



Improving the mental  
health and wellbeing of  
the people we serve

# IAPT Update

## Insight Healthcare

### Current Service and Challenges

### Health and Social Care Forum

Guy Phillipich - Service Lead

Dr Mick Collins - Clinical Lead





# Content

Improving the mental  
health and wellbeing of  
the people we serve

- What we do?
  - Presenting Mental Health Problems
  - Therapies Offered
- How we do it?
  - Clinical framework
  - Referral pathways
- Current Situation
- Looking Ahead
- Challenges throughout





# What we do

Improving the mental  
health and wellbeing of  
the people we serve

## • 10 x Main Presenting Problems

- Depression
  - Generalised Anxiety Disorder (GAD)
  - Social Anxiety
  - Health Anxiety
  - Body Dysmorphic Disorder
  - Phobias
  - Post Traumatic Stress Disorder (PTSD)
  - Obsessive Compulsive Disorder (OCD)
  - Panic
  - Agoraphobia
- 
- **Challenge 1: Treat the person, not the condition**
  - **Challenge 2: Service Gaps**
  - **Challenge 3: Often co-morbid**
  - **Challenge 4: “Pathologisation” of normality**





# What we do

Improving the mental  
health and wellbeing of  
the people we serve

## 7 x Therapy modalities

- Low intensity Cognitive Behavioural Therapy - CBT (Depression, GAD, Panic, OCD)
  - High Intensity CBT (All)
  - Counselling (only for depression)
  - Eye Movement Desensitisation Reprocessing - EMDR (PTSD)
  - Couples therapy for Depression - CtfD (Depression within partner relationship)
  - Mindfulness Based Cognitive Therapy - MBCT (Recurrent Depression)
  - Cognitive Behavioural Analysis System of Psychotherapy CBASP (Recurrent Depression)
- 
- **Challenge 5: Not just “counselling”**
  - **Challenge 6: Not a medical model**





# How we do it

- Stepped Care Model
  - Step 1: Assessment
  - 
  - Step 2: Low intensity intervention
    - Step 3: High intensity intervention
    - 
    - Step 4: Secondary Care (Psychology, Psychiatry)
- **Challenge 7: Designed around 2/3-1/3 split; reality is 1/3-2/3**

Summarize information by:

Service Name

Show

All appointments

Time Frame

Date Field

Appointment Date

Range

Last Month

From

01/06/2018

To

30/06/2018

Run Report

Hide Details

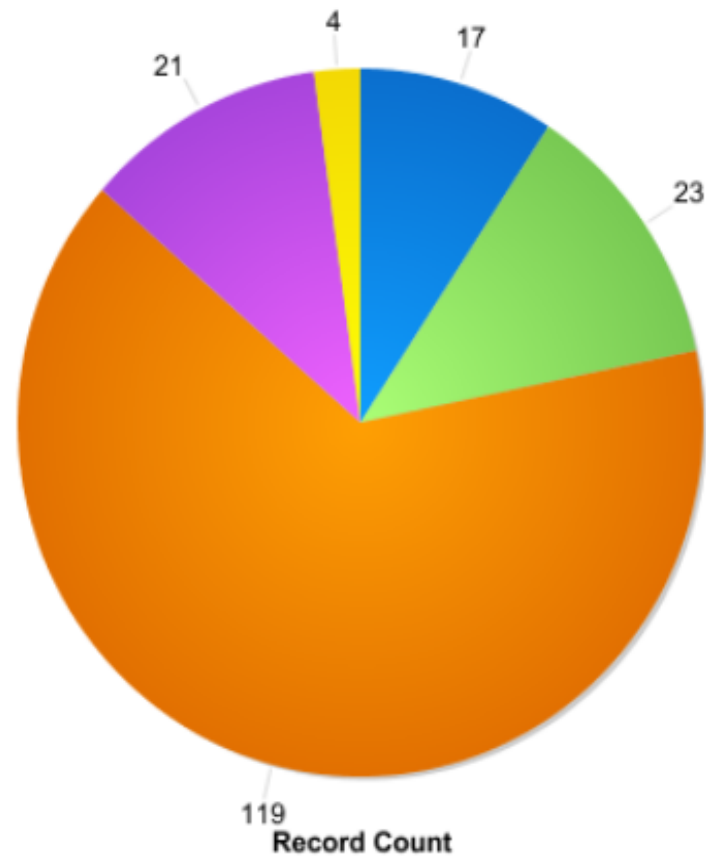
Customize

Save As

Printable View

Export Details

Subscribe



#### Care Cluster Decision

- 01 - Common Mental Health Problems (Low Severity)
- 02 - Common Mental Health Problems (Low Severity With Greater Need)
- 03 - Non-Psychotic (Moderate Severity)
- 04 - Non-Psychotic (Severe)
- Other

