



QUALITY ACCOUNT

2024 – 2025





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Executive Statement

Welcome to the Impact on Teesside Quality Account for 2024-2025. This marks our fifth year of delivering services to the Teesside community, and we are proud of our achievements and excited for the future.

Impact's greatest asset is the passion and expertise of our team, united in our commitment to making a difference for the people of Teesside.

Impact meets our key targets and we often exceed expectations in the support we offer our clients. However, we recognize the need to improve in various areas, including waiting times in particular. We continue to refine our service design and delivery, to ensure timely and appropriate support from the first point of contact with us and to ensure we are offering the most suitable clinical options for our clients' needs.

We maintain high standards and remain accredited by the national Accreditation Programme for Psychological Therapies (APPTS). We have structured this report around APPTS's assessment areas: Effective, Caring, Responsive, Well Led, and Safe, showcasing how we meet each criterion.

Looking ahead, we celebrate our successes and appreciate the collective efforts of the Impact on Teesside team. We are committed to further improving our service quality and performance, building on our strengths and addressing challenges that remain in our service delivery. I look forward to sharing our progress in next year's Quality Account.

To the best of my knowledge, the information contained within this Quality Account is accurate.



Clinical Lead

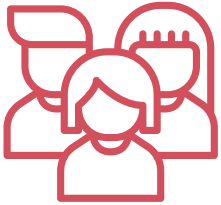




Glossary of Terms

CBT	Cognitive Behavioural Therapy
IPT	Interpersonal Therapy
EMDR	Eye Movement Desensitisation and Reprocessing
TTAD	Talking Therapies for Anxiety & Depression
IAPT	Improving Access to Psychological Therapies
CfD	Counselling for Depression
PTSD	Post-Traumatic Stress Disorder
PWP	Psychological Wellbeing Practitioner
HSSCP	Hartlepool & Stockton-on-Tees Safeguarding Children Partnership
LTHC	Long Term Health Conditions
MHSW	Mental Health Support Worker
VYP	Vulnerable Young People
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



17396 referrals



**73,423 sessions
delivered**



49.0% Reliable Recovery Rate

National Target - 48%



68% Improvement Rate

National target - 67%



APPTS

ACCREDITATION PROGRAMME
FOR PSYCHOLOGICAL
THERAPIES SERVICES

ACCREDITED
UNTIL

23rd April 2026



Achievement and Progress Towards Targets

Client experience

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

We always want people accessing our service to have a positive experience from referral to discharge. The table below shows the plans we made to meet this target and how this has been implemented.

Action Planned	Update & Outcome
Review all of our communication materials this year to ensure we are communicating as effectively and clearly as we can. This will include all letters, text messages, emails and promotional materials.	Over the past year, we have completed a comprehensive review of all our communication materials—including letters, text messages, emails, and promotional content—to ensure they are clear, effective, and accessible. In doing so, we have taken into account data about local levels of health literacy to better reflect the needs of our population. As part of this work, we have updated several existing letters and introduced entirely new ones where needed. We are also excited to launch a newly developed leaflet that reflects these improvements.
Review group materials and presentations to ensure they are consistent, relatable and useful to those using the service and attending these sessions.	We've taken time to review and refresh our group materials so they feel more relevant and helpful for the people attending. Our facilitators have led this work to make sure everything is clear and consistent. We've also updated the language in our automated emails and messages to ensure increased understanding. And based on feedback, we've made some thoughtful tweaks to our group hubs, confirmation emails, and how we communicate session details.
Feedback we had received suggested that people don't always have an awareness of all the services and support available to them, for example earlier opportunities to engage with the service and receive meaningful support/intervention.	We have developed a dedicated webpage that outlines all the options clients can access. This includes detailed information about available groups, what each group offers, and introductory overviews to help clients understand how each option could support them. In addition, we have a new letter ready to launch for all clients who have recently joined a waiting list. This letter highlights the support options they can access sooner—such as group sessions and employment advice—and signposts helpful resources for those who choose to wait.



Achievement and Progress Towards Targets

Clinical effectiveness

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

This year we have continued to meet all recovery based targets across the year. We have made significant changes to the way clients access our service which over the next year we will build on further. Our learning from this will enable Impact to contribute to ongoing service development work across the wider region. We have introduced new approaches to audit and management information reports to provide richer data to guide clinical and operational decision making.

Further details on all of these are in this section below, however the biggest change within the service focusing upon this aim has been the introduction of Wysa - our new Digital Front Door.

Wysa is an AI-powered mental health support tool designed to enhance the way we engage with individuals at the earliest stage of their journey with us.

By integrating Wysa into our service, we aim to:

- Streamline the intake process by gathering essential clinical information before the initial assessment.
- Improve clinical decision-making through more accurate and timely clinical data.
- Ensure better triage by matching referrals to the most appropriate clinician based on individual needs.

Wysa is still in the early days of its use within our service, having gone through a stringent process of quality checks and personalising the system to our specific needs.

We anticipate that over the coming year Wysa will improve the efficiency and effectiveness of our front-end services, ultimately leading to better outcomes for those we support. Clients also receive access to the Wysa app at the point of engaging with the service. This app encourages clients to regularly check in to review their mood, provides psychoeducation matched to their presenting problem, and includes a chat bot to help them to identify the resources most likely to be of benefit to them.

Effective



**49% Reliable
Recovery Rate**



68% Improvement Rate

Teesside NHS Talking Therapies for
Anxiety and Depression Pathway



**99% improvement on
at least 1 Recovery
StarTM measure**



**769 clients accessed
the service**

Foundation and Recovery Pathway

Counselling and Wellbeing Pathway



Effective

Talking Therapies for Anxiety and Depression

Reliable Recovery & Reliable Improvement

This was the first year following the introduction of new targets for all TTAD services nationally, with a move from standard Recovery to Reliable Recovery and Reliable Improvement.

We are pleased to report that over the year we managed to exceed both of these targets by 1 percentage point.

Recovery based Target	Target	Impact Performance
Reliable Recovery	48%	49%
Reliable Improvement	67%	68%

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.
- 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



Effective

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). We always report a high percentage of appropriate use of these measures, this is likely linked to our reliable recovery and improvement rates.

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)

Effective

Talking Therapies for Anxiety and Depression

Performance Summary in comparison to the previous year.

Performance Point	23/24	24/25	Notes
Completing Therapy	5,542	6,127	As well as meeting recovery targets, this has been achieved alongside increasing the number of clients who are discharged having completed therapy, an increase of 585 clients discharged over the past 12 months.
Accessing Therapy	11,695	11,636	Across years 4 and 5 of the contract, we have made attempts to increase both Access and referrals (below). However, despite significant efforts, both have remained steady across the two years
Referrals	17,449	17,396	As above, this has remained steady for several years now.
Assessed within 10 days	31%	69%	We have made significant progress with this target. Utilising online assessment booking and capacity management has led to an improvement, however with this target we are always reliant on clients attending assessments and booking within 10 days to meet the target. The introduction of Wysa, we hope and expect will further improve performance for this target.
DNA Rate	14%	13%	Set pieces of work have been completed to improve upon this target, including improving clarity regarding missed appointments, changing internal processes and completing audits.
Productivity	66%	68%	Even with the improvement, our delivery of groups means that these percentages are not a true reflection of productivity. If an individual client DNAs or cancels a group session, this is not lost capacity, as the group goes ahead with the other participants.



Effective

Talking Therapies for Anxiety and Depression

Waiting Times

As well as achieving the recovery rate target, we have worked hard to ensure that we are as effective a service as possible. Another main area we have focused upon is our waiting time to access treatment. We have made improvements on our average wait in days for both Step 2 and Step 3 therapies, with step 2 reporting less than 90 days on average wait for therapy for 11/12 months (the one month we did not meet this it was 91 days!). The below table includes some of the work that has gone into reducing our wait for treatment.

