

2021 / 22

# Quality Account

Impact on Teesside



impact  
on Teesside

## Contents

Introduction .....	2
Welcome from the Board / Senior Management Team .....	3
Service Values .....	5
Services Provided .....	6
Performance and Achievement .....	11
Feedback, Complaints and Compliments .....	17
Incidents and Learning .....	22
Governance and Quality Assurance .....	23
Staffing and Staff Wellbeing .....	27
Quality Improvement Targets for 2022 / 23 .....	28
CCG statement .....	30

## Introduction

Impact on Teesside is a partnership between Alliance Psychological Services Ltd and Middlesbrough and Stockton Mind which was established to provide a psychological wellbeing and therapy service to residents of Teesside commissioned by Tees Valley CCG. The psychological wellbeing and therapy service consists of a core Improving Access to Psychological Therapies service, an integrated Long Term Health Conditions / Persistent Physical Symptoms service, wellbeing and counselling service, a recovery-based service and support for complex needs who do not meet the criteria for secondary care or do not wish to access it.

The aim of combining these services into a collective provision is to ensure patients are able to access the right support for them at the right time without having to be transferred between services and providers.

Our quality account is an annual report about the services we provide and is a requirement for NHS funded services.

## Welcome from the Board / Senior Management Team

After the most challenging of starts to a new service in April 2020 we have been pleased to have moved to a stable and strong position by the end of our second year of delivery.

We had further challenges to manage this year as we adjusted to the constraints of the pandemic and re-introduced working in our offices and other premises, albeit in a gradual way as restrictions slowly lifted. We needed to commission a new data system to replace one that could not accurately manage data across our more complex set of service pathways, and we are now using one which better meets our needs.

We brought to an end our pilot project with TEWV, which had helped us to develop better pathways between Primary and Secondary Care Mental Health services. This has now been developed into a new system of multidisciplinary Hubs to improve assessment and support of more vulnerable or complex presentations.

We had a change in the Partnership Board as Insight Healthcare, part of the Concern Group, made the decision to leave this partnership at the end of March 2022 to prioritise other services they are involved in. Whilst we were sorry to lose their experience and expertise this meant minimal change to the Impact service as Insight staff moved across to employment with remaining partners Middlesbrough & Stockton Mind and Alliance.

We set ourselves clear priorities for service development and improvement this year:

- Decrease waiting times and provide more support to those clients waiting for treatment
- Improve recovery rates and outcomes for clients
- Increase access rates and face to face appointment provision

These targets were chosen following a review of feedback received from clients, staff and commissioners, and also from reviewing the achievement of targets set in 2020 / 21. Whilst we are far from complacent about how far we have progressed towards meeting these, we are satisfied that we can continue to reduce waiting times, improve the level of support received by clients and improve against all our service targets.

This year we introduced a process of planning for improvement across all our service Pathways with our Leadership Team developing structured and

detailed Year Two Improvement Plans which have greatly helped in focusing resources where they were most needed to make a difference. Our Management Team have then worked with Leads from each Pathway to ensure they were on course to make planned changes, introduce innovation and improve performance against targets. We are taking Improvement Planning forward into Year 3 and will continue to monitor and develop each service area in this way.

We hope that we can report on further improvement at the end of Year 3 as we introduce innovative new resources for clients, some of which will be unique within Primary Care Therapy services.

We want to acknowledge and praise the contribution from every member of our Partnership staff team. We are also grateful for the support of our local Commissioners and Contract Managers who have been understanding of the challenges we have faced whilst encouraging us to continue to improve and achieve the expectations of the service.

Anne Drummond

Clinical Lead

Alliance Psychological Services

## Service Values

We want anyone who is struggling with their mental health and is suffering from anxiety, stress or depression to be able to reach out and access our support whenever they need it. Our team will listen to your story and understand your needs, before working with you to develop your skills and coping techniques to help you make positive changes to your life.

We know how hard it can be to trust someone and open up to them. Our values are at the heart of our organisation and our team practices them each and every day.

### **Listening**

We're focused on you and will always invest our time **listening** to you and your story.

### **Understanding**

We never judge, we simply try to **understand** and in turn help you to understand your situation and experiences.

### **Compassionate**

We want everyone we work with to feel safe, comfortable and relaxed. We genuinely **care** about you and your wellbeing.

### **Professional**

While we're empathetic, kind and caring our team is made up of trained and **qualified** professionals who have significant experience and expertise in mental health.



## Services Provided

### **Improving Access to Psychological Therapies (IAPT)**

The Improving Access to Psychological Therapies (IAPT) programme began in 2008 and has transformed the treatment of adult anxiety disorders and depression in England. IAPT is widely recognised as the most ambitious programme of talking therapies in the world and in the past year alone more than one million people accessed IAPT services for help to overcome their depression and anxiety, and better manage their mental health.

### **Low Intensity Therapy**

Within our low intensity pathway, our Psychological Wellbeing Practitioners (PWP) deliver low intensity Cognitive Behavioural Therapy (LICBT) to clients experiencing mild to moderate mental health problems, including depression and numerous anxiety disorders. This support is often delivered on a 1-1 basis with clients and can be delivered face to face, over the telephone or digitally over Microsoft Teams.

As well as our traditional support through LICBT, we offer computerised CBT to clients using the Silvercloud platform; support through this is usually delivered remotely but can occasionally be supported by the telephone.

Together with our 1-1 support, we also have a range of psychoeducational groups that clients can access as a stand-alone treatment or access whilst waiting for a 1-1 intervention as part of a dual pathway (e.g. wellbeing counselling). These include the following:

- Getting started with CBT – brief psychoeducational group to introduce to the CBT model, as well as providing information around interventions utilised within this modality.
- Breathing Space – Delivers information to clients around anxiety and recommended low intensity interventions for this, including graded exposure, worry management and problem solving.
- Mood Matters – Delivers information to clients around depression and recommended low intensity interventions for this, including behavioural activation and cognitive restructuring.
- Managing Anger – Delivers information to clients around anger and low intensity self-help techniques to cope with this in a more helpful way, including cognitive restructuring and problem solving.

### **High Intensity Therapy**

Impact offers a variety of high intensity therapies for people when low intensity therapy hasn't been effective, or the issues being presented are of a more complex nature. High intensity interventions include:

- Cognitive Behavioural Therapy (CBT)
- Mindfulness Based Cognitive Therapy (MBCT)
- Counselling for Depression (CfD)

- Interpersonal Therapy (IPT)
- Eye Movement Desensitisation & Reprocessing (EMDR)
- Groups

Towards the end of year 2 the groups getting started with CBT and getting started with Counselling will commence delivery at the start of year 3. The purpose of these groups is to provide general coping strategies and techniques as well as providing an introduction the modality of therapy being offered. This will provide some much needed information and support for those clients who then go on to the waiting list 1-1 therapy. The outcomes we have seen from groups held in other parts of the service have been positive and we are keen to replicate this level of support to all clients regardless of pathway. There has been some examples from early 'Getting started with..' groups, where this was all the client felt they got the help they needed and no longer required 1-1 treatment.

### **Long Term Conditions**

Psychological therapy has been shown to improve outcomes for people with a range of long-term conditions such as diabetes and chronic obstructive pulmonary disorder who also have a mental health problem such as depression or anxiety. There is also strong evidence for the use of therapies to support people with medically unexplained symptoms. We support people in this pathway by offering talking therapies in all of the modalities mentioned above and group sessions, tailored to meet the needs of those experiencing physical health problems.

### **Digital Therapies**

We collaborated with IESO Digital Health in 2021 in order to offer clients more choice in how and when they access therapy. IESO provides low and high intensity CBT via online chat.

### **Counselling and Wellbeing**

For clients who require support but do not meet the clinical criteria for the Core IAPT pathway, we also have the Counselling and Wellbeing pathway. Counselling is all about listening and then helping to find ways to deal with emotional issues. Impact utilises person centred, solution focussed and transactional analysis approaches to counselling.

