

## Yorkshire and the Humber Senior PWP Network 13.10.2016

### Table Top Discussions - Summary

#### 1. What is working well in your service – what does good look like?

- Good team work, good support, support covering during staff shortage, general support and nice atmosphere
- Amazing team
- Little us/them – with counsellors (not between PWP/CBT)
- Enthusiasm and development role
- 1 service doing well with recovery – not prevalence (general consensus)
- 1 service well with good prevalence, not so recovery (general consensus)
- Good wait times – Step 2 and 3
- Good line management
- Drop in self-referral
- Good links with secondary care / single point
- Referrals meeting
- Stress control, Healthy Mind and Depression course masterclasses
- Progression for PWP's
- Positive feedback from PWPs – trusted and respected. Management trusted and valued
- Satisfaction in roles
- Increased access rates
- Offering more choice
- Wait times
- Well career structured pathway
- New senior management training – staff investment
- Clear pathways on waiting times
- Slivercloud / CCBT

#### 2. What challenges are you facing in your role?

- Restructuring
- Time, contracts and aims
- Commissioner expectations - ££=TARGETS
- Data records – Duplications of notes
- “Manager”, No clinical lead for direction
- Using step 2 for inappropriate clients
- Working with complex clients
- PCMIS – cannot test for CM+T?
- Shortages of “qualified PWPs” – filling posts
- Time constraints – conflicting demands / priorities
- Diary management
- Not so good line management
- Therapist drift
- Staff who have been in post a long time ‘do their own thing’
- Staff (PWP) morale – how to keep people motivated, engaged and make feedback constructive
- Inappropriate referrals – not enough step 2 clients
- New role – need clear boundaries and role definition

- Services spread out
- Gap between step 3 and secondary care
- Risk – difficult to assess and refer on
- Changes in service
- Role between PWP and management – being asked to do more management tasks
- Slivercloud / CCBT
- Uncertainty of contract and response to this – negative
- Managing change – models/pathways
- “piggy in the middle” – juggle clinical and leadership “hats”
- Challenging staff
- Care pathway
- Staff rotation

### **3. How can we support each other in this network?**

- Sharing ideas / best practice
- Developing leadership skills
- Recognition / identified role
- Forum – mutual support
- What are the mutual ‘difficulties / challenges’ at step 2
- Innovation
- Understanding differences in roles / areas and similarities
- Translating ideas into actions
- Limit “offloading” and more focused agenda
- Assessment – Pathways – Appropriate pathway for patient?

### **4. Can you identify 3 themes/topics for this network to focus on going forwards?**

- How can we support / work towards delivering meaningful step 2 CPD
- Developing leadership skills
- Learning from each other – may incorporate specific topics i.e. supervision courses, CCBT, BME, old people, young people etc.
- Education – drawing from successful areas
- High turnover – how can we retain staff
- Wellbeing in service
- Accreditation – recognition of role by BACP and other professionals
- People to present things from their service
- ACTION PLANS! – More doing!
- CPD – pooling resources
- NHS England support
- Forum
- Strategies: good and bad
- Legitimising PWP role – some ‘look down nose at PWP’