

Yorkshire and the Humber IAPT Providers Network

Minutes

24th May 2017, 10:00-15:30

Oxford Place, Leeds

Present:			
First Name	Surname	Job Title	Employer
Emma	Baker	Information Analyst	Tees, Esk and Wear Valleys NHS Trust
Sarah	Boul	Quality Improvement Lead, Mental Health	Yorkshire and the Humber CN
Linda	Brownbridge	IAPT Clinical Lead	Navigo (Grimsby)
John	Butler	IAPT Team Manager	South West Yorkshire Partnership NHS Foundation Trust
Rebecca	Campbell	Quality Improvement Manager, Mental Health	Yorkshire and the Humber CN
Sara	Collier-Hield	Quality Improvement Lead, Perinatal Mental Health	Yorkshire and the Humber CN
Mick	Collins	Clinical Lead	Insight Healthcare (Bassetlaw)
Caroline	Coxon	IST Manager	NHS England
Cheryl	Day	Programme Lead	Health Education England
Sharon	Edwards	Senior Psychological Therapist	Bradford District Care Trust
Sam	Farrington	Clinical Lead, Chartered Psychologist	Insight Healthcare
Richard	Garland	IAPT Manager	Touchstone (Leeds)
Laurence	Gregory	East Clinical Team Manager	Leeds Community Healthcare NHS Trust
Victoria	Greensmith	Acting Team Leader/Link Practitioner	South West Yorkshire Partnership NHS Foundation Trust
Gareth	Griffiths	IAPT Team Manager	Turning Point Talking Therapies (Wakefield)
Nichola	Hartshorne	Kirklees & Calderdale IAPT HI Team Manager	South West Yorkshire Partnership NHS Foundation Trust
Alison	Hobbs	North Yorkshire IAPT Clinical Lead	Tees, Esk and Wear Valley NHS Foundation Trust - North Yorkshire IAPT
Liz	Holdsworth	MHAT Manager	South West Yorkshire Partnership NHS Foundation Trust
Ursula	James	IAPT Programme Manager	NHS England

Karen	Kirby	Team Manager	Rotherham, Doncaster and Scunthorpe NHS Foundation Trust
Alison	Lynskey	Trainee Cognitive Behavioural Therapist / Performance Manager	Rotherham, Doncaster and Scunthorpe NHS Foundation Trust
Toni	Mank	Head of Service	Sheffield Health and Social Care Trust
Jodie	Millington	Team Manager	Sheffield Health and Social Care Trust
Sara	Munton	Senior PWP	Navigo (Grimsby)
Louise	Robertson	Senior Information Analyst	Tees, Esk and Wear Valley NHS Foundation Trust
Andrew	Sainty	Team Manager	East Riding Emotional Wellbeing Service (IAPT)
Joanne	Squires	Clinical Lead Step 3 and 4	Bradford District Care Trust
Heather	Stonebank	Senior PWP	Sheffield Health and Social Care Trust
Nii	Wallace-Davies	Account Manager	Ieso Health
Clare	Wdowczyk	CBT and EMDR Therapist, Clinical Lead	Turning Point Rightsteps® Wakefield
Andy	Wright	IAPT Clinical Advisor	Yorkshire and the Humber CN

Apologies:

First Name	Surname	Job Title	Employer
Liz	Barkham	Lead Psychologist; Offender Health	Nottinghamshire Healthcare NHS Foundation Trust
Steve	Callaghan	IAPT Service Manager	Leeds Community Healthcare NHS Trust
Guy	Fillipich	Service Lead	Insight Healthcare Bassetlaw
Tim	Godley	Team Manager / Cognitive Behavioural Psychotherapist	Rotherham, Doncaster and Scunthorpe NHS Foundation Trust
Gareth	Griffiths	IAPT Team Manager	Turning Point Rightsteps® Wakefield
Clare	Houlden	Senior CBT Practitioner	Tees, Esk and Wear Valley NHS Foundation Trust - North Yorkshire IAPT
Steve	Kellett	IAPT Programme Director and Consultant Clinical Psychologist	Sheffield University and Sheffield Health and Social Care NHS Foundation Trust
Liz	Oxtoby	Head of Service-Clinical Lead (Adult)	Northpoint Wellbeing
Gayle	Porter	IAPT Clinical Manager	Bradford District Care Trust

