

National Update



NHS Talking Therapies for anxiety and depression

Summary of Version 7 2024 Manual Updates

Perceptions of NHS Talking Therapies & Pathway Integration

Name Changes

iapt

Improving Access to Psychological Therapies

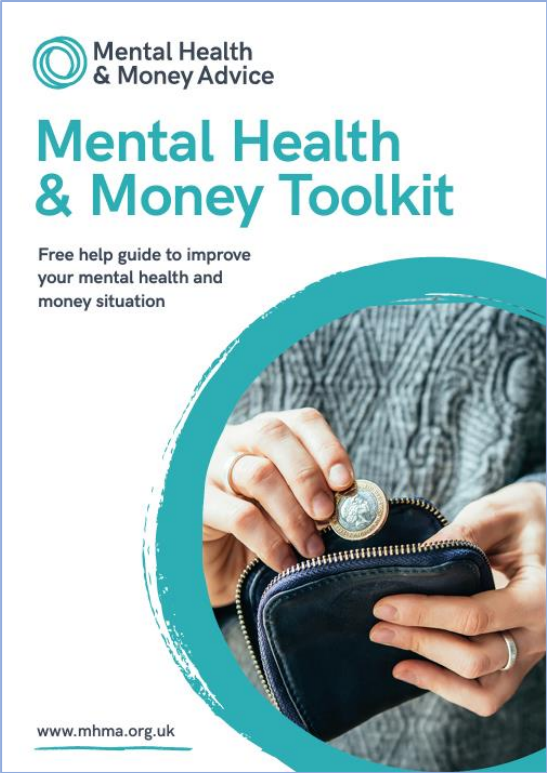


NHS
Health Education England

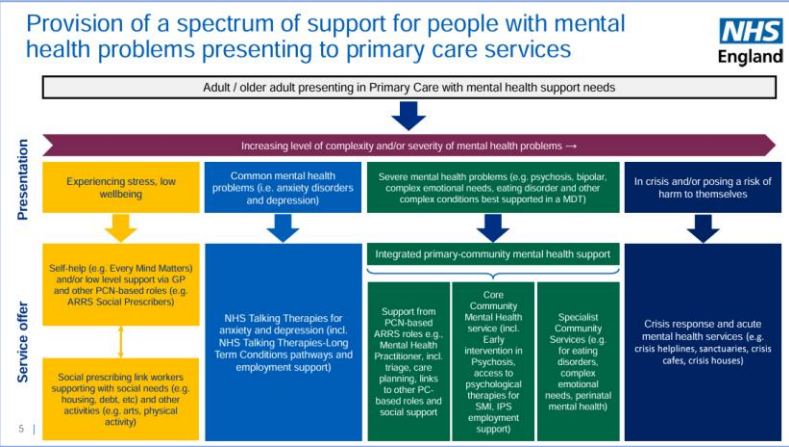


NHS
England

New Resources



Money advice and debt
Section 11.6, Pg 84



Interface between NHS TT and CMH
Section 11.4, Pg 83

NHS England

Treatment of Post Traumatic Stress Disorder

including Complex Post Traumatic Stress Disorder

Guidance for delivery of psychological therapies

Contents

Introduction	2
Summary of essential features	3
Detailed essential features	5
Psychological interventions for the treatment of PTSD	9
Care for people with PTSD and Complex needs	13
Factors in decision-making about which services can best meet the needs of a patient with PTSD/ Complex PTSD	14
Boundaries with other disorders and conditions	20

Treatment of PTSD including CPTSD
Section 5.2.3, Pg 41

Autumn Statement: Funded Bid

- Labour market benefits of NHS TT strongly related to clinical outcomes
- SO, bid aimed to *both* increase number of people treated and the proportion who recover.
- RECOVERY boosted by:
 - Increasing average number of sessions
 - Expanding high intensity workforce
- Funding for 5 years to expand the workforce establishment each year by:
 - 548 High intensity therapist posts
 - 156 Psychological Well-Being posts
- Delivering
 - 344,000 more courses of treatment
 - Phased increase in average number of sessions
 - 388,000 more people recovering