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. This has been the second year in a row we have increased our group offer and this has had a noticeable impact on the speed at which clients are accessing meaningful intervention. As well as others, we have increased our group offer for perinatal clients and Introduction to Counselling.
New treatment focused group opportunities	Building on the success of our treatment group for OCD, we have introduced full treatment groups focused upon Low Mood/Depression and Generalised Anxiety Disorder. These are now up and running and we are increasing capacity to meet the demand. Based on really positive client outcomes from the Grief & Loss Group, some updates were made to the content and this is now a stand alone treatment group, rather than an introductory group.
Counselling Team - Caseload balance and session numbers	We have reviewed all counsellor caseloads and introduced new percentages to help to manage the balance of clients across the working week. We have also introduced a new model to attempt to better balance wait time and need.
Performance management – focus upon DNA & Cancellations	For the second year in a row this has been a focus, more noticeably this year this has had an impact alongside other pieces of work on overall performance. With an increase in our productivity and reduction in DNA sessions year on year. Meaning that appointments are freed up sooner to be allocated to those waiting.



Effective

Talking Therapies for Anxiety and Depression

Reduce waiting times

Action	Detail and Outcomes
Changes to Group Processes	<p>We have streamlined some group processes, this has reduced the need for everyone to receive an ad hoc call to discuss next steps. Instead feedback is received via an electronic form; should this require follow up then this call is completed. However, this is rarely the case and has freed up valuable clinical time.</p> <p>We have redesigned and updated several groups to ensure the quality of the group we deliver is high.</p> <p>How clients access group information has also changed and a lot of these processes are now automated to ensure timely delivery of information for each group session.</p>
Changes to DNA Processes	<p>We have updated our DNA policy for clients in therapy. We are now able to send electronic letters direct to mobile phones. This also allows us to confirm when letters have been delivered, opened and viewed. We have therefore shortened our response time to a DNA session to one week rather than two, meaning that a new appointment is freed up sooner for someone on the waiting list if someone does not respond. Clear processes are in place for circumstances where clients re-contact outside of this time and also where letters have not been viewed.</p>
Step 2 Caseload Changes	<p>Due to staff changes we developed disproportionate waits at step 2 for LTHC LICBT compared to LICBT. Workplans were adjusted across the qualified team and this disparity has now been addressed and the waiting lists are at equal wait length.</p>
Expansion Places	<p>We have applied for expansion posts for the coming year and hope to be successful in expanding the clinical team, especially at step 3 level.</p>
Reviewed and Redefined Pathway guidelines	<p>We identified that we had two areas where we regularly noticed clients being allocated to the wrong pathway - our Counselling and Wellbeing Pathway and our 3+ Pathway (for clients whose symptoms are at the most complex and severe end of the spectrum of presentations within the scope of NHS TTAD). We have reviewed and redefined criteria for both aspects of the service which in the long run will support with waiting times, ensuring we work with clients whose presenting concerns and clinical symptoms are appropriate for each intervention.</p>



Effective

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 clinical scores at the start of treatment.

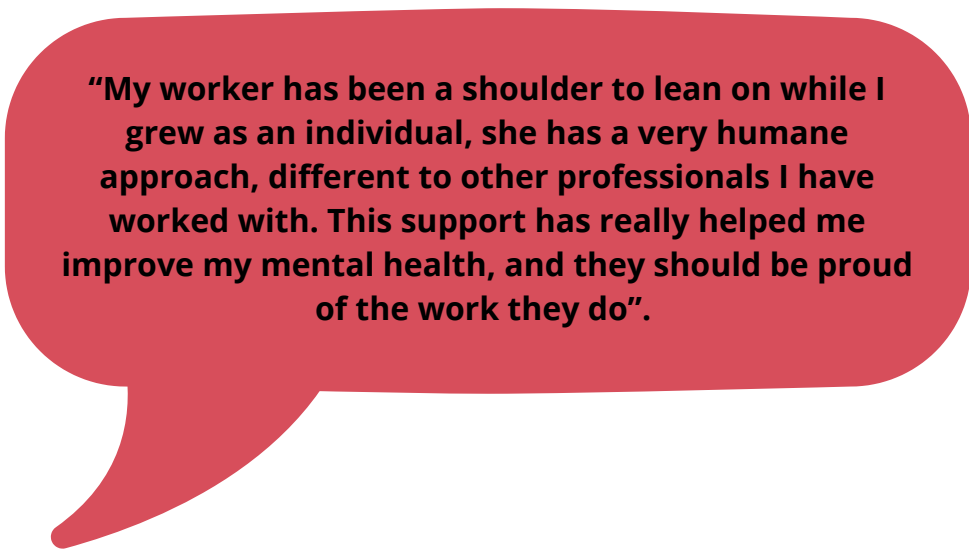
In addition to quantitative data, we also collect qualitative information to provide a more contextual overview in how our services have impacted the lives of those accessing them. This includes collecting feedback from patient experience questionnaires as well as feedback obtained from complaints and 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

The Recovery Outcome Star- for mental health and well-being is a widely used and well evidenced tool for supporting and measuring change for those with both short and long-term mental health difficulties.

There are 10 areas of a person's life on 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

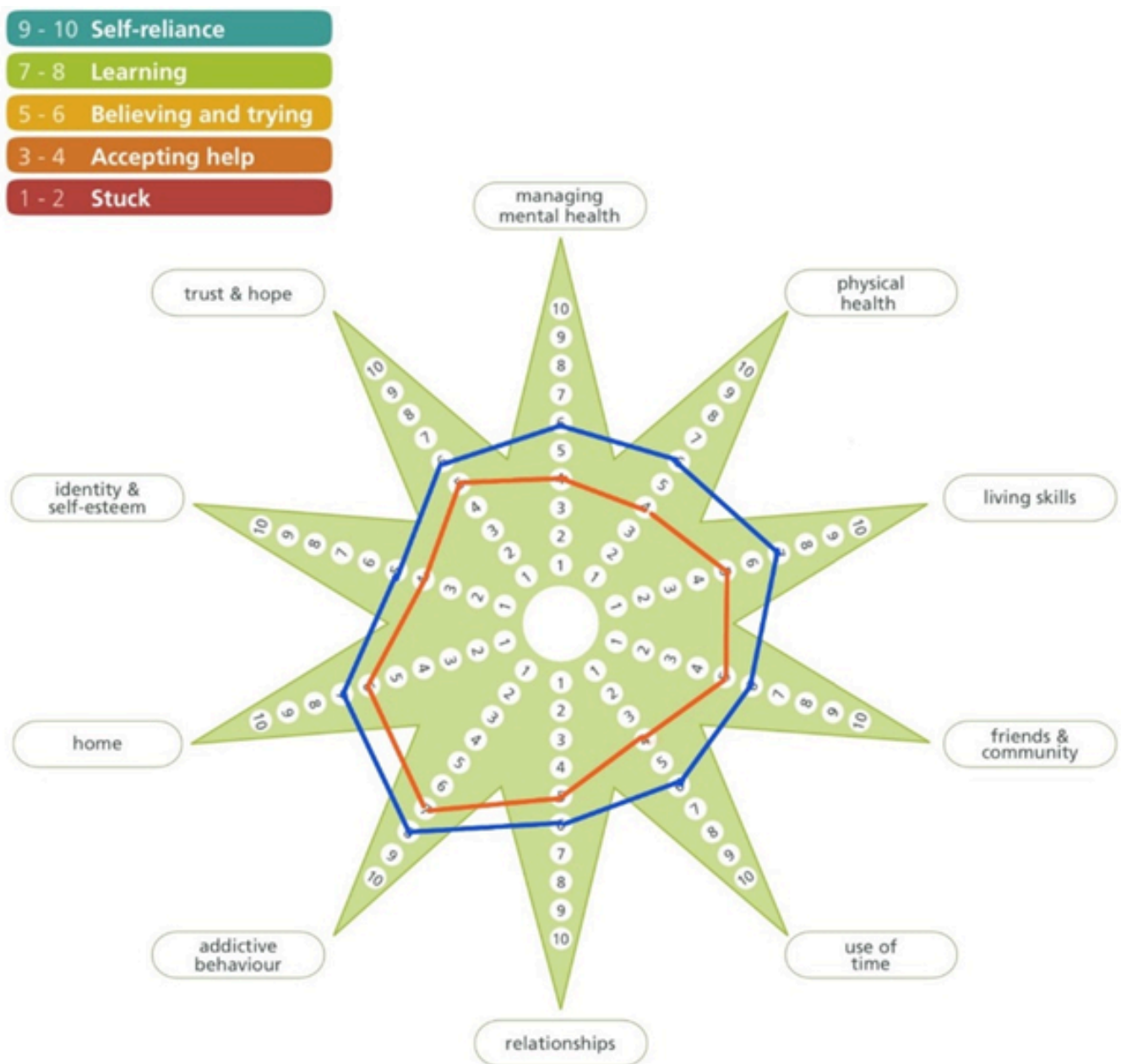


"My worker has been a shoulder to lean on while I grew as an individual, she has a very humane approach, different to other professionals I have worked with. This support has really helped me improve my mental health, and they should be proud of the work they do".

