

**Health and Adult Social Care Scrutiny Committee - 16 May 2024
NHS Talking Therapies and Step 4 Psychological Therapies Services**

This paper provides an overview of the NHS Talking Therapies provision in Nottingham and Nottinghamshire and an update on the work between Talking Therapies and Nottinghamshire Healthcare NHS Trust when referrals are made between services. The paper also highlights targeted actions undertaken by NHS Talking Therapies to reach underrepresented groups and areas of focus for 2024/25.

Background

NHS Talking Therapies are evidence-based psychological therapies delivered by fully trained and NHS accredited practitioners to help with depression, excessive worry, social anxiety or post-traumatic stress disorder. Psychological therapies are also delivered as part of a new psychological therapies pathway within community mental health services for people with more severe or treatment resistant depression or complex trauma, for example patients treated in the Step 4 service; and for those with severe mental illness such as psychoses or personality disorder, alongside their psychiatric treatment including patients receiving treatment from the Local Mental Health Teams and other community mental health services.

Nottingham and Nottinghamshire Integrated Care Board (ICB) re-procured NHS Talking Therapies services in 2022/23 and a contract was awarded to Vita Health Group from 1 April 2023.

National standards for Talking Therapies Services are detailed below:

2023/24 National Targets and Standards for NHS Talking Therapies	2024/25 National Targets and Standards for NHS Talking Therapies
Increase Access to Talking Therapies to 32,868 people across Nottingham and Nottinghamshire	Deliver 15,097 courses of treatment across Nottingham and Nottinghamshire, and increase courses of treatment for over 65s
Achieve 50% Recovery Rate	Achieve 67% Reliable Improvement
	Achieve 48% Reliable Recovery
Achieve 75% of patients to enter treatment within 6 weeks and 95% in 18 weeks	
No more than 10% of patients wait over 90 days between their 1 st and 2 nd appointment	
Close the recovery gap between Black And Minority Ethnic (BAME) and White British service users	

Referrals between Talking Therapies and Step 4 Psychological Therapies Service

Psychological Therapies are delivered in a stepped care approach (see appendix 1), offering the least intensive interventions appropriate for someone’s needs, stepping up or down as required. Interventions are delivered in line with NICE guidance and includes Cognitive Behavioural Therapy (CBT), Psychodynamic Psychotherapy, Interpersonal Therapy (IPT), and Eye Movement Desensitisation and Reprocessing (EMDR). NHS Talking Therapies (Vita) delivers step 2 and step 3 interventions for mild to moderate and moderate to severe common mental health disorders, and Nottinghamshire Healthcare NHS Foundation Trust (NHT) delivers both step 4 psychology and psychotherapy interventions for people with severe and recurrent mental health needs and serious mental illness within the Step 4 service and other community mental health services.

As part of the Adult Community Mental Health Transformation Programme the [NHS Long Term Plan](#) (2019) requires systems to expand Psychological Therapies within community mental health

services for people with severe mental illness as part of wraparound support with community mental health services, with the aim of improving effectiveness and experience of care.

The average wait for assessment for Step 4 in the City was 12 weeks in March 2024, for treatment this was 34 weeks. It should be noted that these are averages and that different interventions will have different waiting times, and the average will be skewed by patients who “elect” for a particular appointment slot / therapist / location. The “waiting well offer” for patients includes letters at 3 months, 6 months and 9 months and a telephone/video or face to face appointment at 6 months, based on risk assessments. It is not appropriate for Talking Therapies to provide therapy to a patient waiting for Step 4 as a step 4 intervention has been identified to best meet their needs. However, Talking Therapies can support patients open to community mental health services, if they are not receiving any other psychological intervention.