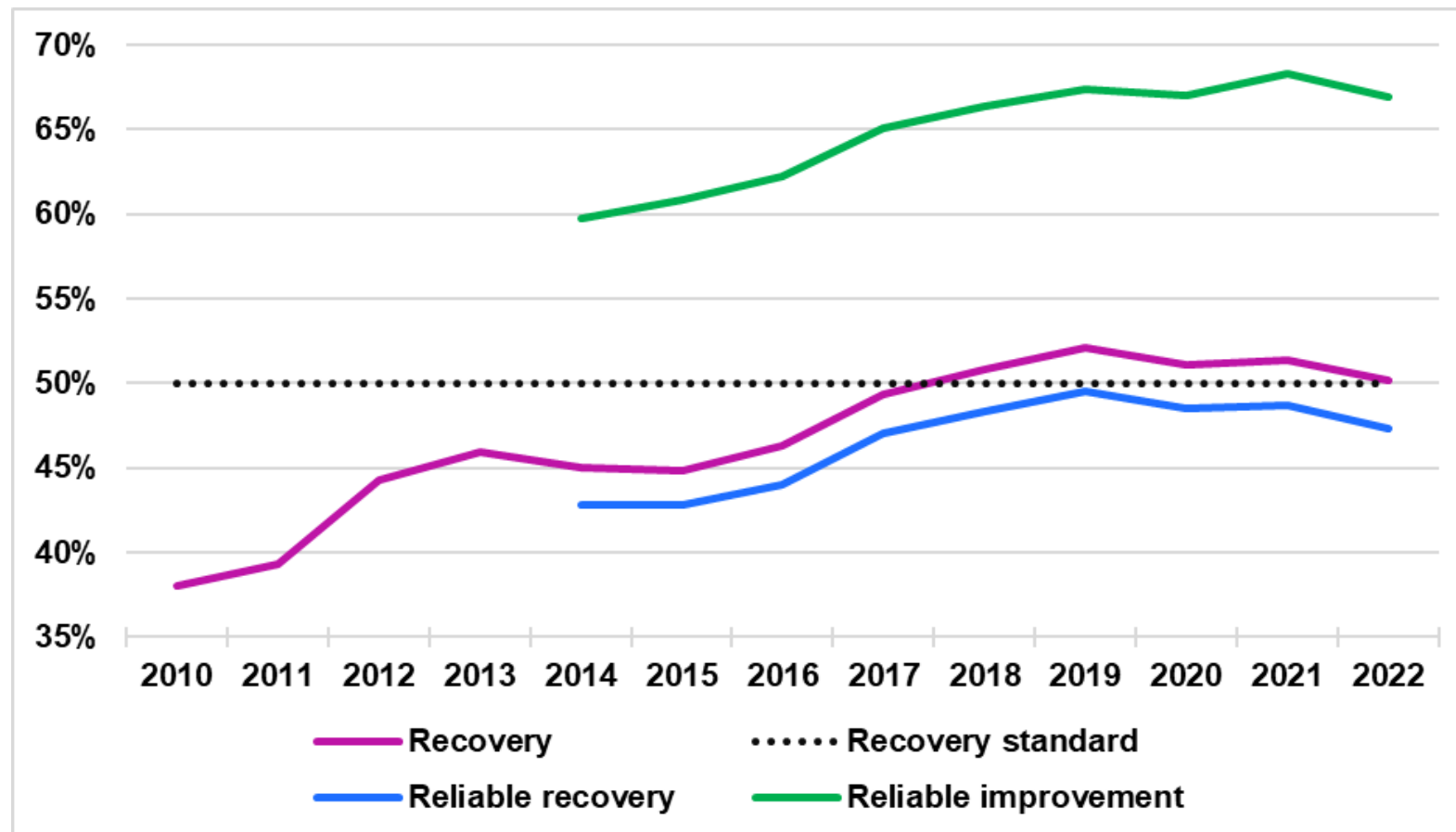
Data & Outcomes

Data & Outcomes Updates

Data collection clarity for couple therapy added: Pg 49	For Couple Therapy for Depression (CTfD) and Behavioural Couple Therapy (BCT), services should record data for both partners. Each should have a separate health record, irrespective of the non-referred partners' outcome measure scores. A problem descriptor should be recorded if identified and updated as appropriate.
ADSM section strengthened to include recent research: Pg 47	Recent analyses of the NHS Talking Therapies database have shown that when therapists use the relevant ADSM to guide the treatment of people with PTSD, social anxiety disorder, panic disorder and obsessive-compulsive disorder, clinical outcomes are better, and patients report a greater reduction in mental health related disability (assessed by the Work and Social Adjustment Scale). This beneficial effect is thought to be because regular administration of ADSMs helps therapists to keep a strong focus on the key features of the relevant clinical condition.

Data & Outcomes Updates

Language around reliable improvement alongside recovery reinforced in response to system feedback: Section 9, p67

