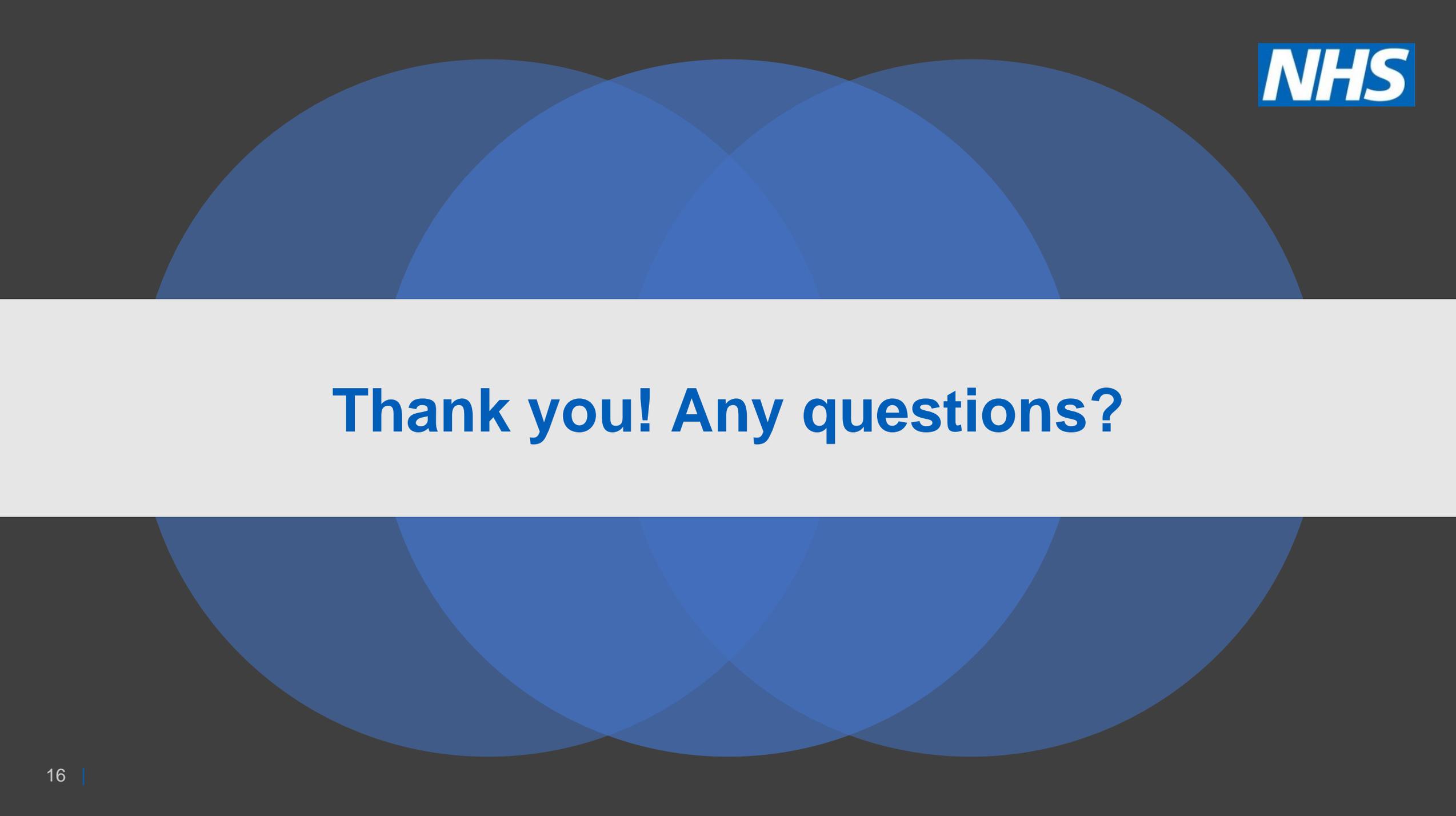
IAPT Preceptorships Discussion

Preceptorship is “a formal period of support and guidance from an experienced professional colleague for newly qualified professionals to assist the transitional process from student to accountable professional.”



