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# Quality Account

# 2022 / 23







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#### **Executive Statement**

Welcome to our Impact on Teesside Quality Account for 2022 – 2023. This has been our third full year of delivering a wide range of services to support the mental health needs of the Teesside population and we are proud of how much we have managed to achieve this year.

We took time this year to look at the **values** we hold as a partnership service and to ensure that these reflect both the expectations of our stakeholders – people using our services, our commissioners and our colleagues in other organisations – and also the enthusiasm and commitment that our team brings to the work they do. We have set up a recognition system to acknowledge and reward staff who have been nominated by their peers as demonstrating these values in their work.

We have made improvements in the ways we engage with people coming into our services based on their feedback and suggestions as well as learning from internal reviews when things haven't gone well. We have an active **Service User group** who have been involved in co-designing some of our information and resources. We plan to involve some of this group in many other areas of service development in the year to come. We set high standards for our service and this year we have been re-accredited by the national Accreditation Programme for Psychological Therapies (APPTS). They were particularly impressed by the high numbers of service users who chose to be involved in this process. We have used some of the areas assessed by APPTS – Effective, Caring, Responsive, Well Led and Safe - to structure this report and to show examples of how we meet each of them.

We are not complacent about our progress and achievements – waiting times in some areas remain higher that we want them to be and this has been a major focus for our Partnership Board and our Management & Leadership team throughout the year. Based on the success we had in introducing our range of 'Get Started With...' groups last year we are now offering a wider range of ways in which people can access help and support to begin improving their mental health from their first contact with our team. You will see more information about our plans to continue service improvement against targets later in this report.

We will continue to work towards meeting service targets and our own expectations over the year to come. On a personal note, this will be the last year I am involved with Impact as I am retiring in the Autumn but I am confident that our team – managers, leads, staff in every role across the team – will continue to do their best to make this a service we can be proud to be part of and proud to deliver.

#### Anne Drummond

Clinical Lead

### Glossary of Terms

СВТ	Cognitive Behavioural Therapy		
IPT	Interpersonal Therapy		
EMDR	Eye Movement Desensitisation and Reprocessing		
IAPT	Improving Access to Psychological Therapies		
CfD	Counselling for Depression		
PWP	Psychological Wellbeing Practitioner		
LTHC	Long Term Health Conditions		
MHSW	Mental Health Support Worker		
VYP	Vulnerable Young People		
TTAD	Talking Therapies for Anxiety and Depression		

### **Values**

We reviewed our values this year to ensure they still reflected who we are and what we do. We involved the staff team and asked them to contribute their thoughts and ideas, Collectively we created the below.



We are Human – We care passionately about the work we do



We'll keep going - Breaking down barriers, endeavouring to get you the right support



We are pioneering - We know that one size does not fit all, creativity and innovation is at the core of what we do



We have integrity – Ensuring quality and transparency in everything we do

### Mission

Using our local knowledge to make a difference to the mental health and wellbeing of the people on Teesside

### Our Year on a Page



17322 referrals



70180 sessions delivered



50.4% Recovery Rate against national average of 49.7%



68.9% Improvement Rate

against national average of 66.4%



### Waiting times

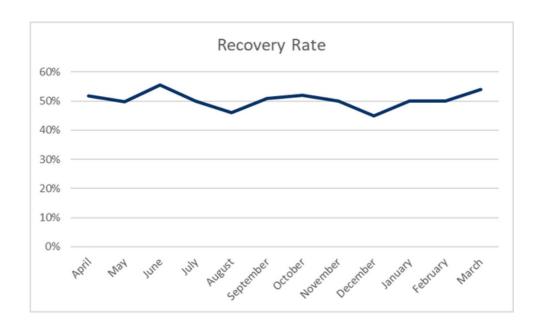
A significant amount of effort has gone into improving the waiting times at Impact. Within our Teesside NHS Talking Therapies for Anxiety and Depression Pathway we have introduced several 'Getting Started with...' Groups, these include options such as Getting Started with Counselling, CBT and Overcoming Trauma. These groups run at different times across the week and are a way for clients to access a meaningful intervention in a timely manner by providing lots of information and socialisation to the models of therapy, and tools and techniques that would be suggested in therapy to get people started in managing their symptoms. We have had very positive feedback from clients who have attended the group and also some who have decided this is all that they required and at review have declined any further support. These groups are not mandatory, and clients can go on to receive 1-1 afterwards if still needed but they are a way of getting people valuable and specific psychoeducation or support quicker.