Developments in Nottingham and Nottinghamshire

In 2023, “Community Mental Health and NHS Talking Therapies for anxiety and depression: National Guidance to support seamless and person-centred access to appropriate mental health care” was published by NHS England. The guidance outlines how Community Mental Health and NHS Talking Therapies services can jointly work with Primary Care to ensure people seeking treatment are able to reach the most appropriate service to meet their needs, therefore addressing the issue of too complex for Talking Therapies and not complex enough for Step 4.

The ICB, NHT and Vita are working collaboratively to implement and embed the four national principles outlined in the guidance which includes:

1. Improve appropriate referrals to community mental health services and NHS Talking Therapies for anxiety and depression.
2. Improve ability for people to ‘move’ between services where appropriate.
3. Increase provision of evidence based psychological therapies for severe mental health problems and outcome monitoring as part of the Long Term Plan community mental health transformation.
4. Avoid duplication of service provision across mental health pathways.

A self-assessment against the guidance has identified key local areas for focus including opportunities for clinical discussion of referrals and ‘no wrong door’ approach, and ongoing recruitment to the psychological therapy roles within community mental health services to expand the range of therapy available. Vita’s marketing, engagement and education strategy also supports ensuring referrers are making appropriate referrals to talking therapies.

New Mental Health Practitioner roles were introduced to work in Primary Care Networks (PCNs) to bridge the gap between Talking Therapies and Secondary Care Mental Health Services (see appendix 2). Practitioners are in place in all Nottingham City PCNs providing specialist mental health care in a primary care setting, including advice and consultation to the PCN, mental health assessments and short-term, focused, psychological interventions.

Additionally, funding was agreed in 2023 to enable Nottinghamshire Healthcare NHS Foundation Trust to recruit 22 additional psychology roles into community-based Local Mental Health Teams (LMHT) to deliver more evidence-based interventions. A further 14 posts across a range of psychology roles were agreed to increase the capacity within the Step 4 service for those who don’t have a severe mental illness but have severe or treatment resistant depression or complex trauma and require psychological intervention.

Patients can self-refer into NHS Talking Therapies, the Step 4 Service requires referral by GP or other mental health professional therefore where patients are assessed by NHS Talking Therapies (Vita) and require a more intensive level of treatment with community mental health services or step 4, NHS Talking Therapies will provide a direct referral for the patient without the patient needing to go back to the GP. Currently around 2% of referrals to NHS Talking Therapies are referred onwards to secondary care, direct referral to services such as Step 4, eating disorders or perinatal if the need is obvious, or the Local Mental Health Team if less obvious for psychiatric assessment.

Clinicians from both NHS Talking Therapies and community mental health services are available for consultation prior to making referrals to improve referral pathways.

NHS Talking Therapies and Health Inequalities

In addition to the national standards that services must meet, locally, there continues to be a focus on increasing courses of treatment for BAME (black, Asian and minority ethnic) groups, 18-25s and people with long term conditions (LTC).

Until end of 2023/24 there has been a target that 50% (minimum) of people who complete treatment move to recovery, which will continue to be monitored but in 2024/25 focus is on reliable improvement and reliable recovery. There is also a requirement to reduce the gap between BAME recovery rates and those of their White British counterparts.

Summary of data regarding health inequalities

The following data summary is based on NHS England validated and published NHS Talking Therapies data and local data.

Access (Entering Treatment)

The number of patients entering treatment has been consistently around 7000 (rolling 3 month) since Q3 2022/23. The exception to this is in Q1 2023/24 figures which are lower, this is the period when services transitioned to the new Talking Therapies provider.

Access rates for Target Groups

BAME

The total number of patients entering treatment each quarter from the BAME group has increased from a mean of 17% to 19% (1460 patients) in 2023/24. The BAME group represents 17.9% of the ICB overall population.

18-25

The 18-25 age group has a mean of 26% (1860 patients) accessing treatment over the reporting period. This quarterly percentage has been lower in 2023/24, likely due to young people accessing an alternative mental health and emotional wellbeing service for 0-25s, BU Notts, giving them choice in where to seek help. The 18-25 age group represent 11.1% of the ICB overall population.

