

## Freedom of Information Request

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**Reference Number:** EPUT.FOI.19.1346  
**Date Received:** 22 November 2019

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### Information Requested:

I would like to receive all copies of EPUT policy/procedures which relate to the care and treatment of mental health patients.

I would like ALL the policies that deal with Psychotherapy patients and especially how they are to be treated and how they are to be discharged.

I would like this to include staff policies and procedures which are relative to the psychotherapy team to please, if possible.

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### Response:

The Trust policies are published on the Essex Partnership University Trust's website. Therefore the Trust is applying a \* Section 21 exemption of the Act (Information accessible to applicant by other means):

<https://eput.nhs.uk/publication-category/class-5-our-policies-and-procedures/>

There is one document that is not on the publication scheme this document has been attached.

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### \* Section 21: Information accessible to applicant by other means.

(1) Information which is reasonably accessible to the applicant otherwise than under section 1 is exempt information.

(2) For the purposes of subsection (1)—

(a) information may be reasonably accessible to the applicant even though it is accessible only on payment, and

(b) information is to be taken to be reasonably accessible to the applicant if it is information which the public authority or any other person is obliged by or under any enactment to communicate (otherwise than by making the information available for inspection) to members of the public on request, whether free of charge or on payment.

(3) For the purposes of subsection (1), information which is held by a public authority and does not fall within subsection (2)(b) is not to be regarded as reasonably accessible to the applicant merely because the information is available from the public authority itself on request, unless the information is made available in accordance with the authority's publication scheme and any payment required is specified in, or determined in accordance with, the scheme.

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### **Publication Scheme:**

As part of the Freedom of Information Act all public organisations are required to proactively publish certain classes of information on a Publication Scheme. A publication scheme is a guide to the information that is held by the organisation. EPUT's Publication Scheme is located on its Website at the following link

<https://eput.nhs.uk>

## OPERATIONAL POLICY TITLE

<b>POLICY REFERENCE NUMBER</b>		
<b>VERSION NUMBER</b>	<b>3</b>	
<b>REPLACES SEPT DOCUMENT</b>		
<b>REPLACES NEP DOCUMENT</b>		
<b>KEY CHANGES FROM PREVIOUS VERSION</b>		
<b>AUTHOR</b>		
<b>CONSULTATION</b>	<b>Dr W. Burbridge-James; Dr H. Heydari</b>	
<b>IMPLEMENTATION DATE</b>	2015	
<b>AMENDMENT DATE(S)</b>	2015	
<b>LAST REVIEW DATE</b>	2016	
<b>NEXT REVIEW DATE</b>	2018	
<b>APPROVAL BY</b>		
<b>RATIFIED BY</b>		
<b>COPYRIGHT</b>		
<b>OPERATIONAL POLICY SUMMARY</b>		
<p>The policy describes the operations and roles that enable the clinical functioning of the Complex Needs Personality Disorders and Psychotherapies Service. This enables the service to provide specialised patient consultation and personalised psychotherapeutic care planning and treatment interventions for younger adults with emerging personality disturbance and adults who have long standing complex difficulties. The service provision includes: specialist assessment, treatment interventions (individual, group psychotherapy and art psychotherapy), family therapy, psychosocial nursing, short term focused and psychoeducational groups, training, mentoring, supervision and support to colleagues to enable the recovery of clients with complex needs.</p>		
<b>The Trust monitors the implementation of and compliance with this operational policy in the following ways;</b>		
<b>Services</b>	<b>Applicable</b>	<b>Comments</b>

**The Director responsible for monitoring and reviewing this policy is  
Director of Mental Health**

<b>ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST</b>
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**OPERATIONAL POLICY TITLE**

<b>CONTENTS</b>	
<b>Title</b>	<b>Section No</b>
<b>Introduction</b>	<b>1.0</b>
<b>Service Description</b>	<b>2.0</b>
<b>Clinical Procedures</b>	<b>3.0</b>
<b>Operational Management</b>	<b>4.0</b>
<b>Consultant Psychiatrists in Psychotherapy- Clinical Lead</b>	<b>5.0</b>
<b>Training and Research</b>	<b>6.0</b>
<b>Honorary Therapists</b>	<b>7.0</b>
<b>Bank Therapists</b>	<b>8.0</b>
<b>Outcome Measures</b>	<b>9.0</b>

<b>Essex Partnership University NHS Foundation Trust</b>
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<b>The Complex Needs Personality Disorder and Psychotherapies Service Operational Policy For service provision in south Essex</b>
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<b>1.0 Introduction</b>
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**Overview**