When looking at the improvements in waiting lists, the only anomaly to this with regards to a significant increase in the number waiting is on the High Intensity CBT waiting list. Nationally we believe this is also replicated across the country due to the demand for this type of therapy and the number of therapists trained to deliver it. Locally, this can be explained as we have had several HICBT therapists leave the service in the last 12-18 months. It has proven very difficult to recruit staff with a high intensity CBT qualification into these positions so we have had to rely upon training places, however trainees have a limited caseload for 18 months as they progress through the course, whilst we have taken the maximum number of training positions available to us, it will take time for this to show in the improvements to the waiting time.

Pathway	Change %	Start of Year 3	End of Year 3	Reduction/ Addition
LICBT	-61%	1153	449	-704
LTHC LICBT	+1%	89	88	-1
SilverCloud	-72%	39	11	-28
HICBT	+17%	1349	1578	+229
Counselling & Wellbeing	-31%	191	132	-59
Counselling for Depression	-38%	1843	1151	-692
Interpersonal Therapy	-58%	395	167	-228
EMDR	+6%	141	150	+9
Foundation	-9%	179	162	-17
Recovery	-25%	224	169	-55
Recovery College	-51%	51	25	-26
Full Service Waiting	-28%	5664	4095	-1397

#### Recovery Rates

One of our main focus over the previous year was to ensure that our recovery rate improved. This was not only to meet the national target of 50% of clients in Teesside NHS Talking Therapies for Anxiety and Depression pathway ending therapy below clinical caseness, but also to more accurately reflect the quality of therapy provided in the service and to match the feedback from clients as they leave the service. To achieve this, we provided drop-in sessions for therapists around the use of the questionnaires, provided guidance around the importance of using these appropriately and discussing with clients the purpose of measures and how their progress is linked to this. We ensured that staff were aware of how to use follow up sessions at the end of therapy, this is a way of reducing any anxiety around the ending of therapy and maintaining progress made in therapy with a couple of appointments spaced out following completion of therapy. Guidance and information is provided to the line managers on a monthly basis around individual recovery rates for therapists and any performance concerns are discussed in line management on a 1-1 basis.



#### Access

Across the year we have focused upon improving Access Rate into the service. Whilst we have not achieved the target of 24%, we have improved our Access Rate from 14.2% the year previous, to 15.7% this last year.

We have contacted all GP surgeries with an update about Impact and requested space to see clients in the GP Surgery. We have been a key part of the Transformation Projects across Teesside, maintained huddles with Secondary Care Services across Teesside and other huddles with wider service involvement. We are keen to ensure that people in the local area are aware how to access support and have made regular updates to our website, including a new section on suitability and the services/interventions we offer. We have plans for our first client bulletin and have a Service User Forum where our leaflets and marketing are reviewed by service users prior to being agreed. We have plans in place for the coming year to further increase this Access Rate, we have new and innovative groups that clients can refer into the service and access quickly with a treatment focus, these include CBT for IBS, CBT for Menopause symptoms and an Overcoming OCD group. We plan to reach out to local communities and referrers to ensure clients are aware of our increasing options and that the options we have available are accessible in a timely manner. We also plan to strengthen and develop our links with local colleges and the University, to offer bespoke groups to their students based upon feedback we have received and to offer a similar option to local Carers Groups with a focus upon self care.





50.4% Recovery Rate against national average of 49.7%



68.9% Improvement Rate

against national average of 66.4%

Teesside NHS Talking Therapies for Anxiety and Depression Pathway (formally IAPT)



Foundation and Recovery Pathway



Counselling and Wellbeing Pathway

To monitor effectiveness of the interventions we offer we use a variety of measurements across all pathways. Within the NHS Talking Therapies pathway we utilise outcome measures in line with national guidance. These include Patient Health Questionnaire (PHQ9) for depression, Generalised Anxiety Disorder (GAD7) for anxiety and the Work and Social Adjustment Scale (W&SAS) to measure functioning and impact of mental health difficulties. For specific presenting problems we also use Anxiety Disorder Specific Measures (ADSM):

Presenting Problem	Specific Measure	
Agoraphobia	Mobility Inventory Assessment (MIA)	
Social Phobia	Social Phobia Inventory (SPIN)	
OCD	Obsessive Compulsive Inventory (OCI)	
PTSD	Patient Checklist DSM-V (PCL-5)	
Health Anxiety	Health Anxiety Inventory (HAI)	
Panic Disorder	Panic Disorder Severity Scale (PDSS)	

With our Counselling & Wellbeing Pathway, it is difficult to provide comparable improvements using NHS Talking Therapies for Anxiety and Depression measures. This pathway is in place for clients who do not meet clinical caseness on the NHS Talking Therapies for Anxiety and Depression minimum data set (PHQ9 & GAD7). Therefore, a reduction in scores and measures of recovery and improvement are not achievable due to the low scores at the start of treatment. Its efficacy can be demonstrated in that of those who started therapy within this pathway in the year, 74% of those went on to complete the course of therapy. 72% saw a reduction in their PHQ9 scores and 69% reduced in GAD scores.