Paula	Scott-Loftus	Team Manager	Tees, Esk and Wear Valley NHS Foundation Trust
Ros	Speck	Performance Manager	Rotherham, Doncaster and Scunthorpe NHS Foundation Trust
Charlotte	Whale	Quality Improvement Manager, U&EC	Yorkshire and the Humber CN

No.	AGENDA ITEMS	Action By
1.	<p>Welcome, Apologies and Introductions</p> <p>Andy Wright welcomed everyone to the meeting and conducted introductions.</p>	
2.	<p>Minutes from the Last Meeting (01.02.17) and Matters Arising</p> <p>The minutes of the last meeting were reviewed and accepted as a correct record.</p> <p>The actions were displayed to the attendees and attendees were advised that all actions had been completed.</p>	
3.	<p>National Update, Ursula James, IAPT Programme Manager, NHS England and Caroline Coxon, IST Manager, NHS England</p> <p>Andy Wright advised the attendees that the Clinical Network is working closely with the NHS England IAPT Programme and with NHS Improvement to help sustain and improve IAPT services across the region. Andy Wright thanked both Ursula James and Caroline Coxon for attending the Clinical Network meeting to provide national updates.</p> <p>Andy Wright introduced Ursula James to the attendees.</p> <p>Ursula James advised the attendees that IAPT had nationally achieved the 50% recovery target for the first time in the history of IAPT and congratulated all the services on their hard work to achieve this.</p> <p>Ursula James then provided the attendees with a national update focussing on the most relevant and important national guidance; the commitments regarding Integrated IAPT and Employment Advisors and an update on upcoming hot topics including increased access for older adults and BAME communities.</p> <p>Regarding the ongoing Integrated IAPT work Ursula James advised the attendees that the draft Integrated IAPT Evidence Based Treatment Pathway was now available for review and comment on Yammer. It was agreed that the draft would be shared with attendees and guidance on how to join Yammer would also be shared.</p> <p><i>ACTION: Sarah Boul to share the draft Integrated IAPT Evidence Based Treatment Pathway and guidance on how to join Yammer.</i></p> <p>Please see the slide pack for more information.</p> <p>Following the presentation from Ursula James Andy Wright then introduced Caroline Coxon from the Intensive Support Team.</p> <p>Caroline Coxon advised the attendees that she was presenting today from an NHS Improvement perspective. Caroline Coxon advised attendees that the IAPT Clinical Network was an excellent forum and very active. Caroline Coxon then advised attendees that the focus of the presentation would be to provide an overview of the Intensive Support Team, its focus going forwards and its approach and to share some top tips for IAPT services.</p> <p>Please see the slide pack for more information.</p> <p>Questions and Answers:</p> <p><i>Q. What is the reason why the mixed anxiety and depression problem descriptor should not be used?</i></p>	<p>Sarah Boul</p>

