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# Quality Account

# 2023 / 24







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#### **Executive Statement**

Welcome to the Impact on Teesside Quality Account for 2023-2024. This has been the fourth full year of delivering Impact on Teesside's services to the people of Teesside. We are proud of what we have achieved this year and focused and ambitious for the future.

I joined Impact on Teesside as Clinical Lead in September 2023. It's very clear to me that Impact's greatest strength is the passion and expertise of our people and our shared commitment to making a difference for Teesside.

Joining a new organisation always involves developing an understanding of that organisation's strengths and challenges. We are performing well as a service against key targets we are commissioned to meet and we are proud of the ways in which our team often go above and beyond to help Impact's clients. We also know we have improvements to make, in particular to address waiting times in some of our service areas. We are continuing to make improvements in how we design and deliver our services, to ensure people can access appropriate help and support from the point of first contact with Impact, and to make sure we offer the most clinically suitable options to meet our clients' needs.

We are also focused on improving how we communicate with the people of Teesside about what Impact can offer them, and how we communicate with clients about the options available to them within the service. Mental health jargon and the language associated with psychological therapies can be extremely confusing. We are working hard to review and improve our documents and communications with clients and very grateful to be able to draw on the experience and insights of our Service User Group to help us in this work.

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.

Looking to the future, we are proud to celebrate Impact on Teesside's successes and grateful to the Impact on Teesside team as a whole for its collective contribution to achieving them. We are also committed to further improving the quality and performance of the service, building on our strengths and tackling areas of challenge effectively. I look forward to reflecting on our progress in next year's Quality Account.

Laura Timms 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	
ADSM	Anxiety Disorder Specific Measure	
CAMHS	Child and Adolescent Mental Health Service	

### **Values**



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



17449 referrals



88815 sessions delivered



51.8% Recovery Rate

against national average of 49.9%



67.8% Improvement Rate

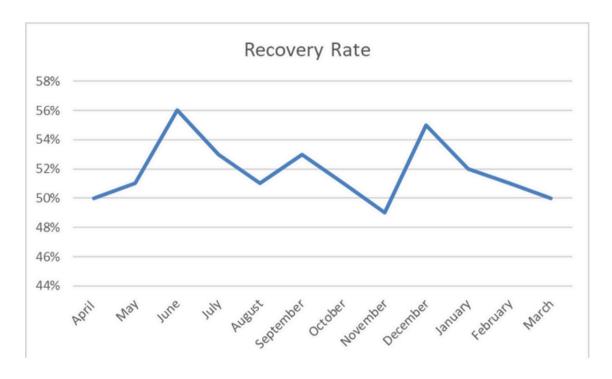
against national average of 66.5%



#### Clinical effectiveness

Aim To improve the management of our client journeys through the utilisation of evidence based practice

We are proud that our team has consistently achieved our monthly recovery target of 50% in 11 out of the past 12 months, reaching a high of 56% in June. This remarkable accomplishment reflects our team's unwavering commitment and dedication in supporting the people of Teesside in improving their mental health and wellbeing. We extend our heartfelt gratitude to every team member whose contributions have been pivotal in reaching this target. As we celebrate this success, we remain focused on sustaining and building upon this performance in the future.



#### Clinical effectiveness

Aim To improve the management of our client journeys through the utilisation of evidence based practice

The table below shows some of the work that has been carried out over the last 12 months to contribute to achieving the recovery rate target.

Action	Details and Outcomes	
Suitability focus.  -Training delivered around service suitability and guidance regularly shared  -Audits – service and pathway suitability  -Audit – check on ADSM use  New Huddle - CAMHS	Feedback supports an increased use of the suitability criteria within the duty team and this guidance has been shared widely with referrers into the service.  Regular audits have ensured we are adhering to suitability for Primary Care Therapies and also that within the service we were offering the most appropriate intervention at the earliest opportunity to help increase the likelihood of this being effective.  Audits completed to check use of ADSM measures to increase the likelihood of this progress being captured.  We have new and regular huddles with CAMHS and local children's services as part of our transitions pathway to discuss cases before agreeing to referral into the service.	
Line Management Focus upon Recovery Rates	Within line management the importance of recovery rates were routinely discussed, training delivered around the importance of using measures clinically. Drop-in sessions were made available to therapists to ensure thorough understanding and guidance reinforced around the use of ADSM measures and ensuring therapists were keeping files up to date with regard to presenting problems especially where this linked to the use of an ADSM.	

Action	Details and Outcomes	
A focus upon missed opportunities	Missed opportunities were highlighted and action taken, for example further attempts than previous were made to contact clients who had completed groups in an effort to capture the progress they had made, often clients had reported progress and declined any further input but had not completed a final MDS/ADSM.	
Increased access to data	Work was completed alongside our data analyst and performance and delivery lead to identify any presenting problems with low recovery rates and highlight potential areas for training across the team.  Pathway leads given increased access to their pathways performance within the wider service recovery and areas for improvement highlighted. Reviewed in 6 weekly meetings with performance and delivery lead.	

"THE SERVICE I RECEIVED WAS EXCELLENT AND MY
THERAPIST WAS EXTREMELY HELPFUL AND PROFESSIONAL
SHOWING ME RESPECT AND COMPASSION AND
UNDERSTANDING."

