



NAPT
NATIONAL AUDIT OF
PSYCHOLOGICAL THERAPIES



National Audit of Psychological Therapies for Anxiety and Depression

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National Clinical Audit and Patient Outcomes Programme

- Funded by Department of Health through the Healthcare Quality Improvement Partnership (HQIP)
- 29 current national clinical audits

Partner organisations

- Managed by the Royal College of Psychiatrists' Centre for Quality Improvement in partnership with:
 - ▶ **Professional organisations:** BPS, RCGP, RCN, BABCP, BACP, UKCP, BPC
 - ▶ **Service user organisations:** Mind, Rethink, No Panic, Depression Alliance, The Mental Health Providers Forum, Anxiety UK

Aims

1. Provide feedback to individual psychological therapy services about their performance in relation to
 - Agreed quality standards
 - Compared to other servicesso they can improve service quality
2. Provide a national overview of the delivery of care by psychological therapy services

Participating services

- 357 services across 120 organisations.
- 309 in England
- 48 in Wales (from all Local Health Boards)
- Data collection was carried out between May 2010 and February 2011

Types of Services

- Sector managing the service:
 - 312 NHS managed
 - 30 Voluntary Sector
 - 7 Private Sector
 - 7 NHS & Voluntary
 - 1 NHS & Private
- 147 primary care, 169 secondary care, 41 both
- 127 working age, 29 older people(65+), 201 both
- IAPT funding:
 - 118 (33%) IAPT funded
 - 239 (67%) No IAPT funding

Retrospective audit

- Audit of therapy cases who had ended treatment
- 272/357 (76%) services submitted data on a total of 49,963 people
- Number of returns by service size:

Size	N (%)
Small (<8 wte)	1924 (4)
Medium (8-20 wte)	8866 (18)
Large (>20 wte)	39173 (78)

Service user survey

- Questionnaires sent to people in therapy
- 314/357 (88%) services sent out a total of 52,582 questionnaires
- 10,970 service users responded
Response rate = 21%

Key Findings

- **Access**
- **Appropriateness**
- **Acceptability**
- **Effectiveness/Outcomes**

Equity of Access

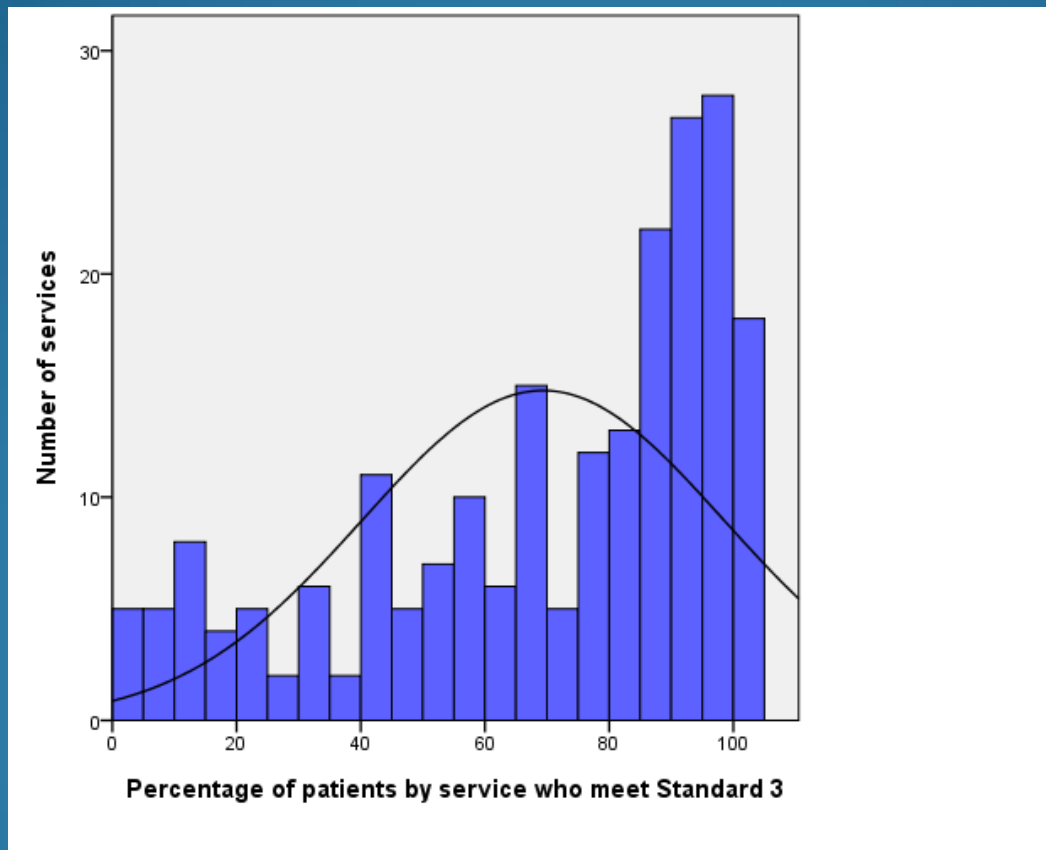
- Older people were less likely to receive psychological therapy than younger people.
- People aged between 65 and 74 were half as likely, and those aged over 75 one-third as likely, to receive therapy as people under the age of 65
- No ethnic groups were under-represented; but ethnicity data were not mapped at a local level