It can be hard to open up and share thoughts and emotions. It can sometimes be harder still to share feelings with a family member or friend. We know it's often easier to talk to a trained professional as they are not personally involved and provide objective, unbiased support. Counselling is offered for a range of issues including:

- Bereavement
- Relationship breakdown
- Gender or sexual identity
- Anxiety and depression
- Stress



Groups are also offered within this pathway. The grief and loss group has been running throughout the year and feedback has been positive. The group runs over a 6-week period for 1.5 hours per week and focusses on ways to cope with loss and self-care.

### **Foundation and Recovery**

Recovering from poor mental health is a unique journey. Every person is different, so everyone's recovery is different too. The one thing that is constant though, is that everyone deserves to live a happy and healthy life that fulfils them.

It's important to recognise that there's not just one road to recovery. Different to therapy, support with the Recovery and foundation pathway offers an individualised service that includes peer support, self-care and holistic practices to help support good mental health and general wellbeing.

### **Recovery**

The Recovery pathway offers an alternative to traditional therapies and counselling and is primarily for those clients who have struggled to engage with therapy in the past and have a history of accessing secondary care services. Clients present with multiple issues all of which will have an impact on their mental health. Example of interventions offered:

- Coping techniques to support emotional stability
- Person-centred goal setting to support social stability- e.g., finances, housing, access to services
- Psychoeducation
- Supported referrals into specialist services- e.g., Citizens Advice Bureau
- Risk management and safety planning

### **Foundation**

The Foundation pathway provides practical support in managing mental health issues by improving quality of life and linking into community activities. Interventions offered include:

- Coping techniques and psychoeducation
- Stress management and confidence building tools and techniques
- Person-centred goal setting to improve wellbeing and get life back on track

### **Recovery College**

Support for wellbeing through learning. Courses are delivered on Teams and face to face across Teesside alongside volunteers with lived experience. Courses include:

- Confidence building
- Emotional Resilience
- Coping Skills
- Keeping Well
- Hope Macmillan cancer support
- Mindfulness and Relaxation

## **Peer Support and Volunteering**

Opportunities for people with lived experience of accessing Impact to volunteer with us either as a Recovery College Facilitator or a Peer Mentor.

Volunteers have the opportunity to achieve an accredited Level 2 'Setting Up and Facilitating Peer Support Groups' qualification which is for those who wish to use these skills in a community group or service in future.

## **3 + Pathway**

Impact also operates an additional pathway called 3+. This pathway is for clients who may have previously accessed other forms of therapy which have not been helpful, may have a mental health diagnosis such as personality disorder or bipolar disorder and may have had involvement with secondary services but are not currently suitable for secondary care. They may have higher levels of risk that would not normally be in the remit of a primary care service. Clients accessing this pathway will be offered support from an experienced practitioner who is usually trained in multiple modalities of therapy and can offer an integrated approach to therapy to meet the client's needs.

Whilst the pilot did not continue, many of the positive working practices and relationships remain which include weekly huddles between primary and secondary care services. These huddles provide a space to discuss options available to clients and to ensure they access the most appropriate service for their needs.

## **Special Interest Groups**

Impact has a number of special interest groups (SIG) focussing on developing specific areas to better support clients accessing the service. These include:

### **Perinatal**

Pregnancy, birth and beyond can be an exciting and rewarding time in our lives. However, it can also be possible for us to experience anxiety, depression or emotional distress. We recognise the importance of mothers (fathers/carers) mental wellbeing during this stage and so we aim to offer tailored treatment and flexibility with appointments to ensure easy access to our service.

### **Vulnerable Young People and Students**

The vulnerable young people and student service SIG is made up of a team of experienced practitioners providing enhanced support for 16 – 25 year olds at risk of becoming NEET.

- Additional waiting list support/check in calls for clients aged between 16 – 25 considered as vulnerable.
- Bespoke groups for vulnerable 16 – 18 year olds through the recovery college to work on improving clients emotional resilience and preparing them for treatment or alternative support.

- Collaborative working with external organisations to maintain a high level of support and treatment outcomes.
- Collaborative work across Impacts pathways to improve accessibility and appropriateness of support.
- Joint working with local education providers to provide a more holistic approach to treatment to link in with their pastoral, peer and training support.

We continue to review the service regularly and will create SIGs as they are required to ensure the highest quality of care. However, SIGs do not interfere with the services we deliver to all clients, and we persist in finding ways we can develop and improve.



# Performance and Achievement

## Priorities for 2021 / 22

Our priorities for this year were:

- Decrease waiting times and provide more support to those clients waiting for treatment
- Improve recovery rates and outcomes for clients
- Increase access rates and face to face appointment provision

These targets were chosen following a review of feedback received from clients, staff and commissioners, and also from reviewing the achievement of targets set in 2020 / 21.

### **Decrease Waiting Times and Provide More Support to Those Clients Waiting for Treatment**

Impact on Teesside continues to struggle with waiting times. When the service began in April 2020, we inherited waiting lists from existing and outgoing providers. This resulted in over 6000 people, either partway through therapy or on an existing waiting list, being transferred into the service. At this time, we went through a TUPE process, and due to the Covid-19 pandemic, some staff required furloughing and delivery of services needed to be adjusted to comply with government guidance. This has had a cumulative effect on waiting times with the service starting with a deficit of almost 6 months equivalent activity. Unfortunately, we have not managed to reduce waiting times significantly during 2021 / 22 but waiting lists have stabilised and are no longer growing.

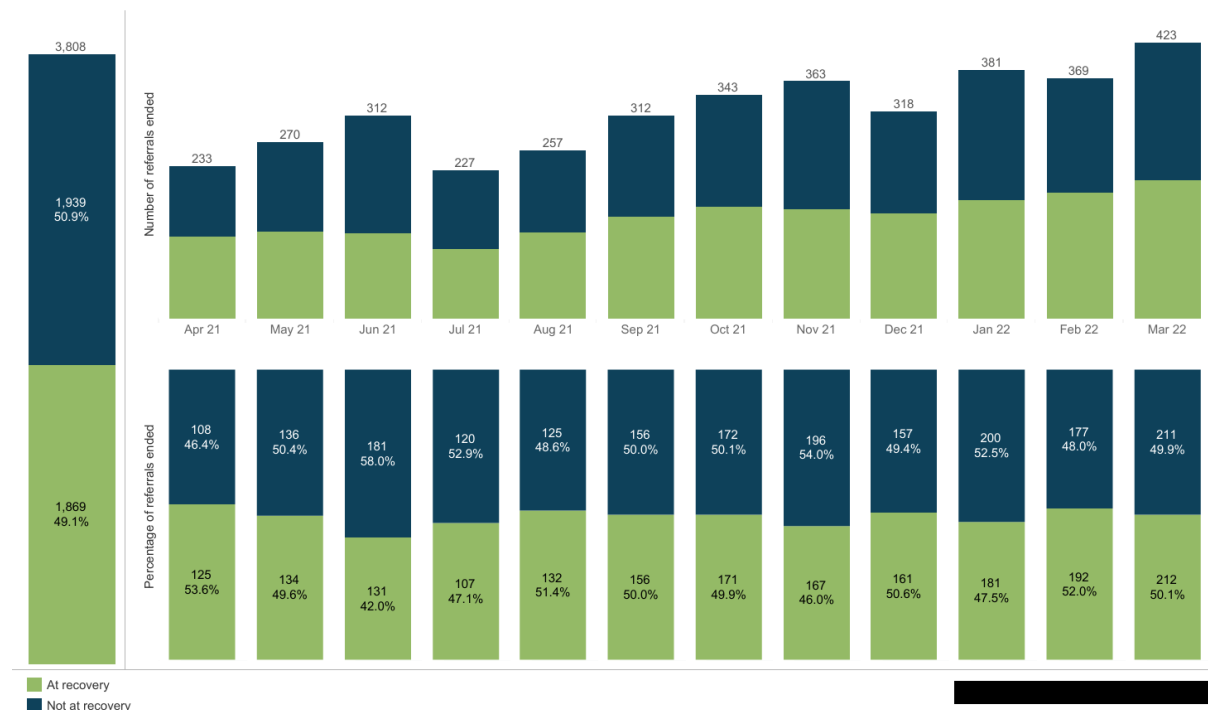
An additional challenge has been retaining IAPT qualified staff. This is currently a national problem for all IAPT services as people's priorities and working lives have changed following the pandemic, staff are opting for flexible remote only contracts. Where Impact can offer some flexibility, we are required (and want) to deliver our services both face to face and remotely via online video call and telephone. This has had a natural impact upon waits, as we have struggled to recruit suitably qualified staff into vacancies. Whilst we have a high number of trainees in the service with a view to expanding the workforce, this is not immediate and courses run up to 18 months at a time, during which we receive reduced clinical activity.