Examples of Existing Preceptorships

1. Alliance Psychological Services in Teeside have developed a PWP Preceptorship Guide
2. North Staffs IAPT have recently launched a Preceptorship Programme
3. Devon Partnership Trust have recently launched a Preceptorship Programme

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Thank you! Any questions?

IAPT Leadership Training Offer Next Steps

Andy Wright, Clinical Networks / All

NHS England and NHS Improvement



IAPT Leadership Programme Aims

The aims of developing a leadership programme for IAPT services are to:

- Encourage new ways of working in Y&H that holds learning at the heart of the success of IAPT services
- Develop greater understanding of what good looks like and share across the region
- Develop leadership potential at all levels
- See the current and future leadership potential developed
- Develop a programme that supports IAPT service's high quality continuous improvement

IAPT Leadership Programme Principals



- Understanding the key principles around effective leadership
- Encouraging IAPT leaders to increase understanding of how they lead through the current challenges
- Flexibility for bespoke service improvement objectives
- Create a regional resource of people who can offer support and expertise to meet the LTP
- Continue to encourage & explore ways of working together
- If helpful, facilitate conversations with commissioners

IAPT Leadership Programme Next Steps



NHS England and NHS Improvement will meet the costs of the programme which will include:

- Offer a specific leadership skills programme to support Senior PWPs
- Working with local IAPT services to identify in service issues and offer bespoke leadership support across teams
- Make better use of data analytics to support bespoke service improvement work
- Secure access to new IAPT system maturity and triangulation tools that build a more nuanced appreciation of service challenges
- Develop a shared experiential learning offer utilising action learning sets and coaching

IAPT Employment Advisors Update

Kevin Jarman, Department of Work and Pensions

NHS England and NHS Improvement





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EA in IAPT Initiative – Progress update from EA in IAPT National Team Yorkshire & Humber IAPT Providers Network

Kevin Jarman

EA in IAPT Lead

Work & Health Unit

Employers, Health & Inclusive Employment Directorate

Department of Work & Pensions

18 November 2020

Primary aims of EA in IAPT



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- **To more than double the number of EAs within IAPT services**
- **Increase the provision of combined psychological treatment and employment support, and standardise and improve the quality of employment support provided in IAPT services**
- **To assess the impact on Health and Employment outcomes of additional EAs ahead of potential bids to finance the roll-out of the programme nationally if it proves successful**
- **To allow IAPT therapists currently undertaking employment support to return to providing therapy increasing the clinical capacity of IAPT services**

Progress in meeting these aims



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Doubling the number of EAs working in IAPT services:

- **This aim was reached in February 2018. We have now almost tripled the workforce with 303 new EAs and 75 new SEAs in post, well in advance of the 127 whole time equivalent EAs in post in 2015.**

Providing more combined psychological treatment and employment support:

- **In the first six months of this financial year, over 12,000 people started employment support**

Standardise and improve the quality of employment support:

- **Our service model is constantly being refined and is now established across all EA in IAPT sites**
- **Liverpool John Moores' University have completed the national training course with over 250 EAs passing the EA training course and over 70 SEAs also passing the additional supervision and leadership module**
- **We are currently working to establish a national induction and training programme to be made available to Health Education England to support future roll out of EA in IAPT.**

Progress in meeting these aims



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Improve mental health and employment outcomes for people by providing combined psychological treatment and employment support:

- **A study by our Dorset and Southampton EA in IAPT sites suggests that clients with employment difficulties who receive combined employment support and psychological treatment get substantially better employment and mental health outcomes than those who receive psychological treatment only.**
- **We are due to publish our clients survey and interviews evaluation on the next few weeks, this has some positive findings**

Spending Review bid to extend EA in IAPT to all IAPT services in England:

- **Bid submitted to expand EA in IAPT to 60% of CCGs in 2021/22, we expect the outcome of this bid before the end of November.**

Increase IAPT therapy provision capacity by removing need for therapists to provide employment support

- **An online survey of clinical leads and therapists took place over the summer looking at the impact of EAs on services, early findings from clinical leads are overwhelmingly positive**

EA in IAPT in Yorkshire & Humber



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This table shows the number of people starting employment support in the first six months of this financial year in the Yorkshire & Humber EA in IAPT sites and the numbers nationally