Effective

We use the Star as a basis for the work we do by creating an action plan with an individual. The focus of our work is looking at how people's circumstances and experiences affect their mental health.

We use SMART goal setting to create stability and support the person to make sustainable changes within the 10 areas of the star.



Effective

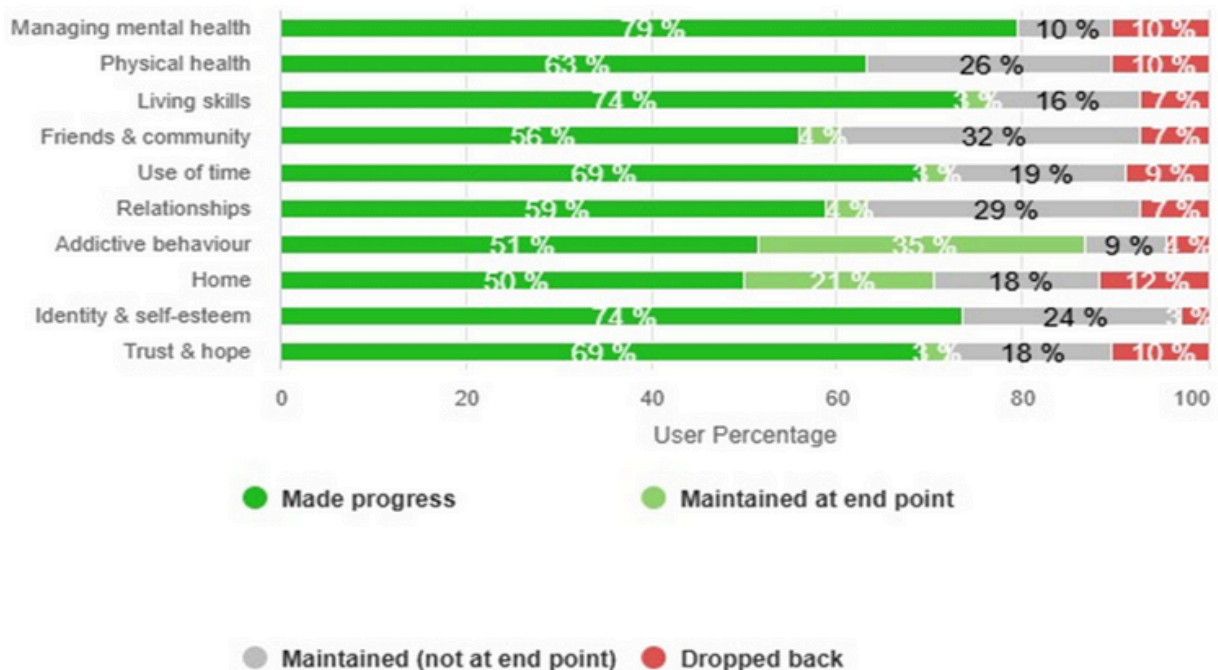
We measure these outcomes at the start of support and at the end to measure distance travelled.

Our Foundation & Recovery Pathway started using the Star online database to gather and compare data on 1st October 2024.

The Data below shows the progress of people who completed support From 1st October 2024 to 31st March 2025. This demonstrates great progress using this measure and we are looking forward to having more data over the coming year to help to guide decisions and support with client care.

Are people making progress?			
In 1+ outcome areas Percentage of people making progress in at least one outcome area	In 2+ outcome areas Percentage of people making progress in at least two outcome areas	In 3+ outcome areas Percentage of people making progress in at least three outcome areas	Outcome areas showing progress Average number of outcome areas in which someone is making progress
99%	93%	91%	6.4

How much progress are people making in each outcome area?





Effective

Case Study - Off The Scales - One of our Recovery College Courses

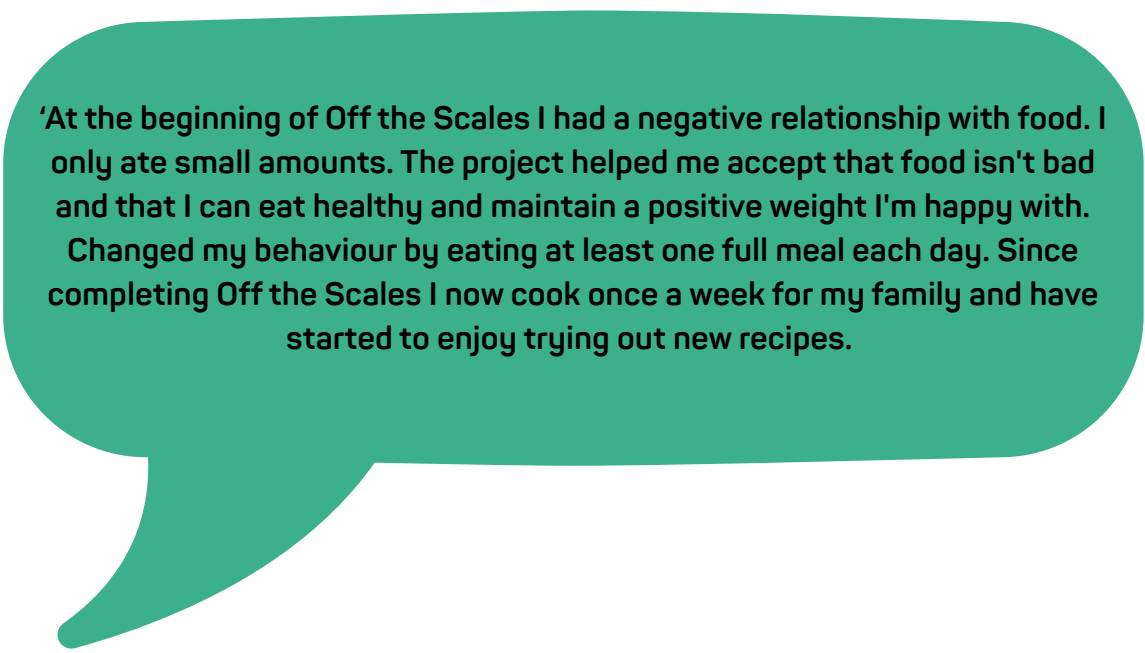
This Recovery College Course is aimed at clients who wish to learn about food and exercise but do not have a specific known eating disorder.

One learner was referred to the Off the Scales course by her social prescriber, seeking support with her relationship with food and physical activity. She engaged fully with the course content and participated actively in discussions and exercises.

Throughout the sessions, the learner reported noticeable improvements in her mindset. She shared that the course helped her develop a healthier, more balanced relationship with food and movement. Additionally, she experienced a reduction in anxiety, which had previously been a significant barrier in her daily life.

During the course, the learner received a letter inviting her to attend a routine health screening at a local Boots store. In the past, her anxiety would have prevented her from attending. However, she felt that the confidence and motivation gained through the course empowered her to go. The screening identified a few health concerns, but thanks to early detection, she was able to take proactive steps to address them.

The learner has since gone on to enrol in additional Recovery College courses, continuing her journey of personal growth and wellbeing.



'At the beginning of Off the Scales I had a negative relationship with food. I only ate small amounts. The project helped me accept that food isn't bad and that I can eat healthy and maintain a positive weight I'm happy with. Changed my behaviour by eating at least one full meal each day. Since completing Off the Scales I now cook once a week for my family and have started to enjoy trying out new recipes.'

Effective

Employment Advice Team

We are pleased to have received continued funding for our Employment Advice service for 2025-2026.

