



Health Partnerships Overview and Scrutiny Committee

29 January 2013

Report from the Director of Strategy, Partnerships and Improvement

Wards Affected:
ALL

Mental Health Services in Brent - IAPT and Pathways to Psychological Therapy Services

1.0 Summary

- 1.1 Following a previous agenda item on IAPT (Improving Access for Psychological Therapies) services, the Health Partnerships Overview and Scrutiny Committee requested a follow up report from CNWL (Central and Northwest London NHS Foundation Trust) on the mental health provision on offer for people with more complex mental health needs, in order to get a better understanding of the services available and how the realignment of resources into IAPT has affected services for patients with more complex needs.
- 1.2 The report outlines the findings of a review that has been undertaken following the suggestion that there is a gap in psychological provision for step 4 interventions within secondary care services. The review has concluded that available psychological treatment for more complex mental health needs in secondary care for clinical psychology is currently limited due to the proportion of resources available through primary care IAPT. The review has identified a lack of availability in the ABT (Assessment and Brief Treatment) service for users with more complex problems and not on a CPA (Care Programme Approach). There is no psychological treatment service within the ABT service to support first point of entry for non-CPA cases and more complex cases to those less suited to the IAPT model. A number of patients who are currently receiving treatment through IAPT have a need for more complex and specialist treatment.
- 1.3 To address the issues highlighted it is proposed to combine funding within IAPT and vacant sessions in secondary care services to increase the provision of step 4 interventions within secondary care. The pathway will be revised and there will be an increase in band 8a capacity to respond to more complex non-CPA cases. The 8a post will work within secondary care and across ABT and recovery in the provision of for complex non-IAPT cases and assist with supervision of High Intensity therapists with complex cases. It is anticipated that this will result in a number of benefits including improved access to psychological treatment for those with complex difficulties and improved pathway provision for complex care needs from steps 3 to 4.

2.0 Recommendations

- 2.1 The Health Partnerships Overview and Scrutiny Committee is recommended to consider the report and question representatives from CNWL and NHS Brent Clinical Commissioning Group on the findings of the review and on how effective their proposed measures will be in fully addressing the problems highlighted.

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