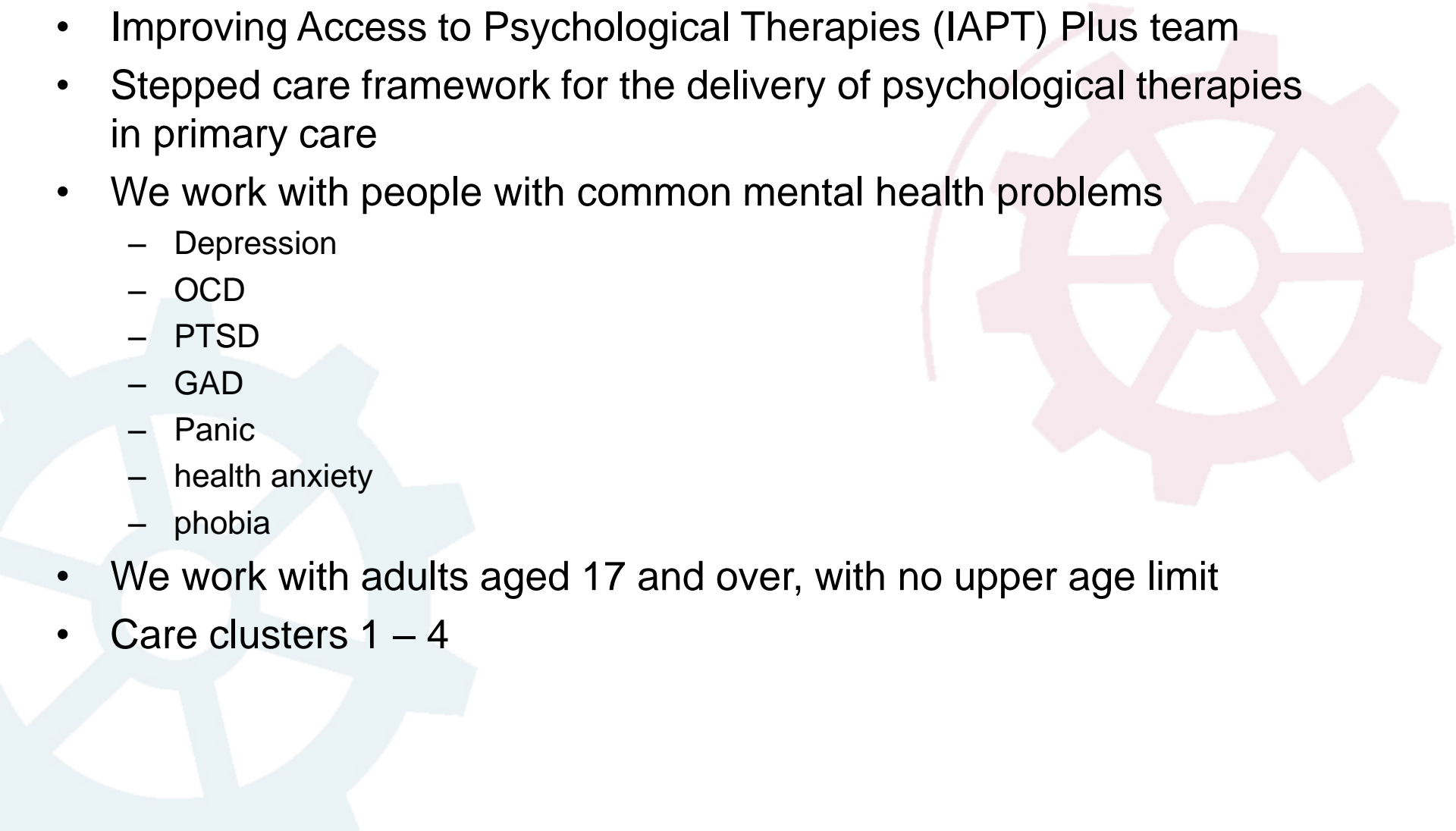




# Psychological Therapies in Primary Care in Walsall

Dr Louise Cooke  
Primary Mental Health and Talking  
Therapies Service

## What do we do?

- Improving Access to Psychological Therapies (IAPT) Plus team
  - Stepped care framework for the delivery of psychological therapies in primary care
  - We work with people with common mental health problems
    - Depression
    - OCD
    - PTSD
    - GAD
    - Panic
    - health anxiety
    - phobia
  - We work with adults aged 17 and over, with no upper age limit
  - Care clusters 1 – 4
- 