The aim of the Employment Advice service is to offer clients information advice and guidance on a range of employment support needs, for example, to help people return to work following time off, retain current employment, or gain work after being unemployed. Clients who refer to Impact for mental health support have the opportunity to work with one of our Employment Advisors alongside receiving therapy. Our Employment Advice team use a person-centred approach and evidence-based interventions to support clients to meet employment goals.

Poor mental health can be a barrier to sustaining or engaging with employment, so tackling both mental health and employment in tandem has shown overwhelmingly positive outcomes, with clients reporting that the service feels more supportive and enabling than a traditional employment service.

To make our service even more effective, our Employment Advisors have completed the money guiders accredited training. This enables them to confidently discuss money issues and refer clients to appropriate financial support services if required.



"My EA was lovely and she helped me look for new job positions, update my CV, sent me links and websites to use for jobs and apprenticeships. She also helped me apply for a course through Billingham community centre. She was very helpful and understanding of my current situation and has helped me a lot".



Effective

Employment Advice Team

During 2024 – 2025 the Employment Advice Team supported 711 individuals. 327 people have completed support with the service and achieved an employment outcome of return to work, remain in work or found work. 60 of these people were long term unemployed and gained work through our support.

3 months following discharge 97% of the people supported were still in employment. Those that hadn't reached an employment outcome were still working towards their goals and demonstrating progress such as volunteering or training.

"I found discussing my situation with my EA really helpful as it provided an independent viewpoint on the return to work plan, I had put in place by my employer and I felt comfortable discussing the impact my neurodivergence had on the way I felt about myself"

The EA was very supportive and understanding of my anxiety around my upcoming meetings I had with my employer and had sent me some very useful resources. I am very grateful for the support I received and feel it has greatly improved my anxiety around attending these meetings and preparing me to return to work.

Effective

Data Quality

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

**97.2% of problem
descriptors recorded**

an increase of 1.3% on last year

**83% of Appropriate
Anxiety Disorder
Specific Measures used**

Against a target of 65% and showing a service
improvement of 9% on last year

**99.6% NHS
Numbers Recorded**





Effective

Quality Assurance

Following achieving accreditation from the Accreditation Programme for Psychological Therapies (APPTs) programme in 23/24, we have continued to work within this quality framework.

New Meetings - Update

As part of our commitment to quality, last year we 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 introduced two new meetings. All aspects of the service are covered by these meetings, with clear agendas and sign off processes, providing clear and robust governance of overall delivery and strategy.

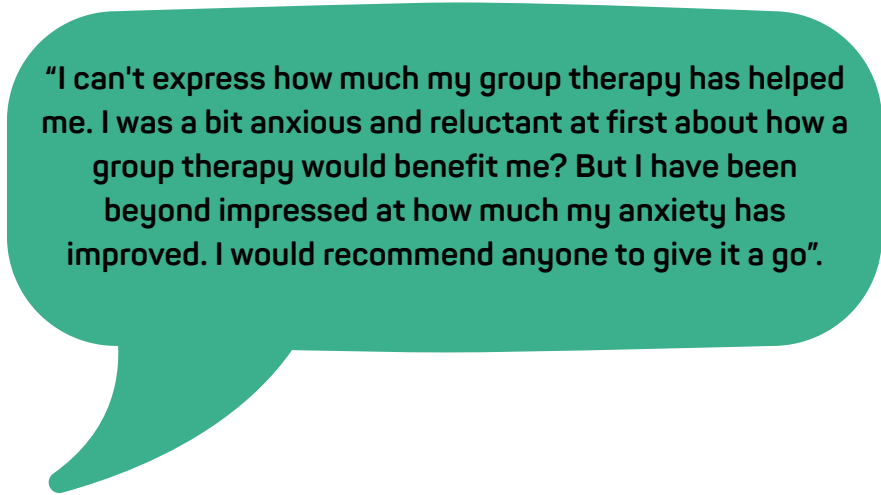
- Operations
- Clinical Oversight and Strategy

Audits

We 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.

Pathway Leads & Seniors also complete audits specific to their pathways, this includes checks on presenting problem matching the waiting list they are allocated to, clients who have experienced a reduction in clinical scores following an introduction group, engagement levels (especially those who flag as regularly missing appointments), suitability and those who have a priority label to ensure this has been appropriately added.

We use the information taken from these audits to provide feedback to the team, make service changes to help improve upon areas such as performance or processes and regularly review our audit schedule.



"I can't express how much my group therapy has helped me. I was a bit anxious and reluctant at first about how a group therapy would benefit me? But I have been beyond impressed at how much my anxiety has improved. I would recommend anyone to give it a go".

Caring



**1487 people report
that they felt listened
to most or all of the
time**



**1288 people reported the service
helped them to understand their
difficulties better**

of 1545 respondents



**1407 people reported
being involved in the
choices about their
treatment and care**



**1339 reported they
got the help that
mattered to them**

Caring

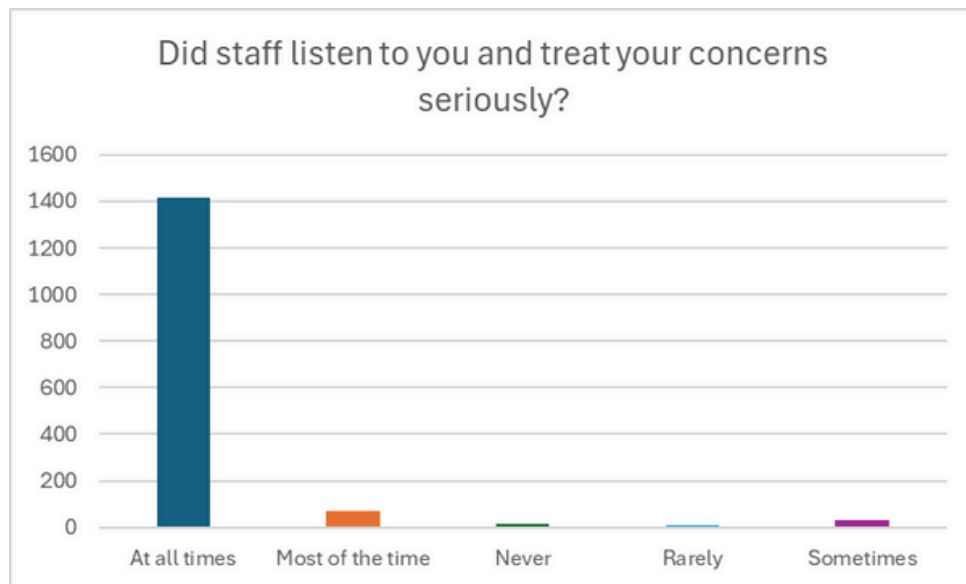
Feedback

Impact utilises NHS Talking Therapies standard patient experience questionnaires (PEQs). The PEQs 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 1545 completed questionnaires which is an improvement on last year.