#### Client access

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

In the past year, our team has worked diligently to enhance our service accessibility and outreach. We implemented a number of actions to do this, however this did not lead to an increase in access rates and we maintained our rate from the previous year. Our efforts highlight our commitment to stability and reliability in service provision and our commitment to ensuring the people of Teesside are aware of the services we offer and how to access these if needed. It has now been recognised by the National Team that Access Rates were an unhelpful target and not a measure of quality. This target has now been removed for all services and the focus is upon courses of treatment; clients engagement with services and attending two or more treatment sessions. Based upon numbers recorded the previous year, we expect to perform well within this target over the coming 12 months.

The below table outlines the work we carried out to try and increase awareness of our service and the number of people in our community accessing it.

Action	Detail and Outcomes	
QR Code linking to referral form & shorter assessment for groups	2 QR Codes were developed, one leading to the website/self-referral form. Another was attached to promotional materials for groups and led to a new referral form, this collected information specific to each group and led to a faster assessment process and access to the group sooner.	
Offering Psychoeducation Group within local college	Following discussions within a local college student support team, several attempts were made to complete this group face to face. Whilst the college had confidence the group would be well attended and the research completed from feedback at Freshers events supported this, the group did not receive sufficient referrals and did not go ahead.	

#### Client access

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

Action	Detail and Outcomes	
Menopause Group	A 6 week integrative group was developed, this has ran on two occasions. Feedback for the group has been positive, however referral numbers are not at the expected level and are currently being reviewed.	
IBS Group	Despite attempts to engage with local health services and writing to each GP Surgery with a promotional leaflet & QR Code, we have not received sufficient referrals to go ahead with this group. This is currently under review.	
Increased promotion	Increased promotion has been carried out, we have a quarterly bulletin to stake holders with information on the service and new options, we have written to GP's to encourage referrals into the service and requested a presence in the GP surgery to strengthen these links. We attended almost all promotional opportunities and these include specialist perinatal and physical health events, Freshers events at college and have engaged with the referrers to attempt to increase those entering the service.	

"VERY HELPFUL SERVICE, FRIENDLY PEOPLE,
HELPFUL WITH VARIOUS THINGS, MAKE YOU
FEEL AT EASE SPEAKING TO THEM. WOULD
HIGHLY RECOMMEND TO OTHERS"

### Client experience

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

Clients remain at the forefront of everything we do and this has been reflected in the feedback we have received and the outcomes we have achieved. The national Talking Therapies Team have introduced new targets this year which are 48% of people to reach reliable recovery and 67% reliable improvement.

### Reliable Improvement:

- A referral is considered to have shown reliable improvement if there is a significant positive change in their condition after completing a course of treatment.
- This improvement is measured by comparing their initial scores on tailored questionnaires (specific to their anxiety or depression) with their scores at the end of treatment.
- The goal is to demonstrate a meaningful improvement in symptoms.

#### 1. Reliable Recovery:

- A referral is deemed to have reliably recovered if they meet both the criteria for recovery and reliable improvement.
- Specifically, they must:
  - Transition from being a clinical case (i.e., meeting the criteria for anxiety or depression) at the start of treatment to not being a clinical case at the end of treatment.
  - Show a significant improvement in their condition.
- Essentially, reliable recovery combines successful symptom reduction with sustained positive change.

Based on these targets, Impact on Teesside is currently one of only 43% of services across the country who achieved a reliable improvement rate above the national target and one of only 33% achieving the reliable recovery target during this year. More information on this can be found under the 'Effective' section of the report.

We have continued to work with users of our service and have met in person and online to begin working together on our strategic aims for user involvement across the service. We are planning further meetings in the coming months to look at specific areas and we are already implementing some of the ideas that have been shared. We attended the lived experience forum in Stockton to share information about the service and to answer questions raised by the group. Forums such as these give us valuable insight into how the service is perceived and informs our communication strategy.



51.8% Recovery Rate



67.8% Improvement Rate

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



Foundation and Recovery Pathway



Counselling and Wellbeing Pathway

### Counselling and Wellbeing Pathway

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 always achievable due to the low scores at the start of treatment.

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.

#### Foundation and Recovery Pathway

In addition to the PHQ9 and GAD7, we also utilise the Recovery  $Star^{\mathsf{M}}$  to measure improvement within the Foundation and Recovery Pathway. The star incorporates the 5 step journey of change and where they score in each area is an indication of what they are struggling with. There are 10 areas to the star:

1.Managing mental health

2.Physical health

3.Living skills

4.Friends and community

5.Use of time

6.Relationships

7.Addictive behaviour

8.Home

9.Identity and self-esteem

10. Trust and hope

Each area is scored in the following way:

Stuck (1-2 on the scale)
Accepting help (3-4)
Believing and trying (5-6)
Learning (7-8)
Self-reliance (9-10)

Action plans for each individual are created following completion of the star and achievement is monitored by repeating the star throughout the persons time with the service. The Foundation and Recovery Pathway had an overall improvement rate of 93% on the Recovery Star over the year for those clients completing 2 or more recovery stars.