	Apr	May	Jun	Jul	Aug	Sep	Total
East Riding of Yorkshire	18	34	46	38	31	41	208
North Yorkshire	23	45	37	47	47	46	245
Vale of York	29	29	18	18	16	31	141
Leeds	19	29	21	15	15	40	139
North East Lincolnshire	9	18	17	17	12	15	88
Yorkshire & Humber Total	98	155	139	135	121	173	821
National Figure	1768	1615	2132	2417	2162	2392	12,486

The immediate future



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- **We are interested to see if IAPT Data Set V2 improves the quality of employment data. We have worked very hard with EA in IAPT sites and Data System Suppliers to ensure this happens**
- **We are confident of a positive outcome to our spending review bid**
- **We await publication of evaluation results, given they are positive they will make it easier to persuade decision makers to roll EA in IAPT out to all IAPT services across England.**
- **We have recently launched a new online platform called Employment Exchange, this is open to all. Here is the address of the mailbox for those who would like to access the Employment Exchange:**

caxtonhouse.employmentexchangeeditorialboard@dwp.gov.uk

Finally



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- **A massive thank you to all our EAs, SEAs, therapists and clinical leads working in our sites for your energy and activity. You are making a difference.**
- **Thanks to my team, many of whom have just returned from being redeployed for seven months to support Job Centre Plus deal with over 2.4million Universal Credit claims**
- **Thanks to the Work & Health Unit analysts who have been incredibly helpful in recent months supporting us with the V2 IAPT Data Set, Spending review bid and the ongoing evaluation**
- **Keep going, you are doing a great job.**
- **I hope that the next time I provide a report soon I can announce that EA in IAPT will be rolled out across England.**
- **Thank you for your time today**

For further information

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Time for a break?



Post COVID Psychological Support: Discussion

Sarah Boul, Quality Improvement Manager, Yorkshire and the Humber Clinical Networks / All

NHS England and NHS Improvement



Post COVID Psychological Support

On 7th October 2020, NHS England and Improvement announced a five part package of measures to boost support for long Covid patients. This package includes:

- Development of new guidance through NICE
- Further development and expansion of the 'Your Covid Recovery' online rehabilitation service
- Investment in designated long COVID clinics (£10 million)
- National Institute for Health Research (NIHR) funded research to better understand and manage the condition
- Establishment of a new NHS England Long COVID taskforce

The national specification document suggests that a typical holistic assessment for COVID rehabilitation should include:

- Assessment and management of breathlessness
- Symptom or palliative care management where required
- Assessment and management of oxygen requirements
- Consideration of rehabilitation needs and onward referral where required
- **Psychosocial assessment (depression, anxiety disorders, PTSD, traumatic bereavement, psychosis screen, risk to self and/or others, COVID related life stresses such as debt, unemployment, relationship issues) and onward referral where required**
- Assessment and management of dysfunctional breathing
- Consideration of a new diagnosis of venous thromboembolic disease (VTE)

Post COVID Psychological Support

Key questions to consider around the post COVID support offer are:

- How do we identify and recognise patients needing post COVID rehabilitation?
- What should a holistic assessment cover?
- Who & where should these assessments be conducted?
- What tool do we need to conduct effective holistic assessment?
- How do we prioritise patients?
- What should be the model of care?
- What are the entry points into the rehabilitation pathway?

And most importantly of all:

- **Where does IAPT fit in all of this?**

Post COVID Psychological Support

Building on the weekly webinar series held during the lockdown earlier this summer, the National IAPT Programme are hosting a five part clinical webinar series on the role IAPT can play in supporting people who have had COVID and, in particular, those that are experiencing persistent symptoms, which are now commonly being referred to as “long COVID” and “post-COVID syndrome”.