Access – Waiting times

- The audit waiting times standard from referral to assessment (≤ 13 weeks) and referral to treatment (≤ 18 weeks) was each met for 85% of patients
- However, there was great variation between services with patients from small and medium services waiting longer than patients from larger services
- The service user survey showed that waiting time to treatment was the greatest area of dissatisfaction among service users (29% considered wait time unreasonable)

Access – Waiting times

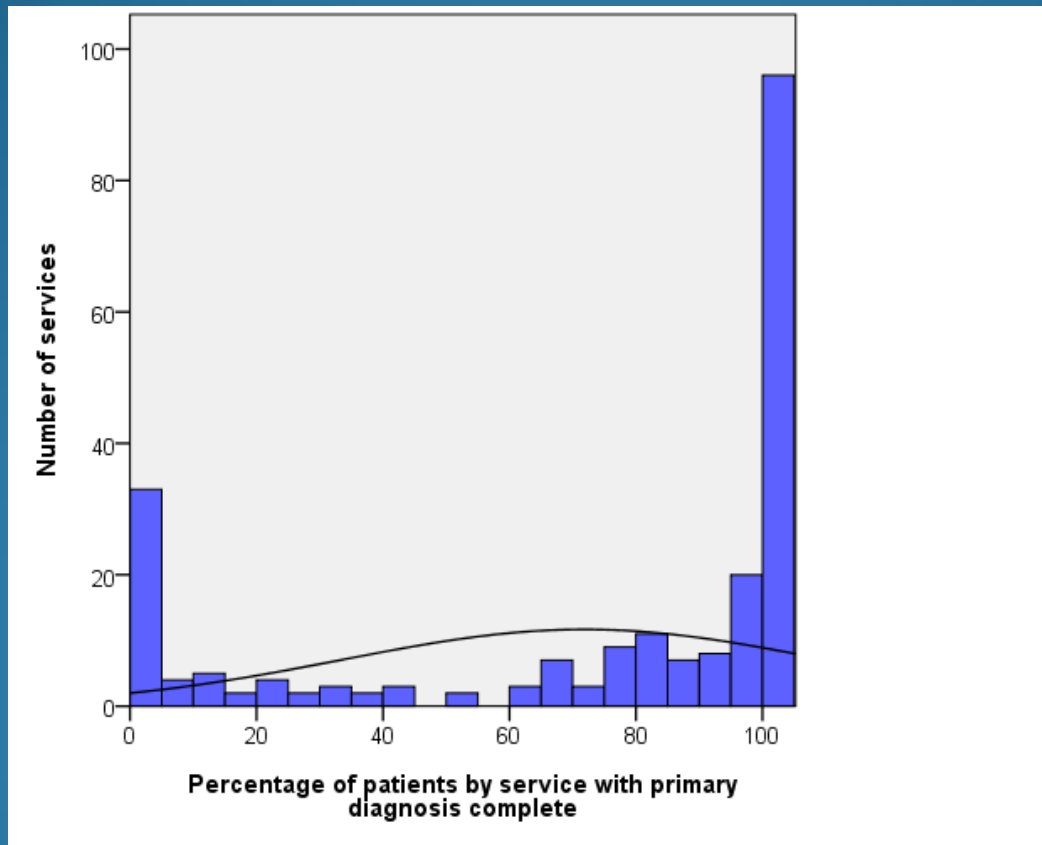
Variation by service in % patients who began treatment within 18 weeks of referral (n=216)



Appropriateness - type of therapy

- 83% of patients given a primary diagnosis of anxiety disorder or depression for which there is NICE guidance received therapy in line with the guidance for their condition
- The proportion of people receiving a NICE recommended therapy varied according to diagnosis; fewest for Post Traumatic Stress Disorder (PTSD)
- But no diagnostic information was provided for 46% of patients, and a further 23% were given a diagnosis for which there is no NICE guideline