### Talking Therapies for Anxiety and Depression

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)

### Talking Therapies for Anxiety and Depression

As well as achieving the recovery rate target, we have worked hard to ensure the interventions offered are as effective as they can be. Below is some of the work that has been carried out over the year:

Reduce waiting times

Reduce waiting times		
Action	Detail and Outcomes	
Increase group capacity – number of groups and times available	Across the year we have increased our group offer, offering a wider range of times and days to meet demand. We now have two Counselling groups running in person due to feedback from clients.	
New treatment focused group opportunities - OCD	The introduction of the OCD group as a treatment group was very positive and this has now been increased. This group also led to considerations for next year and changing groups to being more treatment focused with more sessions at a greater level of detail.	
Quarterly targets for reductions on waiting lists & allocation of clients from pathway leads	Each pathway worked alongside the Performance & Delivery Lead for the service, setting targets for each quarter for the waiting list. Keeping this achievable but making sure progress was being made, often allocating long waiters and highlighting and acting on areas of concern.	
Performance management – focus upon DNA & Cancellations	Several pathways have focused upon cancellations and DNA's and working with their teams with performance management, discharging those not attending in a more timely manner and allocating resulting in availability to the Appointments booking team more quickly. This has been especially effective with the Counselling and LICBT teams, the HICBT team this is more a work in progress but has led to a specific therapy contract being written up for these clients.  Performance & Delivery Lead has sent out reports highlighting those with high numbers of cancellations/DNA's to pathway leads and line managers to follow up.	

### Talking Therapies for Anxiety and Depression

Reduce waiting times

Action	Detail and Outcomes	
Increase therapy team – training opportunities	We have taken on a number of trainees, this does not come with an immediate increase in capacity but pick up largely from a select pool of trainee suitable cases. However, on completion of the course this will lead to a significant increase in capacity. In April 2024 we had 10 PWP's qualify who began training in Year 4 and this will move us much closer to the waiting time targets.	
Admin roles – Appointments Booking Team	From within the existing admin team, 3 Appointments administrators were selected to focus upon the booking of appointments. They work to book from the waiting list into available appointments, ensure cancellations time is used productively and highlight to pathway leads	

"THE GROUP CBT COURSE I ATTENDED HAS GIVEN ME A GREAT STARTING POINT AND PRACTICES TO CONTINUE WHILE EXPERIENCING ANXIETY.

IT WAS ALSO A GREAT OPPORTUNITY TO SEE THAT OTHER PEOPLE ARE HAVING THE SAME ISSUES/THOUGHTS AS I AM."

### Talking Therapies for Anxiety and Depression

Assessments within 10 days of referral

Action	Detail and Outcomes	
Enhanced referral form	Enhanced referral form created and now in use, this provides the assessor with more information on client difficulties, other services involved and goals ahead of their assessment, reducing the time needed to explore these within the assessment. Also highlighting where we may not be the most suitable service and signposting earlier.	
Targeted focus on assessments periodically	On two occasions we had a focus on assessments from across the team, each lasted a fortnight and we completed a high number of assessments within each time (data needed) reducing the waiting time for assessment and moving us within target on each occasion for new referrals.	
Admin roles – Appointments Booking Team	Admin team roles specifically for booking appointments, long term plan of rescheduling those waiting from outside of target into newly created appointments at a sooner date.	
Performance Management – use of cancellations	Line management focus on use of cancellations, with notice assessments to be added into cancelled therapy sessions. Emails sent from admin team requesting this alongside the cancellation notification.	

"ALTHOUGH I WAS VERY NERVOUS AND ANXIOUS DUE TO MY ISSUES AT THE BEGINNING, I WAS ABLE TO RELAX AND TALK OPENLY TO MY THERAPIST. HE HAS MADE ME FEEL COMFORTABLE AND HELPED ME TO FIND MY WAY THROUGH MY PROBLEMS AND ANXIETIES. HE IS HELPING ME TO LEARN HOW TO DEAL WITH MY FEARS AND PROBLEMS IN A MORE PRODUCTIVE AND HAPPY WAY.

I AM SO HAPPY TO BE WORKING WITH [THERAPIST]. PEOPLE AROUND ME ARE NOTICING THE CHANGES IN MY HEALTH AND HAPPINESS."

### **Employment Advisors**

Impact received additional funding to add Employment Advisors to our team!

The aim of the Employment Advice service is to offer clients information advice and guidance on a range of employment support needs. This includes employment support to find a new job, to continue in the same job or to find suitable alternative employment.

Advisors can offer a range of support which may include -

Supporting clients to liaise with employers to help overcome barriers when returning to work after a period of sickness absence or maintain their current job if adjustments are needed.

Support to find employment with clients - Supported Job search / CV and cover letter preparation / interview skills practice / in work benefit calculations / identifying skills shortage and signposting training / opportunities. The advisor can also support with finding helpful links / hints and tips on job searching sites.

Support to return to work after illness – Support with reasonable adjustments / support to contact their employer and discuss return to work options / planning your first day back at work and what to expect (reduced hours / job mentoring or buddy scheme / working with colleagues and adapting to new or existing duties.

Support to maintain job role – Discuss any barriers client may have in current job / how to contact employer and discuss change of duties / reduce working hours / access training opportunities to change career / discuss reasonable adjustments.

During the 7 months the service has been active, we have seen some fantastic results with 44% of clients seen finding employment and 76% retaining or returning to employment.

"THE TOOLS AND ADVISE [EA] PROVIDED
WERE REALLY HELPFUL AND I'VE BEEN
IMPLEMENTING THEM ON MY DAY TO DAY
AT WORK. IT WAS A REALLY GOOD
EXPERIENCE COMBINED WITH THERAPY TO
HELP WITH MY WORK RELATED ANXIETY."

"DON'T THINK I COULD OF ASKED FOR A
BETTER ADVISOR. HE KEPT IN TOUCH TO
SEE HOW THINGS WERE GOING WHICH
MEANT ALOT. HE WAS ALWAYS SMILING
AND HAD A POSITIVE ATTITUDE."

