

## **FOI 008/2023 Response**

### **Request**

\*\* Follow up to FOI 0329/2023

Thank you for your response to the recent FOI request.

With regards to Referrals, are you able to share the policy/guidelines for the Trust's referral procedures?

You also stated that the service provides psychologically informed interventions, can you be more specific with regards what these interventions are? i.e. the name of the intervention or the risk targeted?

### **Response**

Please find attached the referral and guide to the Forensic Intensive Recovery Support Team (FIRST) and note that we are unable to provide the Referral To Secure Services Single Point Of Access Guideline.

This is because the guideline is currently undergoing ratification and is therefore intended for future publication.

The Trust therefore rely on exemption Section 22 of the Freedom of Information Act 2000 to deny this aspect of your request.

In regard to psychologically informed interventions, the Trust's FIRST Psychology team offers psychological assessment and intervention to service users referred to us who are living in the community under the care of FIRST, or those who are within 6 months of discharge from one of our secure hospital sites.

We offer a range of interventions that are suited to the individual's needs, including individual and group sessions.

The team currently includes qualified psychologists, assistant psychologists, a specialist psychological practitioner and an art psychotherapist.

Therapeutic models used to inform and structure interventions include Cognitive Behavioural Therapy (CBT), Dialectical Behaviour Therapy (DBT), Compassion Focused Therapy (CFT), Acceptance and Commitment Therapy (ACT), Cognitive Analytic Therapy (CAT). Examples of the types of interventions we deliver include anxiety reduction, emotion regulation, conflict management, trauma work, violence reduction (review), developing self-compassion, family intervention, reviewing staying well / relapse prevention plans, art psychotherapy sessions.

However, as mentioned above, interventions are tailored to the needs of the service user and therefore can be varied. Interventions are typically facilitated face-to-face, although video, and phone sessions can be accommodated where necessary.

Furthermore, psychology sessions can be facilitated at Trust sites or in the community, depending on where the service user resides. Psychology sessions are generally facilitated on a weekly or bi-weekly basis, and individual therapy would typically last no longer than six months.

FIRST Psychology also facilitate the following psychology groups on a rotation system based on the treatment needs of the service user group: REDD (Regulating Emotions and Dealing with Distress), Good Lives, Building Bridges (relationship skills), Compassionate Minds, Mindfulness, and Transitions group (practical skills for preparing for life in the community). These are open to those individuals already living in the community, as well as those who are nearing discharge.

In addition to direct interventions for service users, psychology staff also support FIRST MDT colleagues and those involved in caring for service users in the community (such as accommodation staff) through developing psychologically informed formulations, offering consultancy and liaison with clinical teams, supporting risk assessment, facilitating staff training, and offering staff support sessions (e.g. reflective practice and supervision).