	<p>A. This code should be used only for someone who is sub-clinical. This code can be used for people who do not meet caseness but for people who do meet caseness their problem descriptor should be reviewed and changed as treatment progresses. The national advice is that the problem descriptor needs to match what you are treating. This is not only to better ensure that the treatment matches the problem but that any ADSM's taken can be used in the recovery calculation.</p> <p><i>Q. What is rolling recovery?</i></p> <p>A. Rolling recovery is a rolling 3 month aggregate of your recovery rates. Services are performance managed on a rolling recovery rate by NHS England North Region due to it being a fairer reflection of performance than in month. Therefore, it is important that services report on both performance in month and on a rolling 3 month aggregate.</p> <p><i>Q. When will we be able to submit the new IDB tables to NHS Digital?</i></p> <p>For long term conditions (LTC) there are 4 IDB tables that need to be submitted to NHS Digital. However, you can only submit these tables if you are a Wave 1 or 2 integrated IAPT site. No agreement has yet been made with NHS Digital for Wave 3 sites. Regarding the IDB tables for employment advisors please contact the DWP to gain further insight into timescales.</p> <p><i>Q. Please could the national team provide some guidance on employing staff into IAPT who are trained in CBT, such as CBT for psychosis, but not disorder specific CBT?</i></p> <p>A. Staff can be appointed to roles in IAPT as long as they are accredited with the BABCP. So for people who may be trained in CBT for psychosis, as long as they have sought accreditation via the BABCP, they can be appointed to IAPT CBT posts. However, the service must be cognisant that such staff would require more support than CBT staff trained in IAPT disorder specific CBT.</p>	
<p>4.</p>	<p>Senior PWP Network Update, Heather Stonebank, Senior PWP Advisor</p> <p>Andy Wright introduced Heather Stonebank to the attendees and advised that Heather has been an excellent addition to the Clinical Network and really brings the perspective of the Step 2 workforce to our work programmes.</p> <p>Heather Stonebank provided an overview of the Senior PWP Network to the attendees with a particular focus on what the network has done so far and how these ideas are being implemented in services.</p> <p>Heather Stonebank asked all attendees to consider: How can your service support best practice and ideas from the network and what would services like to see from the network?</p> <p><i>ACTION: All attendees to consider how can your service support best practice and ideas from the Senior PWP Network and what would services like to see from the network and provide feedback to Sarah Boul.</i></p> <p>Questions, Answers and Comments:</p> <p>Q. Caroline Coxon enquired if managers and clinical leads could feedback on the value of Senior PWPs attending the Network – are services seeing a</p>	<p>All Providers / Sarah Boul</p>

	<p>difference?</p> <p>A. Toni Mank advised that creating a leadership culture at Step 2 and using the learning from the Network has been invaluable in the service.</p> <p>Comment. Andy Wright reiterated that it is important to encourage Senior PWP's to attend the Network and that it is the same Senior PWP's to ensure continuity. Andy Wright also stated that it would be useful for managers and clinical leads to debrief with their Senior PWP's once they have attended the network to ensure learning is embedded and actions are completed.</p>	
<p>5.</p>	<p>HEE Update and Discussion, Cheryl Day, Programme Lead, Health Education England</p> <p>Andy Wright introduced Cheryl Day to the attendees and reiterated the importance of the Clinical Network working closely with HEE.</p> <p>Cheryl Day provided the attendees with an overview of the previous IAPT education commissioning process; the current commissioning and finance process, changes in HEE and an update on replacement posts and top up training for IAPT expansion sites.</p> <p>Please see the presentation slides for more information.</p> <p>Questions, Answers and Comments:</p> <p><i>Q. Will the University of Sheffield remain the provider of IAPT training?</i></p> <p>A. Yes the University of Sheffield will remain the provider. The university has a planned cohort for October 2017 and there may be a second cohort in March 2018 with funding support from NHS England.</p> <p><i>Q. When will salary support cease?</i></p> <p>A. Salary support will be removed entirely for IAPT from 2018/19 onwards. The justification for salary support removal is that the money will be used to pay course fees instead.</p> <p><i>Q. Are there any time scales on the start date for the cohorts?</i></p> <p>A. We hope to know specific start dates by the end of May. As soon as these are known the information will be shared with Providers.</p> <p>ACTION: Cheryl Day to advise Providers of confirmed cohort start dates.</p> <p><i>Q. Regarding counselling for depression training will there be money available for this rather than just the long term conditions training?</i></p> <p>A. HEE is discussing the possibility of funding this training and is conducting a scoping exercise on demand.</p> <p>Comment: Ursula James advised the attendees that HEE are currently undergoing significant change and staff are under a large amount of strain and pressure. Ursula James reminded attendees to bear this in mind when waiting for information from HEE.</p>	<p>Cheryl Day</p>
<p>6.</p>	<p>North Yorkshire IAPT, Alison Hobbs, Clinical Lead, Tees, Esk and Wear Valley NHS Foundation Trust</p> <p>Andy Wright introduced Alison Hobbs, Clinical Lead for North Yorkshire IAPT to</p>	