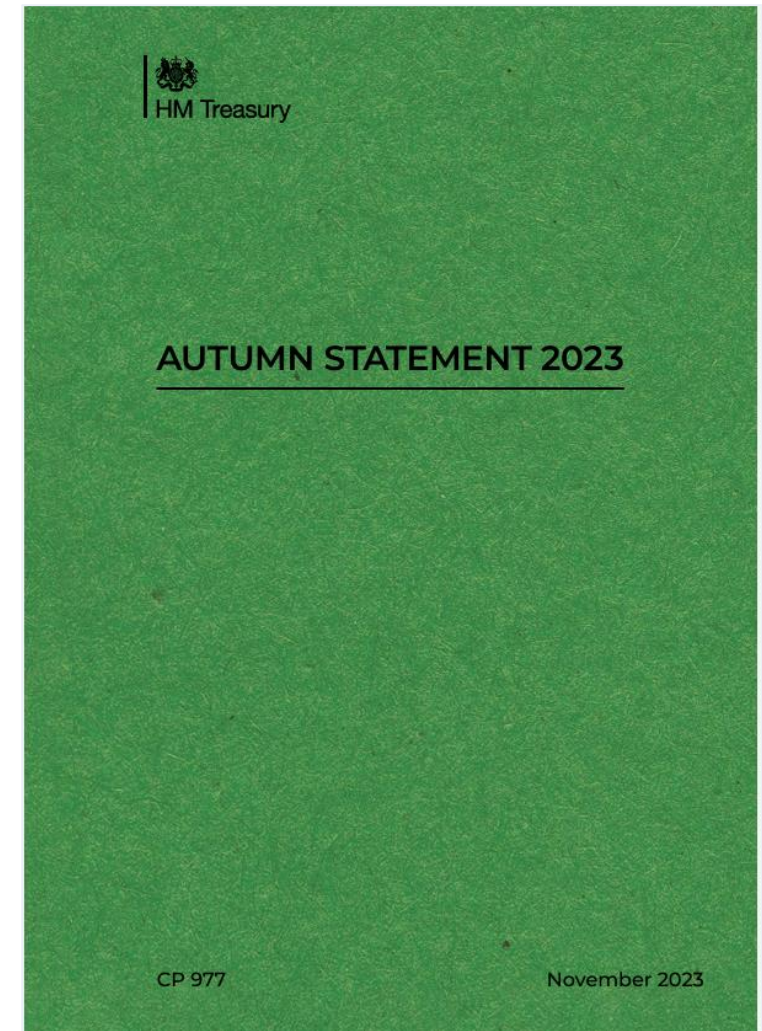


National Standards

National Standards Updates

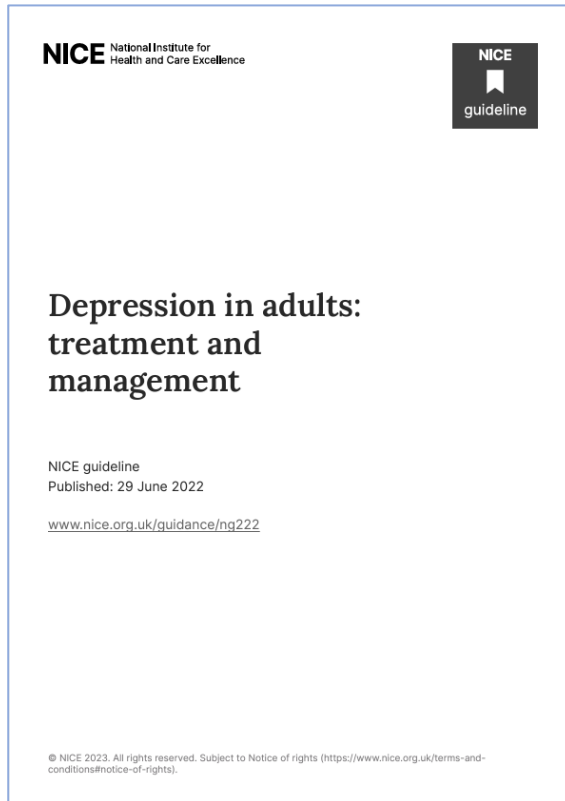
1. Number of people receiving a **course of treatment** (at least two sessions); an expected additional 384,000 people completing a course of treatment by 2028-29.
2. Maintaining existing **waiting time standards**; of the referrals that have a course of treatment (two or more clinical sessions), 75% should have their first session within six weeks, and 95% within 18 weeks.
3. Proportion of people achieving **reliable recovery**; achieve 53% of patients achieving reliable recovery following a course of treatment by 28/29.
4. Proportion of people achieving **reliable improvement**; achieve 71% of patients achieving reliable improvement following a course of treatment to by 2028/29.

Section 6.4, Pg 49.