"PLEASE GIVE [EA] SO MUCH PRAISE, NOT ONLY DID SHE HELP ME GET A JOB, SHE HELPED ME MASSIVELY WITH MY MENTAL HEALTH AND AN EAR TO LISTEN. THE SUPPORT SHE GAVE ME WAS AMAZING AND I'M SO GRATEFUL FOR HER HELP"

### **Data Quality**

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

95.9% of problem descriptors recorded

74% appropriate
Anxiety Disorder
Specific Measures
used

Against a target of 65%

99% NHS Numbers
Recorded



### **Quality Assurance**

Following achieving accreditation from the <u>Accreditation Programme for Psychological Therapies</u> (APPTs) programme, we have continued to work within this quality framework. We have been involved in reviewing other Talking Therapies services and have attended the annual forum to keep abreast of any new developments. We are also in the process of joining 'the knowledge hub' which is a new online platform for APPTs members to share knowledge and best practice with colleagues.

As part of our ongoing commitment to quality we have reviewed the meetings we currently have in place to ensure there is clear oversight and accountability across the service. As a result of this review we are introducing 3 new meetings to replace previous quality and governance meetings that we had in place. These are:

- Operations
- Clinical Oversight and Strategy
- Clinical Professional Development

These meetings will provide clear and robust governance of overall service delivery and strategy.

#### **Audits**

In addition 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 continued to audit professional referrals into the service against our suitability criteria. This streamlines the process for clients who fall outside of our criteria and whose needs are best met elsewhere, we are able to signpost accordingly and avoid them completing an unnecessary assessment.

"I CAN'T SPEAK HIGHLY ENOUGH OF THE QUALITY OF CARE I RECEIVED FROM MY THERAPIST. SHE SHOWED A GREAT DEAL OF UNDERSTANDING AND GENUINE EMPATHY. SHE HAS HELPED ME THROUGH A DIFFICULT TIME IN MY LIFE AND CAN'T THANK HER ENOUGH."



1476 people report that they felt listened to most or all of the time



1274 people reported the service helped them to understand their difficulties better

# of 1523 respondents



1380 people reported being involved in the choices about their treatment and care



1305 reported they got the help that mattered to them

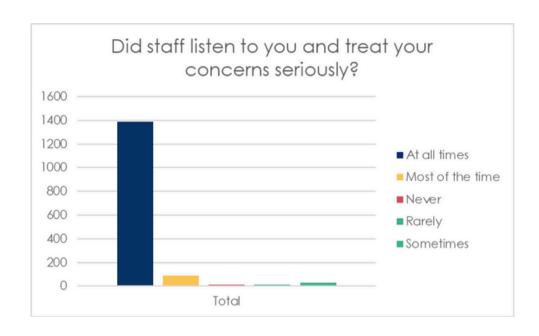
#### **Feedback**

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 1523 completed questionnaires which is an improvement on last year.

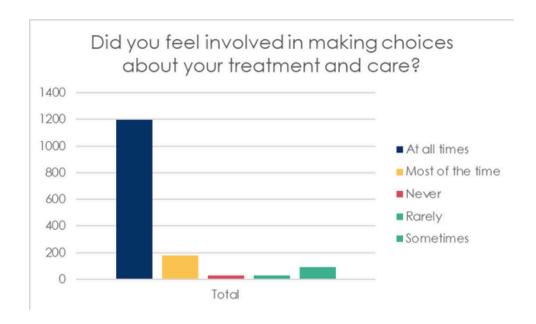
. We also repeated the questionnaire that we sent out to clients last year as part of the APPTS accreditation process

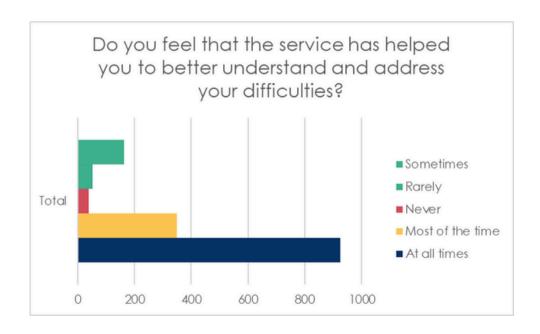
#### PEQ's



"I REALLY COULD NOT SING [THERAPIST]" PRAISES ENOUGH, HE WAS
EXTREMELY KIND, PATIENT AND EMPATHETIC WHILST ALSO
CHALLENGING SOME OF MY OCD BELIEFS WHICH HAS MADE A HUGE
DIFFERENCE TO MY LIFE:) I NOW FEEL LIKE A LITTLE WEIGHT HAS BEEN
LIFTED, AND ALTHOUGH IT'S AN ONGOING JOURNEY, I WOULD NOT
HAVE MADE THIS MUCH PROGRESS IF IT WASN'T FOR THE TREATMENT I
RECEIVED. THANK YOU SO MUCH."

#### PEQ's

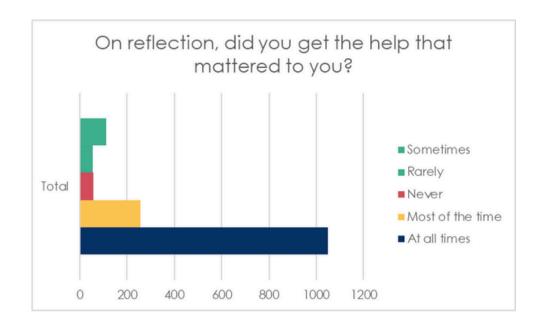


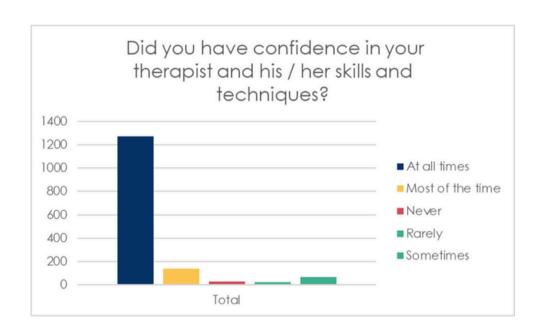


"THIS HAS BEEN SO HELPFUL TO ME AND I ACTUALLY
LOOK FORWARD TO MY APPOINTMENTS.