Waiting times will remain a priority for the coming year.

### **Improve Recovery Rates and Outcomes for Clients**

'Recovery' has a specific clinical meaning within the IAPT context linked to a reduction in symptoms measured using questionnaires throughout therapy. There is a target of achieving 50% recovery, a client is judged to have met recovery when their scores on standard measures for depression and anxiety have dropped below a threshold.

The table below provides a monthly record of recovery rates, this shows that across the year the recovery target was met on 6 occasions and on several occasions was just short of being achieved.



This demonstrates some improvement on the first year of the service, during which the recovery target was met on only one occasion. In comparison, the total recovery rate in year one was 45.7% and for year two was 49.1%.

Whilst this demonstrates progress, there is room for development and improving the recovery rate and meeting the target set will remain a priority for the next year.

### Increase Access Rates and Face to Face Appointment Provision

Impact on Teesside has struggled to come close to the numbers accessing the service that are set within the target. We identified a data quality issue within this whereby some activity wasn't being counted towards this target. This was corrected in October 2021, from which point there is a noticeable improvement with all activity being accurately reported. However, the initial error resulted in only achieving 14.2% of the 22% target.

Due to length of some waits for 1-1 support, we were initially reluctant to actively promote the service if the wait for treatment was going to be considerable. Despite this we have done some targeted promotion to certain groups where we had less of a wait. We have advertised our groups on social media over the year and contacted local hospitals and services regarding our Pain and Fatigue Group which clients can access within 8 weeks of referral. Silver Cloud as a treatment intervention has also been promoted.

## IAPT Performance

### Service Targets

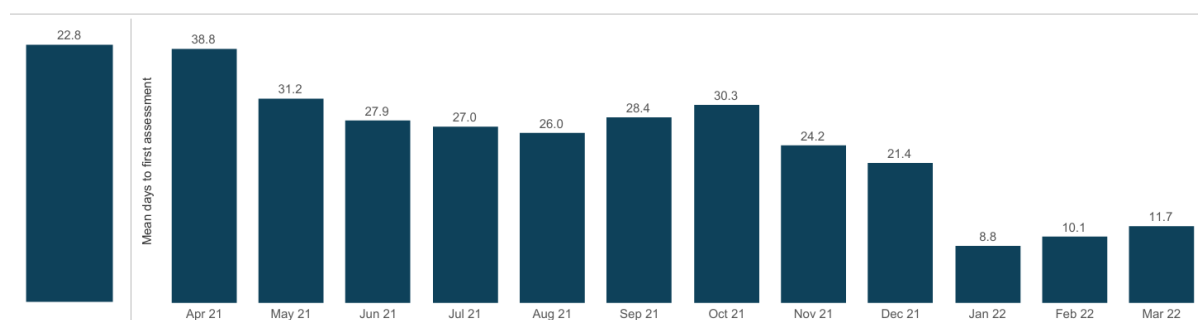
Entering Treatment within 6 weeks of referral	75%
Entering treatment within 18 weeks of referral	95%
Prevalence (proportion of people with a level of need within CCG area who enter treatment)	22% (Annual target)
Referrals assessed within 10 days	90%
Proportion of people who completed treatment and moved to recovery	50%
Proportion of referrals with a problem descriptor recorded at assessment	85%

The above targets all apply to the IAPT pathway, however across the service we apply the same targets for waiting times.

### Waiting Time for Assessments

Waiting times for assessment have reduced significantly throughout the year and this is something we continue to monitor.

In April 2021 we changed our information management system. This was not a straightforward process and whilst attempts were made prior to and during this to ensure minimum disruption, this did not happen as expected. This resulted in a delay in booking assessment appointments and created a backlog of people waiting. This had a natural cumulative effect for the following months and a plan was put in place across the whole clinical team to provide an increased number of assessments over a 20-week period to remove the delays being experienced and recover from the complications caused by the transfer.



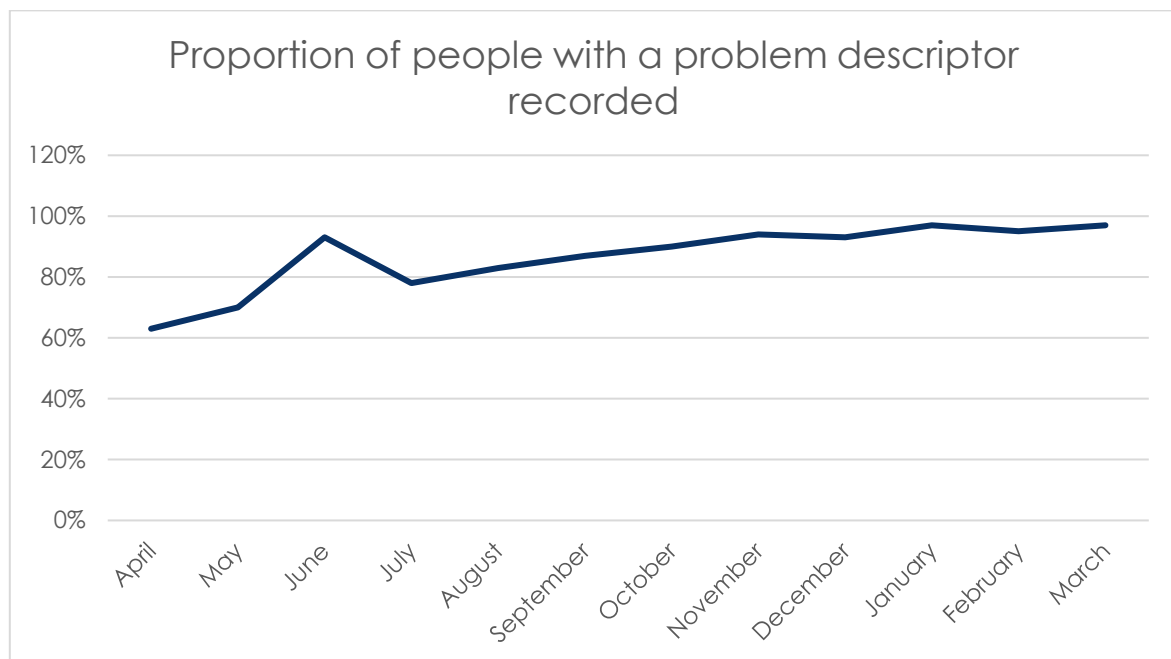
### Waiting Times for Treatment

Whilst waiting times for 1-1 therapy remain high in some areas, other treatment options provided mean that the overall average waiting time to enter treatment is reduced. This includes online treatment, groups and support calls where needed.

Progress in reducing waiting times was also affected by the data transfer difficulty resulting in the clinical team supporting further with assessments, thus removing some capacity from treatment. This will not be a problem this year and further progress will hopefully be made.