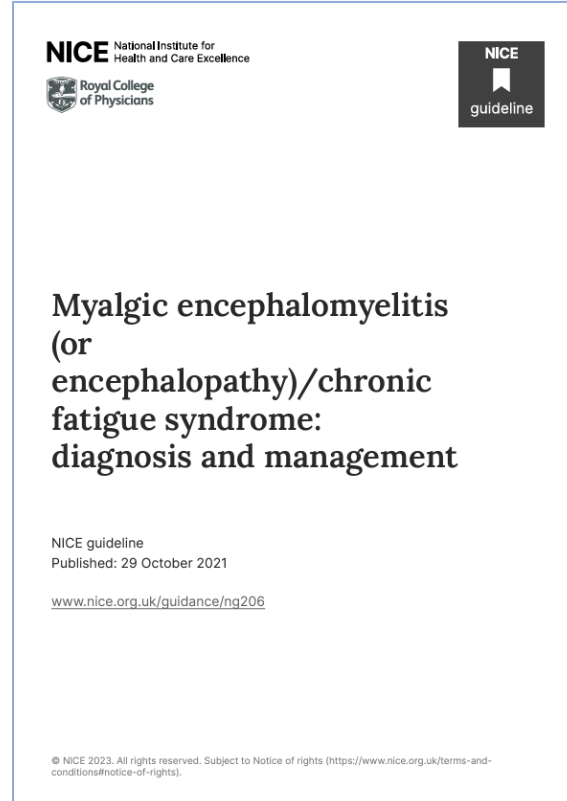


Service Delivery

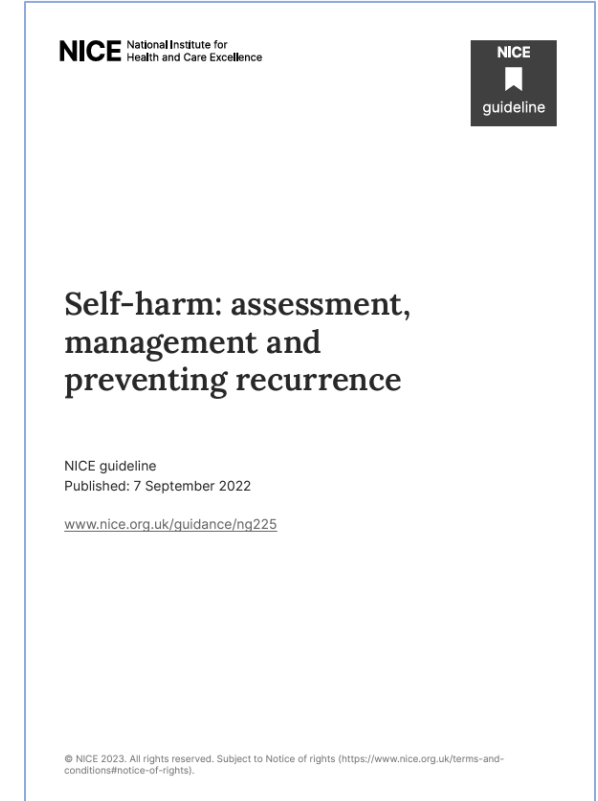
New NICE Guidance



**NG222 Depression in adults:
treatment and management**
Published 29/06/2022



**NG206 Myalgic encephalomyelitis
(or encephalopathy)/chronic fatigue
syndrome: diagnosis and
management**
Published 29/10/2021



**NG225 Self-harm: assessment,
management and preventing
recurrence**
Published 07/09/2022

Supervision section update

Figure 3: Purpose of supervision

Fidelity to evidence base	Ensuring therapists choose treatments and use them in a way which is as close as possible to the protocols tested in clinical trials which have led to these treatments being recommended in clinical guidelines.
Case management	Ensuring all patients are reviewed according to specific clinical and organisational criteria in order to make effective and efficient clinical decisions, often relating to treatment response, treatment length, treatment intensity or treatment alternatives.
Clinical governance	Ensuring safety for patients and therapists, by routinely reviewing patient risk and therapists' clinical practice for ALL patients, not just those that a supervisee or supervisor selects for discussion.
Skills development	Assisting therapists to improve their own clinical and therapeutic skills by supervisor feedback on therapists' sessions, e.g., through direct observation, review of notes or taped recordings.
