

13<sup>th</sup> March 2023

Mr Simon Adams  
Managing Director  
Healthwatch Worcestershire  
Civic Centre  
Queen Elizabeth Drive  
PERSHORE  
WR10 1PT

Dear Simon

Thank you for your letter dated 23<sup>rd</sup> February, please find clarification of the points raised below.

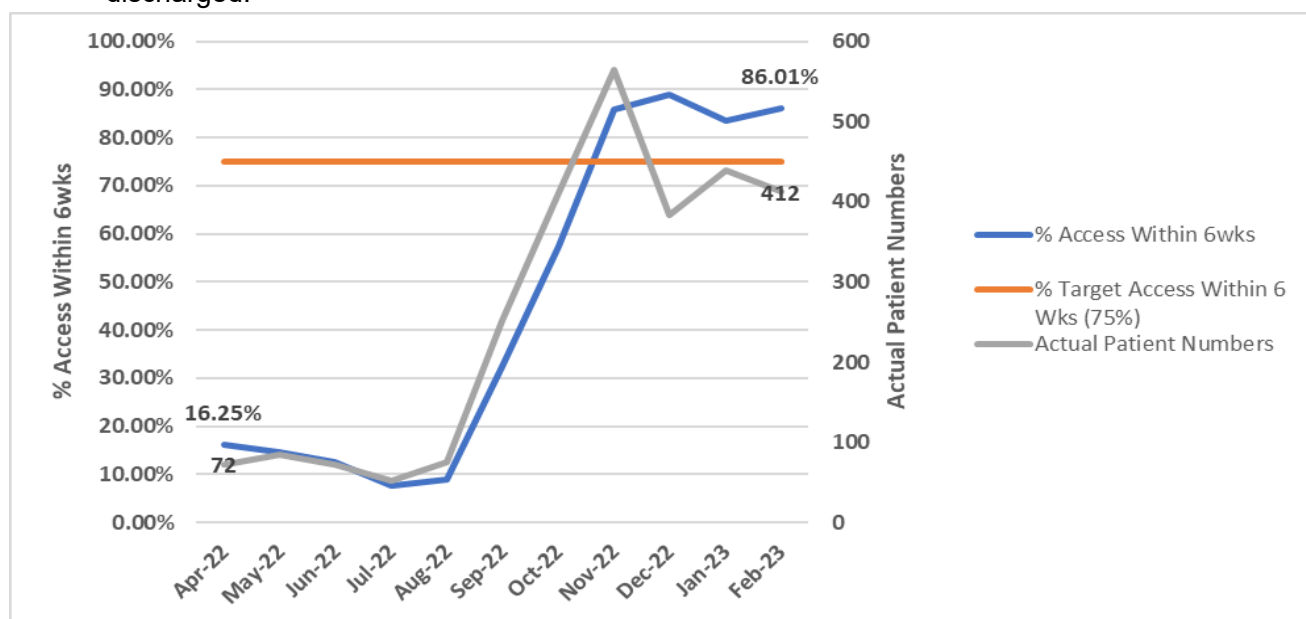
Specific Data for Worcestershire IAPT Healthy Minds

**Key Performance Indicators**

**6 Week Access**

Service access waiting times are from receipt of referral by the service to first appointment / assessment:

- 75% of patients should receive a first assessment/treatment appointment within 6 weeks of referral
- KPI is reported on upon discharge, however, the service is now meeting this KPI in-month, with projected full recovery of the KPI expected in July 2023 as patients moving through the system are discharged.



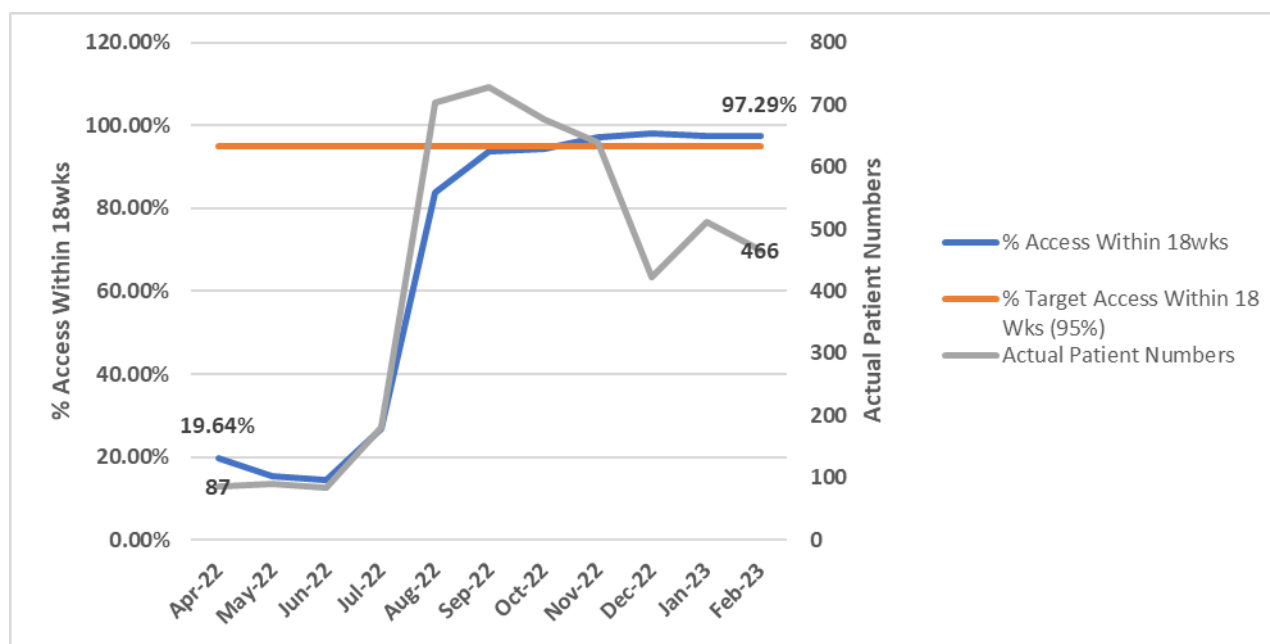
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## 18 Week Access