MY THERAPIST IS LOVELY AND I AM COMFORTABLE AND
HAPPY HAVING MY APPOINTMENTS WITH HER."

### PEQ's

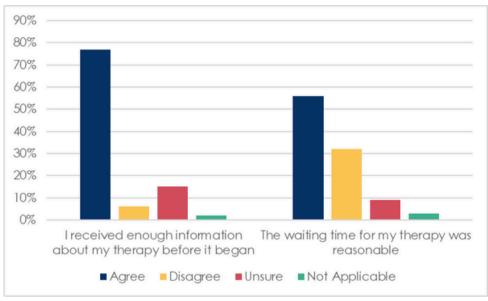


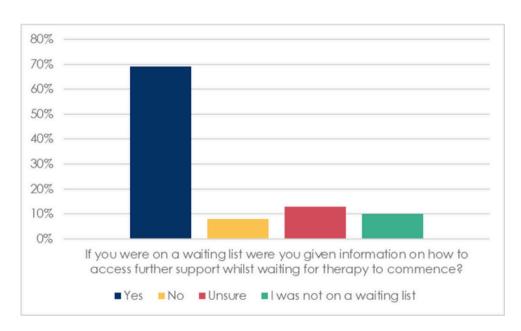


"BEFORE STARTING THE COURSE I COULDN'T SAY DAD
WITHOUT BREAKING DOWN THE SERVICE HAS HELPED
IMMENSELY, ALSO LOOKING BACK AT PAST TRAUMA AND
TALKING THROUGH HAS HELPED THANK YOU [THERAPIST]"

#### **APPTS Questionnaire**

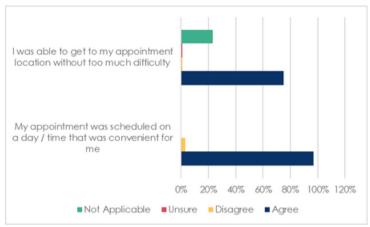
For consistency we repeated the questionnaire sent to clients as part of our APPTs accreditation last year. We received 195 responses which is a great improvement on the 62 responses we received last year. Some of the feedback given can be seen throughout this report.

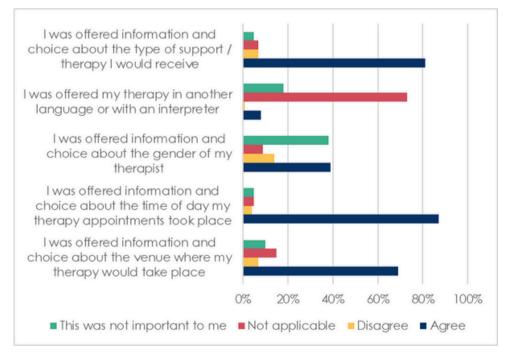


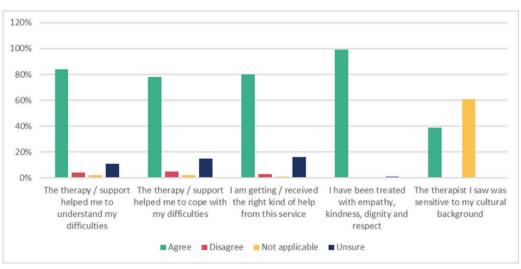


"MY THERAPY HAS BEEN VITAL TO ME AND HELPED ME TO UNDERSTAND MY EMOTIONS BETTER."

### **APPTS Questionnaire**







#### **APPTS Questionnaire**

The below table shows the comparison of scores from last year

	22 / 23 Agree	23 / 24 Agree	Difference
I received enough information about my therapy before it began	77%	77%	0%
The waiting time for my therapy was reasonable	50%	56%	6%
My appointment was scheduled on a day / time that was convenient for me	88%	97%	9%
I was able to get to my appointment location without too much difficulty	59%	75%	16%
I was offered information and choice about the venue where my therapy would take place	66%	69%	3%
I was offered information and choice about the time of day my therapy appointments took place	75%	87%	12%
I was offered information and choice about the gender of my therapist	74%	39%	-35%
I was offered my therapy in another language or with an interpreter	19%	8%	-11%
I was offered information and choice about the type of support / therapy I would receive	77%	81%	4%
The therapy / support helped me to understand my difficulties	82%	84%	2%
The therapy / support helped me to cope with my difficulties	74%	78%	4%
I am getting / received the right kind of help from this service	73%	80%	7%
I have been treated with empathy, kindness, dignity and respect	93%	99%	6%
The therapist I saw was sensitive to my cultural background	93%	39%	-54%
I have been asked if and how I would like family, friends or others close to me to be involved in my care	42%	30%	-12%
I agreed a goal for my treatment with my therapist, and they checked how I was progressing towards this goal during treatment	63%	70%	7%
I was actively involved in shared decision-making about my care and treatment	68%	76%	8%
I would recommend this service to a family member or friend if they were looking for similar support	87%	92%	5%

In comparison to last year, we have observed an increase in the majority of the results. In instances where there has been a decrease, it is primarily due to clients indicating that the particular aspect was either not applicable or not important to them.