Therapist support	Ensuring that therapists' own mental health is addressed where they are working with emotionally difficult material, high clinical volumes or are themselves in distress unrelated to their work.

Information added:

- Purpose of supervision
- Types of supervision
- Competencies required by NHS Talking Therapies supervisors
- NHS Talking Therapies supervision: key principles
 - Supervision format
 - Supervision content
 - Modality
 - Supervisor Training and Competence

Workforce Retention & Expansion

Skill Mix

Recommended national and service level skill mix for high-intensity therapists:

Training	Required % HIT capacity per service
Cognitive Behavioural Therapy (CBT)	75-90%
Person-Centred Experiential Counselling for Depression (PCE-CfD)	0-6%
Interpersonal Psychotherapy (IPT)	0-6%
Dynamic Interpersonal Therapy (DIT)	0-6%
Behavioural Couple Therapy (BCT)	0-8%
Couple Therapy for Depression (CTfD)	0-8%
Eye Movement Desensitisation and Reprocessing (EMDR)	0-2%
Mindfulness-based cognitive therapy (MBCT)	0-2%

Banding & Pay Scales

Recommended banding and pay scales:

PWPs:

- Trainee PWPs should be employed and paid at AfC Band 4.
- Once qualified and registered with the appropriate professional body, this banding should be adjusted to AfC Band 5.

HITs (all Step 3 modality therapists):

- Trainee HITs should be employed and paid at AfC Band 6.
- Once qualified and accredited with the appropriate professional body, this banding should be adjusted to AfC Band 7.