Over 65s

The older adults group entering treatment remained at an average of 7% (504 patients) in 2023/24, an increase of 1% from previous years and is in line with the national average of 7%. Older adults represent 17.8% of the ICB overall population.

Long Term Conditions

The Long Term Condition (LTC) percentage of total patients entering treatment has increased in 2022/23 and 2023/24. Local data for Q4 2023/24 suggests an increase to 38% (2762 patients). Nationally, people with LTCs represent 5% of those entering treatment. People with 1+ LTC (excluding SMI & depression) represent 31.6% of the ICB overall population.

Recovery Rates

Recovery rates are based on patients completing treatment, and subsequently reported at discharge which could be 12+ weeks after they started treatment. As with access rates, recovery rates appear to have been impacted in Q1 2023/24 by the transition to the new provider but have improved to 52% overall in Q3 and Q4 (local data) against the 50% minimum target.

Recovery rates for the BAME group have historically been below the overall rate of recovery, with a mean of 48%. This reduced to 45% between Q1- Q3 2023/24 but local data suggests an improvement to 49% in Q4. Recovery rates for the White British group are generally above the 50% minimum target with a mean of 52%. The national BAME recovery rate is 47% and White British is 50%.

Service model and actions being taken to reduce health inequalities

In Nottingham and Nottinghamshire, Vita have been commissioned to deliver a model that will address local need and health inequalities, working with individual Place-Based Partnerships to focus on population-level health outcomes and tackling inequalities. This approach engages with people, partners and voluntary sector organisations to focus on hard-to-reach groups. NHS Talking Therapies have implemented subcontracts with local charities to better support access and meet the needs of target groups, are using local data and heat maps, and through engagement have established clinics in all PCNs.

Recognising the diversity and different needs in Nottingham City, NHS Talking Therapies co-locate in GP practices, St Anns Advice Centre, Nottingham Recovery Network and at both universities and they fund a link worker at St Anns Advice Centre to support awareness raising of and pathways between NHS Talking Therapies and benefits/debt/employment/housing advice.

The model has a range of access routes for referrals via telephone, online with a digital assistant or via professional referrals to enhance choice and overcome communication and access barriers. A marketing and engagement plan is in place targeting all population groups via most appropriate methods for those groups and Vita have funded link workers within sub-contracted Voluntary Community and Social Enterprise (VCSE) providers to further reach into communities and facilitate access.

NHS Nottingham and Nottinghamshire Talking Therapies and system partners have agreed a number of actions to improve access for target groups and improve their outcomes. Actions include:

- Community and Partnerships Officers (CPO) working with Nottingham and Nottinghamshire's four Place-Based Partnerships to ensure relationship building with key stakeholders. Initial work has included engaging with community organisations and services to promote the service, including two large conferences, as well as place-based actions, to co-produce services and engage communities.
- A strategy is in place focusing on Older People, Black, Asian, Minority Ethnic communities (BAME), Long Term Conditions (LTCs), unemployment and 18–25-year-olds. The Nottingham