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.

We have begun pulling together our service user involvement strategy for the coming year and have met with service users both online and in person. These valuable meetings are a collaborative and creative space to discuss how we can better involve service users in the design and delivery of services. More focussed sessions will be planned over the next few months and our strategy will be shared with our commissioners once complete.

"MY THERAPIST WAS ABSOLUTELY AMAZING AND EXCELLENT ...

HELPED ME TO UNDERSTAND MY AREAS OF DIFFICULTY AND TO WORK TOGETHER AND FORMULATED STRATEGIES TO ELEVATE DIFFICULTIES.

[THERAPIST] WAS EXTREMELY THOROUGH IN HER THERAPY. SO CARING, HELPFUL AND SUPPORTIVE AND SO DOWN TO EARTH. I LOOKED FORWARD TO EVERYTHING SINGLE THERAPY SESSION AND WOULD LIKE TO THANK [THERAPIST] FOR PUTTING MY LIFE BACK TOGETHER AGAIN.

THANK YOU SO MUCH ..."

The next few pages details some of the excellent work, innovation and positive work taking place across the service

Attend a clinic fortnightly at Middlesbrough job centre where we promote Impact on Teesside and support people to refer if appropriate, we also offer employment advice and support the work coaches by answering queries and offering guidance. we are about to start the same clinic at Hartlepool job centre and have agreed to attend monthly wellbeing hubs at Stockton job centre.

Teesside University
Lecture / Presentation to
2nd Year trainee
Midwives every cohort.

Closer working
relationships have been
developed with CYP
secondary mental care
services aiming to reduce
inappropriate referrals into
Impact

Middlesbrough Community
Mental Health Team- The
team ran a pilot course in
partnership for those waiting
for an assessment around
neurodiversity. This
commenced at the end of
Year 4 and is due to complete
end May 2024

We have appointed 3
members of the admin
team to take control of
booking appointments. This
has allowed us to keep up
to date with incoming
requests. We are hoping
this will have a positive
impact on our waiting lists.

Set up links and a pathway with North Tees and Hartlepool Hospital to replicate the Birth Reflections pathway that we have with JCUH. (Use of Badger net and regular review meetings)

Have set up a buddy system for trainees as a means of accessing support and being able to shaddow therapy from a qualified therapist CBT days 2 times per year to help build relationships and feel more like a team 1/2 day CPD offered to staff every other month including from external trainers

Recently created a
Neurodiverse champion for
the service. Giving all staff
a point of contact for
Neurodivergence within
the service both for clients
and staff

Set up and ran treatment groups for OCD which has been a successful and has meant clients have not had to wait for 1-1 treatment.

Depression and anxiety treatment groups will be running in the early part of year 5

Involvement in the transformation agenda for mental health across

Teesside

All the Employment Advisors's are currently undertaking training to become accredited Money Guiders. This will enable them to offer stronger advice and guidance on matters such as debt, benefits, savings, budgeting and pensions.

We are working collaboratively with other services across Teesside.

Sharing innovations and best practice across the area. We are working closely with South Tees

Wellbeing forum, making sure services across the region are aware of what we do and making us aware of what they do. We have a practitioner working within JCUH, working as a point of contact between JCUH and Impact.

The team have carried out some incredible work over the last year and their passion for helping the residents of Teesside is evident in everything that they do. We thank our incredibly hard working staff for their drive and commitment to constantly improve and innovate in response to the needs of our clients. Please see some examples of living our values and going above and beyond to ensure our clients get the support they need.

"Employment Advisor supported a Romanian gentleman who required an interpreter to find work. She needed to liaise with the job centre to help him get benefits and then arranged an interview or him at a job agency in Darlington. She went with him and also arranged an interpreter so that he could register with the agency. He is now working full time."

"IMPACT provided the psychological therapy (PcECfD - High intensity Counselling) for a client that had experienced a previous traumatic birth that was presenting with high levels of anxiety in current pregnancy. IMPACT referred to Mental Health Midwife at JCUH where by they completed a collaborative bespoke birth plan and carried out regular appointments at JCUH in the room where by the client experienced the trauma to help alleviate distress. IMPACT therapist provided appropriate treatment which in turn helped the client manage her anxiety and support her recent positive birth experience."

"I'D JUST LIKE TO LET YOUS KNOW THAT [FOUNDATION AND RECOVERY WORKER]
HAS BEEN 1 OF BEST SUPPORT PEOPLE I'VE MET IN MY LIFE SHE'S BEEN THERE THRU
WORST AND HARDEST TIME OF MY LIFE SHE NEVA GAVE UP WHEN I WAS AT MY
LOWEST AND WOULD FORGET APPOINTMENTS ECT SHE'D ALWAYS DO A PHONECALL
CHECK AND SHE WAS A VERY GENUINE CARING LADY WHO'S AN ASSET TO YOUS
ON IMPACT TEESSIDE AS SHE MADE A GOOD IMPACT ON MINE FOR BETTER 
I COULD FEEL COMFORTABLE TO TRULY BE MY SELF AND OPEN UP TO HER WITHOUT
FEELING I WAS GETTING JUDGED ECT AND SHE WAS ALWAYS SMILING AND KNEW
SHE GENUINELY CARED