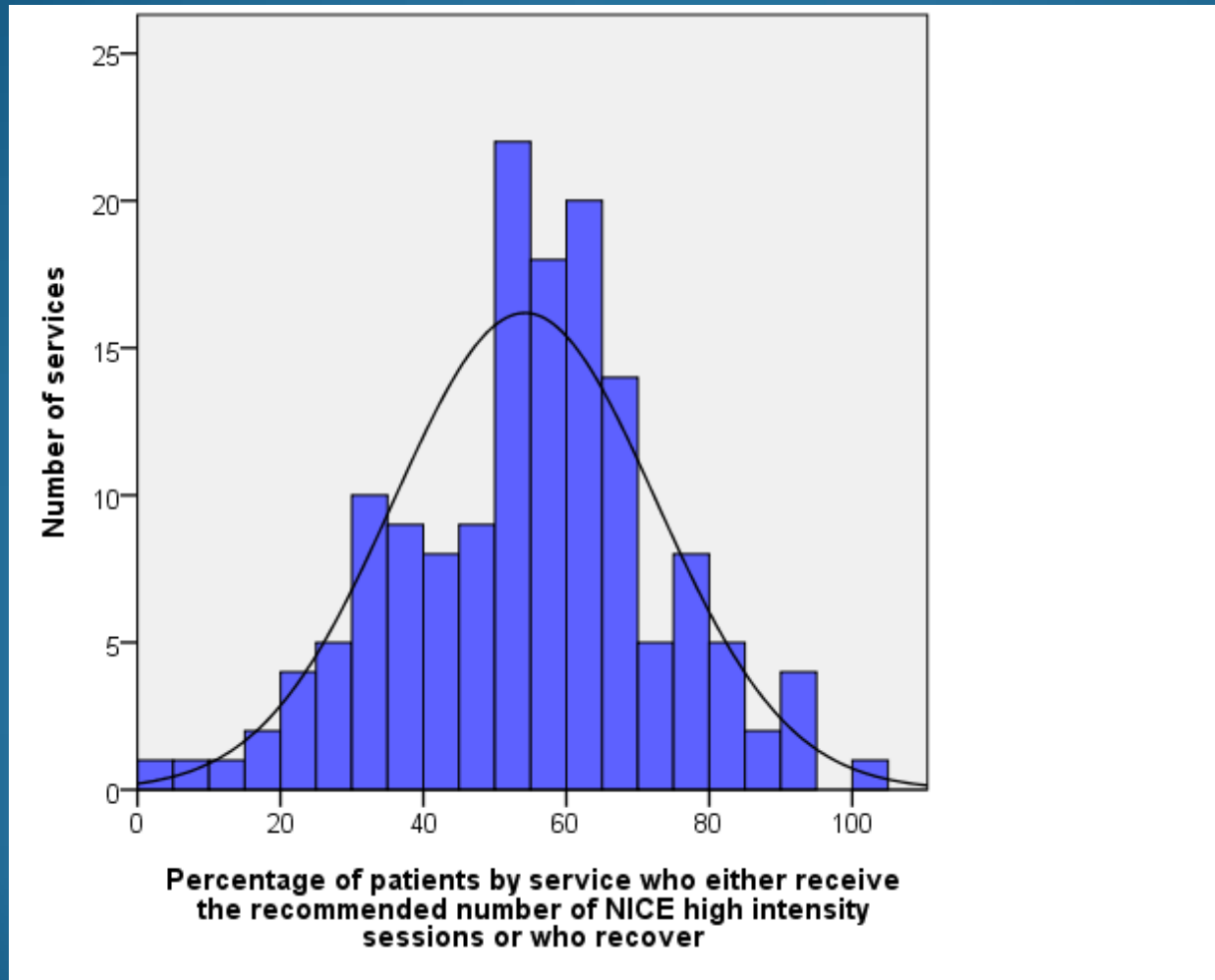
Recording of diagnosis: variation by service



Appropriateness – length of therapy

- 70% of patients who had high intensity therapy did not receive the minimum number of treatment sessions recommended by NICE
- About half of these patients had not recovered by the end of therapy
- The service user questionnaire results also highlighted concerns about length of therapy - 17% considered they did not receive the right number of sessions