	<p>the attendees.</p> <p>Alison Hobbs provided an overview of the North Yorkshire IAPT Service to attendees focussing on an overview of the North Yorkshire geography, current position in relation to national targets, challenges faced by the service and ways in which the service has changed and developed.</p> <p>Please see the presentation slides for further information.</p> <p>Questions, Answers and Comments:</p> <p>Comment: Caroline Coxon commented on the usefulness of the team and leadership huddles that the North Yorkshire service had instigated. Caroline Coxon recommended that services review the Institute for Healthcare Improvement website for daily huddle for healthcare ideas.</p> <p><i>ACTION: All services to review Institute for Healthcare Improvement website for daily huddle for healthcare ideas.</i></p> <p><i>Q. How do you run your healthy living group?</i></p> <p>A. The group is run in a similar way to stress control. The group is facilitator led due to the large numbers of attendees. It is a taught course and includes behavioural activation. We actively discourage questions during the teaching elements of the course but actively encourage people to come and ask questions in the breaks. We find that people like the anonymity of the group environment.</p> <p><i>Q. I am very impressed by your IPASS mandatory training idea please can information on this be shared?</i></p> <p>A. I will seek confirmation from the Trust that this can be shared but then yes.</p> <p><i>Q. How do you manage cCBT in the context of your geography and accessibility issues?</i></p> <p>A. During the assessment we ask patients what their access is like, if they have access to a computer/device etc. to ensure cCBT is appropriate. Connectivity is more of an issue for guided self-help when we need to contact people via phone.</p>	<p>All Service Providers</p>
<p>7.</p>	<p>PMH IAPT Report – Outcomes and Next Steps, Sara Collier-Hield, Quality Improvement Lead, Perinatal Mental Health, Yorkshire and the Humber Clinical Networks</p> <p>Andy Wright introduced Sara Collier-Hield to the attendees.</p> <p>Sara Collier-Hield presented to the attendees on the baseline findings from the survey recently undertaken by all IAPT Providers in the North Region into IAPT services for women in the perinatal period. Sara Collier-Hield thanked all the attendees for partaking in the survey and advised that a copy of the North Region report would be shared with all Providers.</p> <p>Please see the presentation slides for further information.</p> <p><i>ACTION: Sarah Boul to share the North Region Summary Report on IAPT for Women in the Perinatal Period with all attendees.</i></p>	<p>Sarah Boul</p>

<p>8.</p>	<p>NHS Choices – Information Update Discussion, All</p> <p>Andy Wright advised the attendees that nationally up to date information on NHS Choices for IAPT services had been noted as an issue. Andy Wright proposed to the attendees that the Clinical Network assisted services in ensuring information on NHS Choices was up to date. Andy Wright enquired if services would be interested in the Clinical Network collecting standardised information and ensuring this is uploaded onto NHS Choices. The attendees expressed an interest in this and it was agreed that Sarah Boul would write out to services to collate the relevant information.</p> <p>ACTION: Sarah Boul to write out to services to collect standardised information for NHS Choices.</p> <p>Andy Sainty advised that there is a YouTube video that provides a guide for patients to find IAPT services using NHS Choices. Andy Sainty agreed to share the link with Providers.</p> <p>ACTION: Andy Sainty to share YouTube video on NHS Choices for IAPT services. NB: Link available here: https://www.youtube.com/watch?v=eKQhEOogsBw&feature=youtu.be</p>	<p>Sarah Boul</p> <p>Andy Sainty</p>
<p>9.</p>	<p>Psychoeducational Training Update and cCBT Training Proposal, Andy Wright, IAPT Lead, Yorkshire and the Humber Clinical Networks</p> <p>Andy Wright provided the attendees with an overview of the outputs from the recent psychoeducational training provided by the Clinical Networks. Andy Wright advised that the training had been well attended and well received.</p> <p>Andy Wright also provided the attendees with an overview of the results of a survey conducted into Computerised CBT (cCBT). Andy Wright advised that as a result of the survey the Clinical Network are considering a further training proposal to increase confidence of practitioners delivering cCBT. Andy Wright advised that the training would focus on aspects such as therapist belief and ways in which cCBT can be appropriately promoted to patients. The attendees advised that this seemed like a useful piece of work and would be happy to support attendance of training.</p> <p>ACTION: Sarah Boul and Andy Wright to develop a training proposal for cCBT.</p> <p>Please see the presentation slides for further information.</p>	<p>Sarah Boul / Andy Wright</p>
<p>10.</p>	<p>Any Other Business</p> <p>- IAPT Maps</p> <p>Andy Wright advised the attendees that the Clinical Network has developed an online map of IAPT services in Yorkshire and the Humber. A link to the map has been shared previously for comment and following this has been updated according to the comments received. An updating mapping link will be shared with all providers for a final check before going live on the Clinical Network website.</p> <p>ACTION: Sarah Boul to share IAPT Map link with all Providers. NB: Link available here: http://www.yhscn.nhs.uk/mental-health-clinic/mental-health-network/IAPT/IAPTMaps2.php</p>	<p>Sarah Boul</p>