In addition to the PHQ9 and GAD7, we also utilise the Recovery Star $^{\rm m}$  to measure improvement within the Foundation and Recovery Pathway.

The information collected is used to inform interventions and ensure the service we offer remains effective for those accessing it.

In addition to quantitative data we also collect qualitative information to provide a more contextual overview in how our services have impacted the lives of those accessing them. This includes collecting feedback from patient experience questionnaires as well as feedback obtained from complaints and dissatisfaction. This helps us to form a picture of what is going well and what is not so we can make adjustments to improve the services we deliver.



### **Data Quality**

Data quality is a vital part of ensuring the services we deliver are effective

95.5% of problem descriptors recorded

70% appropriate
Anxiety Disorder
Specific Measures
used

Against a target of 65%

99% NHS Numbers Recorded



### **Quality Assurance**

Impact has undertaken a peer review in the final quarter of the year as part of the <u>Accreditation Programme for Psychological Therapies</u> (APPTs). Our review and submitted evidence has been assessed by the accreditation committee and we have achieved accreditation.

This process has allowed us to carry out a full review of the services we deliver and benchmark against nationally recognised standards as well as be reviewed by our peers from other psychological therapy services.

As part of the review, clients of the service were interviewed by the review team. 27 people attended and the review team commented that this was the highest number of clients they had seen attend a review! We would like to thank those clients again for their time and the feedback they provided to us.

We have received some excellent feedback throughout this process with some of our submitted evidence being shared with other services to demonstrate good practice.

#### **Audits**

In additional to carrying out the review we also carry out regular clinical audits to check the effectiveness of the interventions we offer. This includes audits of referrals, assessments, records and notes, data completeness, risk, waiting lists, outcomes and feedback.

We have also carried out audits of referrals and the new acceptance criteria to ensure that people being referred to the service are suitable so we can avoid the need for them to go through an assessment when it is not needed.

#### Feedback from our contract manager

I attend a regular performance meeting for Talking Therapies and at this month's meeting particular reference was made to Impact service for their upward trend and target achievement for the 6 week waits and the upward trend for the 18 week wait. It was recognised that this is due to the hard work and dedication of you and your team in what has been and continues to be challenging times for everyone involved in the Talking Therapies service.

I just wanted to take the opportunity to share with you that while we as commissioners are proud of the hard work and innovative ideas that Impact has as and continues to deliver it is also being recognised on a regional basis. I would appreciate if you could extend this thank you to the team.

Thank you.



976 people report that they felt listened to most or all of the time



866 people reported the service helped them to understand their difficulties better

# of 1000 respondents



934 people reported being involved in the choices about their treatment and care



882 reported they got the help that mattered to them

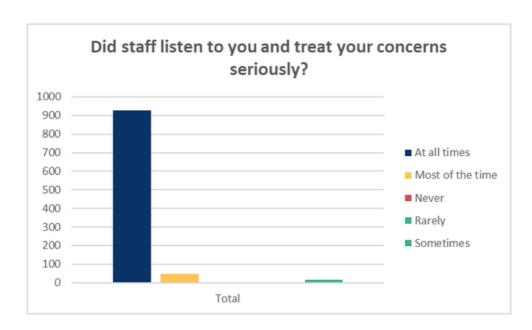
#### Feedback

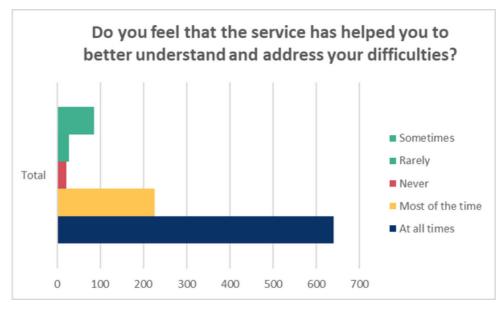
Impact utilises NHS Talking Therapies standard patient experience questionnaires (PEQ's). The PEQ's are issued after assessment and after treatment is complete and provides the space for clients to provide honest feedback on the service they have received.

We received 1000 completed questionnaires which is an improvement on last year.

