National Clinical Audit of Anxiety & Depression
Spotlight Audit of Psychological Therapies

Methodology

Audit Governance

NCAAD is commissioned by the Healthcare Quality Improvement Partnership (HQIP) on behalf of NHS England and is part of the National Clinical Audit and Patient Outcomes Programme (NCAPOP). It is managed by the Royal College of Psychiatrists’ (RCPsych) Centre for Quality Improvement (CCQI), working in close partnership with professional, service user and carer representatives including:

- Anxiety UK;
- British Psychological Society;
- Care Quality Commission;
- Carers Trust;
- Healthcare Quality Improvement Partnership;
- The McPin Foundation;
- Mind;
- Rethink Mental Illness;
- The Royal College of General Practitioners;
- The Royal College of Nursing;
- RCPsych.

Representatives from partner organisations collaborating in the audit comprise our Steering Group, together with six representatives with experiences of living or supporting someone living with anxiety and depression, and the audit Project Team.

Audit Standards

NCAAD measures the performance of secondary care psychological therapy against eight quality standards. These standards were derived from national and professional guidance, including those from the National Institute for Health and Care Excellence (NICE).

Participation in the Audit

The NCAAD is applicable to all NHS-funded secondary care psychological therapy services in England that provide care to service users with a diagnosis of anxiety and depression aged 18 and over.

The following services were excluded:

- Services that are part of the national IAPT programme;
- Specialist psychosis services (e.g. Early intervention in psychosis services);
- Forensic mental health services (inpatient and community);
• Eating disorder services;
• Specialist personality disorders services.

**Identification of Sample**
Participating Trusts were asked to generate a list of all eligible service users within their Trust and submit this list to the NCAAD team.

The maximum sample per service was 30 with a minimum of 20. Where a service had less than 20 cases, all the cases were audited but data are less reliable.

**Inclusion and Exclusion Criteria**
Service users were eligible for inclusion if they met the following criteria:

- Aged 18 years or over (no upper age limit);
- Ended contact for psychological therapy between 01 September 2017 and 31 August 2018;
- Who have non-psychotic disorders

**Data Collection**
Staff working in secondary care psychological therapy services were asked to complete tools for each of their sampled service users, using data from their case notes. The audit of practice tool included items on demographics, diagnosis, assessment, care planning, psychological therapies, and outcome measures. The audit of practice tool is available on the audit website.

Data were submitted directly to the NCAAD project team via a secure online version of the audit of practice tool between October 2018 and January 2019.

A total of 4462 case records were received, following the selection of an appropriate random sample from the eligible population provided by the 50 Trusts that took part in the audit. This represented a return of 79% of the numbers expected (submitted cases/expected cases).

**Therapist Survey**
All members of staff who provide psychological therapy as part of their role were asked to complete the therapist survey (including therapeutic practitioners, assistant psychologists, trainees, voluntary and honorary members of staff and any other staff group that delivers formal psychological therapy). Each service was responsible for identifying their sample of therapists and distributing the survey to relevant staff members. Data were collected via a secure online data collection tool.

A total of 1453 therapist surveys were received.
**Service User Survey**

The service user survey was distributed to all service users who had ended psychological therapy with a participating service between 01 September 2017 and 31 August 2018. This included service users who completed therapy, as well as those who did not complete or dropped out.

Each service was responsible for identifying their sample of service users and distributing the survey to eligible service users. It was encouraged that individuals complete them via the secure online data collection tool but there were also hard copies available that individuals could complete and send directly to the NCAAD team at RCPsych who entered the data on their behalf.

A total of 662 service user surveys were received.

**Registration Information**

In the registration form data were collected on:
- Type of service;
- Type of therapies offered;
- Number of staff who deliver therapy;
- Whether the service provided follow-up appointments after a course of treatment has been completed;
- If the service routinely uses validated measures to inform and evaluate treatment.

**Data Handling and Analysis**

All data were entered using Snap Survey Software via secure webpages. Data were analysed using IBM SPSS Statistics 21, Stata, or Microsoft Excel 2016.

**Data Cleaning**

The NCAAD team checked submitted cases against the eligibility criteria, as well as for duplicate cases, missing data and unexpected values. Data which appeared to have been entered in error were followed up by asking audit staff in Trusts to check if correct data had been submitted.

**Changes Made to the Data**

During the process of data management, the following changes were made:
- When it was possible to identify data entry errors with a high degree of confidence, responses were amended. Where it was not possible to identify an error with a high degree of confidence, no change was made;
- Where there were clear errors, for example, the follow-up date falling before referral date, and Trusts did not respond to the query, the data were changed to ‘unknown/not documented’.
Quality Assurance
Inter-rater Reliability

We asked all services to re-audit five case notes from the submitted sample using a second auditor, so that matching case notes could be compared for reliability. The results of this analysis are published on the audit website.

Psychological Therapies Algorithm

The audit developed an algorithm to determine which service users were receiving a therapy in line with NICE guidance. Not all anxiety and depression disorders have a specific therapy or therapies recommended in NICE guidance. The algorithm included a subsample that had one of the following listed as the problem for which therapy was provided:

- Depression;
- Post-traumatic stress disorder (PTSD);
- Generalised Anxiety Disorder (GAD);
- Obsessive-compulsive disorder (OCD);
- Panic disorder;
- Social anxiety.