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# WELCOME

In this issue we have a number of interesting pieces and useful resources to share. Juliet, Expert by Experience, creatively expresses her experience through story-telling (p.2-3). We also hear about the importance of working collaboratively with family and carers (p.5), a positive challenge to consider involvement in every service. We also hear about work in Lincoln using

technology to support Trauma therapy (p.4), and have an update on psychology involvement at the Edinburgh Fringe Festival (p.1-2).

Don't forget to share your thoughts and ideas with other services via [APPTS-Chat@rcpsych.ac.uk](mailto:APPTS-Chat@rcpsych.ac.uk)

**Best wishes,  
The APPTS Team**

## The Edinburgh Fringe Festival: A Mentally Well Fringe



*NHS Lothian Staff at the Edinburgh Fringe Festival*

Did you know that for the past two years NHS Lothian staff have hosted a series of drop-in, taster sessions for performers and participants at the Edinburgh Fringe?

Following a successful first year, Dr Alison Wells, Clinical Psychologist, NHS Lothian and Dr Alana Davis, Division of Clinical Psychology - Scotland agreed with Edinburgh Fringe to return in 2018 for a second year. The event was run as a single workshop, on three consecutive Fridays, providing experiences commonly used in psychological therapies.

British Psychological Society – Scotland Chair, Beth Hannah said: "As the city bursts into life, signalling the start of the month-long, non-stop festival atmosphere, it can be easy for performers to let their mental health take a back seat. The pressure of ticket sales, getting on stage, and keeping up with the hustle and bustle does take its toll – we all need to take a moment to look after ourselves and I hope performers can benefit from the great services offered by our applied psychologists and NHS Lothian".

*Continued on page 2...*

## Useful resources: Good practice examples on NHS England Website

See the NHS England website for a number of case studies of good practice in mental health services:

<https://www.england.nhs.uk/mental-health/case-studies/>

This includes two examples from APPTS Member services:

- Promoting Staff Wellbeing. Sheffield IAPT
- Patient involvement. Steps2Change Lincolnshire

## A Mentally Well Fringe Continued...

A small team of about twelve staff from Applied Psychology, Psychological Therapies and Arts Therapy were kept busy running a diverse range of 'taster sessions', each lasting about fifteen minutes that were designed to offer an insight into psychological therapies, and provide some relief from the stresses and strains of performing at the Fringe.

This year's experiences saw people listening to a guided meditation of a visit to the seaside, trying out mindfulness techniques such as walking in silence and even mindful eating. Mindful eating is when we eat something like raisins or even chocolate but we slow down the process to appreciate the experience. These techniques help to deal with stress and improve general health. The sessions also explored how our relationships influence how we feel and what we might do about it. Other activities included therapeutic art and music activities. These activities were designed from evidence-based therapies, practised within NHS mental health services.

Feedback from visitors was very positive, commenting on how refreshed they felt and several reviews have already appeared in mainstream and social media. People commented on how important it was to have 'this kind of thing' at the festival.

**John Wills, NHS Lothian**

## The Story of The Strong Black Woman: A Fairy-tale

*Juliet, an Expert by Experience, expresses her experience through story-telling.*



Once upon a time, there was a Strong Black Woman, who lived alone in a castle high upon a hill.

As often as she could, the Strong Black Woman donned her finest clothes, fixed her latest

hairstyle, lowered her draw-bridge, sailed across her moat and strolled down into the town below.

There she sang, danced and made merry with her friends, pretending not to see those she had hurt or upset; those who eyed her suspiciously and those who just thought she was weird.

Her friends loved her! They loved the way she whirled and twirled and shone in her own bright light. They admired her wit and her charm, but most of all, most of all, they admired her strength.

"You are the strongest person I know," said one. "You're amazing! Such an inspiration," beamed another. "I wish I had half your strength," lamented yet another.

Though their words stabbed at her heart, The Strong Black Woman smiled and danced, all the time knowing, the spell would soon break.

*Continued on page 3...*

All the time knowing The Shadows would soon come storming through, kicking up a blinding dust, reeking hellish havoc.

And silently, she would be dragged back up the hill, dragged across her moat, dragged across her draw-bridge, dragged back into her lonely castle.

Her friends never questioned her disappearances – just another part of her mystique!

Alone in her castle, the Strong Black woman cried. Screamed. Smashed. Stared. Shook. Stinking, she laid dead for days, weeks, months.

