Inventing IAPT in prison?

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Session content

• Potted history of Inside Help
• Detail : referrals and triage
• Issues : ours and other services’
• Measuring outcomes
• Next steps
• You share your expertise with me!
Service set up

• When? November 2010
• Where? HMP/YOI Swinfen Hall
• Who? .6 Senior counsellor + CBT therapist
• What? ‘mild to moderate anxiety and depression’
• What other services involved? in-reach; primary mental health
Referral

Original plan was to triage through pmh service, but now ....... referrals from:

• On waiting list: primary physical and mental healthcare; Offender Supervisor; in-reach CPN; CARATS (drug workers); solicitor; 6 self-referrals (some from Health Fair)

• In therapy: + GP; forensic psychology; wing staff; chaplaincy; in-reach psychiatrist
Prioritising (not triage)

- Referral forms + discussion with referrer
- MASH meeting
- Self harm incidents
- Notes on SystmOne
- Length of sentence remaining
- Short assessment + PHQ9 and GAD7 scores (when waiting list was long)
Issues

• Organisational
• Relationships
• Complexity of presentation

Cross cutting themes:
• Culture
• Confidentiality
• Communication
• Stigma
Organisational

- Accommodation
- Regime
- Medication
- IAPT Minimum Data Set
- Adaptation
Relationships

- With prison staff
- With other NHS staff
- With the wider community
Complexity of presentation

Comorbidity:
- Personality disorder
- Substance misuse
- Learning disability
- Early trauma

Establishing a therapeutic relationship
Cross cutting themes

- Culture
- Confidentiality
- Communication
- Stigma
Measuring outcomes

Hard data:
• PHQ9 and GAD7 changes
• Reduction in self harm

Soft data:
• Client surveys (anonymous)
• Discharge questionnaires
• Anecdotal (from colleagues)
Where next?

- Group work
- Mental health awareness, stigma reduction training
- Develop better PD and LD services
- Develop better outcome reporting
- Become a better practitioner!
Next research?

- Schwartz rounds
- Further develop self harm data
- IAPT MDS: agree outcome measures
- Treatment success rates across services: what works best and why?
- Therapeutic engagement in an untrusting client group
Please share your views and experiences now ..........

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