### Proportion of people with a problem descriptor recorded

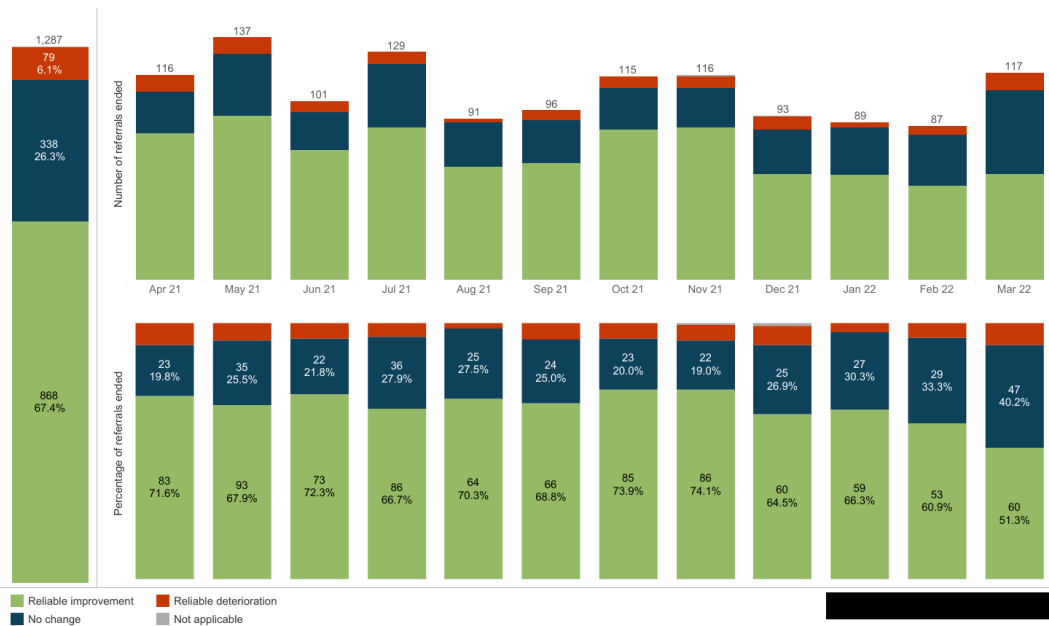
Not only has effort gone in to increase the proportion of people with a problem descriptor recorded, but significant work has also gone into ensuring the accuracy of this problem descriptor. Training has been provided on identifying appropriate problem descriptors, this is recorded and available on the services SharePoint page. The leads and seniors for each pathway in the service run regular audits of their waiting lists, this highlights any clients who have moved from the assessment stage and onto a waiting list who do not have a problem descriptor. An email is then sent with a request to add this in a timely manner, which will be a contributing factor to how we have moved from 63% completion to 97% completion across the year. To try and increase accuracy, a significant number of problem descriptors were removed from the system, these were often inappropriately used or not used at all, this has left us with a small number of suitable options which help make a clearer and more accurate decision.





## Counselling and Wellbeing Performance

Although clients on the counselling and wellbeing pathway complete the same standard measures as those accessing the IAPT part of the service, effectiveness is not measured in the same way. This is because many clients do not score within the clinical criteria needed to 'recover'. Effectiveness for this part of the service is therefore measured on overall scores improving. The in-house target for improvement in this pathway is 65% which has been achieved this year.



## Waiting Times for Counselling and Wellbeing

This is one of our waiting lists that has shown real improvement over the course of the year, both in the number of people waiting and the length of wait to begin therapy.

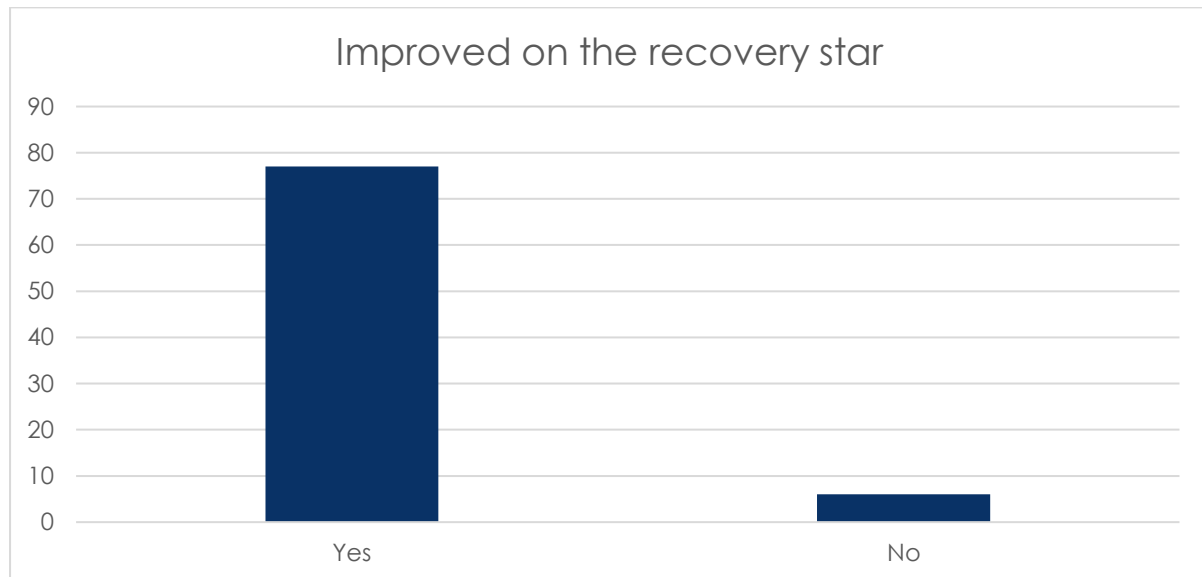
Due to there being a treatment option of counselling for depression within the IAPT pathway, it was identified towards the end of the first year that some staff had found it difficult to understand the difference between the IAPT option and the counselling and wellbeing pathway. This resulted in some people being placed on an incorrect waiting list. As a result of this, mandatory training was provided on the differences between treatment options for assessors to help them better understand the pathway and how to make helpful and correct decisions following assessment. We have also introduced a communication channel for counselling pathway decisions for staff to request support with selecting the most appropriate option for clients.

This approach, plus regular audits from the senior staff has meant we have made real progress with this pathway, meaning we can be confident that the team working on the pathway are currently staffed to the appropriate level required to meet the demand for this intervention and can hope to make further progress over the coming year.



## Foundation and recovery performance

Foundation and recovery utilise a different measure to evaluate the effectiveness of their pathway. The [Recovery Star](#) measures functioning in 10 different areas. An improvement rate of 93% was achieved in the period with improvements being made on an average 6 points on the star.