	<p>- PBR Guidance and PBR Event</p> <p>Andy Wright advised the attendees that the Clinical Network has recently been in discussion with the national PBR team to discuss the implementation of PBR in IAPT services, which is a requirement from April 2018. Andy Wright advised that the national PBR team had agreed to provide a workshop for IAPT Providers and Commissioners on PBR. A proposed date has been agreed as 20 July 2017 – please save the date! Booking information to follow.</p> <p>- Older Adults</p> <p>Andy Wright advised the attendees that the Clinical Network, in conjunction with the National IAPT Programme, would be hosting an Older People in IAPT Conference on 22 June 2017. The conference is currently fully booked however, it was agreed that the slides from the event would be shared with the Provider Network for information.</p> <p><i>ACTION: Sarah Boul to share slides from the Older People in IAPT conference with IAPT Providers Network.</i></p> <p>- Recovery Cards</p> <p>Andy Wright provided the attendees with an update on the Recovery Cards that are being developed by the Clinical Network. The cards are intended to serve as a quick reminder to clinicians regarding elements of recovery such as, definitions, what constitutes caseness, top tips for improving recovery etc. Andy Wright advised attendees that the cards are currently with Professor David Clark for comment but any comments or suggestions that Providers have would be welcome also.</p> <p><i>ACTION: Sarah Boul to share draft Recovery Cards with IAPT Providers' Network for comments and suggestions.</i></p> <p>- Health Education England PWP Widening Participation Survey</p> <p>Andy Wright advised the attendees that the Clinical Network had been supporting a project funded by Health Education England (HEE) to conduct a national survey of initiatives and ideas on widening participation in the PWP workforce and develop recommendations that can be tested by IAPT services and HEIs. Andy Wright advised that the survey had been circulated to all IAPT Providers in the region and encouraged services to complete the survey before 31 May 2017.</p>	<p>Sarah Boul</p> <p>Sarah Boul</p>
	<p>ITEMS FOR INFORMATION:</p>	
	<p>Future Meetings: The next meeting will be held on Wednesday 4 October, 10:00-15:30, Oxford Place Centre, Leeds. To book your place please email sarah.boul@nhs.net.</p>	

Summary of Actions

No.	Action	Owner
1	Sarah Boul to share the draft Integrated IAPT Evidence Based Treatment Pathway and guidance on how to join Yammer.	Sarah Boul
2	All attendees to consider how can your service support best practice and ideas from the Senior PWP Network and what would services like to see from the network and provide feedback to Sarah Boul.	All Providers / Sarah Boul
3	Cheryl Day to advise Providers of confirmed cohort start dates.	Cheryl Day
4	All services to review Institute for Healthcare Improvement website for daily huddle for healthcare ideas.	All Providers
5	Sarah Boul to share the North Region Summary Report on IAPT for Women in the Perinatal Period with all attendees.	Sarah Boul
6	Sarah Boul to write out to services to collect standardised information for NHS Choices.	Sarah Boul
7	Andy Sainty to share YouTube video on NHS Choices for IAPT services.	Andy Sainty
8	Sarah Boul and Andy Wright to develop a training proposal for cCBT.	Sarah Boul / Andy Wright
9	Sarah Boul to share IAPT Map link with all Providers.	Sarah Boul
10	Sarah Boul to share slides from the Older People in IAPT conference with IAPT Providers Network.	Sarah Boul
11	Sarah Boul to share draft Recovery Cards with IAPT Providers' Network for comments and suggestions.	Sarah Boul