81% of staff report they feel supported with professional development



78% of staff report there are clear processes to raise concerns about standards of care

### From APPTs Staff Survey



81% reported that the service actively supports their health and wellbeing



81% report that job targets and workload are reasonable and manageable

### 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 Lead

Service 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

**Employment Advisors** 

### **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)

Referral and Assessment Coordinator

**Duty Supervisors** 

We welcomed our new Clinical Lead, Laura, this year! She is a fantastic addition to the team and we continue to see the services we deliver go from strength to strength under her leadership

### Wellbeing

We have many wellbeing initiatives for staff which include:

- Staff Recognition Team where staff can give colleagues messages of appreciation and gratitude
- 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

THE SERVICE IS A BENCHMARK FOR OTHER SERVICES ACROSS THE COUNTRY. WE ARE AN INNOVATIVE, FORWARD THINKING, STANDARD SETTING SERVICE THAT I AM PROUD TO WORK FOR.

I LOVE MY JOB,
AND MY EMPLOYER.
I FEEL WELL
SUPPORTED AND
VALUED.

THE WORK LOAD QUESTIONS IS A DIFFICULT ONE, ON GOOD DAYS EVERYTHING IS FINE BUT WHEN THERE IS COMPLEXITY, LONG AND DIFFICULT ASSESSMENTS, RISK REVIEWS AND FOLLOW UPS NEEDED, THE WORK LOAD BECOMES VERY DIFFICULT TO MANAGE AS WE HAVE TO DO IT ON TOP OF THE PATIENT - CONTACTS.

HAVING WORKED FOR OTHER IAPT PROVIDERS I
HAVE FOUND ALLIANCE TO BE REALLY EFFECTIVE
IN SUPPORTING STAFF WITH A GOOD WORK LIFE
BALANCE, WHILST ENSURING SERVICE NEED IS
ALSO MET. AS A LINE MANAGER TO OTHER
CLINICIANS THIS ETHOS REALLY HELPS ME IN
SUPPORTING THEM, PREVENTING BURN OUT AND
NURTURING A COMMUNITY FEEL WITHIN THE
WIDER SERVICE AS 'ONE TEAM'.

THERE IS A HIGH LEVEL OF SUPPORT WITH THE SERVICE TO ENABLE ME TO DO MY JOB.
THIS SUPPORT IS MORE THAT JUST PROFESSIONAL.



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 4 formal complaints (reduced from 10 last year) throughout the period, however all informal complaints and reports of dissatisfaction with the service were investigated and responded to.

### The formal complaints were:

- A client was unhappy about a safeguarding referral being made. Following review this
  complaint was not upheld as given the information available, it was the correct course of
  action to take.
- Client had contacted the service to complain about the treatment she had received and
  the therapist. Client stated the treatment did not meet her expectations and when
  expressing her dissatisfaction, she was unhappy with the way the therapist dealt with it.
  The client was reallocated to another therapist and the complaint was upheld. Further
  training was given to the staff member in question.
- Client reported a bad experience with professionals in the past and had asked to record therapy sessions. The complaint was raised following the therapist declining this request. This is currently still under investigation and local resolution.
- A letter was received regarding a client who had relocated from another area where they
  were receiving specialist support for emotionally unstable personality disorder. Client
  was not happy that her referral had been declined within secondary care and then had
  been referred to Impact who were unable to give the level of support they were receiving
  before. This was discussed with our secondary care colleagues and a joint response was
  provided.

#### 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. This is currently under review to ensure the updated NICE guidelines are reflected.

### **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 2024. Impact partners continue with their preparations for submission. In June 2023, the submission date for 2022/23, Alliance and Teesside 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 Quality and Governance Manager who works closely with the Data Protection Officer to ensure continued compliance. Staff are training in data security annually by completing mandated e-learning and in house briefings.

### Staff Training and Continuous Professional Development

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.

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.

"KIND, THOUGHTFUL, SYMPATHETIC AND CONSIDERATE
THERAPIST WHO LISTENED. SHE WAS FRIENDLY AND GUIDED
ME INTO MAKING PRODUCTIVE DECISIONS TO MOVE MY LIFE
FORWARD INTO A MORE POSITIVE 'PLACE'. THANK YOU."

This year staff have attended CPD in the following areas:

- · Gender Identity
- LICBT Interventions for OCT & Health Anxiety
- Working with LTCs & Medically unexplained conditions
- Social Phobia
- · Working with Neurodiversity
- Working with Complexity Factors at step 3
- Vicarious Trauma
- Complex Grief Suicide
- Working with Grief & Loss
- · Working with clients who are involved in Social Services
- · How the hormones and menstrual cycle affect female mental health webinar
- ADHD
- Mental Health PWP Conference
- Making friends with Uncertainty
- Working Trauma for Counsellors
- Delivering CBT with Autistic Clients
- Compassion Focused Therapy
- · Eating Disorders
- · Working with Shame

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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:

- Extended Dynamic Interpersonal Therapy (eDIT)
- Trauma-Focused Cognitive Therapy for PTSD
- PWP Supervision
- HICBT Supervision
- HILTC
- CFD
- Narrative Exposure Therapy for Refugees and Asylum Seekers
- EMDR
- IPT
- LICBT
- HICBT

# Quality Improvements for 2024 / 25







**Clinical Effectiveness** 









# Quality Improvements for 2024 / 25

#### Clinical effectiveness

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

We want to continue to support as many people as possible in achieving their goals and improving their mental health and wellbeing. We are pleased that we achieved the new targets set in the last year however we want to ensure that we maintain this. We aim to do this by ensuring we get things right at the entry point to the service.