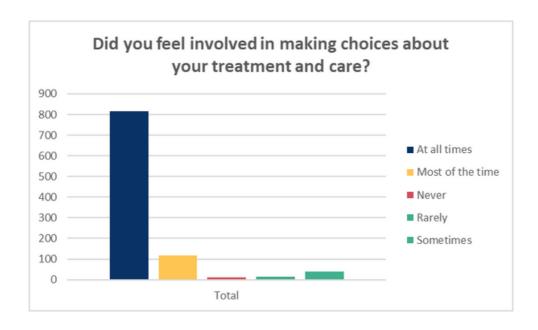
. We also gathered vital feedback via our accreditation process for APPTs.

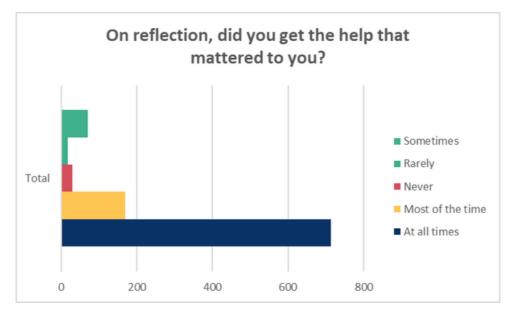
#### PEQ's





#### PEQ's







### PEQ's

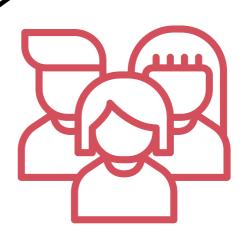
Extremely friendly and caring therapist who has supported me and helped me tremendously through my course of appointments!

I can't express how appreciative I am for the help, support and understanding.

The professionalism is outstanding, and I leave these sessions safe in the knowledge that should I need help in the future, I can be assured of an amazing service.

"Therapist was fantastic. Really listened to what I wanted to work on and get out of the sessions. Didn't rush me and gave me the time and space to think things through and time to reflect on how things are going, what went well and what could be worked on. My life has changed immensely and for the better thanks to the time I have spent with Therapist, I will never be able to thank her enough!"

I've had counselling before but in previous ones sometimes its been more like you turn up and talk and you're asked the same questions, but this time the focus each week has been so helpful. I like that we looked at mindfulness but that it wasn't just dropped in, it was attached to what were were talking about. Last time it felt like this happened, that happened, but this time we looked at the impact those things had on me.



66

I found the CBT Group very helpful.

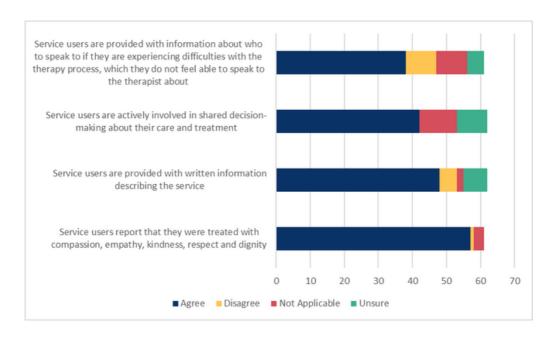
Presenters were sensitive and didn't rush. Helpful and prompt responses to individual questions

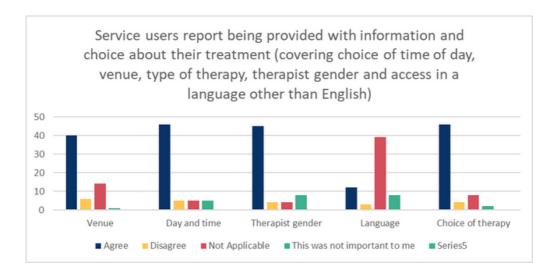
The online sessions were positive and better than I expected as I had not used Teams before so the tech could have been challenging but it was straightforward.

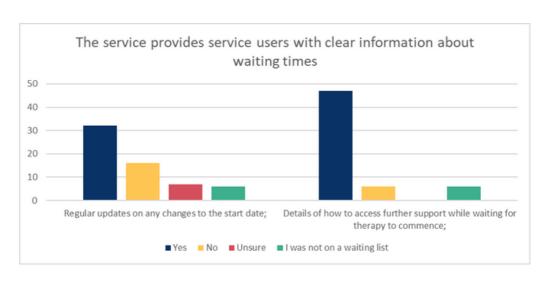
I found group contributions helpful too

The e mailed sessions sent after the group were especially helpful as can read at own pace and continue the work individually to reinforce what we learned.

#### **APPTS Questionnaire**









Transitions pilot
established
between child and
adult services



Increase in partnership working



Service User Involvement Forum established



Training and CPD for staff to enhance skills and improve treatments offered

We review the feedback we receive via questionnaires, complaints, in sessions, and from other organisations we partner and work with. This has helped us to enhance the services that we offer and ensuring they are meeting the needs of the local communities we serve.

