REPORT TO:	Health Policy & Performance Board		
DATE:	15 November 2016		
REPORTING OFFICER:	Director of Adult Social Services		
PORTFOLIO:	Health and Wellbeing		
SUBJECT:	Improving Access to Psychological Therapies (IAPT)		
WARD(S)	Boroughwide		

1.0 **PURPOSE OF THE REPORT**

1.1 To receive a presentation from Angela Ryan, Assistant Director for Halton, 5 Borough Partnership NHS Foundation Trust, which will provide the Board with an update in respect of Improvng Access to Pychological Therapies (IAPT) delivery and development of the service in Halton.

2.0 **RECOMMENDATION:** That the Board notes the contents and provide comment on the report and presentation.

3.0 **SUPPORTING INFORMATION**

3.1 5BP have held the contract for Halton IAPT services since August 2014. They are the principal provider for Step 2 and Step 3 intervention. They work closely with the third sector organisations to deliver psychological therapies for Halton residents.

3.2 Service Data

Date	Referrals	Entered Therapy	Completed Therapy	Recovery
Aug 14/15	3399	1584	964	40%
2015/16	3889	2402	1391	40.05%
2016/Sep 17	1687	1226	759	44.4%

3.3 Access Recovery Standards

IAPT services are monitored monthly by NHS England in relation to access and recovery standards. At present the Halton service prevalence rate i.e. clients entering therapy is on target at 7.47%, 89.9% of clients who completed treatment were seen within six weeks of referral and 93.7% were seen within 18 weeks of referral. The recovery rate for September is 44.4% against a target of 50% recovery rate.

3.4 Internal waiting list

The service has seen an increase in internal waiting times due to the issue of recruitment, this has been closely monitored on a weekly basis by the Trust and Clinical Commissioning Group (CCG).

3.5 **Staffing Establishment**

The current staffing establishment is 12.13 whole time equivalent for Step 2 and 14.75 whole time equivalent for Step 3, however, there has been issues recruiting Step 2 practitioners; this is a national problem. The Team Manager has worked closely with the local university in order to develop more training courses and at present has five trainees who have started to take active cases and will be fully trained by May 2017.

In terms of skill mix, all Step 3 staff are trained in cognitive behaviour therapy and three are trained in eye movement desensitisation reprocessing (EMDR) and one is trained in couples therapy.

The team offer one to one therapy, group therapy and they are in the process of piloting E-therapy.

The team at present offer appointments Monday to Friday between 8am and 8pm and Saturday mornings.

- 3.6 There have been changes in getting access to clinical space within locations that are not owned by Trust. The Team Manager has been working with agencies to try and find space which is suitable, accessible and within the locality. This has proven to be time consuming and can also cause delay in therapy due to lack of space.
- 3.7 Piloting E-therapy through 'Silvercloud'.
- 3.8 The Team Manager, Lead Psychologist and Senior Management have enrolled on NHS England Capacity and Demand theory and action learning sets where they will complete the Bottom Up Capacity and Demand modelling tool. They will produce clear trajectories that monitor processes to deliver and maintain a sustainable waiting list.

4.0 **POLICY IMPLICATIONS**

4.1 The proposed model is in line with current local mental health strategy and national guidance.

5.0 OTHER/FINANCIAL IMPLICATIONS

5.1 None identified

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 Children & Young People in Halton

None identified.

6.2 **Employment, Learning & Skills in Halton**

None identified.

6.3 A Healthy Halton

All issues outlined in this report focus directly on this priority

6.4 A Safer Halton

None identified.

6.5 Halton's Urban Renewal

None identified.

7.0 **RISK ANALYSIS**

- 7.1 None identified
- 8.0 EQUALITY AND DIVERSITY ISSUES
- 8.1 None identified

9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

9.1 None under the meaning of the Act.