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

PEQs

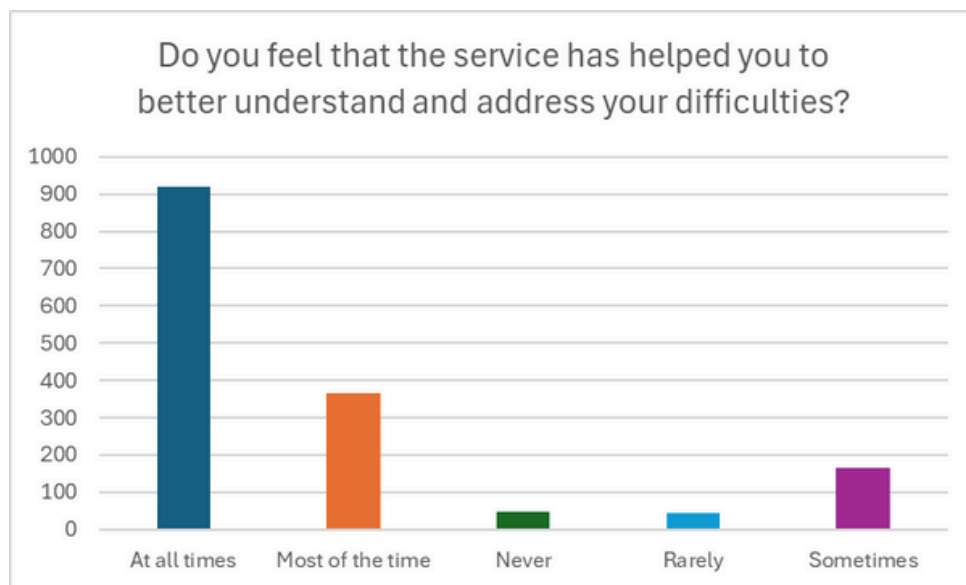
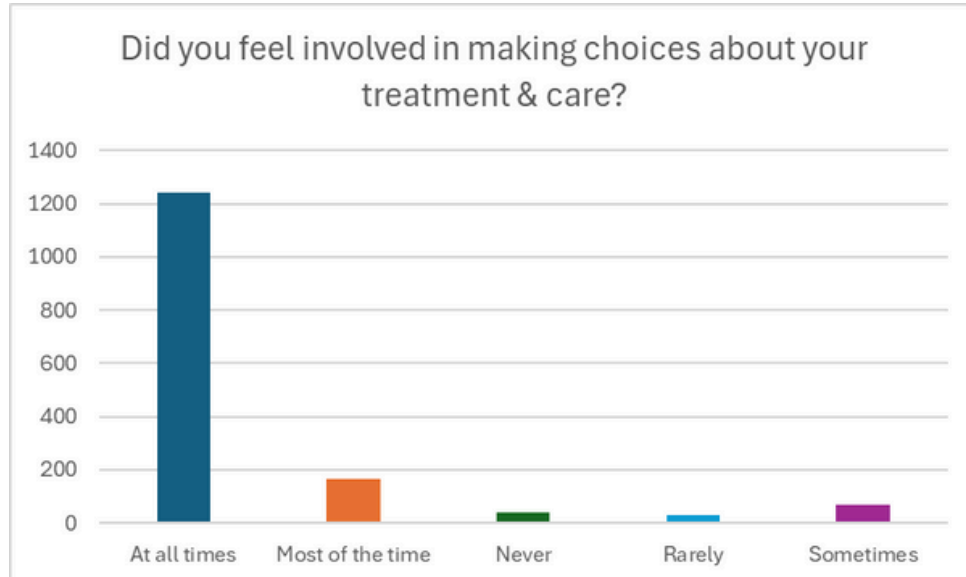


"A vital service, I am very grateful and it has been crucial to me"

"I have been treat with the utmost care and with genuine sincerity by a very knowledgeable, empathetic person".

Caring

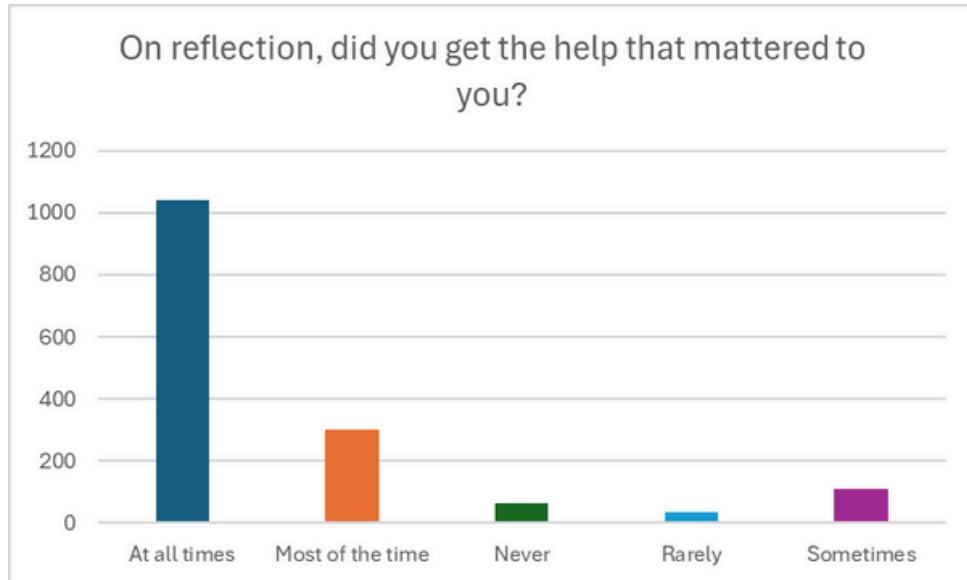
PEQs



"I feel so relaxed when I come to therapy, so kind and helpful I recommend this therapy to people I know who need it"

Caring

PEQs

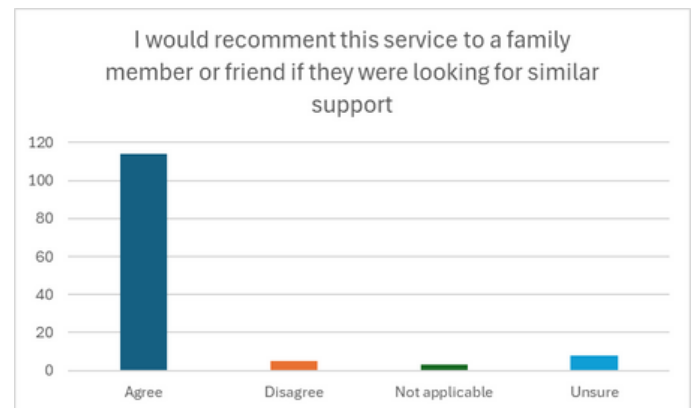
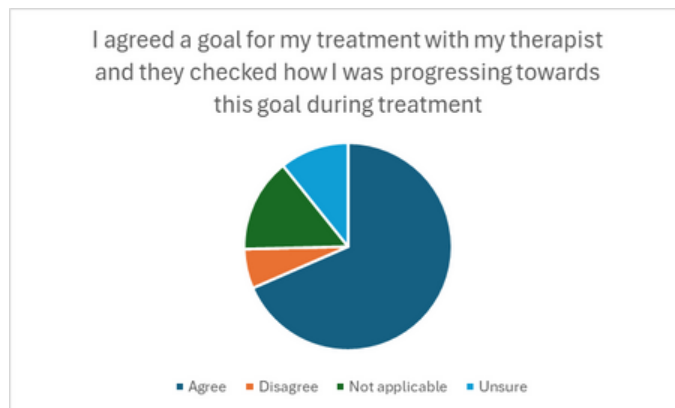
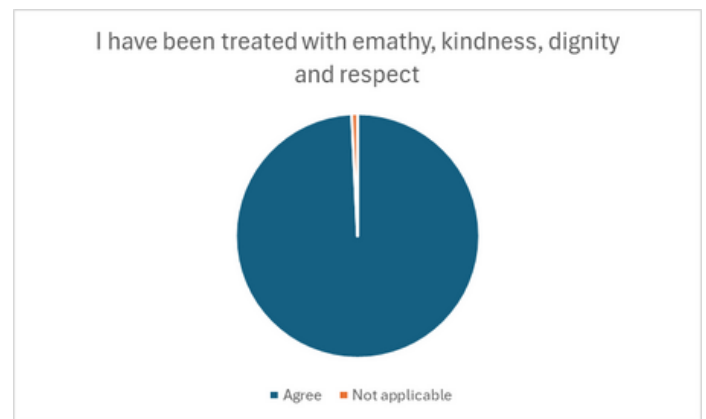
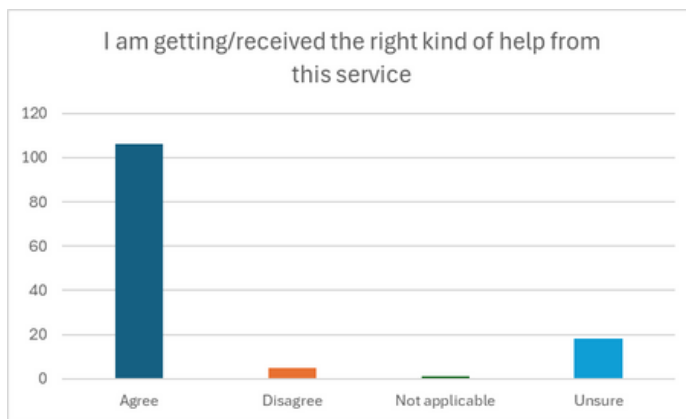


"This service is a great help especially in my circumstances and would not hesitate coming back if I ever needed it again".