# How we do it

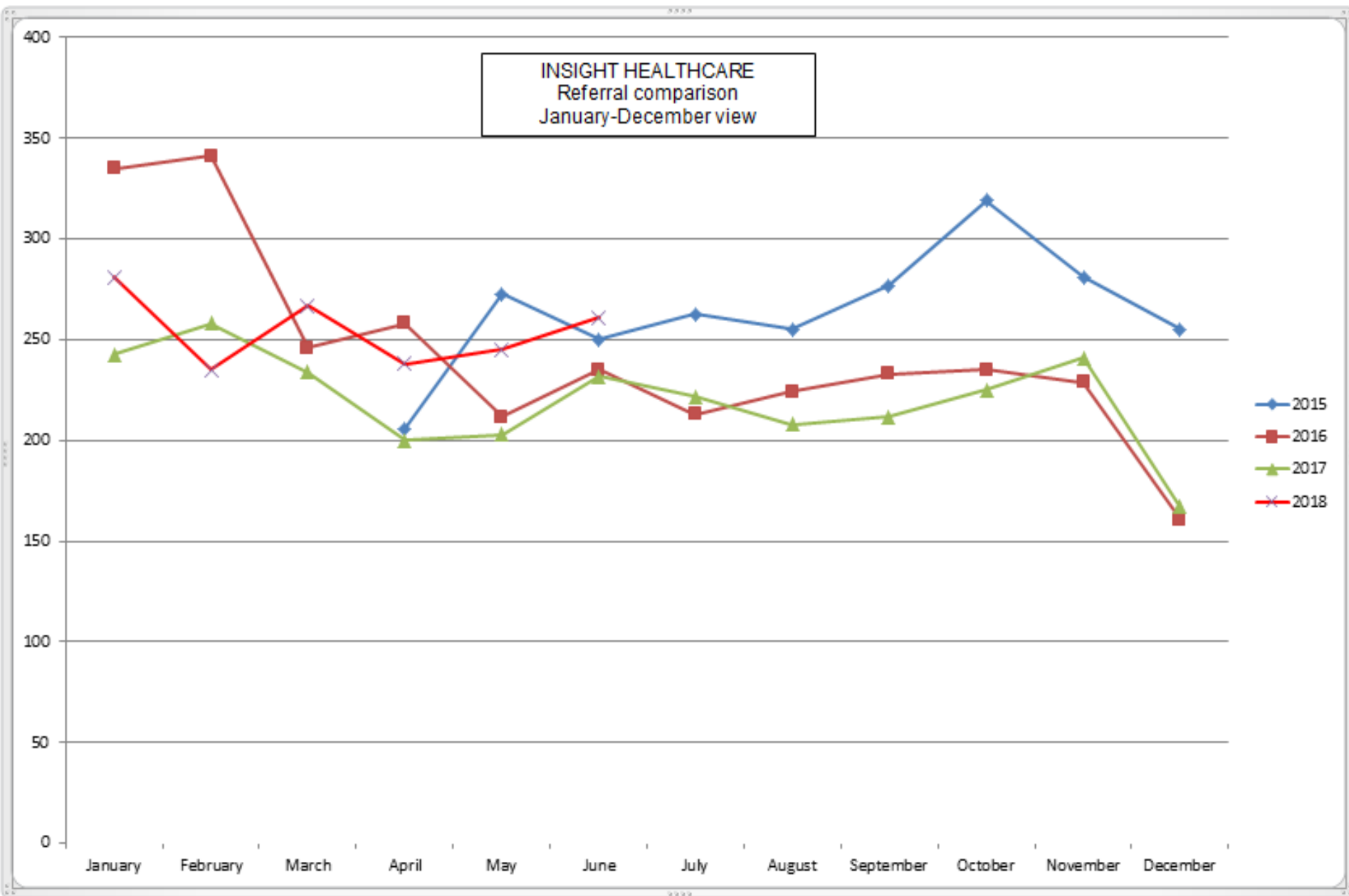


Improving the mental  
health and wellbeing of  
the people we serve

- Self-Referral (tel and online)
- Other healthcare professional
- Attended Step 1 assessment within 10 days
- First attended treatment appointment:
  - 75% within 6 weeks
  - 95% within 18 weeks
- Short-term therapy
  - 5, 6, 8 weeks
- **Challenge 8: “I need help now”**
- **Challenge 9: Not designed for ongoing support**

# Current Situation

Improving the mental health and wellbeing of







Improving the mental health and wellbeing of the people we serve

## INSIGHT HEALTHCARE - RISK PATTERN

Day	January	February	March	April	May	June
Monday	13	9	8	11	3	12
Tuesday	9	7	9	9	15	7
Wednesday	13	8	6	7	6	5
Thursday	3	7	7	4	8	3
Friday	4	7	8	1	4	5
<b>TOTAL</b>	<b>42</b>	<b>38</b>	<b>38</b>	<b>32</b>	<b>36</b>	<b>32</b>
<b>AVERAGE per working week (M-F)</b>	<b>10</b>	<b>9.5</b>	<b>8.2</b>	<b>8.8</b>	<b>8.5</b>	<b>7.2</b>



Improving the mental  
health and wellbeing of  
the people we serve

# Future

- Payment by Results
- Integration with physical health
- SYHA and RCT
- NHCT re-modelling



Improving the mental  
health and wellbeing of  
the people we serve

Questions?