In the latter half of last year we set up a service user involvement forum whereby people who had accessed the service were invited to become involved in providing feedback. We plan to enhance this further in the coming 12 months by widening the scope of what clients can be involved in which will include contributing to external communications, including a client newsletter, reviewing and contributing to more group session content, become part of the recruitment process and provide their expertise in their experience of the service and informing us how we can improve. Their feedback so far has been invaluable and improvements have already been made across the service as a result.

We have included some of the amazing work that has been carried out by the team in response to feedback and needs our local areas.



We have been developing our connections over the last 12 months which includes Tees Valley Sport, Health Watch and Flipping Pain. This increases both visibility within the community sector but also develops more working partnerships and signposting opportunities. Flipping pain connection gives up more training and CPD options for staff which in turn improves the support we are able to provide for our clients

Pilot CBT for menopause group ran in conjunction with James Cook University Hospital (JCUH) radiology department

We have also been working together with Alliance's Child and Family Team to create a pilot project for 16 and 17 year olds transitioning from child services into adult. This project has seen 2 High Intensity CBT Therapists be seconded from the children's team into Impact to review the process of transition and provide therapeutic support

We are involved in transformation work across Teesside which aims to bring together services which previously worked independently to form partnerships across all four localities as well as establishing links and better working practices with other wellbeing support areas such as substance use, social care, domestic abuse, Citizens Advice Bureau, and housing

New system within Duty Supervision for requesting information from referrals has seen an increase in the speed which we receive this information, and prevents clients waiting long periods before being assessed

restart of the birth reflection collaboration with JCUH midwives.

Development of groups across the counselling pathway including Getting Started with Counselling and IPT, as well as Grief and Loss



We started to build relationships with external agencies and community groups. We connected with:

- START (Substance and alcohol misuse service) in Hartlepool
- Recovery Connections (Integrated substance misuse team) Middlesbrough
- Middlesbrough Alcohol Centre of Excellence (MACE)Teesside Hospice

We were able to work collaboratively and offer a tailored 6 week bespoke well-being package created from the Recovery College model for existing clients at START, Recovery Connections and MACE.

For Teesside Hospice we delivered The HOPE course which is a Macmillan accredited course and is open to anyone that had been effected by cancer.



Foundation Pathway Groupwork

Developed a 1st step to support 8 week Recovery
Focused Group which includes managing mental
health, anxiety-awareness and exploring techniques,
unhelpful thinking styles and challenging them.
-What is Mental Health Recovery?
-CHIME Recovery model and goal setting
-Well-being toolkit
-Importance of well-being, balanced life, sleep,
routine, and structure.
-Uses the evidence based Recovery Star to set goals
and measure personal outcomes.

Recovery College
Volunteer Quality Assurance Group
(Lived Experience Volunteers) set up to
regularly review materials and make
recommendations for change based on
their feedback and feedback from
learners. The group also look at
developing new material for new courses.



91% of staff report they feel supported with professional development



91% of staff report there are clear processes to raise concerns about standards of care

### From APPTs Staff Survey



92% reported that the service actively supports their health and wellbeing



84% report they have received a well structured appraisal

### Staffing

We constantly review our staffing structure, skills mix and wellbeing initiatives to ensure we have a qualified and skilled workforce to deliver interventions to the people of Teesside. We pride ourselves on the quality and quantity of training, development and progression opportunities for staff which is reflected on the feedback we receive from staff in line management and supervision, but also during the staff survey we conducted for our APPTs review.

The service structure is made up of a variety of staff with diverse roles and skills sets to enable us to provide a range of support

### Management and Leadership Team

Clinical Director

Locality Managers

Operations and Data Manager

Performance and Development Clinical Manager

Quality and Governance Manager

Digital Development Lead

Individual Pathways Leads & Seniors

### **Clinical Team**

High and Low Intensity CBT
Therapists

Counselling Team

Recovery and Foundation Team

Mental Health Support Workers

Recovery College Tutors

### **Core Support Team**

Admin Leads and Seniors

Admin Team

Specialist Pathway Leads (Perinatal, Long Term Health Conditions, Vulnerable young People, Peer Support and Volunteers)

Champions (Veterans, Neurodiversity, Older Adults, Diverse Communities, Domestic and Sexual Abuse)

We have been awarded funding for the coming year to grow our team with employment advisors! They will be funded by the Department of Work and Pensions and will provide employment support to clients who may be struggling to stay in work or find employment because of the difficulties they are experiencing

### Wellbeing

We have many wellbeing initiatives for staff which include:

- New Staff Recognition Scheme where staff can nominate colleagues to receive an award for living our Impact values
- Health and Wellbeing Committee who oversee wellbeing and provide the team with news and events as well as reviewing and implementing staff suggestions
- Working Together days to bring the team together to collaborate and share information and learning

In addition to Impact wide initiatives, each partner also has their own employee wellbeing strategies





#### Comments we have received from staff

66

Staff well being is at the forefront of line management. Managers work with practitioners to improve stress when possible. Management are approachable to discuss any well being concerns.