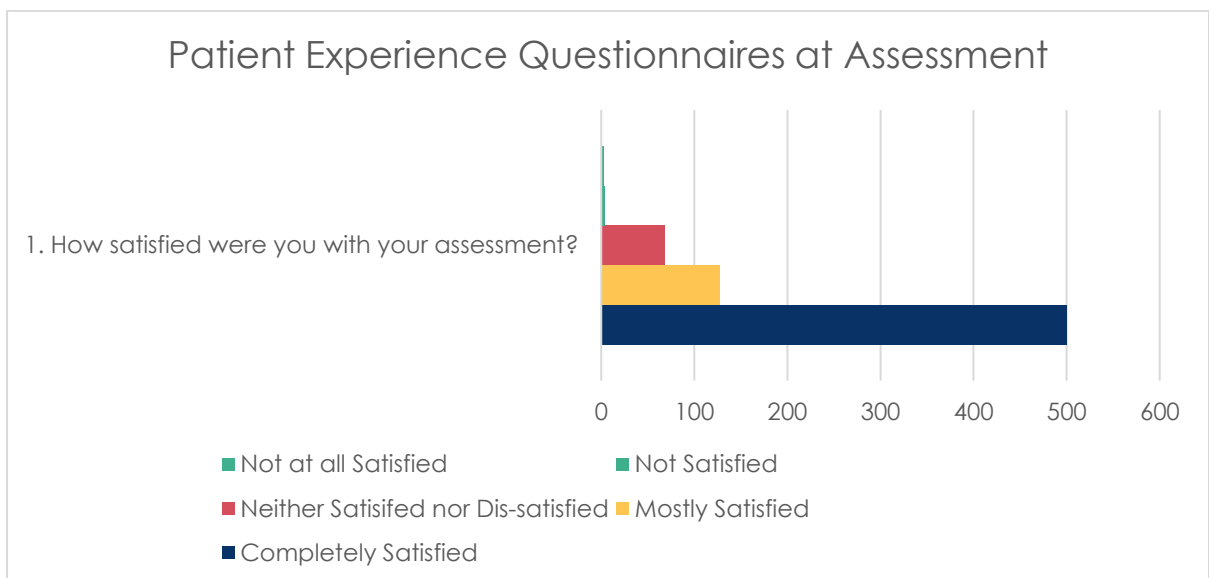
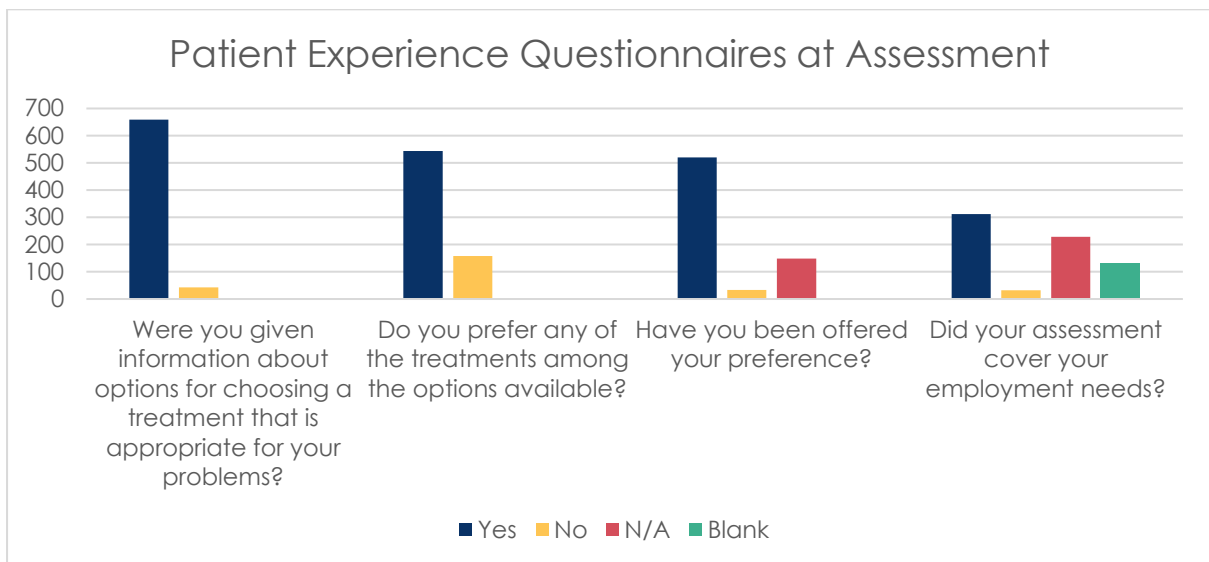
## Waiting times for Foundation and Recovery

This part of the service comprises 3 different treatment options; Foundation Pathway, Recovery Pathway and Recovery College. Within the service we have identified an increase in clients presenting with complexity and also professional referrals into the service that request this pathway as it is something not commonly available within IAPT Services. Generally, the waiting times have been fairly stable across these pathways, though longer than we would hope. Some work has been completed on this with an innovative trial of offering clients a pilot programme to include shorter 1-1 support in the foundation pathway but whilst they attend the Recovery College at the same time. This was recently completed, and an audit is ongoing as to the efficacy of this pilot and its outcomes. Whilst we have seen an increase in numbers waiting for the Recovery College, this is not necessarily a bad thing as we are able to run courses and reach a number of people at the same time, we are also offering this college alongside or whilst clients are waiting for IAPT or Counselling/Wellbeing options in an attempt to help with engagement and progress ahead of therapy.

## Feedback, Complaints and Compliments

Impact utilises IAPT 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 702 PEQ's following assessment



Selection of comments:

I feel the person I spoke to listened was compassionate and spoke with the understanding of trying to find out what would best help me and my needs.

*Feels like a safe space and always there to help*

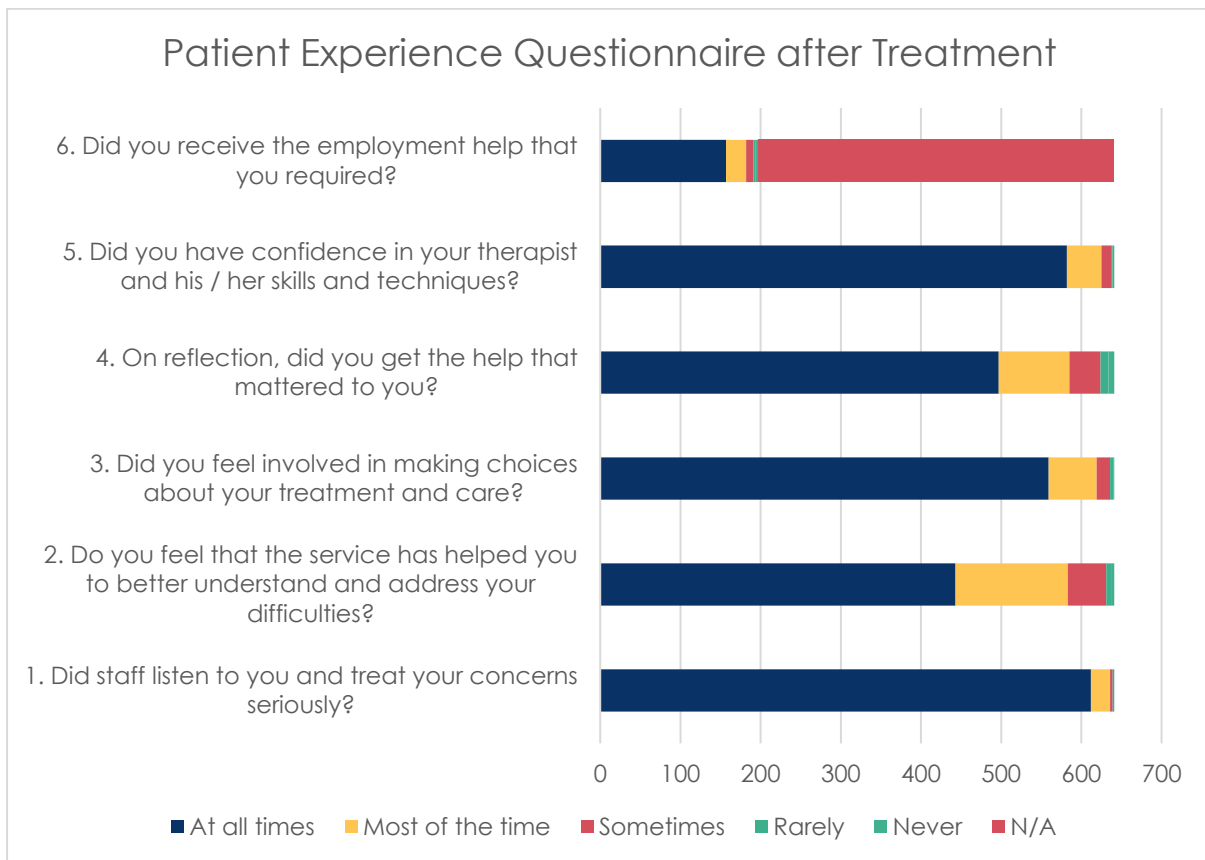
All the staff have been extremely helpful and understanding. My assessment was thorough and made me feel much

Very professional, understanding, amicable, flexible and reassuring towards one's individual needs.