When she awoke, the Strong Black woman cleaned herself and her home. Her mind clear, she wrote to The Shadows:

Oh.  
It's You  
Again.

\*sighs\*

I thought we'd discussed this.  
This can't continue,  
It really must stop.  
No-one benefits ...

Why. Do. You. Keep. Coming. Back?  
I don't want you here.  
Don't you get that?  
Leave means LEAVE!

\*laughs\*

Seriously.  
Please.  
You're killing Me.  
Please stop.  
Please leave.  
Please let Me  
Live  
Love  
Breathe.

Then she donned her finest clothes, fixed her latest hairstyle, lowered her draw-bridge, sailed across her moat and strolled down into the town below.

**Juliet McKenzie**

## New APPTS Peer reviewer Training Date: 17 April

The next opportunity for staff in member services to train as a Peer reviewer will take place on **Wednesday 17 April 2019**, at Prescott Street, London.

The review days are valuable experience as you get to see how another service is managed and run, and gain insight into how services are experienced by staff and service users.

It is also necessary for each member service to visit at least two other member services in order for everyone to be seen.

Email [APPTS@rcpsych.ac.uk](mailto:APPTS@rcpsych.ac.uk) to register interest for yourself or a colleague, or [book online](#).

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## APPTS Forum Resources

In November, we were joined by APPTS member services, services users, and carers for the Annual Forum – to explore improving quality in psychological therapy services.

There were a range of interesting presentations, including 'Trauma therapies for Grenfell survivors', 'Service User and Carer Engagement' and 'Cultural Relevance of Psychological Therapies for Local Communities'.

**Slides and further resources can be found on the [APPTS website](#).**

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## Save the Date – Annual Forum 2019

We are pleased to announce that the next Annual Forum for Psychological Therapies will take place in **York on 13 November 2019**.

York has been chosen due to a large representation of APPTS membership in the North of England.

# Power to Recover: Using Technology to Support Trauma Focused Interventions

Patients routinely present to Improving Access to Psychological Therapies (IAPT) services for treatment of symptoms of Post-Traumatic Stress Disorder (PTSD) following a variety of critical incidents which have resulted in them experiencing distressing and disabling reactions. In the United Kingdom there are no recommended guided self-help options for patients experiencing symptoms of PTSD and patients are referred for CBT/EMDR in line with NICE (2005) guidelines. Thinking about how we engage with people experiencing PTSD is essential if treatment is to be successful as research indicates this cohort are particularly prone to missed appointments and early drop-out.

*"From a patient's perspective, providing a clear credible rationale for the symptoms they are experiencing... is essential in improving uptake and engagement with trauma-focused therapies".*

The Five Year Forward View for Mental Health (FYFVMH) provides a policy context for providers to consider the use of digital technologies in creating more efficient and sustainable clinical pathways in mental health services. In early 2018 steps2change added 'KRTS Power to Recover™' to its options of Digitally Enhanced Therapies (DET) using it as a blended care option for patients being treated at step 3 with CBT/EMDR for trauma. This online programme is designed to assist symptom stabilisation and help people recover from the psychological and emotional impact of the traumatic event they have experienced through a number of specially designed trauma focused modules:

- The trauma response
- Reactions to trauma
- Managing hyperarousal
- Managing re-experiencing
- Managing avoidance and numbing
- Planning for the future

There is also a wellbeing area promoting commonly used grounding strategies to assist in times when patients may feel overwhelmed. During the normal stabilisation phase of treatment, the patients are supported in using the programme by their nominated CBT/EMDR therapists who acts as a coach providing telephone contact between planned face to face

sessions. The patient receives the equivalent of 12 hours of specialised and trauma-focused intervention in the space of 1-3 clinical sessions.

From a patient's perspective, providing a clear credible rationale for the symptoms they are experiencing and consistent rationale for the intended clinical intervention is essential in improving uptake and engagement with trauma-focused therapies. Although not yet conducted in research conditions there have been a number of positive benefits observed in keeping with the initial hypothesis that the introduction of the programme would provide more consistent delivery of trauma psychoeducation, reduce treatment drop-out, reduce the overall number of clinical sessions required to treat and patients would report positive benefits from having this option available.