With this in mind we are reviewing and redesigning our referral and assessment process to collect more meaningful information to enable us to make better and more informed decisions about appropriate treatment. We want to reduce the need for clients to go through assessments when this may not be the most suitable service to meet their needs. We understand how difficult it can be for people to share their stories with multiple services in order to find the right support.

We are redesigning our website and support hub for clients to improve the information and self help materials available. After the success of implementing treatment groups this year, we also plan to expand this into new groups including anxiety and low mood.

"MY THERAPIST WAS AMAZING, SHE LISTENED AND HELPED ME UNDERSTAND THINGS AND PUT PLANS INTO PLACE FOR ME. SHE GAVE ME TASKS TO DO TO HELP WITH MY UNDERSTANDING AND STRATEGIES THAT I CAN USE GOING FORWARD SHE WAS FRIENDLY, DOWN TO EARTH AND A GREAT THERAPIST"

# Quality Improvements for 2024 / 25

### Client experience

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

We want people accessing our service to have a positive experience from referral to discharge. We plan to review all of our communication materials this year with our service user group to ensure we are communication as effectively and clearly as we can. This will include all letters, text messages, emails and promotional materials.

This will also include group materials and presentations to ensure they are consistent, relatable and useful to those using the service and attending these sessions.

We understand that waiting times for some one to one treatment options are not where we would like them to be and we also understand the impact this has on those waiting. We want to set ourselves realistic targets in reducing these lists but also providing other meaningful support to people. Feedback we have received has indicated that people don't always have an awareness of all the services and support available to them and we aim to improve this over the next 12 months.

We are working with our service user group to create our service user involvement strategy. The group have accessed different areas of the service and are keen to share their stories and experiences with others, especially around groups where people might be nervous or unsure what to expect. We are looking forward to see what we can achieve over the next 12 months and providing an update on this in the next account.

"I WANT TO HELP MAKE A DIFFERENCE AND FEEL I HAVE SOME GOOD IDEAS"

### ICB Statement



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

28th June 2024

Ms Jill Best Quality and Governance Lead Impact on Teesside 24 Yarm Road Stockton-on-Tees TS18 3NA

Dear Ms Best

Response on behalf of North East and North Cumbria Integrated Care Board (ICB) for Impact on Teesside Quality Account 2023/24

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 for 2023/24.

The ICB recognises the efforts made by Impact to achieve the monthly client's recovery target of 50% in 11 out of the past 12 months, reaching a high of 56% in June and it is encouraging to read that Impact will remain focused on sustaining and building upon this performance in the future

The ICB recognises the actions Impact have implemented and the work that has been done to enhance service accessibility and outreach and note that this did not lead to an increase in access rates but maintained the rate from the previous year. We recognise that this target has now been removed for all services and the focus is upon courses of treatment. It is encouraging to read that Impact expect to perform well within this target over the coming 12 months.

It is positive that the new targets introduced for reliable recovery and reliable improvement, Impact is currently one of 43% of services across the country who achieved a reliable improvement rate above the national target and in the top 33% achieving the reliable recovery target during this year. It was also encouraging to read that The Foundation and Recovery Pathway had an overall improvement rate of 93% on the Recovery Star tool over the year for those clients completing two or more recovery stars.

It is pleasing to note that the additional funding in 2023/24 to fund Employment Advisors to the team resulted in some positive results with significantly more clients seen finding employment and retaining or returning to employment.

The ICB note the customer feedback received is reassuring to read and this is an improved position on the previous year. Out of 1523 completed questionnaires, most clients indicated they felt listened to most of the time throughout their treatment, that they felt involved in making decisions about their treatment and care, and reported the service helped them to understand their difficulties better. The narrative provided by patients who have accessed the service is encouraging to read.



### ICB Statement



The Commissioners recognise that Impact has given focus to training and Continuing Professional Development (CPD) to enhance staff skills and improve treatments offered.

The ICB is encouraged that links and a pathway have been set up with North Tees and Hartlepool Hospital to replicate the Birth Reflections pathway that is currently in James Cook University Hospital and that closer working relationships have been developed with children and young people secondary mental care services aiming to reduce inappropriate referrals into Impact. It is also reassuring to see the partnership working with Middlesbrough Community Mental Health Team regarding a pilot course for those waiting for an assessment around neurodiversity which commenced at the end of Year 4, and we look forward to seeing the outcomes.

It is positive that Impact are working collaboratively with other services across Teesside, sharing innovations and best practice across the area whilst working closely with South Tees Wellbeing forum, making sure services across the region are aware of what the services provided by Impact.

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 98% of staff have completed the Adult and Children Safeguarding training with the remaining staff being new starters.

It is positive to read that Impact had 10 Psychological Wellbeing Practitioner's qualify in April 2024 who began their training in Year 4, and we look forward to seeing how the additional Psychological Wellbeing Practitioner's improves waiting time targets.

The ICB supports Impact's quality improvement priorities for 2024/25 which are focused on maintaining last years achieved targets, redesigning referral and assessment process, redesigning website, and support hub, implementing new groups including anxiety and low mood, improving waiting times, communication, service user involvement and create a service user strategy.

We look forward to continuing to work with Impact on Teesside to assure the quality of services commissioned in 2024/25.

Yours sincerely

COBres

Kate OBrien

Director of Nursing, Mental Health, Learning Disabilities, Autism and Complex Care North East and North Cumbria Integrated Care Board