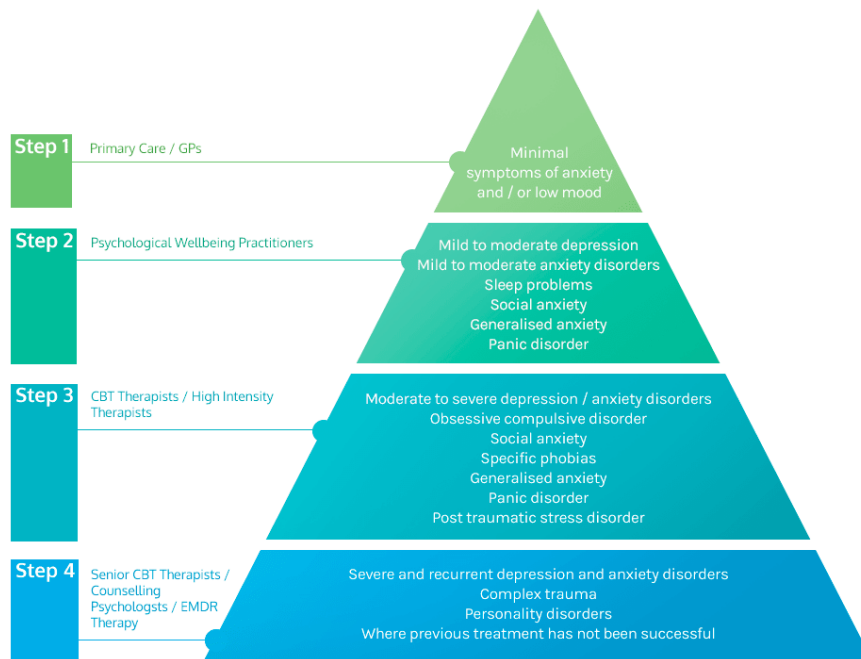
City Community and Partnerships Officer (CPO) leads on BAME, building on the work undertaken in 2022 by Nottingham Council for Voluntary Services (CVS) and Nottingham City Place Based Partnership. The learning from this work identified the requirement for education about mental health and the importance of good mental wellbeing, acknowledgment that there is a lack of language/words for mental health in South Asian communities, a requirement to address cultural taboos and stigma, and reassurance around confidentiality and privacy, a requirement for marketing materials in various languages – and include reference to requesting an interpreter or a therapist of specific background, cultural training needs of therapists and visibility at cultural events

- Targeted communications and marketing including digital campaigns, DAX (Digital Ad Exchange) targeted radio campaign, pharmacy campaigns, campaigns targeting student groups which saw increases in referrals from the target groups directly during and after the campaigns e.g., BAME referrals increased by 1% after a radio campaign.
- Bespoke pathways created with organisations including LTC organisations and Employment services, Drug/Alcohol, Neurodiversity, and Ethnically diverse community pathways. The proportion of LTC referrals have increased by 2% since the launch of bespoke LTC pathways.
- Recruitment of volunteer patient ambassadors for engagement and coproduction from June 2024/25.
- For 18-25s, work is ongoing with Child and Adolescent Mental Health Services and Be U Notts, a mental health and emotional wellbeing services for 0-25s, to ensure pathways are in place to promote referral and self-referral to Talking Therapies, working closely with universities and co-location at Cripps Health Centre at University of Nottingham.
- Utilisation of best practice and benchmarking tools such as the Talking Therapies Positive Practice Guides (BAME, older adults, Learning Disabilities, Long Term Conditions) and supporting the testing of the City Race Maturity Matrix.

Areas of focus for 2024/25

1. As part of the community mental health transformation work and implementation of the guidance, the system is continuing to develop a "no wrong door" approach in 2024/25. The objective is that referrals or requests for service are provided by the new model or are transferred via a supported handover to alternative services/self-help where their needs cannot be met within the new model.
2. Continued focus on Community Engagement - collaboration and co-production with priority groups, still focusing on Older Adults, 18-25's, Long Term Conditions and BAME communities. Carers, Unemployed and Men will also be a focus throughout the year based on populations that are known to engage less with mental health services. New initiatives include a steering group of partners and service users, developing the role of patient ambassadors and piloting community education workshops from June 2024.
3. Clinical Pathways and programmes - Development of new clinical pathways with Diabetes, Cardio and Respiratory physical health partners. Disease specific online LTC modules, a perinatal group-based intervention, Autism pilot group to be a standard offer and co-production recovery and treatment guides to support tailor interventions for all underrepresented groups.

Appendix 1: Stepped Care Model



Appendix 2: National Model for Adult and Older Adult Mental Health

Provision of a spectrum of support for people with mental health problems presenting to primary care services