The link to register for the sessions is: [Post-Covid syndrome IAPT training webinars link to register](#)

Centralised Recruitment Proposal

Marie Watkins, Service Improvement Lead, NHS England and Improvement

NHS England and NHS Improvement



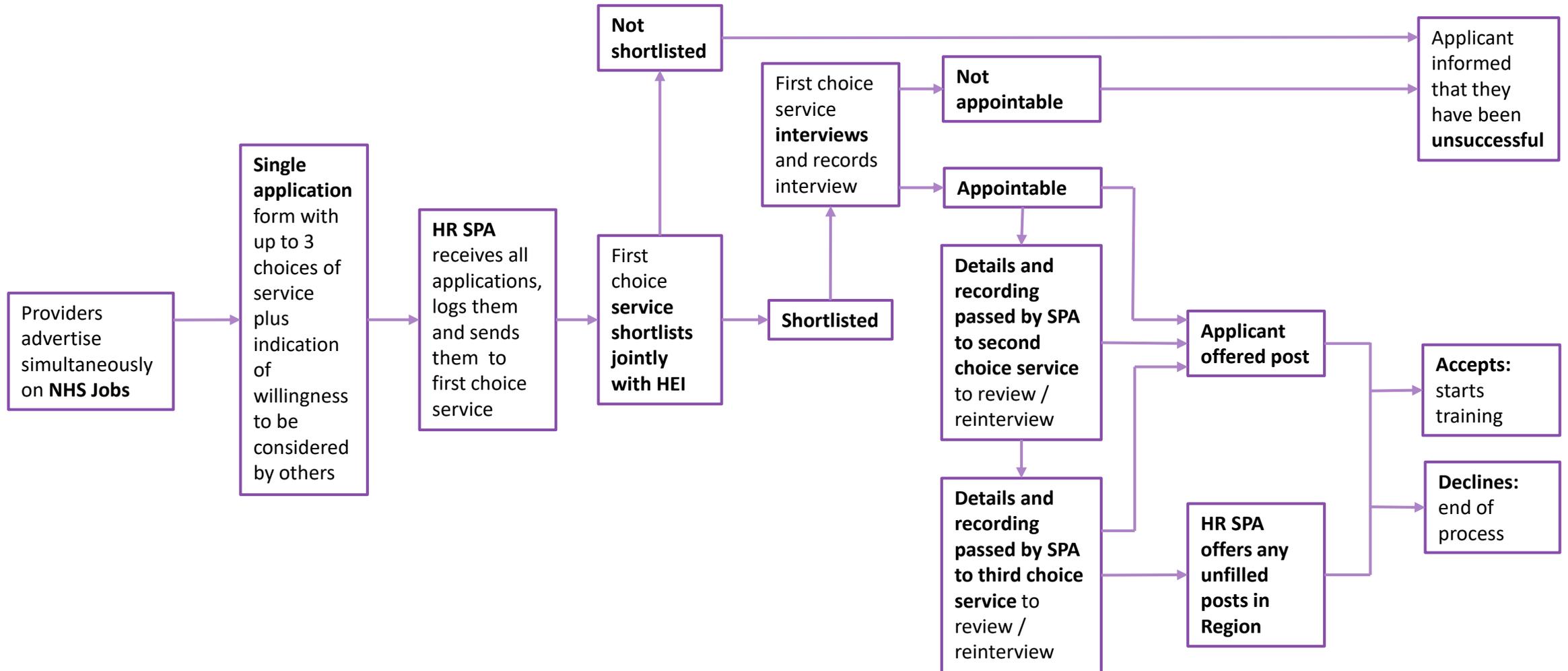
Current issues

- Applicants sending simultaneous training applications to a number of services
- Duplication in shortlisting and interviewing
- Applicants being offered more than one post
- Wasted training places
- High level of attrition post qualification

Principles

- Coordinated advertising of trainee posts – separate service descriptions but single process
- Single application form and up to three choices of service
- HR 'SPA' receives and sorts all application forms
- First choice service shortlists and interviews – jointly with HEI
- Candidates not shortlisted or interviewed and not appointable are informed they've been unsuccessful
- Candidates deemed appointable but not offered a post are passed onto second (and then third) choice service
- Subsequent services can accept outcome of interview, review recording or re-interview (face-to-face or by telephone)
- Candidates declining a post will not be offered any others
- Appointable candidates not offered a post in any of their choices will be offered any training posts which remain unfilled
- HR SPA will maintain a database and use this to understand patterns and issues