Caring

APPTS Questionnaire

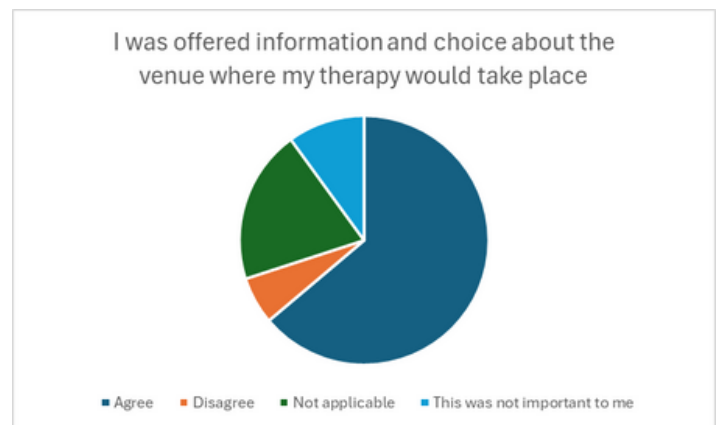
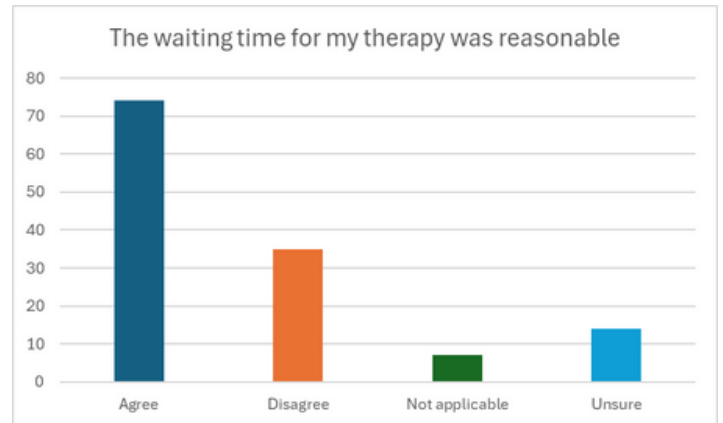
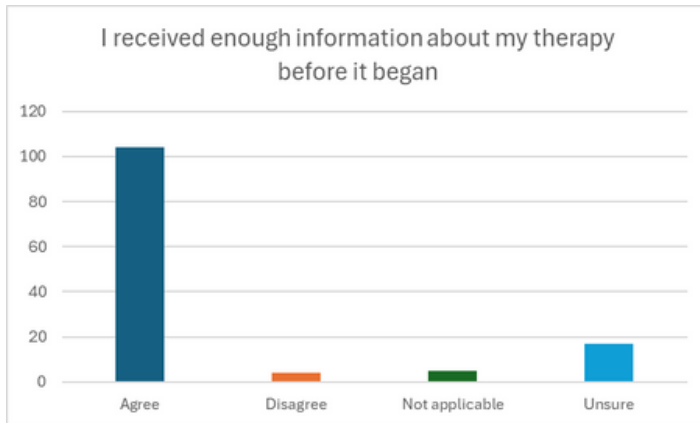
For consistency and comparison we repeated the questionnaire sent to clients as part of our APPTs accreditation and last years Quality Account. We received 130 responses which is slightly down on last years total, when we repeat this in the future we will look to increase the number of potential respondents.



'It was really helpful to be in a group with people with similar experiences. I have completed the courses now and feel well equipped to use what I've learned to look after my wellbeing. I know it's not an easy fix, but I know what to do to overcome the challenges I may face.'

Caring

APPTS Questionnaire Outcomes



"My therapist is amazing. She has guided me through my grief and trauma allowing me really tap into my emotions safely. I didn't think I would have made as much progress as I have. I'm so thankful"

Caring

APPTS Questionnaire

The below table shows the comparison of scores from last year

	23/24 Agree	24/25 Agree	Difference
I received enough information about my therapy before it began	77%	80%	+3%
The waiting time for my therapy was reasonable	56%	57%	+1%
My appointment was scheduled on a day / time that was convenient for me	97%	96%	-1%
I was able to get to my appointment location without too much difficulty	75%	72%	-3%
I was offered information and choice about the venue where my therapy would take place	69%	64%	-5%
I was offered information and choice about the time of day my therapy appointments took place	87%	84%	-3%
I was offered information and choice about the gender of my therapist	39%	38%	-1%
I was offered my therapy in another language or with an interpreter	8%	5%	-3%
I was offered information and choice about the type of support / therapy I would receive	81%	77%	-4%
The therapy / support helped me to understand my difficulties	84%	83%	-1%
The therapy / support helped me to cope with my difficulties	78%	75%	-3%
I am getting / received the right kind of help from this service	80%	82%	+2%
I have been treated with empathy, kindness, dignity and respect	99%	99%	same
The therapist I saw was sensitive to my cultural background	39%	35%	-4%
I have been asked if and how I would like family, friends or others close to me to be involved in my care	30%	30%	same
I agreed a goal for my treatment with my therapist, and they checked how I was progressing towards this goal during treatment	70%	68%	-2%
I was actively involved in shared decision-making about my care and treatment	76%	75%	-1%
I would recommend this service to a family member or friend if they were looking for similar support	92%	88%	-4%

In comparison to last year, we have performed very similarly on a lot of the questions, with only a couple of of percentage point changes difference. For some of these recorded as lower this year, this for the majority can be explained by the percentage where respondents had indicated that this factor was not important or relevant, e.g. no interpreter was required or the location of their appointments was not relevant because the therapy was delivered online. Other areas of negative change we can explore with the pathway leadership team, such as goal setting in therapy. 99% of staff who responded to a survey reported goal setting was part of assessment and treatment, but the response to a question about goal-setting was lower from a client experience point of view.



Responsive

We are committed to continuously developing and improving the services we provide, and a key part of that process is listening to feedback from a wide range of sources. This includes clients who use our services, therapists who deliver them, professionals who refer individuals to us, our leadership team, and other important stakeholders.

We gather feedback in various ways; through questionnaires, complaints, conversations during sessions, and input from partner organisations we work closely with. Every piece of feedback is reviewed and considered.

By taking the time to reflect on this input, we're able to make meaningful changes and enhancements to our services. This ensures that what we offer remains relevant, effective, and aligned with the evolving needs of the local communities we serve.

"I was not initially offered the choice of a therapist based on gender, but when I rang and explained my requirements, someone returned my call very soon afterwards. When I explained my request - they were completely supportive and understanding and couldn't have done more to sort it out immediately. I am more than happy with the outcome. There was absolutely nothing wrong with the first therapist - who treat me with kindness, dignity and respect - it was just not the gender I preferred to work with. I am very pleased with the service as a whole and with everyone I have come in contact with from my very first call onwards. Excellent service!"

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



Responsive

The Foundation and Recovery Service also includes a Recovery College. Below is one great example in which we have been responsive to need.

ASD bespoke course

Through our work with Community Mental Health Transformation, we identified the need for accessible support for those waiting for an assessment for Autism Spectrum Disorder or who already have the diagnosis. People waiting for an assessment were facing lengthy waits, although often did not need secondary care intervention.

We have worked collaboratively with Tees, Esk and Wear Valley Mental Health Trust in Middlesbrough to provide an adapted Recovery College course supported by staff from the team. The course covered topics such as confidence building, emotional resilience, mindfulness and coping skills all with adaptations to suit learners needs.

This initiative aimed to enhance the mental health and well-being of participants through developing coping strategies, equipping them with knowledge and skills to manage mental distress and difficult life challenges, feeling more understood and less alone.