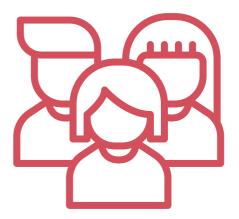
This is a wonderful organisation to work for, very supportive of staff and committed to health & wellbeing.

66

I feel there is a robust process in place to deal with staff wellbeing - which is needed in the climate we work in with high demands on the service. It is a good service with loads of support available for both clients and staff.

66

Very satisfied with my work environment and the competencies and processes in place.





100% of staff have a DBS Check



98% of staff have completed safeguarding adults training

the remaining staff are new starters



98% of staff have completed safeguarding children training

the remaining staff are new starters



Partners are compliant
with the NHS Data
Security and
Protection Toolkit

### Complaints and Incidents

Supporting our clients to raise their concerns is important to us. This feedback helps us to inform improvements and helps to educate and inform staff to support change and continuous improvement. The service recorded 10 formal complaints throughout the period, however all informal complaints and reports of dissatisfaction with the service were investigated and responded to.

Complaints centred around the following themes:

- ·Communication
- o Staff communicating incorrect information.
- o Miscommunication of appointments.
- ·Waiting times

6 of the complaints were upheld and resulted in updating staff training and reviewing our methods of communication.

#### Risk Assessments and Safety Planning

Service users receive assessments using a standardised template which informs a person centred discussion. It is regularly updated and includes risk assessment and management. Risk management will include the development of a risk management plan with the service user which may include referral on to the Crisis Team or other services as appropriate. For service users with known complex or other needs we offer an enhanced '3 Plus assessment' to allow additional time to establish the best pathway for their needs, including liaison with other services.

Staff are given training in risk management on an annual basis. A version of the training is given to admin staff as the first point of contact with clients to ensure they understand their responsibilities within the process.



### **Data Protection and Confidentiality**

The Data Security and Protection Toolkit is an online self-assessment tool that allows organisations to measure their performance against the National Data Guardian's 10 data security standards. All organisations that have access to NHS patient data and systems must use this toolkit to provide assurance that they are practising good data security and that personal information is handled correctly. Organisations must make an annual submission supported by appropriate evidence to demonstrate that they are working towards or meeting the required standards. The deadline for the DSPT 2022/23 submission 30 June 2023. Impact partners continue with their preparations for submission. In June 2022, the submission date for 2021/22, Alliance and Middlesbrough and Stockton Mind submitted a 'Standards Met' return. The Senior Information Risk Owner keeps the Impact Board fully informed of Information Governance issues affecting the organisation. Information governance is overseen by the Impact Governance Group. Staff are training in data security annually by completing mandated e-learning and in house briefings.

### Staff Training and Continuous Professional Development

All staff delivering therapy and counselling have received, or are currently receiving, formal accredited training in the interventions being offered. All qualified staff are also members of an appropriate professional body which provide ethical standards that the therapist must adhere to maintain membership. Each service area has a detailed plan to ensure staff stay abreast of their development and to ensure that the interventions being offered are following the latest evidence. This year staff have attended CPD in the following areas:

Staff are provided with clinical supervision and regular line management to support their development and professional standards. All clinical supervisors have received training in providing supervision which enables them to monitor ethical practice and adherence to NICE guidance and therapeutic standards.