- 1..1 The Complex Needs Personality Disorder and Psychotherapies Service forms a Multi-Disciplinary Team (MDT) providing psychotherapy for the population of South Essex. The service is based at Basildon Mental Health Unit and the Taylor Centre, Warrior House. A number of community outreach clinics are located in south Essex including Brentwood, Grays Hall, Coombewood and Knightswick Clinic.
- 1..2 In response to the service transition and to align with the development of the First Response and Well-Being Teams the service provides care for PbR client cohorts in clusters 6 and above.
- 1..3 There already exists a component of the service commissioned as Personality Disorder service since 2008. The negotiations for commissioning were conducted by Sally Morris, in her then role as director of operations for 220k per year.
- 1.3.1 The service specification is available and had been updated regularly with commissioners. The most recent meeting was in February 2015 to look at "Key Performance indicators" in the presence of [REDACTED].

- 1.3.2 The service benefits from a collaborative alliance between operational and clinical leadership and management.

## 2.0 Service Description

- 2.1 The CNPD & Psychotherapies service to provides specialised patient consultation and Personalised psychotherapeutic care planning and treatment interventions for younger adults with emerging personality disturbance and adults who have long standing complex difficulties. The service provision includes: specialist assessment, treatment interventions (individual, group psychotherapy and art psychotherapy), family therapy, psychosocial nursing, short term focused and psychoeducational groups, training, mentoring, supervision and support to colleagues to enable the recovery of clients with complex needs.
- 2.2 The team works with other aspects of the Mental Health Service to support clients in their recovery. Many clients will present with conditions that have not been helped by brief psychological interventions, ex. Therapy for You. However, due to recurrent and distress and complexity of pathology these clients require in-depth specialised intervention from the psychotherapy service.
- 2.3 The model of the service is based on a well tried and researched model from a tertiary centre out-patient model of service delivery (The Cassel outreach service) incorporating the principles set out by Bateman and Tyrer made explicit in NICE guidelines for Borderline Personality Disorder CG 78, and the Delphi Study conducted by Mike Crawford (2008) of the 11 national pilots funded following the 2003 DH document "Personality disorder no longer a diagnosis of exclusion"
- 2.4 Bateman and Tyrer state that the model underpinning the service must be:
- be well structured
  - devote effort to achieving adherence
  - have a clear focus
  - be theoretically coherent to both therapist and patient
  - be relatively long term
  - be well integrated with other services available to the patient
  - involve a clear treatment alliance between therapist and patient
  - be a multi-disciplinary approach with a varied skill mix to meet the range of complex needs clients present with. The service is able to deliver individual and group psychodynamic psychotherapy, art psychotherapy with psycho-social nursing support and family therapy.
  - In addition NICE states the service must be accessible, pay particular attention to points of transition, and the team must be supported by regular supervision.
- 2.5 Using this model and the expertise gained from the development of the once discrete Personality Disorder Service (embedded in the Psychotherapy service) the psychotherapy service is well prepared to specialise in providing psychotherapy interventions clients in PbR cohorts 6-7-8 as required by service restructuring
- 2.6 This is achieved by psychodynamic approach that has been supported and further developed by Mentalization Based Therapy approach to working with Personality disorder, and a strong emphasis on a team approach.
- 2.7 The service actively supports the transition from CAMHs, particularly for 'emerging PD' young adults

2.8 Protocols with NLEFT are being discussed.

### **3.0 Clinical Procedures**

- 3.1 The service provides specialised patient consultation and personalised psychotherapeutic care planning and treatment interventions for younger adults with emerging personality disturbance and adults who have long standing complex difficulties. The service provision includes: specialist assessment, treatment interventions (individual, group psychotherapy and art psychotherapy), family therapy, psychosocial nursing, short term focused and psychoeducational groups, training, mentoring, supervision and support to colleagues to enable the recovery of clients with complex needs.
- 3.2 Referrals are received into the service primarily through the First Response Team MDT in the south or Access and Assessment MDT in the north. Referrals are accepted from other mental health colleagues and psychiatrist, preferably to be discussed in MDT
- 3.3 A psychotherapy colleague attends FRT MDT referral meeting in Basildon, Grays Hall and Rochford
- 3.4 Referral criteria and client readiness to engage are carefully monitored
- 3.5 To maximise efficiency referrals accepted there are not screened again in the Psychotherapy case management meetings.
- 3.6 The service has retained the clinical procedure of requesting that clients complete a Self-Report Form prior to being given an initial consultation
- 3.7 Clients, if necessary are prompted and offered support to complete the 'SRF' if there is no return in 4 weeks the client is discharged back to the referrer.
- 3.8 The returned SRF is reviewed by the consultant psychiatrist in psychotherapy and/or by a psychotherapy MDT.
- 3.9 The client's specific needs are identified and the client is allocated to a therapist for the consultation phase of engagement.
- 3.9.1 The client and therapist are then able to determine the subsequent phase of treatment this may be to: engage in an extended in a monthly consultation treatment; the client could be allocated to individual or group therapy for a period of up to 24 months or family therapy.
- 3.9.2 The internal psychotherapy pathway is being reviewed to consider efficiencies in the consultation process moving to engagement in more intense psychotherapy. This now includes varying the time intervals of consultation sessions providing short term psycho-education groups and psycho-social groups.
- 3.9.3 Delays following the initial consultation to commencing the on-going therapy are monitored in team meetings.
- 3.9.4 Clients are contacted by letter during any waiting period. If a client requests to be seen during this time; the therapist who did the initial consultations will see them and assess needs and risk and offer any interim support or advice as necessary.