Advancing Equalities

Positive Practice Guides



Office for Health
Improvement
& Disparities

Autism PPG (due Spring 2024)
Section 10.3.4, Pg 78

Working with Perinatal Parents
Appendix D.9, Pg 126

Drugs & alcohol: Bite-sized PPG
Appendix D.8, Pg 120

Appendix

List of Updates

Perceptions of NHS Talking Therapies & Pathway Integration

- 'IAPT' replaced with NHS Talking Therapies for anxiety and depression following rebrand: throughout.
- HEE replaced with NHS England: throughout.
- Graphics updated for ease of reading: throughout.
- References to CCGs replaced with ICBs: throughout.
- Interface between NHS TT and CMH clarified and link to recently published guidance included: Section 1.3.1, Pg 9 and Pg 83.
- Relevant FutureNHS Platform links added for social prescribing: Section 11.1.2, Pg 81.
- Updated section on PTSD to include newly published guidance [Treatment of PTSD including CPTSD: Guidance for delivery of psychological therapies](#): Section 5.2.3, Pg 41.
- Added link to information about the [Additional Roles Reimbursement Scheme \(ARRS\)](#): Section 11.3, Pg 83.
- Money advice and debt section strengthen to include updated tools and guidance: Section 11.6, Pg 84.

Data & Outcomes

- Updates to data to bring in line with recent reports/ publications: throughout.
- Language around access adjusted to align with increased focus on treatment and clinical outcomes: throughout.
- Reference to clustering removed: throughout
- ADSM section strengthened to include recent research: Section 6.2.1, Pg 47.
- Data collection clarity for couple therapy added: Section 6.3.3, Pg 49.
- Language around reliable improvement and reliable recovery reinforced in response to system feedback: Section 9, Pg 67.

National Standards

- Revised national standards following Autumn Statement 2023 Settlement (2024/5 – 2028/29):
Section 6.4, Pg 49.
 1. Number of people receiving a course of treatment (at least two sessions); an expected additional 384,000 people completing a course of treatment by 2028-29.
 2. Maintaining existing waiting time standards; of the referrals that have a course of treatment (two or more clinical sessions), 75% should have their first session within six weeks, and 95% within 18 weeks.
 3. Proportion of people achieving reliable recovery; achieve 53% of patients achieving reliable recovery following a course of treatment by 28/29.
 4. Proportion of people achieving reliable improvement; achieve 71% of patients achieving reliable improvement following a course of treatment to by 2028/29.

Service Delivery 1

- Updated from ICD-10 to ICD-11: throughout.
- Counselling for Depression (CfD) updated to reflect terminology change to Person-Centred Experiential Counselling for Depression (PCE-CfD): throughout.
- Clarified the definition of Medically Unexplained Symptoms (MUS) to include Persistent Physical Symptoms (PPSx): throughout.
- Updated clarification re: drug and alcohol misuse: Section 1.3.1, Pg 9.
- NICE guidance updates – Depression, Myalgic Encephalomyelitis/ Chronic Fatigue Syndrome (ME/CFS) and Self-harm: Section 3.2, Pg 10, Table 2, and throughout.
- Added chronic pain and chronic depression to the list of conditions treated by NHS TT: Section 2.1, Pg 12.
- Updated psychological interventions in NHS Talking Therapies in line with revised NICE guidelines: Section 3.2, Pg 17, Table 2.
- Added chronic depression and health anxiety to the list of NICE-recommended psychological interventions in NHS Talking Therapies: Section 3.2, Pg 17, Table 2.

Service Delivery 2

- Split interventions for OCD into low and medium/ high impact: Section 3.2, Pg 17, Table 2.
- Updated the recommended interventions for CFS in line with revised NICE guidelines: Section 3.2, Pg 17, Table 2.
- Added clarification that The NHS Talking Therapies curriculum does not cover disorders related to OCD, such as trichotillomania, skin picking and hoarding disorder: Section 3.2, Pg 17.
- Supervision section strengthened, with links to newly published [Supervision Guidance](#): Section 4.1.7, Pg 28.
- Updated components of a good assessment: Section 5.1.1, Pg 36.
- Added information on remote delivery and importance of informed patient choice with regards to delivery method: Section 5.2.1, Pg 41.
- Updated section on taking a broader perspective: Section 6.4.4, Pg 53.
- More detailed guidance regarding the management of in-pathway waits: Section 6.4.2, Pg 54
- Strengthened section on improving access via digitally enabled therapy: Section 7.3.1, Pg 58 and Section 8.1.3, Pg 62.

