

Information Governance

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15 June 2018 Reference no. 18190082

Dear

Request for Information: Freedom of Information Act

Thank you for your email of 22 May making a request for information under the Freedom of Information Act. You requested the following information and the Trust is able to provide the information below in response:

Request:

I have recently taken over the role of Service Manager for Psychotherapy Services (Step 4 and above) for Plymouth and wonder if I could gain some information from each of you to look at how services operate across the country. I would be grateful if you are able to provide the below information for your service:

- 1. Service Criteria
- 2. Service Structure
- 3. Population of area covered by service
- 4. Caseload size, mix and average length of time on caseload
- 5. Modalities of Psychotherapy offered
- 6. Service Information Leaflet
- 7. Waiting times for each modality offered
- 8. Details of group work offered

Response:

- 1. Suitability Guidance for ALL Level 3 Psychological Therapies
- a) AMHT staff and psychological therapists work jointly to make psychologically informed decisions about progression between levels of psychological treatment.

b) Decisions are reached through consultation, supervision, joint assessments and joint triage. A patient's suitability for Level 3 Psychological Therapy will be discussed with the Psychological Therapist based within a team before initiating a formal request for Level 3 assessment or committing the patient to an assessment. A formal consideration for level 3 can be considered if clustering and assessment paper work is fully completed and available.

The overall resource in all models will be coordinated centrally by the Countywide Resources and locality leads.

- a. The consideration for possible Level 3 treatment will have been discussed with and agreed by the patient.
- b. To be suitable for level 3 intervention the patient must:
- i. Be defined by ICD10 diagnoses F00-F99 of moderately severe or severe degree.
- ii. Have significant morbidity or more severely impaired functioning and/or treatment resistance and/or concerns of risk or safety.
- iii. Be assessed as cluster 4-8 or cluster 11-18.
- c. In addition, the patient:
- i. Is willing and able to manage difficult feelings that arise during a course of therapy without resorting to significant self-harming or other high risk behaviours.
- ii. Is able to attend regular appointments, with support or in collaboration with AMHT staff
- iii. Primary needs of housing, health, welfare and safeguarding are not contributing to major instability in the absence of AMHT or partnership support.
- iv. Is likely to benefit from a brief (up to 25 sessions) course of weekly outpatient individual therapy or up to 2 years in a group.
- v. Is motivated to use therapy in order to bring about change in themselves/their lives
- d. Key Current Clinical Features which are likely to prohibit service users at this stage of care from benefitting from level 3 treatment (Consultation could be provided):
- i. Preoccupation with medico-legal, welfare issues.
- ii. Where substance misuse or eating disorder is the primary presenting problem.
- iii. The dominant presentation is forensic.
- iv. The patient's predominant need for treatment lies in the personality disorder pathway.
- e. Criteria to be considered in deciding if level 3 may be suitable

- i. Repeated previous DNAs /cancellations indicative of poor motivation, unless there is recent evidence of change.
- ii. Previous poor response to therapy, unless there is recent evidence of change.
- f. Service criteria:
- g. Priority groups will be seen in accordance with national guidelines wherever possible provided the patient meets the criteria below.
- h. The patient has:
- i. Received, or been considered and not found suitable for, interventions at Level 1 & 2
- ii. Received, or been considered for, at least two trials of treatment for the current episode in primary care, including pharmacological treatment (for Common Mental Health Disorders only).
- iii. 12 months have elapsed since the individual completed a previous course of psychological therapy equivalent to level 3 therapy (in any modality and with any service). Private therapy assessed as at a step 3 level of equivalence should be considered in this context.
- iv. The patient has received or been offered no more than 3 courses of previous Level 3 psychological therapy in which at least two models have been considered.
- 2. Psychotherapy is provided as part of the Psychological Therapies Team. This is a team that is integrated with the Adult Mental Health Teams in a locality structure. The team is made up of Consultant Psychotherapists in Psychotherapy, Consultant Psychotherapist, Principal Psychotherapists; group analysts and Cognitive Analytic Therapists as well as Clinical Psychologists and systemic family therapists.
- 3. Information is publicly available for population levels in Oxfordshire and Buckinghamshire, and the Trust has applied section 22 of the Act to this part of the request.
- 4. Total caseload for psychotherapies (group and individual) for patients in treatment: 154

Mix – see answer to question 2

Length of time on caseload – individual psychodynamic treatments: 26 weeks and group treatments for up to 2 years. Mentalisation class: 9 weeks; Cognitive Analytical Therapy: 16-20 weeks

- 5. See answer to question 2.
- 6. Attached see example of current service leaflet (under review)
- 7. Individual Psychotherapy:

City	18 weeks			
South	15 weeks			
North	16 weeks			
Group psychotherapy:	24 weeks			
Cognitive Analytic Therapy:	13 weeks			
Mentalisation	27 weeks			
8. Group psychodynamic the the group at any one time, meeti	rapy – 2 year group with normally no more than 8 people in ng weekly.			
The service also offers a 9 week rone follow up.	nentalisation class (session 1 is an orientation session) with			
make a complaint or request a re the decision is reviewed. The Tru	ce you have received in relation to your request and wish to view of our decision, you should write to me and I will ensure st will consider undertaking a review if requested to do so te the response is received by the applicant, and will apply me has passed.			
	laint as a result of the outcome of such a review, you may Commissioner's Office (ICO) for a decision.			
Generally, the ICO cannot make a procedure provided by the Trust	decision unless you have exhausted the complaints for Fol Act matters.			
The ICO can be contacted at:				
The Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF				
Please contact me if there are any	y further queries.			
Kind regards,				
Yours sincerely,				
Mark Underwood				
Head of Information Governance				