Increasing access to psychological therapies in City & Hackney Psychotherapy Department

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New PFF Group Delivers Statistically Significant Shifts in Reflective Functioning!

Aim

1) Reduce referral to first assessment/treatment (1st appointment) waiting times to below 8 weeks
2) Reduce wait from referral to assessment by 25%
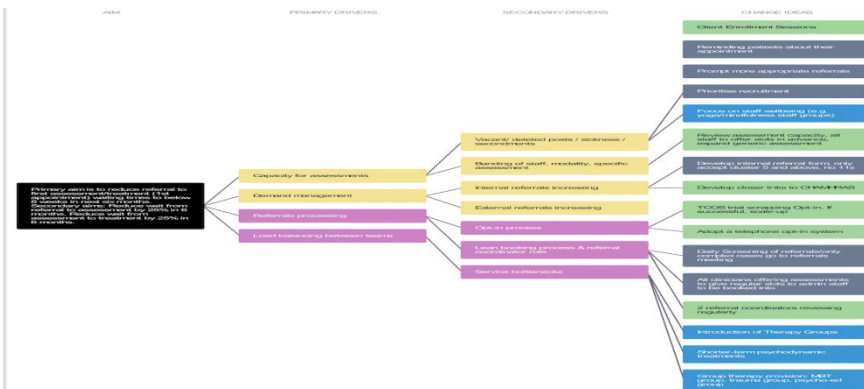3) Reduce wait from assessment to treatment by 25%

Why is this important to service users and carers?

Given the lengthy waiting times for treatment it was felt that introducing the first stage treatment groups would provide service users with support and techniques to manage their difficulties, earlier on in the care pathway.
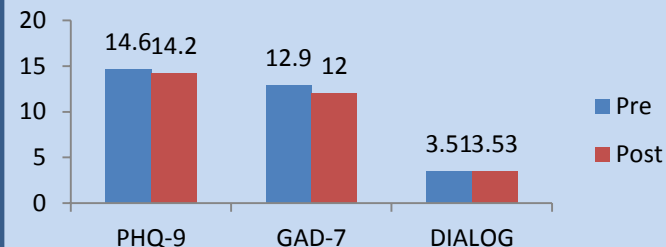
Tests of Change

- *Three 1st stage treatment groups were introduced into the care pathway, in an attempt to reduce waiting times and provide access to a meaningful treatment.*
- Groups: Psychotherapy Foundation & Formulation Group, The Trauma Group & ACT group.

Driver diagram

Data

PHQ-9: Pre 14.6, Post 14.2
GAD-7: Pre 12.9, Post 12
DIALOG: Pre 3.5, Post 3.53

- In total 49 people completed the PFF group between June 2017-July 2018
- A recovery rate of 18% on the GAD-7 & PHQ-9 was found

Scores on the uncertainty scale of the Reflective Functioning Questionnaire significantly improved from (M=1.05, SD=0.74) to (M=1.25, SD=0.73), t(35) = -2.24, p=0.032 The effect size was small (d=0.27).

Learning and what next?

The quantitative results from this project are promising and taken alongside the qualitative feedback sought from group members, they both provide evidence to suggest that the group is both acceptable to service users and demonstrates clinical improvement. The next step will be to look at the flow referrals through the system to ensure that waiting times are reduced.

Tell us your story in a nutshell

Given that we have now established that this group is both acceptable to clients as well as demonstrating clinical improvement, the next step in this project is firstly to analyse the effectiveness of the trauma group using quantitative outcome measures and qualitative feedback.

Secondly it will be important to analyse the flow of referrals through the service, given the changes to the existing pathway, to establish the impact that the introduction of 1st stage treatment groups has had on waiting times. It will also be important to calculate the numbers of people progressing to second stage individual treatment to establish whether the 1st stage groups are either reducing length of time in 2nd stage treatment and/or numbers of people progressing to 2nd stage treatment. See below for a visual diagram of the new care pathway in the service.