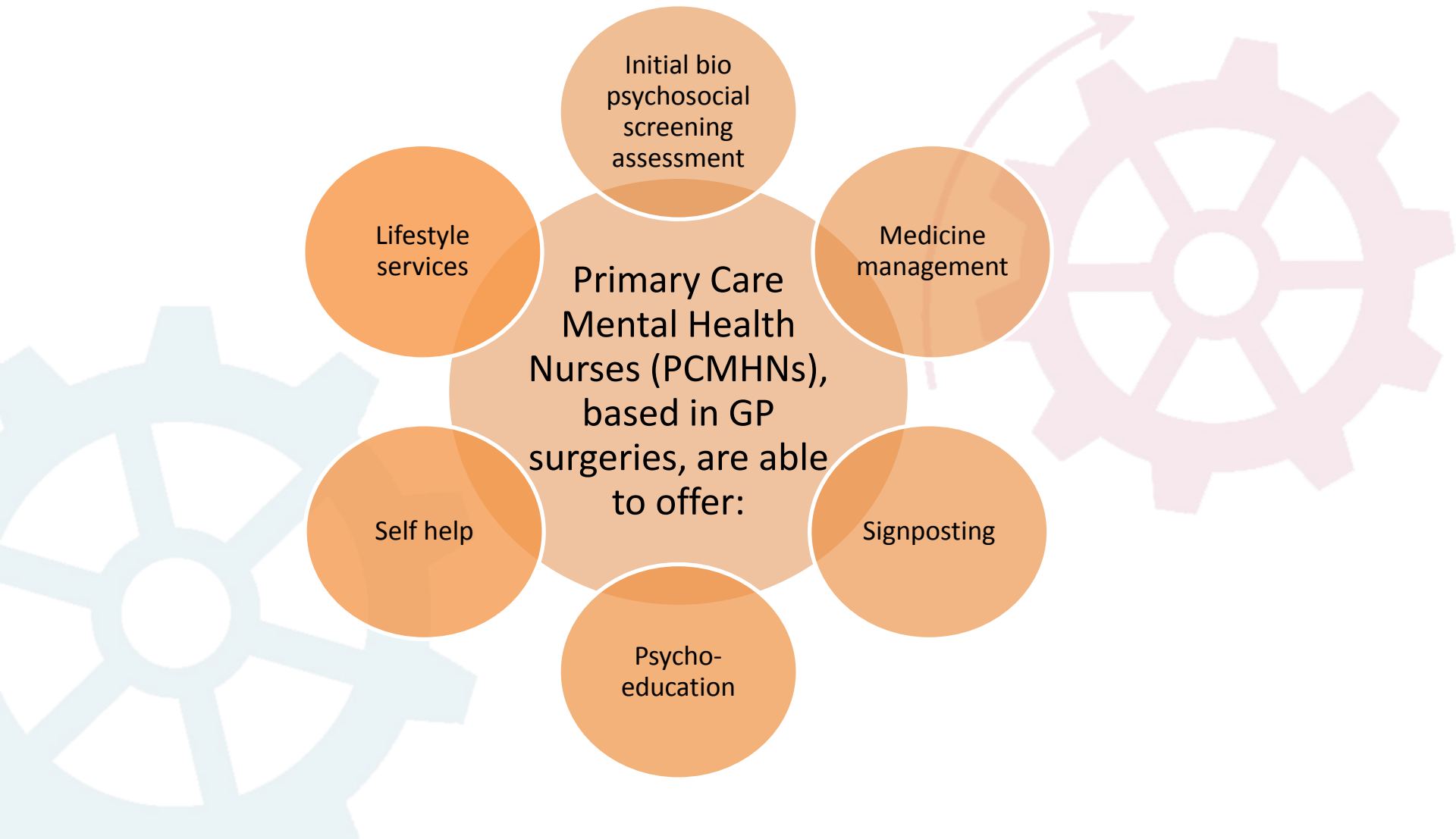
# Stepped care model

We deliver brief evidence-based talking therapies according to client need:

- Group work
- Low intensity – up to 6 sessions
- High intensity – up to 20 sessions
- Clinical Psychology – up to 26 sessions



# Primary Mental Health



## Steps 2 and 3 Interventions

### Step 2 – Low Intensity interventions

Our PCMHNs are able to offer low intensity interventions:

- Up to 6 sessions
- Individual Cognitive Behavioural Therapy (CBT)
- Eye Movement Desensitisation and Reprocessing (EMDR)
- Guided self help for depression and bulimia management
- Group interventions:
  - Stress and Anxiety Management
  - CBT for Depression

### Step 3 – High Intensity interventions

Our high intensity therapists are able to offer:

- Up to 20 sessions individual therapy
- CBT, EMDR, Dynamic Interpersonal Therapy (DIT)

## Step 3 plus - Clinical Psychology

Our Clinical Psychologists are able to offer:

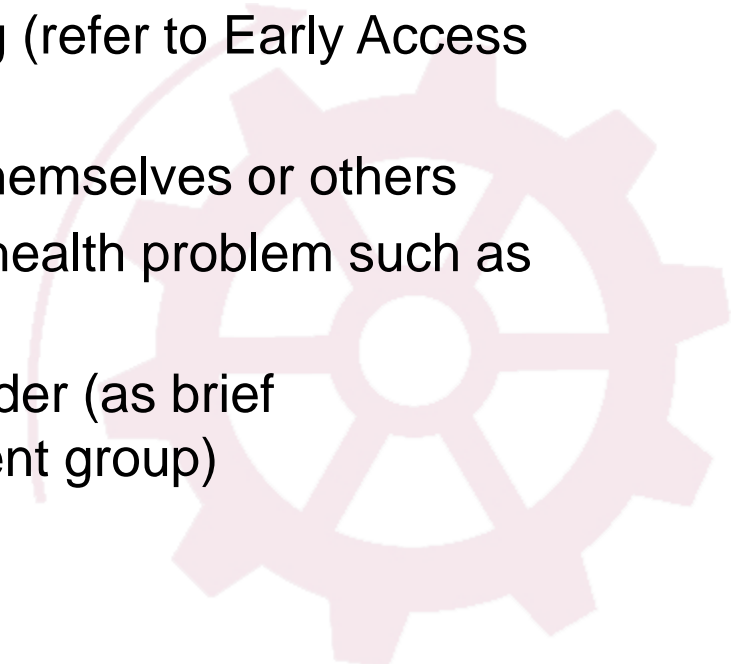
- Up to 26 sessions individual therapy
- Range of therapies available to tailor to client need:
  - CBT
  - EMDR
  - Cognitive Analytic Therapy (CAT)
  - Compassion Focused Therapy (CFT)
  - Interpersonal Therapy (IPT)
  - Solution Focused Therapy (SFT)
  - Schema Therapy, Narrative Therapy
- High Intensity group therapy – Mindfulness Based Cognitive Therapy (MBCT) Group, Feeling Better Group (based on DBT principles)
- 75-80% of caseload is care cluster 5+