Overview of proposed process



Next steps

- Engaging IAPT services, CCGs and HEI across the North East and Yorkshire footprint
- Agreeing the scope of the service and work up the proposal including issues around capping shortlists
- Establishing an HR expert reference group to support the process and development of all documents
- Baselining the current position as regards the number of applications, number of interviews per post, number of posts declined, number of lost training places etc to quantify the benefits of a centralised process
- Developing a specification for a single IAPT HR service and agreeing how this will be procured and funded
- Working with providers and HEIs to agree a shortlisting and interviewing process for all trainee posts
- Developing standardised documentation and information to applicants to support the process
- Agreeing a timeline for implementation

Apprenticeships Update

Marie Watkins, Service Improvement Lead, NHS England and Improvement

NHS England and NHS Improvement



Objectives

- Recruiting a more diverse workforce
- Enabling people without a degree to train as PWP
- Recruiting trainees based on relevant experience rather than qualifications
- Distributing recruitment of trainees more evenly across the year
- Improving joint working with HEIs on training course specifications, for example offering 'study skills' support
- Delivering an equivalent level of competency through a different training and assessment approach
- Embedding the PWP role as a career in itself and not just a stepping stone to other roles
- Improving staff retention

Principles

- Ensuring parity with the traditional PWP training route
- Permanent contracts for apprentices
- More accessible training locations
- Part-time training opportunities
- Supporting a longer training period if needed
- Securing adequate training places
- Embedding a mixed model of face to face and virtual training including exploring options for trainers to come out to students rather than students travelling to HEIs

Progress

- Steering group established
- HEE leading on national procurement of training – have agreed input into tender document and scoring of bids
- HEE have asked services for their interest
- Working towards launch in 2021 – noting that course start can be different to schedule for ‘traditional’ PWP training
- Have also agreed to look separately at widening undergraduate entry onto ‘traditional’ training

Next steps

- Develop briefing to inform and engage more widely
- Review scoping exercise carried out by HEE
- Confirm HEE salary support for apprenticeships
- Understand accreditation process and timeline
- Develop outline implementation plan
- Design robust evaluation framework – including monitoring impact of all recruitment work on staff retention
- Collate FAQs to inform briefing...

Digital IAPT and Opportunities for Regional Co-commissioning: Discussion

Andy Wright, IAPT Advisor, Yorkshire and the Humber Clinical Networks / All

NHS England and NHS Improvement



Reflections on the Day and Any Other Business

1. IAPT Manual proposed revisions

The IAPT programme recently shared suggested changes to the IAPT manual via clinical networks and regions. The changes were shared as “draft” in advance of final confirmation of the changes, so systems could be sighted and to collect feedback. We have had feedback from many regions around concerns of the suggested clarification on the use assessment and treatment codes and the need to accurately reflect the patient experience in particular. Based on this feedback further work is ongoing to review the proposed change, and the programme team wanted to confirm **that currently no official changes have been made to the IAPT manual and we would recommend no action is taken by services in anticipation until formal communications are sent out which confirm the final agreed position.** We would appreciate if this message could be shared on with systems and will confirm any final changes.