*The initial assessment covered the issues at hand and gave me the opportunity to share how I was feeling without going into too much detail which gave a good balance for the initial assessment. Support was offered throughout making it much easier to talk through the issues*

I was extremely anxious prior to my appointment but my Counsellor was very reassuring, keeping me informed at each stage of the assessment and made my appointment a positive experience.

## Treatment PEQ's



## Selection of comments

Impact has been great from the beginning it's the only mental health service that has been able to help me in a realistic and practical way

Time was taken to understand myself and my problem/issue. Therapy was provided to help me deal with my issue, expanding on things as time went on. The focus on ensuring sessions met my needs and being made to feel fully inclusive on the how the sessions went.  
 Openness in discussions and feeling of being valued was important  
 Well explained information provided and demonstrated ensuring I understood  
 Overall very pleased with the help and guidance I have received.

I feel like my counsellor was empathetic and listened to everything I said. She offered resolutions to my problems and provided me with coping techniques for my anxieties. She was very supportive throughout my whole time of receiving counselling support and gave me great after care advice too. Thank you for everything.

I have really enjoyed being part of this group. I was anxious prior to meetings but always really enjoyed them once I arrived. There were lots of life tips, I really liked the other members and tutors. A positive experience.

I have had therapy in the past and felt it to be a waste of time it has never really helped (with other services not impact) So I was very sceptical when I was referred to impact but my therapist was fantastic I can not begin to say how much she and her knowledge and understanding has helped me to cope and manage my OCD and other issues. I was in a dark place when I was referred but I feel so much better after the CBT I now feel a little more in control.

After years of mal-suited treatment, misdiagnosis, and numerous counsellors under different organisations (even in various cities), this is the first time I have ever had such a life changing response to counselling. I truly hope that there is a way for your quality of service and treatment adaptability to be held as an example to other organisations, as I haven't experienced anything that comes close in the past 6 years of mental health treatment.

I really can't express my gratitude to the whole team at IMPACT on Teesside enough. Whether it's the consistently kind, understanding and proactive admins on the phones and emails that go out of their way to answer questions and get you in touch with the right folks; or the fantastic counsellor that has helped me turn my mental health around- I couldn't appreciate the work that you all clearly take pride in doing any more than I already do.

I might not be "fixed", or exactly who or where I want to be, but for the first time in my life I really believe I have the tools and understanding to get there.

I just feel like she was an angel from sent from up above ...she massively helped me cope with my severe panic attacks and to learn how to manage and to control them ...I just wished I could of had her for longer, I also believe the online service was a fantastic service as I believe if it was face to face I most probably would of cancelled numerous appointments due to not leaving house etc .

Excellent service brilliant therapist. Felt treat like a human being and happy that I have received more help at the end of my therapy. I.e counselling and groups.

## recovery college feedback

The courses were very helpful and informative.

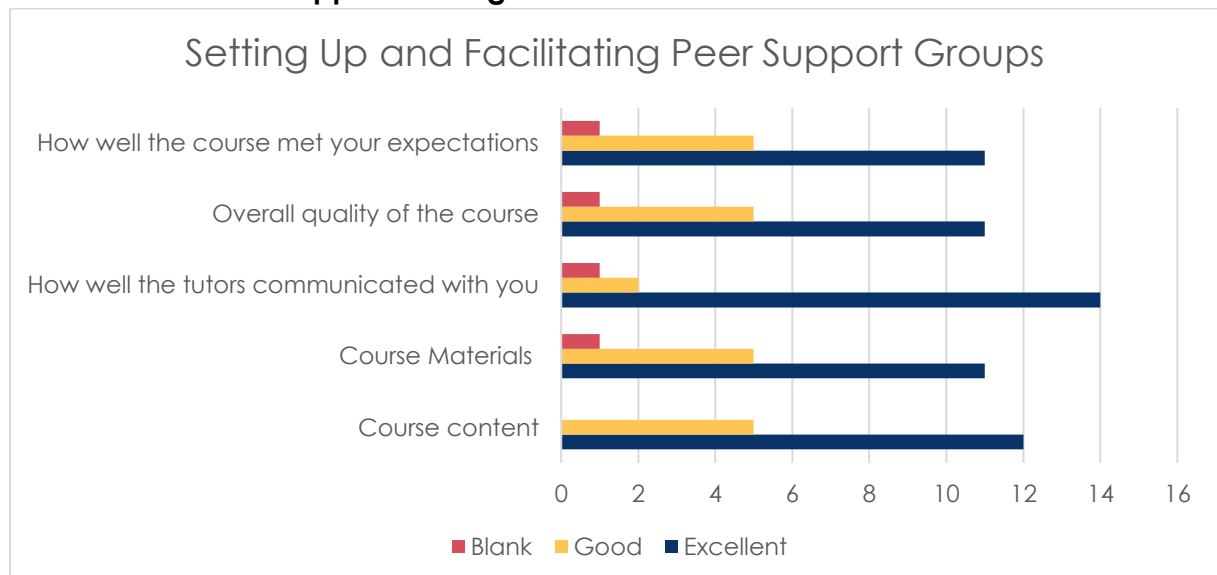
Very friendly atmosphere, makes me feel comfortable

I like it was kept appropriate. Topics were kept appropriate this meant you got what you were supposed to.

Marvellous!

I found this course extremely helpful both for my mental health and my creative writing needs, and feel like I have gained a lot of useful information and techniques in both regards

## Feedback for Peer Support Training



## Complaints

The service recorded 8 formal complaints throughout the period, however all informal complaints and reports of dissatisfaction with the service were investigated and responded to.

Complaints centred around the following themes:

- Communication, mainly around being contacted when promised and receiving agreed correspondence
- Staff conduct, primarily around how difficulties were dealt with
- Waiting times

As a result of these complaints the following improvement actions have been taken:

- Ensure staff provide accurate information to avoid any confusion
- Staff improvement plans
- Process reviews
  - Support and contact that can be offered whilst clients are waiting for treatment
  - Review of staff sickness process

## Incidents and Learning

Impact recorded 9 clinical incidents during the reporting period. All incidents are reviewed, and learning is shared throughout the team.

The following themes were identified during review:

- Communication with other services involved in a client's care doesn't always happen as it should.
- Decision making isn't always documented fully.
- Policies, processes, and procedures were not always followed with no indication why.
- Internal communication sometimes delays action.

## Improvement Actions

The following improvement actions have been identified as a result of incidents:

- Update of information governance training to put more emphasis on the importance of information sharing
- Briefings to staff on the importance of following policies and procedures, with individual staff members supported where required
- Links made with the Patient Safety Team at Tees, Esk and Wear Valley NHS Foundation Trust (TEWV) to work collaboratively and share information on any incidents we become aware of.

## Governance and Quality Assurance

Impact has an established governance group which meets on a bi-monthly basis. All organisations involved in the Impact partnership are represented at the group and it has responsibility of approving policies and procedures to have oversight of complaints and incidents. Impact have also recently introduced a quality assurance forum. The purpose of the forum is to ensure all improvement actions are carried out and to they are of benefit to clients, staff and the delivery of the service. Now that the service is becoming more established and work is starting to return to offices and venues, audits will be implemented to assess the quality of services delivered within the Healthcare Quality Improvement Partnership (HQIP) guidance<sup>1</sup> assessing patient experience, clinical effectiveness and patient safety. Audits will be categorised within different quality domains:

- Clinical
- Operational
- Information governance
- Safeguarding
- Organisational

### Information governance

All partners are fully compliant with the [Data Security and Protection Toolkit](#). Impact have not had any reportable data breaches or incidents in the period.