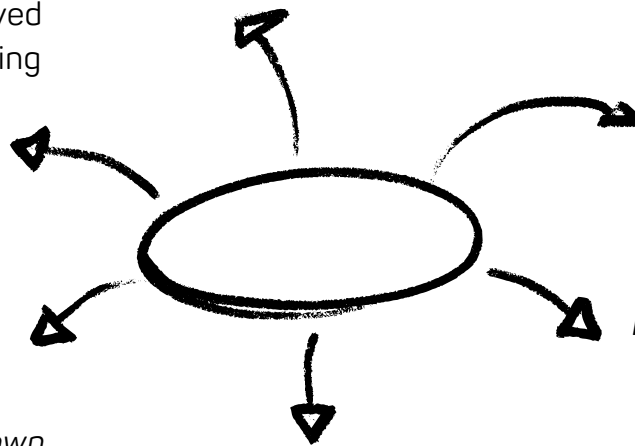
On average 97% of people who completed a Recovery College course rated their overall experience as "Good" or "Excellent"

"I use the tools from the course in my everyday life. My family have noticed a difference in me"

'It has been the best experience I've had to help my mental health so far"

'The tutors delivered the course in a calm, professional, and sensitive way that made me feel comfortable. My opinions were listened to and it felt like a safe space.'

Responsive



Due to concerns over suitability our CBT/EMDR Leads completed an audit of all clients on our Trauma Focused Pathway. This was a huge piece of work but led to improved plans for each client and learning across the team.

We have reviewed our supervision guidance for each of our pathways and adjusted according to identified need.

Streamlined face-to-face & home visit processes. We now have this as an allocated task for our Intake Team to assess the need & potential risks associated before booking, reducing delays and ensuring clinical safety through a clear review system.

Increased parameters for our online booking system for assessments led to reduced wait and increased client options.

Introduction of pre-assessment calls to clients with a high level of disengagement previously. Ensures we assess current readiness to engage, clarify the remit of our service, and manage expectations early, leading to more appropriate & timely referrals.

Auto-booking of treatment appointments that is within known availability and with 3+ days notice has led to improved waiting times.

Responsive

Reflective practice sessions were put in place to support the admin team to develop and thrive in their roles. This has helped staff to develop in confidence for example, when managing challenging calls and improved client experience

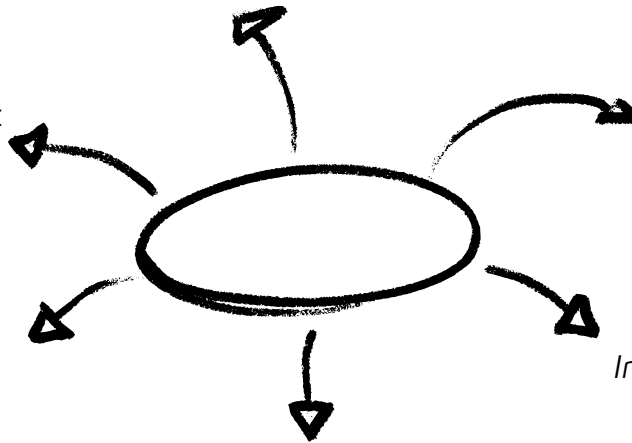
Foundation and Recovery team changed how they gather information at assessment to reduce time and improve client experience

Restructured assessment process and changes to clinical staff model for delivering assessments within the service

Training provided to the admin team in managing difficult calls, especially those where clients phone in distress or potentially at risk

Introduction of a centralised intake team to support in reviewing incoming self-referrals and cross-referencing new Wysa referrals

We have changed the way we talk about availability to attend therapy appointments with clients to ensure we have as many options as possible





Responsive

We have reviewed and improved our pathway and processes for supporting clients who have needs for both psychological treatment and recovery-focused support.

In the main, people who come to Impact on Teesside access one intervention, because this is all that is needed.

For a smaller number of people, we identify that they would benefit from talking therapy, but are not in a position to access it at that time because of difficulties around emotional and social instability.

In these cases, we offer an option for people to access recovery intervention first and then move into therapy in a timely way to ensure that any progress made is maintained.

The three comments below are all from the same person who benefited from accessing support and intervention with the Recovery Pathway first, then moving into HICBT where they received psychological therapy.

"I haven't had the best experiences with MH professionals in the past, I wasn't the best client to deal with and it was a bit like a rollercoaster from one week to the next but I always felt like they never lost patience and they never gave up. I always feared the worst, but they never judged, they always tried to understand"

Thank you so much from me and thank you so much for giving my son his mam back.'

"They gave me the confidence to try and actually brought me down to earth when I was putting invisible pressure on myself"

Well Led



92% of staff believe that the service promotes culturally sensitive practice



80% of staff report there are clear processes to raise concerns about standards of care

From repeated APPTs Staff Survey - 74 staff responded



77% reported that the service actively supports their health and wellbeing



88% of staff use outcome measures to guide discussion in clinical supervision



Well Led

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 remain focused on the quality and quantity of training, development and progression opportunities for staff. This is reflected in 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 Team	Core Support Team
Clinical Lead	High and Low Intensity CBT Therapists	Admin Leads and Seniors
Service Managers	EMDR Therapists	Admin Team
Operations and Data Manager	Counselling Team	Specialist Pathway Leads (Perinatal, Long Term Health Conditions, Vulnerable young People, Peer Support and Volunteers)
Performance and Development Clinical Manager	Recovery and Foundation Team	Champions (Veterans, Neurodiversity, Older Adults, Diverse Communities, Domestic and Sexual Abuse)
Quality and Governance Manager	Recovery College Tutors	Referral & Assessment Co-ordinator
Digital Development Lead	Employment Advisors	Clinical Care & Intake Coordinators
Individual Pathways Leads & Seniors		

Well Led

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
- Introduction of a staff newsletter to keep the widely dispersed staff team connected.

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

I am very happy in my job and feel supported in all aspects of my role by the service.



I enjoy working for my organisation - I feel confident and competent in my role and well supported and respected

Safe



**100% of staff have
a DBS Check**



**All staff have
completed
safeguarding adults
training to the
correct level. This is
mandatory training.**



**All staff have
completed
safeguarding children
training. This is part of
mandatory training.**



**Partners are compliant
with the NHS Data
Security and
Protection Toolkit**



Safe

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 five formal complaints throughout the period, however all informal complaints and reports of dissatisfaction with the service were investigated and responded to.

The formal complaints were:

- Concerns raised regarding the conduct of a staff member towards a client. A full investigation was conducted and the complaint was upheld. The client was transferred to a different therapist.
- A client was unhappy with the content of a letter that was sent by Impact to their GP. Following investigation, the letter was re-written with clarified information, and the GP updated their records with the new letter. The client was happy with this outcome. Complaint upheld.
- A client was offered an appointment on a day of the week they were not available. The next appointment offered was on the same day, causing the client frustration that their requirements were not being acknowledged. An investigation found that information regarding their preferences was not recorded in the correct place. This was amended and the client was offered an appointment at a convenient time. Complaint upheld.
- A client complained that a letter was sent by Impact to their GP, without their consent. Upon investigation it was found that there had been no communication with the GP at all and no letter had been sent. Complaint not upheld.
- Complaint received from an advocate on behalf of a client regarding the waiting times to access one-to-one therapy, frustrations around contacting the service such as being held in phone queues, being transferred straight to answer phone and no one calling them back. It also raised concerns around our communication process when discharging clients. Processes associated with the client's discharge were reviewed and clarification relating to this was issued in the light of the review. The client began therapy. The service-wide themes raised in the complaint, including those related to phone contact and the service remit were addressed with the advocate and the locality's Health Watch lead and planned improvements were explained.



Safe


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 2024/25 submission is 30 June 2025. Impact partners continue with their preparations for submission. In June 2024, the submission date for 2023/24, 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.