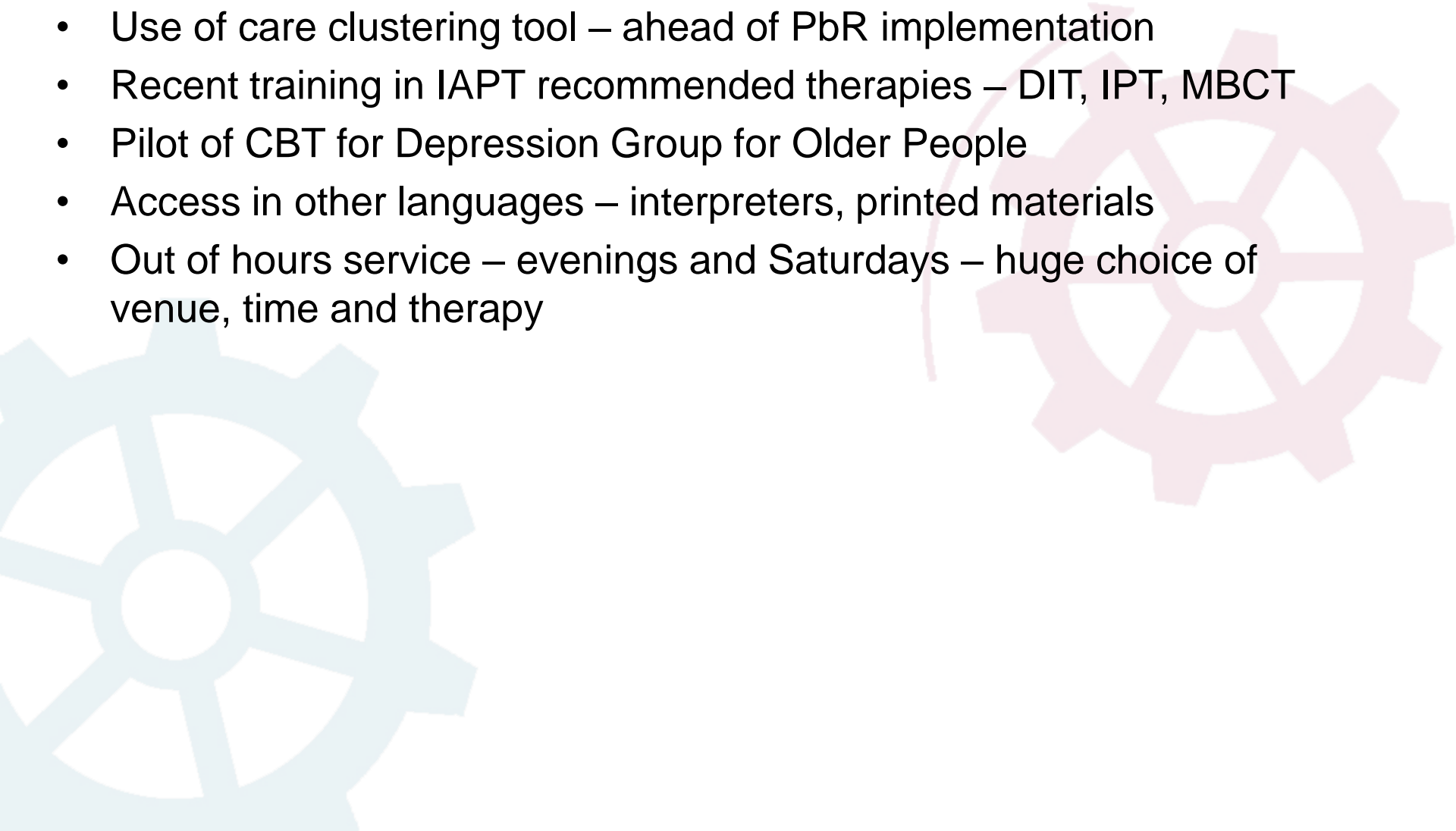
## What we cannot offer

We are unable to offer a service to the following (refer to Early Access Service):

- Clients who present as a significant risk to themselves or others
- Clients with a diagnosis of a severe mental health problem such as schizophrenia or bipolar disorder
- Clients with a diagnosis of Personality Disorder (as brief interventions are contra-indicated for the client group)



## Innovations in PMH&TTS

- Use of care clustering tool – ahead of PbR implementation
  - Recent training in IAPT recommended therapies – DIT, IPT, MBCT
  - Pilot of CBT for Depression Group for Older People
  - Access in other languages – interpreters, printed materials
  - Out of hours service – evenings and Saturdays – huge choice of venue, time and therapy
- 
- The slide features two large, semi-transparent gear icons. One is light blue and positioned in the bottom-left corner, while the other is light pink and positioned in the middle-right area, partially overlapping the text.



## Service outcome data – 2013/14

Average 50.5%  
recovery rate

99.32% patient  
satisfaction

Attrition rate =  
11% (national  
average = 22%)

	Target	Actual
• KPI 3 – No. referred to psychological therapies	6919	9972
• KPI 4 – No. entered therapy	5767	6292
• KPI 5 – No. completed treatment	499	2497
• KPI – No. off sick pay and benefits	78	260

# Client journey – integrative psychotherapy

## Sarah Jane:

- Presenting problems
- Assessment, including risk assessment
- Formulation
- Intervention
- Monitoring and evaluation
- Follow up