2. IAPT Counsellors

3. MBCT Training for HITs - <https://sway.office.com/HzgPddwEOfWtZTM4?ref=Link>

4. Help Us Help You – Mental Health NHS campaign (see next slide)



Help Us Help You – Mental Health NHS Campaign



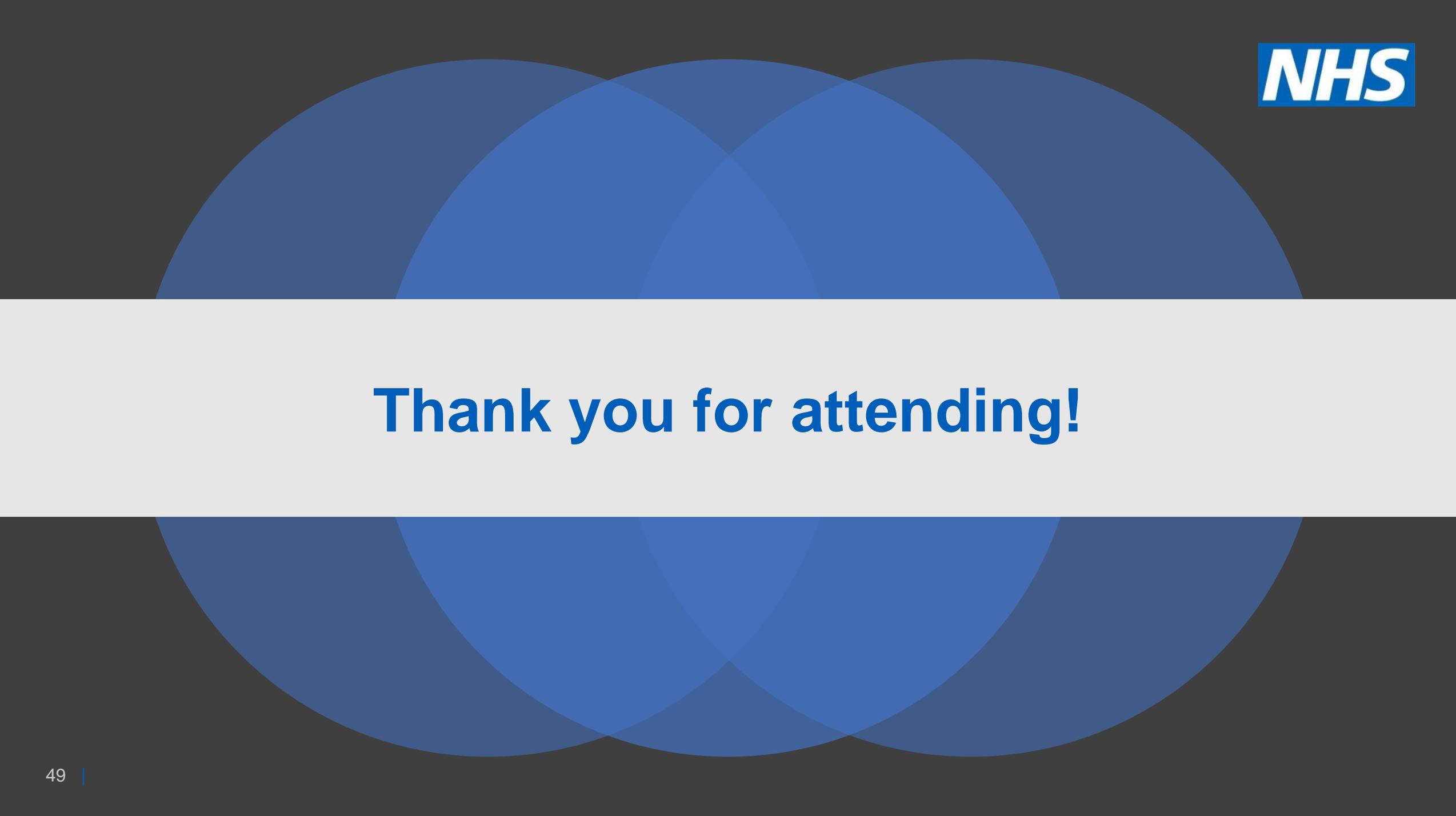
- **Help Us Help You – Mental Health** is a two-month campaign aiming at increasing awareness of NHS talking therapies services (IAPT). It will encourage adults with mental health issues to seek help and consider accessing NHS talking therapy via their GP or through self-referral. It will have a specific focus on BAME groups and people struggling with unemployment.
- Mental health is a top priority of the NHS, and we count on your support to promote the campaign.
- The campaign resources can be accessed and downloaded for free [here](#).
- We just published a [press release](#) on our website and a [video](#) of our National Director Claire Murdoch on Twitter.
- The campaign webpage is now live: [NHS.UK/Talk](https://www.nhs.uk/talk)
- On social media we will be using #HelpUsHelpYou
- If you have any questions, please contact england.mhcomms@nhs.net

JUST TALKING CAN HELP

NHS talking therapies can help you if you're struggling to cope with feelings of anxiety or depression. They're effective, and confidential.

Your GP can refer you or you can refer yourself online [nhs.uk/talk](https://www.nhs.uk/talk)



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Thank you for attending!