### Audits

Impact utilises a range of methodology when carrying out quality audits including spot checks, regular clinical audit, staff questionnaires and interviews and client feedback.

Clinical audits regularly review:

- Waiting lists, particularly clients at risk who may require escalation to a more specialist service
- Clinical decision making
- Clinical outcomes
- Risk assessments and clinical documentation
- Data validity and completeness

Any non-conformance found within audits is added to the rolling quality improvement action plan. This plan keeps track of all actions from complaints, incidents and audits and is monitored at the bi-monthly quality assurance forum. All staff members are made aware of improvements via weekly updates and monthly bulletins.

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<sup>1</sup> [Final-Quality-Improvement-QI-Tools-09-12-20.pdf \(hqip.org.uk\)](#)



## Service wide clinical audit

Audits carried out	Good practice we found	Improvements we have made
Audit on completion of risk assessment document	Risk documentation completed was appropriate and meaningful	Some staff were not using the required documentation and were documenting risk elsewhere on the record. This made it difficult to quickly find the required information in the event of an emergency. This has been circulated to all staff and added to the risk management training
Utilisation of the 'think family' approach in working with clients aged 16-18	Some good practice found of discussing information sharing with family and sometimes involving parents in treatment planning	This approach was not always utilised. As the service is an adult service, consideration wasn't always given that in the eyes of the law the client is still a child but can make decisions around their own treatment and care. The importance of discussing involvement of parents and carers has been shared with the team, and added to risk management training
Referral to assessment pathway – unnecessary waits	Referrals into the service were acted upon quickly and appropriately in most cases	Some referrals were sent to duty supervisors to check appropriateness. Of the referrals checked some had been sent to duty supervisors to check which didn't need to happen. Clearer guidance has been cascaded to the admin team.
Safeguarding policies	All staff interviewed stated they were aware of the policies, understood was expected of them	Staff requested more support in the clinical record keeping of safeguarding concerns. This will be rolled out to all staff in the coming year

## **APPTS**

Alliance was previously accredited by the Accreditation Programme for Psychological Therapy Services (APPTS)<sup>2</sup> and is working within the same quality standards within Impact. We will be working towards gaining the accreditation for Impact in the latter part of the year.

## **Data quality**

Data quality is reviewed on a monthly basis. This includes the validity of records and checks for the completeness of demographic information. For referrals received in the period, 99% have an NHS number recorded.

## **Innovation and Development**

In response to some of the challenges the service has faced, we have consistently strived to develop and improve. The following initiatives and developments have been implemented throughout the year:

- Review of the duty team (the duty team provide assessments and clinical support for any risks or difficulties faced by practitioners). This included recruitment of Mental Health Support Workers, a Referral and Assessment Co-ordinator and a full time Duty Supervisor. This provided more consistency for staff in knowing who to go to for support.
- We are developing a client portal that will give our clients access to:
  - Quality checked coping strategies: shorter guided exercises that will help a client learn a new coping skill or adapt an existing one to be more effective.
  - Digital recordings of our groups: By recording our groups, it will mean that we give our clients the opportunity to access the learning and content without them having to be able to meet the times of the group or be nervous of the idea of being in a group.
  - Written guidance for helpful strategies and psycho-education
  - These resources will be used both as a support during waiting times as well as during treatment and will continue to be updated throughout the year.
- We have created apps internally to aid with information finding and decision making. These include:
  - Signposting app: An app that keeps track of all the different local organisations, their contact and referral information. Staff can choose a location and specific labels (gender, presenting problem, financial, LTC, ...) and will be given organisations who work in that area with the selected labels.
  - Clinical Decision app: An app that helps clinicians at assessment make decisions about the right pathway. A decision tree model is being followed and clinicians can click through this and are given information at the end which pathway would be most effective.
- Expansion of the workforce with additional funding obtained for trainees.

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<sup>2</sup> [Accreditation Programme for Psychological Therapies Services | BPS](#)

- Expansion of group work offering following the positive outcomes and feedback from other groups. This will help clients access treatment much faster and will give a wide variety of self-help. This includes Bespoke groups offering a 6 week programme focussed on supporting vulnerable young people to develop emotional resilience through building confidence and skills to manage their own mental health. The groups offer a safe space to encourage peer support, improve connections with others and build self-confidence. The groups also help us to identify if the client is ready to engage in other treatments and/or what additional support might be needed.
- Huddles with secondary care, education providers and CAMHS to discuss clients care where required. Information sharing in this way and working together with our colleagues from other services and organisations mean clients are offered treatment most appropriate for their needs, whether that is within our service or another one. Having this space also enables a smoother transition between services.
- We introduced pathway guidance around the treatment of Bulimia and Binge Eating Disorder following changes to NICE guidelines for guided self-help to be offered as an initial step for clients. The pathway guidance was developed relative to the evidence base around guided self-help for these presentations and with NICE guidelines in mind. A CPD programme was developed to go alongside this. We are continuously reviewing the implementation of this guidance in relation to efficacy of treatment for these presentations at Step 2.
- The introduction of a Peri-Natal group commencing in Spring 2022, providing support to pregnant (or partners pregnant) and parents to children under the age of 2. The purpose of the group is to provide coping strategies during this perinatal period. The group will be open to all clients regardless of pathway.
- Following liaison with the Peri-natal team, the current Grief & Loss Group was adapted to a bespoke Loss group for an external organisation supporting Mothers who have had 2 or more children taken from their care. This was delivered as a Face-to-Face group & was well received.
- Plans to expand on service user involvement in providing information and support to clients of the service.

## Staffing and Staff Wellbeing

Impact take pride in supporting the mental health and wellbeing of our staff, given both the challenging and rewarding work we do in supporting clients across our 3 services, we believe our workforce is our biggest asset and want to ensure that they feel supported from us.

We have a Health and Wellbeing Group, which comprises of staff across the service, which meets regularly and looks at engaging ways to get staff thinking of their own health and wellbeing, as well as providing information and lots of different opportunities for staff to get involved. We have recently introduced Health and Wellbeing Champions into the service as well, who are another layer of support for staff to get signposting etc around health and wellbeing issues.

Each employing organisation has a wide range of initiatives and benefits that are in place to ensure staff feel supported and valued in their roles, this includes enhanced holidays for length of service. We have additional health and wellbeing initiatives for staff including the ability to have reduced working hours to ensure they have time for positive measures for their own health and wellbeing, alongside other time off allocated around birthdays etc as recognition of what they deliver into our services. We also have an EAP scheme for all our staff.

### **Staff Feedback**

Impact appreciates the need to ensure we engage with our staff regularly and get valuable staff feedback around how the service works including detail around our services and processes etc.

We have a number of mechanisms in place that allows us to get feedback including the Investors in People process which gets direct feedback independently around the Investor framework. We actively encourage all staff from starting with us to have an open and transparent approach in terms of asking questions or feeding back any information around their role or working within Impact.

Each employing organisation have staff surveys which are conducted, including other surveys around issues that we want to get more detailed feedback about this has been a useful approach during the pandemic. Results are discussed at board level with action plans created to improve.

Our management team adopt an open door approach so that staff are able to speak to them with any concerns or issues, including a HR team that are available for all staff.

## Quality Improvement Targets for 2022 / 23

Our quality improvement targets have been selected following consultation with the leadership team, review of achievement throughout year 2 and review of the challenges faced. We have overall service targets and each pathway have created their own improvement targets for the coming year.

### **Service Improvement Targets**

#### **Waiting times**

Waiting times are of a significant focus within the service and something we are always working towards improving. We have begun rolling out a series of 'Introduction to...' Courses. These run across the pathways and include Counselling and Cognitive Behavioural Therapy options, plus an Introduction to Overcoming Trauma Course, which has now run on 2 occasions with very positive feedback. The aim of running these courses is that anyone accessing the service over the next 12 months should be given these as an option, they are detailed courses that will run on a regular basis, meaning that clients will be able to access meaningful treatment sooner and with a view to reducing the length of waits across the service.