- 3.9.5 To ensure efficiency the service abides by Trust protocols for discharge and disengagement.
- 3.9.6 Adherence to time boundaries for therapy are maintained and safely managed.
- 3.9.7 Psychotherapists abide by Trust and professional guidelines in all issues of confidentiality, record keeping and multi-disciplinary communications.

#### **4.0 Operational Management**

- 4.1 An operational manager performs and monitors all operational issues including:
- Staff leave, annual, sickness, other leave and negotiates with Human Resources as necessary. Submits team salary returns
  - Financial monitoring, liaising with accounts management and consultant psychiatrist in psychotherapy
  - Performing and monitoring appraisals, supervision and training both professional and mandatory
  - Monitors Trust requirements such as DDS and PbR returns
  - Participates in and represents the psychotherapy services in Trust wide meetings as appropriate
  - Works with consultant heads in psychotherapy to develop the service
  - Prepares reports to represent the service as requested
  - Reports to operational line manager; associate director of Integrated Services

#### **5.0 Consultant Psychiatrists in Psychotherapy- Clinical Lead**

- 5.1 Provide clinical supervision to staff in the CNPD & PS
- 5.2 Provide, with senior colleagues the clinical direction of the service.
- 5.3 To provide expert consultation and advice to colleagues in the MHS
- 5.4 To provide placements, supervision and mentoring to trainee doctors
- 5.5 To fulfil requirements of position of senior consultant and head of service.

#### **6.0 Staff**

- 5.1 All staff are registered with the appropriate professional body and meet all practice requirements of the profession and the Trust requirements.
- 5.2 All staff are trained to M.A./ MSc level or equivalent within the guidelines of their profession.
- 5.3 The employment of a psychosocial nurse was an innovation development for the service, allowing the nurse practitioner to work alongside therapy colleagues to pay specific attention to hard to reach patients at points of transition and support patients at times of high risk, and in their recovery journeys.
- 5.4 The psychosocial nurse only accepts client from the psychotherapy case load who are engaged in therapy. These clients often require additional support but do not

meet the criteria for inclusion in the FRT or WRT teams.

## **7.0 Training and Research**

- 6.1 The Complex Needs Personality Disorder and Psychotherapy services is committed to providing training for all staff groups in the Trust and for partnership agencies.
- 6.2 Specialist training, placement and supervision is provided for trainee doctors in line with requirements.
- 6.3 The Knowledge Understand Framework training in understanding and working with Personality Disordered clients is delivered by staff from the CNPD & PS team.
- 6.4 Staff from the CNPD & PS team provide: consultations to teams for both clinical issues (supervision, reflective practice) and for team (systemic) issues.
- 6.5 Consultations to colleagues may be for a 'one off enquiry' or may be on going for team/individual development
- 6.6 Placements are offered to students training in psychotherapy and art psychotherapy.
- 6.7 The CNPD&PS provides post-graduate training and research opportunities.
- 6.8 The CNPD&PS maintain all protocols for placements: Trust Human Resources and professional.
- 6.9 Research is undertaken in the department; headed by CNPD&PS staff.

## **7.0 Honorary Therapists**

- 7.1 The CNPD&PS contracts Honorary therapists to provide clinical sessions.
- 7.2 All honorary therapists are fully qualified and accredited and provide therapy in return for special supervision and further experience.

## **8.0 Bank Therapists**

- 8.1 Bank Therapist are contract by the service, paid from income generated by staff.

## **9.0 Outcome Measures**

- 9.1 The CNPD&PS uses the CORE-ims outcome measure to monitor progress.
- 9.2 The Lemma competency framework is used to overview practice with PD clients
- 9.3 The Mentalising Interview framework is also used as a training and outcome monitoring tool.