This year staff have attended CPD in the following areas:

- Substance and misuse training The nature of addiction
- Equality, diversity and inclusion LGBTQ courses
- Trauma awareness
- · CBT skills,
- · Understanding personality disorders
- LICBT Interventions for OCD & Health Anxiety
- Group Facilitation Training
- Various BACP Masterclasses
- Social Anxiety Disorder Awareness
- Bespoke Mental Health Thrive as a PWP
- Phobia CPD Training
- · Resilience Training
- Understanding Autism Training workshop
- Compassionate Customer Service
- Mental Health First Aid
- Why do we hold onto People
- · Working with LTCs & Medically unexplained Symptoms
- Social Phobia
- Complex Grief Suicide
- Working with Clients who are involved in Social Services
- · Blood and Needle Phobia
- Pre Trial Therapy

Also other CPD opportunities for individuals which ranges from funded qualifications to adhoc training opportunities which individuals are passionate and interested in attending. For instance:

- CFD
- IPT
- DIT
- LTHC
- PWP Supervision
- HI Supervision
- CFD Supervision
- Trauma-Focused Cognitive Therapy for PTSD
- Narrative Exposure Therapy for Refugees and Asylum Seekers
- EMDR
- Managing Conflict & Toxicity within Senior PWP Role
- Complexity in Primary Care
- Anger Management
- Handling difficult conversations
- Narcissistic and Emotional Abuse





**Client Experience** 



**Client Access** 



**Clinical Effectiveness** 









#### Client access

Aim Ensuring clients access the care they need so they have the best chance of getting a good outcome

Over the next year we are aiming to increase the number of clients coming into the service, this is in line with our local Access Target, which amounts to just over 1500 people entering treatment each month. Whilst this is a performance target, we also want to ensure that our local communities are aware of the support on offer to them and we offer much more than one to one therapy. As detailed within this report, we do have a wait for some of our step 3 one to one options. So, whilst we want to increase awareness of the service, forge and develop new relationships with local services and increase referrals into the service, we need to do this in a planned and measured approach.

We do have an increasing number of groups that clients can access shortly following assessment. Delivering psychoeducation and intervention in this way has meant clients are receiving it much sooner than waiting for one to one support and for some this has been all they have needed. We also have new groups in development that are entirely treatment focused and which would reduce the pressure on the one-to-one waiting lists by delivering interventions that would usually be delivered individually. We plan to expand upon this work and complete some targeted work within specific areas. These include:

- Expanding our work and links with local colleges and the University to ensure they are up to date and aware of the services available they can refer into
- Expand our Long-Term Health Conditions Pathway North of Tees with the local Hospital and Health Pathways including Pain Management, IBS and Oncology
- We will also be contacting local Carers Groups and offering a bespoke, psychoeducation based course within each locality.

As well as these planned developments, towards the latter part of the third year of this contract we completed some work on re-engaging with GP Practices, providing them with information around their clients on our waiting lists and to explore opportunities for offering therapy from their Practice. We have also been involved heavily in the Transformation Projects across Teesside which will help to increase access to our service. These pieces of work are ongoing and will also contribute towards us increasing access and awareness of the service.

#### Clinical effectiveness

### Aim To improve the management of our client journeys through the utilisation of evidencebased practice

Within the third year of the contract, we achieved our recovery based performance target of 50% in 10/12 months, though this was a significant improvement and over the 12 month period we achieved an average of 50.4%, we do want to improve further upon this and ensure that not only do we meet this target, but exceed this wherever possible.

This we believe will more likely reflect the quality of work completed in the service. To help us to achieve this target we are in the process of setting up some working groups around both recovery rates but also our assessment process. The aim of these working groups is to review the efficacy of the interventions offered in each pathway and develop improvement plans where needed. We also plan to involve service users in reviewing our group and online materials to ensure they continue to meet the needs of the clients accessing the service.

We have recently developed and shared a suitability criteria for the service with referrers and clients on our website and we will be focusing on ensuring that we adhere to this. The purpose of this is to ensure clients who do not meet the remit of the service are referred unnecessarily and that clients who come into the service are on the appropriate pathway and intervention for their needs in line with NICE guidelines. We will be sharing this work at a full team working day in early July with an aim of updating the staff team.

Following the analysis from the working groups, ongoing support and CPD will be offered both in house and through external opportunities to ensure that therapists are progressing with their clinical skills and clients are receiving a high quality intervention. Line management will continue to include recovery rates as a target, performance will be reviewed support to the team provided where needed.

We will continue to review specific needs of the service and develop champion roles based on needs to help focus the work needed in each area.

#### Client experience

Aim To ensure that clients have positive experiences in our care and are involved in developing and improving our services

We aim to keep the clients experience of the service at the forefront of everything that we do. We are aware that waiting for one-to-one therapy can be disappointing and we have a range of meaningful interventions that can be accessed as an alternative or as a way of engaging with the service, learning techniques to help support and progress before one-to-one therapy where needed. We also offer targeted support calls where needed or requested whilst waiting and aim to keep in touch with clients to ensure that they are kept up to speed on their wait.