Due to the loss of provision, we have also contracted to work with a national company on providing therapy to some of our clients to reduce the wait further. We have a set amount of funding that can go towards this, and we hope this will help further improve the wait within the service.

Finally, we have a client portal ready to roll out to clients, this can be those on a waiting list or currently in treatment. This has a 'go live' date of 6<sup>th</sup> June 2022 and will be a resource for clients to access information across a variety of presenting problems, have sections for them to complete to aid their own treatment journey and also recordings of our group options for them to watch and then review with a therapist. It is anticipated that introducing this will help better support those waiting, but also provide them with valuable input that will reduce their need for therapy once allocated to a therapist.

#### **Recovery rate**

A lot of time and resources have gone into providing the team with extended training on working with trauma due to a high presentation within the service of this client group. Providing the right support for those who have experienced trauma is vital in improving their wellbeing and managing the symptoms they are experiencing so it is important we get this right in the first instance. Audits are regularly carried out to ensure clients are given the most appropriate support to meet their needs across all pathways. Where this hasn't been the case, staff members are provided with additional guidance and support to help them with their clinical decision making.

Work will continue in improving the recovery rate with an aim of achieving at least the 50% target by the end of the year.

## **Access**

Moving into year 3 of the service and with plans to address the waiting list difficulties, we have agreed on a promotional strategy to take place around September 2022 to increase the number of people accessing the service. Again, part of this will be targeted to those suitable for group options that we can offer in a timelier manner, however it will also work to ensure that our links with GP Practices continue to be established and that those requiring a Primary Care Therapy Service in the local area are aware of how to do so. We are aware of the potential impact this may have on waiting times, this

We will continue working with other services we have already started to work with as well as creating links where we can. This will enable us to provide mutual support for the benefit of the residents of Teesside. This includes the continuation of delivering bespoke groups as mentioned previously.

## **Pathway improvement plans**

The following priorities have been set by leads throughout the service:

- To reduce the length of waiting time for treatment and endeavour to bring this down to the service target of entering treatment within 18 weeks of referral
- To increase the offer of groups within the pathway as an option for clients to engage in a timelier suitable treatment.
- To continue to monitor & audit waiting lists to reduce the number of inappropriate additions, establish any root causes of errors & ensure staff are given appropriate guidance & information sharing to support this.
- Continue to audit clinical case notes to ensure quality in content, time completed & outcomes for therapy
- Achieve improvement / recovery targets set within designated pathways
- Increase the number of clients completing an episode of treatment.
- To develop further our signposting for external services to ensure we are offering the quickest and most effective support at point of assessment whether that be internal or external.
- To increase accessibility for those identified as not in employment, education or training. By developing further working partnerships with local employability, training, and education services. (e.g., Step Forwards Tees Valley & TVCA)
- Continue to develop the digital side of the service to enable all clients to have instant access to support, guidance and self help material 24 / 7.

## CCG statement

First floor, 14 Trinity Mews  
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TS3 6AL

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

29<sup>th</sup> June 2022

Dear Ms Best

### **Impact on Teesside Quality Account 2021/2022 Response on behalf of NHS Tees Valley Clinical Commissioning Group (CCG)**

Tees Valley Clinical Commissioning Group (CCG) takes seriously their responsibility to ensure that the needs of patients are met by the provision of safe care, high quality services and therefore welcome the opportunity to review and comment on the Annual Quality Account for Impact on Teesside.

Tees Valley CCG are pleased to see that Impact on Teesside have recognised a number of priorities from 2021/22 that require further work, including reducing waiting times, in 2022/23. The CCG appreciates that the cumulative effect of COVID-19 and adjusting to government guidance during this time is likely to have impacted all providers. However, the Commissioners are concerned to note the lack of progress in reducing waiting times during 21/22 and support the service's plan to focus on this area during 22/23.

The retention and recruitment of IAPT qualified staff remains an area of concern and the CCG recognises that improving staffing levels are key to enable the service to provide both face and face and remote appointments with patients. Encouragingly, the CCG note that Impact on Teesside have employed a number of trainees within the service, which is anticipated to improve staffing levels in the long term. We look forward to receiving assurance in support of this.

The Commissioners are encouraged to read that waiting times will remain a priority for Impact on Teesside in the forthcoming year, however the report is not clear as to how this will actually be delivered.

Welcome progress has been made in "'Recovery' rates, which measures a client's reduction in symptoms. The increase from 45.7% within the first year to 49.1% for year two, whilst demonstrating progress, still leaves room for improvement for

patients. Impact on Teesside acknowledge this by making improving the recovery rates a key priority for 2022/23.

It is disappointing to read that Impact on Teesside have not met the contract target for clients able to access the service and that data quality was a concern. The latter issue has now been corrected by the service, although the impact of changeover of the client management system, resulting in a delay in booking assessment appointments has created a backlog of people waiting.

The Commissioners note that due to waits for Client 1:1 support, Impact on Teesside initially did not actively promote this element of the service, however, it is recognised the work undertaken to promote other services i.e. Silver Cloud and the Pain and Fatigue group work.

The Counselling and Wellbeing service has made improvements, in terms of reduction to both the number of people waiting and length of wait to begin therapy. However, it is concerning to note the possibility of clients being placed on incorrect waiting lists. Training has taken place to improve staff understanding of pathways as well as the introduction of a communication channel for counselling pathway decisions. Commissioners recognise work around an innovative trial offering clients a pilot programme to include shorter 1-1 support in the foundation pathway, whilst attending the recovery college at the same time. The CCG awaits feedback on the outcomes of this project.

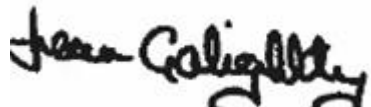
The CCG are encouraged to read clients' feedback on the service, with the majority of clients satisfied with the assessment they were provided with. The CCG note that 8 formal complaints were received and 9 clinical incidents were reported during 21/22. The themes from complaints and incidents included: communication, staff conduct, failure to follow policies and procedures and documentation of decision making. The improvement actions referenced, including the introduction of a quality assurance forum and the regular use of clinical audits, provides Commissioners with some reassurance that these are the areas that Impact on Teesside will focus on in the coming year. We look forward to receiving more robust assurance around this.

Tees Valley CCG welcomes the work undertaken as part of Impact on Teesside's innovation and development initiatives with the recruitment of mental health support workers, a referral and assessment co-ordinator and a duty supervisor. The development of a client portal providing resources to clients as well as a range of different Apps to support with signposting and pathway guidance. The Commissioners are pleased to see work to improve more appropriate information sharing with secondary care providers, and the adaption and expansion of services to meet clients' needs. It is also encouraging to read of future plans to expand on service user involvement in providing information and support to clients of the service. The CCG is pleased to see that Impact on Teesside approach to supporting staff mental health and wellbeing. This is achieved by deploying initiatives from the Mental Health and Wellbeing group, and the recent introduction of health and wellbeing champions.



Tees Valley CCG has reviewed Impact on Teesside quality improvement targets for 2022/23. The recognition that waiting times are a significant concern and focus is welcomed and the CCG is keen to see how these intended strategies will impact on client waiting times. The ongoing work to improve the recovery rate with an aim of achieving a minimum 50% target is accepted by the CCG.

The CCG fully support the priorities identified for 2022/23 and looks forward to continuing to work in partnership with Impact on Teesside to assure the quality of services commissioned in 2022/23

A handwritten signature in black ink, reading "Jean Golightly". The signature is written in a cursive, slightly slanted style.

Jean Golightly  
Executive Director of Nursing & Quality  
Tees Valley Clinical Commissioning Group