Length of therapy: variation between services



Acceptability - Therapeutic alliance

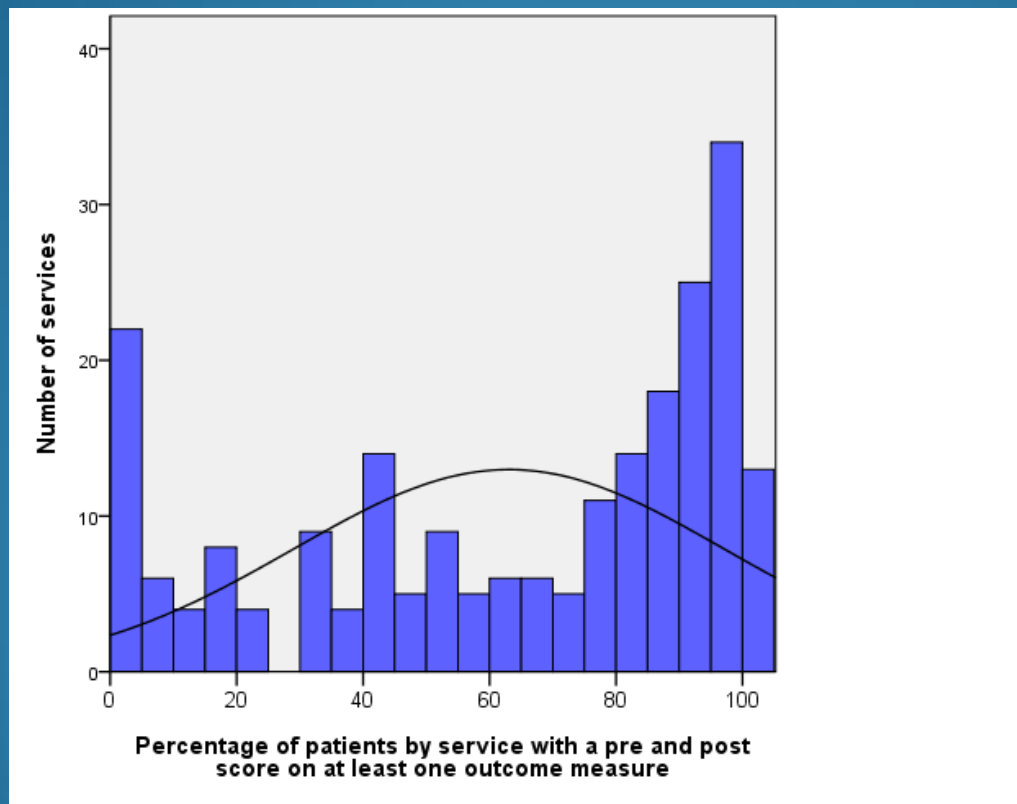
- 80-90% of patients who returned their questionnaire reported a positive therapeutic relationship with their therapist (ARM-5 measure)
- There was some variation between services (interquartile range of % patients neutral or dissatisfied 4 – 13%)
- These findings must be considered in light of the fact that the 19% of service users who completed the ARM-5 measure might be biased in favour of those who are more satisfied

Outcome – recovery and improvement

- Nearly half (49%) of patients with pre- and post-treatment measures had recovered at the end of therapy and 62% had reliably improved
- There was variation between services in outcomes with services in the top quartile exceeding 57% recovery rate
- Few participating services had effect sizes comparable to those found in clinical trials, but the outcomes were broadly similar to those reported in other large evaluations of psychological therapy in routine clinical settings
- However, it needs to be noted that only one-third of services returned adequate data to be included in the analysis

Outcome – data collection

Pre-post outcome data collection rates varied and 42 services (15%) had no outcome data for any of their patients



NAPT findings national summary

- An overall positive picture of the performance of NHS funded psychological therapy services in England and Wales in access, appropriateness, acceptability and effectiveness
- But substantial variation between services in meeting the audit standards

NAPT service reports

- Aim of audit to feed back performance to services to help them improve
- All participating services are being emailed individual reports on how their service performed
- NAPT team will provide an action planning toolkit and workshops to encourage this process

NAPT: Next steps

- In June 2011, the National Audit of Psychological Therapies secured funding from the Healthcare Quality Improvement Partnership (HQIP) for a further two years
- From October 2011-2013, the following activities will take place:
 - The NAPT team will continue to disseminate findings and recommendations from the baseline audit. This will include the promotion of local and national action planning
 - The team will undertake a re-audit in late 2012 to measure change in the 18 months since the baseline audit.

NAPT: Further Information

The full national report, and a service user version of the report, can be found at:

www.rcpsych.ac.uk/napt