Patients have commonly reported moving from being overwhelmed and helpless with their trauma symptoms to being empowered and playing a more active role in their own recovery. In turn this has seen a reduction in missed appointments and early drop-out. Additionally, traditional face to face delivery methods can often be a barrier to those who want to work independently, be self-sufficient and work from a computer, wherever and whenever it is convenient for them. Having this option has provided a further route for these individuals to engage in therapy and being able to revisit materials throughout the episode has also been a reported benefit.



**Nick Harwood (Service Manager, right) and Steve Skinner (Clinical Lead, Left) Steps2Change Lincolnshire**



## The Importance of both Valuing and Including Carers



*Veronica Kamerling, carer representative, shares insights from her own experience on working collaboratively with carers.*

I am the mother of three children – a son and two daughters. My son has never had a mental illness, but both my daughters had an eating disorder. My youngest daughter had anorexia and my eldest daughter had bulimia/binge eating. I also looked after my brother who had schizophrenia. My two daughters are now both in good recovery with families of their own. Sadly, my brother died about three years ago but despite being very unwell at times he managed to write and publish a book of poetry.

After my daughters got into recovery, I decided to start my own organisation which is there to support carers and encourage services to include them in their loved ones' care.

Most carers experience a raft of emotions including guilt, blame, isolation, stigma, fear and depression and I include myself in these. Dealing with these emotions can be extremely difficult which is why we as carers also need help and understanding.

My daughters' recovery was down, almost exclusively, to the fact that I worked collaboratively with the professionals. They recognised that I was the person who knew the patient best and that I could be part of the solution rather than part of the problem.

The psychotherapist who looked after my youngest daughter, then aged 14, acknowledged that it made complete sense to share the plans for her everyday living and this included weighing and food, but not to divulge what was confidential in their conversations. With my eldest daughter, then aged 18, the professionals used to ring me up and ask how I was and how did I

think my daughter was. They would also give me a broad view on how the situation was with her and again with no confidentiality rules broken. This way of working is depicted in the document ["The Triangle of Care"](#).

I also acknowledged that I had to make some changes and by being included and valued by the professionals, it made it easier for me to accept what it was I had to do to make these changes. This in turn increased my confidence and well being and ultimately was one of the reasons my daughters got into recovery.

In my view teamwork, communication, information and a trusting relationship are the keystones to good recovery outcomes - indeed research has shown that these can lead to better outcomes for the patient. In addition, hopefully, more patients will realise the benefits of having their loved ones involved.

*"[The professionals] recognised that I was the person who knew the patient best and that I could be part of the solution rather than part of the problem."*

Information can come in the form of carers packs which should include everything a carer needs to know about the service as well as medication and any carer groups or carer training available. I think it would be helpful to include a small piece about the benefit to carers of "Caring for Themselves".

If there are ever any questions in one's mind as to what would benefit carers all you need to do is ask yourself:

"IF THIS WAS ME HOW WOULD I LIKE TO BE TREATED?"

**Veronica Kamerling**  
**Carer reviewer on the APPTS programme**  
**Proprietor 'Eating disorders & Carers'**  
[veronica@talktalkbusiness.net](mailto:veronica@talktalkbusiness.net)

# Setting Best Practice for Psychological Therapies Services

Would you like to be involved in agreeing standards for best practice in psychological therapies services?

APPTS will be hosting a Standards Development Group Meeting on **Wednesday 8 May 2019**, at the Royal College of Psychiatrists in London (21 Prescot Street, E1 8BB), 10.00 – 16.00.

If you would like to attend this meeting, please complete the following [booking form](#).

The purpose of the meeting is to review the '[Quality Standards for Psychological Therapies Services](#)', and to update with any amendments or new additions. This is the key document for APPTS Accreditation, and its accuracy is crucial to assessing that services are safe, effective, caring, responsive and well-led.

Places are limited to 24 for this meeting. Additionally, we require a representative multi-disciplinary group including service users, carers, therapists, managers, heads of services, clinical leads, national IAPT representatives, and other stakeholders. We also require representation within these from NHS, private and third sector care.

Therefore, please note that we may have to cap attendances to ensure fair representation. Please book early to avoid disappointment.

Those unable to attend will also have the chance to feedback on the APPTS standards in advance of the meeting via email consultation.

## New APPTS Website

This month the Royal College of Psychiatrists launched a brand new website!

[See the new APPTS webpages here](#)

All the best,

The APPTS Team



## Contact the APPTS Team

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