Service Delivery 3

- Further clarification on what constitutes a clinical contact: Section 8.1.4, Pg 63.
- Added a link to an [example job plan template](#): Section 8.1.4, Pg 63.
- Promotion of [Mental Health System Improvement Network workspace](#) on Futures and provision of links: Pg 63 & 66.
- Updated section on principles of good waiting list management: Section 8.1.5, Pg 64.
- Added information about clinical safety and effective management of cases: Section 8.1.5, Pg 66.
- Strengthened information about capping number of sessions: Section 9.1.2, Pg 68.
- Updated section on employment support: Section 11.5, Pg 83.
- Section added to reinforce the importance of physical activity consistent with updated ME and CFS NICE guidance & recent research: Pg 84.
- Employment Advice section updated following roll out to all NHS TT services: Section 11.5, Pg 86.
- Updated screening prompts to include BDD: Appendix B, Pg 103.

Workforce Retention & Expansion 1

- Strengthened section on workforce to include all information on training, accreditation and registration requirements: Section 4, Pg 19.
- Clarification of LTC training being compulsory for PWPs and HITs within 2 years of qualifying: Section 4.1.1, Pg 19 & Section 4.1.2, Pg 20.
- Preceptorship expectation for PWPs and HITs: Section 4.1.1, Pg 19 & Section 4.1.2, Pg 20.
- Added section re: mandatory requirement for qualified PWPs to be registered: Section 4.1.1, Pg 20.
- Updated links to revised High-Intensity and PWP curricula: Section 4.1.1, Pg 21 and Pg 23.
- Updated High-Intensity curriculum and accrediting body information for EMDR and MBCT: Section 4.1.2, Pg 22, Table 4.
- Added information about recommended national and service level skill mix for High-Intensity therapists: Section 4.1.2, Pg 23.
- Strengthened the information about assistant roles, such as assistant psychologists and assistant PWPs: Section 4.1.5, Pg 26.

Workforce Retention & Expansion 2

- Additional workforce section updated to include information about clinical psychologically doctorate trainees: Section 4.1.5, Pg 27.
- Clarification on national recommendations for banding and pay scales: Section 4.1.8, Pg 31.
- Revised workforce wellbeing section to include [Model NHS Talking Therapies Staff Wellbeing Strategy](#) developed by the NHS Thames Valley NHS Talking Therapies services: Section 4.2, Pg 32.
- The importance of workforce retention and ways in which this can be improved and reinforced: Section 4.3, Pg 34.
- Information regarding [NHS TT workforce census](#) added: Section 4.4, Pg 35.
- Added a link to the [Psychological Professions Network \(PPN\)](#): Section 4.2, Pg 33.

Advancing Equalities

- Added link to [Accessible Information Standard](#): Section 10.1, Pg 74.
- Added information regarding the [Oliver McGowan training](#) requirement: Section 10.2.2, Pg 75.
- Strengthened lines on continuity of NHS Talking Therapies treatment when moving to a new area, including addition of information about the [NHS Urgent Mental Health Helplines](#): Section 10.2.4, Pg 76.
- Added reference to the upcoming Autism PPG: Section 10.3.4, Pg 78.
- Added section on importance of coproduction: Section 11.1.1, Pg 80.
- Strengthened lines about treatment of students: Section 11.7, Pg 85.
- Updated the Working with people who use drugs and alcohol: Bite-sized PPG: Appendix D.8, Pg 120.
- Updated the Working with Perinatal Parents: Bite-sized PPG, including a link to the revised PPG: Appendix D.9, Pg 126.