"Really good and helpful service that has helped me massively special thank you to my therapist who has worked with me I'm on my 9th session and making great progress with my anxiety"



Safe

As well as mandatory training completed by all staff, this year staff have developed their skills by attending CPD in the following areas:

- BABCP webinars on Ethical decision making in CBT and Victim Blame and trauma informed CBT Practice
- Baby Loss Training
- Behavioural Experiments in Psychological Practice
- Brief Interpersonal Psychotherapy Training (IPT-B)
- CBT Supervisors Workshop, CBT Working with complexity and CBT with suicidality
- Compassion Fatigue workshop for Counsellors
- Cultural Awareness and Diversity Training for therapists, also cultural training for perinatal and postnatal care
- EMD Conference, EMDR advanced Skills workshop, EMDR working with complexity and EMDR working with suicidality
- Eating Disorders
- Enhance your EMDR Therapy Practice
- GAD / Tolerating Uncertainty
- Getting Started with Managing Emotions Training
- Graded Exposure using Inhibitory Learning Vs Habituation Theory
- Harm Outside the Home Conference
- IPT & Attachment Theory
- IPT in Working with the LGBTQIA & Community
- Imagery Re-scripting
- Managing Anger Rumination and Automatic Anger
- Mini CBT workshops on sleep, Mindfulness and Imagery in trauma
- Neurodevelopment e-conference
- Oliver McGowan Mandatory Training on Learning Disability and Autism part 1
- PWP Conference
- Perinatal Loss, Perinatal Mental Domestic Abuse and Suicidality in the Perinatal period
- Practitioner Mental Health Wellbeing, Wellbeing and Self-Care and Rescue Remedy workshop for Counsellors
- Sleep Hygiene and Beyond Sleep Hygiene (The Science of Sleep)
- Stress Management
- Transactional Analysis 101
- Trauma Focused Cognitive Therapy for PTSD
- Understanding and working with Low self esteem
- Working with Menopause

Our Clinical Lead regularly attends Local Authority safeguarding thematic audits and multi-agency reviews to participate in effective partnership working to promote the safety and wellbeing of children, young people and vulnerable adults.

Our Vulnerable Young People and student service leads attended the Harm Outside the Home Conference, delivered by the HSSCP. The event focused on the complex challenges faced by young people, their families, and professional services in preventing and managing risks from external threats, including sexual and criminal exploitation, radicalisation, going missing from home or care, and grooming. The conference also provided updates on local and national safeguarding agendas and offered practical guidance on how to integrate these approaches into our everyday practices as a service.



Quality Improvements for 2025 / 26

Goal One - Reduced Waiting Times

We remain committed to reducing waiting times for access to treatment across our service. Over the past year, we have implemented several improvements across multiple pathways, which are reflected in the enhanced client feedback—particularly in the increased percentage of clients who felt their wait to access treatment was appropriate.

Within the TTAD Pathways, we report nationally on the proportion of clients who wait 90 days or more for a second treatment appointment. We have made notable progress in reducing these wait times over the past year and are dedicated to continuing this trajectory into 2025/26.

To support this effort, we will also be monitoring the average number of days clients wait for each intervention. This additional metric will provide a more detailed understanding of our performance and help identify further opportunities for improvement.

We recognise that timely access to meaningful support is a priority for our clients. We know that earlier engagement in treatment increases the likelihood of positive outcomes, and we remain focused on ensuring clients receive the support they need as quickly as possible.

Goal Two - Achieve or Exceed the National Recovery Based Targets

Over the past two years, our service has consistently exceeded recovery-based targets, reflecting our commitment to delivering high-quality, person-centred care. As discussions continue around the potential for increased targets in the coming years, we remain focused on maintaining and enhancing our standards across all pathways.

Looking ahead, our Performance & Delivery Lead will continue to collaborate closely with each pathway over the next year, with the aim of not only sustaining but surpassing our current levels of recovery performance.

Ensuring that individuals are appropriately matched to our service is a key priority at the point of intake. We are committed to conducting thorough assessments to confirm that clients are suitable for the TTAD service and are placed on the most appropriate pathway for their needs. This approach supports more effective interventions and better outcomes.

Goal Three: Enhancing Future Communication and Accessibility

Our goal is to continue to improve communication both within and outside of our service for clients, as well as with other professionals. Based upon client feedback, we aim to make our communication channels more accessible, including phone, email, and letters.

Additionally, we will build on our recent letter writing training to further improve our written communication, equipping our team with the skills to effectively communicate with other professionals through written correspondence. Whilst reviewing standard letters we send to other professionals.

Commissioner statement from NHS North East and North Cumbria Integrated Care Board (NENC ICB) for Impact on Teesside Quality Account 2024/25

NHS North East and North Cumbria Integrated Care Board (NENC ICB) is committed to commissioning high quality services from Impact on Teesside. NENC ICB is responsible for ensuring that the healthcare needs of patients that they represent are safe, effective and that the experiences of patients are reflected and acted upon. The ICB welcomes the opportunity to review and provide comment on this 2024/25 Quality Account.

Overview

The ICB would like to thank Impact on Teesside for the openness and transparency reflected in this year's Quality Account. The ICB would like to commend all staff for their commitment and dedication demonstrated throughout these challenging times and for striving to ensure that patient care continues to be delivered to a high standard.

Achievements

The ICB would like to congratulate Impact on Teesside and its staff on the achievements made during this period. The ICB recognises the attainments detailed within the Quality Account, which include:

- A comprehensive review of all communication materials including letters, text messages, emails, and promotional content to ensure they are clear, effective, and accessible, whilst taking into account data about local levels of health literacy to better reflect the needs of the population.
- New approaches to audit and management information reports to provide richer data to guide clinical and operational decision making, including the introduction of Wysa an AI-powered mental health support tool.
- The introduction of new targets for all TTAD services nationally, with a move from standard Recovery to Reliable Recovery and Reliable Improvement. Impact on Teesside have exceed both of these targets by 1 percentage point.
- As well as meeting recovery targets, this has been achieved alongside increasing the number of clients who are discharged having completed therapy, an increase of 585 clients discharged over the past 12 months compared to last year.
- Significant progress made with the assessed within 10 days target, the introduction of Wysa, is hoped to further improve performance for this target.
- Improvements made on average wait in days for both Step 2 and Step 3 therapies, with Step 2 reporting less than 90 days on average wait for therapy for 11/12 months (the one month this was not met was 91 days).
- Received continued funding for the Employment Advice service for 2025/26.
- Continuing to work within the quality framework following achieving accreditation from the Accreditation Programme for Psychological Therapies (APPTs) programme in 23/24.
- Improved response rates for patient experience surveys (PEQs).
- Identifying the need for accessible support for those waiting for an assessment for autism spectrum disorder or who already have the diagnosis which has been identified through work with Community Mental Health Transformation.

- Working collaboratively with Tees, Esk and Wear Valley Mental Health Trust to provide an adapted Recovery College course. It is positive to see on average 97% of people who completed a Recovery College course rated their overall experience as "Good" or "Excellent".
- All staff receive the necessary training and supervision specific to their role to ensure compliancy.
- The completion of the Data Protection Security Toolkit in June 2024 to ensure compliancy with GDPR.

Areas for Further Development

The ICB recognises the additional work required which has been identified within the Quality Account. In particular, the work to improve the way clients access services, noting that this did not lead to an increase in access rates but has remained steady across the last 2 years. It is reassuring to see the details which will be acted upon over the next year to build on further access to services.

Future Priorities

The ICB is fully supportive of the identified Quality Priorities for 2025/26 which are focused on the following priorities:

- **Priority 1 - Reduced Waiting Times.** The ICB acknowledges the progress in reducing the waiting times for access to treatment across services over the past 12 months and welcomes the continuation of this trajectory into 2025/26.
- **Priority 2 - Achieve or Exceed the National Recovery Based Targets.** It is positive to hear that over the past two years, Impact on Teesside has consistently exceeded recovery based targets and looking ahead are aiming to not only sustaining but surpassing the current levels of recovery performance. The ICB looks forward to hearing about the outcomes in the coming year.
- **Priority 3 - Enhancing Future Communication and Accessibility.** To continue to improve communication both within and outside of the service for clients, as well as with other professionals. The ICB is pleased to hear that based upon client feedback, Impact on Teesside aim to make communication channels more accessible, including phone, email, and letters.

The ICB can confirm that to the best of their ability the information provided within the annual Quality Account is an accurate and fair reflection of Impact on Teesside's performance for 2024/25. It is clearly presented in the required format, contains information that accurately represents Impact on Teesside's quality profile and aspirations for the forthcoming year.

NENC ICB remain committed to working in partnership with Impact on Teesside to assure the quality of commissioned services in 2025/26.

Yours sincerely,



Vicky Playforth
Interim Director of Nursing,
NHS North East & North Cumbria Integrated Care Board