Service access waiting times are from receipt of referral by the service to first appointment / assessment:

- 95% of patients should receive a first assessment/treatment appointment within 18 weeks of referral
- KPI is reported on upon discharge, however, the service is now meeting this KPI in-month, with projected full recovery of the KPI expected in April 2023 as patients moving through the system are discharged.



## Referrals Received & Assessments Completed

Over the last 6 months, the service has received an average of 772 referrals per month, completing an average of 598 assessments per month in Worcestershire. The above graph demonstrates that every month, since November 2022, over 75% of those that receive a first assessment/treatment appointment have been seen within 6 weeks of referral.

Every month, since November 2022, over 95% of those that receive a first assessment/treatment appointment have been seen within 18 weeks of referral.

The service is able to see everybody who presents to the service – as long as the referral appropriately meets IAPT criteria. Due to the prescribed and manualised nature of the service – as well as the ‘open’ front door provided by self-referral – there will always be a number of patients who present in such a way that IAPT treatment would not be suitable, leading to discharge prior to an assessment taking place, the need to signpost to other services and patients not attending or opting-in, again leading to discharge.

In February – of those patients who were assessed, 58 patients waited over 6 weeks to be assessed from the point of referral and 13 waited over 18 weeks. The patients showing as waiting over 18 weeks are usually a result of data quality issues or poor engagement.

As it stands, the access entry point to the service is balanced, with demand being met and patients moving through as expected.

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## Non-Attendance of Assessment

Once a referral is received, administrators attempt to contact the referred individual by telephone to book an appointment. If they are unable to reach the individual, a letter (see below) is sent asking them to contact the service to book a telephone assessment within 14 days.



Opt-in 14 Days.pdf

If they don't get back to the service, they are discharged and asked to contact us when ready to engage (see letter below)



Did Not Opt-In  
Discharge.pdf

This 'ring-back' system has helped to reduce the number of non-attended (DNA) appointments, but also provides context for the gap between the number of referrals we receive, and the number of assessments completed as a high number do not get back in touch with the service.

If the patient is reached and an assessment appointment is booked, they receive this letter.



Assessment  
Confirmation Letter.pdf

If a patient does not attend (DNA) an assessment appointment, they are discharged and sent the below letter.



Assessment\_DNA\_Le  
tter.pdf

All patients are given information about the Cancellation & DNA policy, and telephone contact details for the service.

We define a DNA as an appointment to which the patient does not attend and has not contacted the service prior to the session to cancel. We also define DNA as a session when the patient is contacted at the appointment time, and they decline to go ahead.

Cancellations and DNAs are disruptive to a short-term therapy and mean it is unlikely to be effective whilst highlighting a lack of willingness to engage.

Assessments are usually via telephone, and the patient will be contacted at least 2 times 5 minutes apart on the number that has been provided. A clear message will be left if this has been agreed by the patient.

Exceptions to the policy may occasionally be made if there is a valid reason.

Valid reasons by their very nature are likely to be exceptional, however, some examples have been given below:

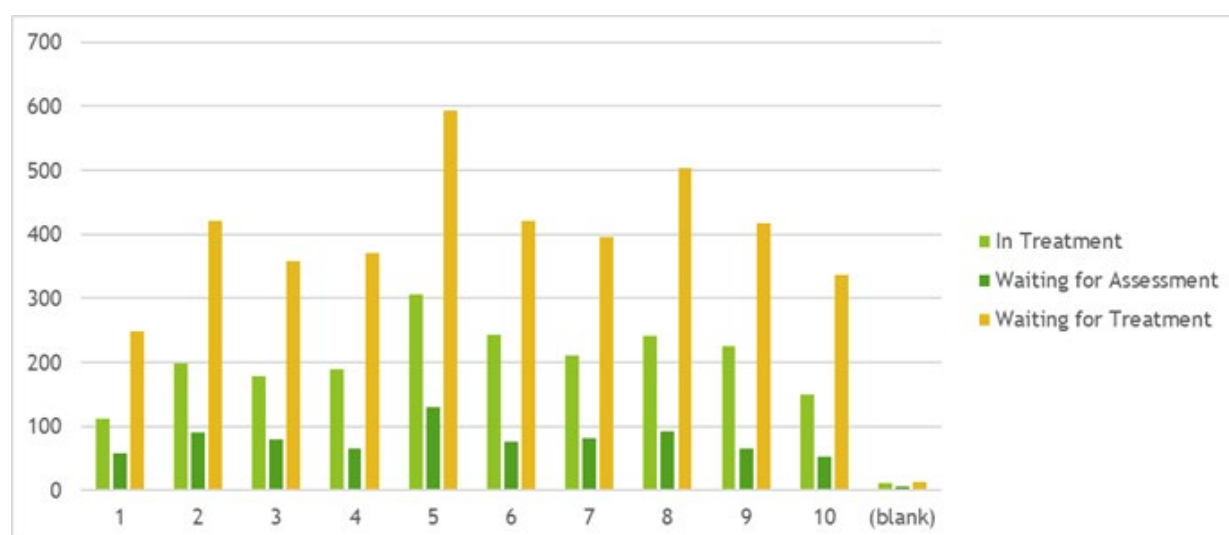
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- Reasonable Adjustments may be provided when a patient with a long-term health condition needs to cancel more than 2 appointments.
- In exceptional circumstances a patient may DNA an appointment, and not be in a position to cancel it, in this case they could be offered another appointment.
- When the patient has no knowledge of the appointment, e.g., the first appointment letter has not been received.

I can confirm there have been no changes to our discharge criteria since June 2022.

## Indices of Multiple Deprivation

1 = Most Deprived



Numbers	IMD	1	2	3	4	5	6	7	8	9	10	(blank)	Grand Total	Trend line
Waiting for Assessment		58	91	79	66	130	77	81	93	66	52	6	799	
Waiting for Treatment		248	422	358	371	593	422	396	503	418	337	13	4081	
In Treatment		112	198	179	190	307	244	211	241	226	150	12	2070	

Percentages	IMD	1	2	3	4	5	6	7	8	9	10	(blank)
Waiting for Assessment		7.26%	11.39%	9.89%	8.26%	16.27%	9.64%	10.14%	11.64%	8.26%	6.51%	0.75%
Waiting for Treatment		6.08%	10.34%	8.77%	9.09%	14.53%	10.34%	9.70%	12.33%	10.24%	8.26%	0.32%
In Treatment		5.41%	9.57%	8.65%	9.18%	14.83%	11.79%	10.19%	11.64%	10.92%	7.25%	0.58%

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High level view of where patients are in our system based on area.

Area	Awaiting Assessment	Assessed & Awaiting Treatment	In Treatment	Total
Bromsgrove	75	404	189	<b>668</b>
Malvern Hills	98	398	203	<b>699</b>
Redditch	93	542	237	<b>872</b>
Worcester	132	754	348	<b>1234</b>
Wychavon	136	700	349	<b>1185</b>
Wyre Forest	101	552	283	<b>936</b>
<b>Total</b>	<b>635</b>	<b>3350</b>	<b>1609</b>	<b>5594</b>

It is important to note that the majority of those awaiting assessment will have an assessment appointment already booked but will still be showing as 'awaiting assessment'.

### Urgent Mental Health Helpline

In relation to the 24/7 Urgent Mental Health Helpline, please find below data for Worcestershire broken down by category for each of the last 3 quarters; I realise that you asked for the information to be provided monthly and apologise we are providing it quarterly, please let me know if you are not content with the information as provided and we will ask for a new report to be run.

April – June 2022

Triage Category	
A – Immediate Referral: Emergency Service Response	54
B – Within 4 Hours – Very urgent mental health response	29
C – Within 24 Hours – Urgent mental health response	48
D – Within 72 hours – semi-urgent mental health response	22
E – Within 4 weeks – non urgent mental health response	14
F – Referral or advice to contact alternative provider	755
G – Advice or Information only	526

July – Sept 2022

Triage Category	
A – Immediate Referral: Emergency Service Response	39
B – Within 4 Hours – Very urgent mental health response	10
C – Within 24 Hours – Urgent mental health response	62
D – Within 72 hours – semi-urgent mental health response	17
E – Within 4 weeks – non urgent mental health response	1
F – Referral or advice to contact alternative provider	217
G – Advice or Information only	1039

Oct – Dec 2022

Triage Category	
A – Immediate Referral: Emergency Service Response	40
B – Within 4 Hours – Very urgent mental health response	34
C – Within 24 Hours – Urgent mental health response	126
D – Within 72 hours – semi-urgent mental health response	2
E – Within 4 weeks – non urgent mental health response	1
F – Referral or advice to contact alternative provider	1162
G – Advice or Information only	710

I hope the information provided is sufficient, please let me know if there is anything additional you wish to raise.

Yours sincerely



Matthew Hall  
Chief Operating Officer

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Chief Executive: Sarah Dugan