Over the past year, our Service User Involvement Forum has expanded significantly, we plan to continue this great work and seek feedback and suggestions around the way in which we communicate with clients, our policies and procedures. An example of this for the coming year will be work we are looking to complete around how to simplify our terms of service, contract and confidentiality agreements as well as involving clients in recruitment and development of group and online materials. We plan to conduct regular meetings with service users in the coming year to gather valuable feedback on how people experience the service from referral to discharge. This will inform our action plans for this year where we want to improve not only the number of feedback forms we receive but increase the number of clients having a positive experience. We will continue to learn from dissatisfaction and complaints and hope to have a reduction of the number of complaints we receive in the next year.

Another development over the year is aimed at the younger clients coming into the service. We have developed a Transitions Pathway for those moving from Children's Mental Health Services into Adult Services and aged 16-18. We have employed two High Intensity CBT therapists who have completed a course targeted at working with children up to 18 and they will work to improve relationships with local services, offer tailored therapy to our younger clients aged 16-18, upskill the wider team around parental engagement and overall improve the client experience for those coming into any part of the service. This has been developed following reviews of engagement and outcomes for this client group and feedback received whereby the transition between children's and adult services can be a challenging one with them each being structured and delivered differently. We hope this pilot will make this transition much smoother to enable young people to have a better experience.

### ICB Statement

LALBE

North East and North Cumbria

First Floor, 14 Trinity Mews North Ormesby Health Village Middlesbrough TS3 6AL

28 June 2023

Ms Jill Best Quality and Governance Lead Alliance Psychological Services Ltd 24 Yarm Road Stockton-on-Tees TS18 3NA

Dear Ms Best

Impact on Teesside Quality Account 2022/23
Response on behalf of North East and North Cumbria Integrated Care Board (ICB)

The ICB takes seriously their responsibility to ensure the services they commission are providing safe, high quality services, and therefore welcome the opportunity to review and comment on the annual Quality Account for Impact on Teesside.

The ICB recognises the efforts made by Impact to improve the waiting times by introducing the 'Getting Started With...' groups with options for Cognitive Behavioural Therapy (CBT), counselling, and overcome trauma. However, it is still a concern for the Commissioners that there remains a significant waiting time for those waiting for High Intensity CBT.

It is disappointing to read that the majority of the last year's aims remain below target in terms of waiting times and access to the services. The commissioners have noted the slight improvement from 14.2% to 15.7% in these rates.

It is, however, encouraging to read Impact's plans to introduce treatment-focused groups including Menopause symptoms and Overcoming OCD, and to strengthen links with local colleges and universities to offer these bespoke groups to their students.

The Commissioners are reassured to read the data quality targets in relation to the recording of problem descriptors recorded, Anxiety Disorder Specific Measures used, and NHS numbers recorded are above target.

It is positive to read that Impact has completed a review of their services and benchmark against nationally recognised standards, and that Impact involved customers in this review.

The customer feedback is reassuring to read in that out of 1000 patients, 976 felt listened to most of or all the time, 866 of patients reported the service helped them to understand their difficulties better, and that 934 patients reported being involved in the



### ICB Statement

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choices about their treatment and care. The narrative provided by patients who have accessed the service is encouraging to read.

The Commissioners recognises that Impact has focused on training and Continuing Professional Development (CPD) to enhance staff skills and improve treatments offered.

The ICB is encouraged to read the progress Impact has made in building relationships with external agencies in 22-23 including START substance and alcohol misuse service, Recovery Connections, Teesside Hospice, and Middlesbrough Alcohol Centre of Excellence. This will be an invaluable benefit to the people of the Tees Valley area to have a joint approach to mental health services. It is also reassuring to see the additions of the Foundation Pathway Groupwork and Recovery College within the service.

The Commissioners are also pleased to see the positive staff feedback returned following the staff survey, which will be further boosted by the staff wellbeing initiatives introduced by Impact Employee Assistance Programmes, Health and Wellbeing Committee, and Staff Recognition Scheme. It is also reassuring to see that staff Safeguarding training figures are above target. The ICB does however note the difficulty Impact has had with recruiting staff with a high intensity CBT qualification, and many of these therapists have left the service in the last 12 months.

It is noted that the actions following the 6 complaints raised have addressed issues with staff training and methods of communication and we look forward to seeing how these improve the service in 2023/24.

The ICB supports Impact's quality improvements for 2023/24 which are focused on improving waiting times, communication, service user involvement, partnership working, monitoring suitability, audits, recovery and improvement of outcomes, staff training and CPD, and pathway developments. We look forward to continuing to work with Impact on Teesside to assure the quality of services commissioned in 2023/24.

Yours sincerely

**Chris Piercy** 

Director of Nursing & Quality

North East and North Cumbria Integrated Care Board