

FOI 0102/2023 Response

Request

Dear FOI Team,

I am writing to request information under the Freedom of Information Act 2000.

I am looking for information held by your organisation, detailing the care CMHT Adult services support Service Users with a Diagnosis of Personality Disorder / Complex needs – specifically Borderline / Emotionally unstable Personality Disorder.

The request is detailed in full below.

To summarise, I am interested in how Trusts currently structure their out-patient Personality Disorder Services to meet Service User need.

I will focus on Dialectical Behavioural Therapy – frequently labelled the Gold standard therapy for BPD / EUPD. I am keen to understand how Trusts are varying from the standard DBT structure (12-month course with weekly Skills group, weekly 1:1 therapy, plus telephone support).

I understand that NHS Services are undergoing significant reform at present, which may make it hard for Trusts mid reform.

For the purposes of this request, for Current Services, please give the position as at the start of this Financial Year, April 2023 – Please do indicate if this is post transformation. I have included opportunity to indicate that Services are currently undergoing Review. There is also space to make comment on Future Provision.

If any parts of this request do prove harder to answer than others due to the nature of the transformation, I would ask that you release available data as soon as possible rather than delay the entire request. If you need further clarification on particular questions, please contact me by email, at the address given above.

I would be grateful if you could confirm via email that you have received this request. I look forward to your full response within 20 working days as outlined by the statute.

Response

Community Therapies and Support Available to Adult Service Users with a diagnosis of Borderline Personality Disorder (BPD) / Emotionally Unstable Personality Disorder (EUPD)

- with a focus on Delivery of Dialectic Behaviour Therapy (DBT)

1 – Does your Trust provide Community support to Service Users with a diagnosis of Personality Disorder / Complex needs?

Yes

2 – Does your Trust currently have a specialist Personality Disorder and Complex Needs Service?

We have various services that all come under a developing pathway for personality disorder including DBT service (known as CASCADE) service , Specialist Psychotherapy Service with funding for personality disorder, Enhanced Team for personality disorder and provision of psychological therapy throughout BSMHFT. This is in recognition that an individual's difficulties can be multi-faceted and not always amenable to having a single team approach.

2a) – For those answering No to currently have a specialist Personality Disorder and Complex Needs Service, please specify the following regarding Future Provision:

Please refer to the response provided in question 2.

3) Does your Trust have a Treatment Pathway for the management of Service Users with a diagnosis of BPD / EUPD

Yes

4) Does your Trust currently allocate a Key worker to Service Users with a diagnosis of BPD / EUPD?

Yes, although this is based on a multidisciplinary team case conceptualisation and case management decision , on an individual case-by-case basis

4a) Is the allocation of Key worker likely to change in future Service provision?

This is currently under review.

5) Please indicate the Therapies Currently available to Service users with a Diagnosis of BPD / EUPD, please note future provision were known

	Currently Provided (April 2023)	If Provided, what is the Occupational Specialism of Lead Therapist?	If Provided, how long is the full Course of therapy?	Is the Current Provision Under Review?	Is Therapy included In Future Provision	Notes on Future Provision (if applicable)
Cognitive Behavioural Therapy (CBT)	Yes	CBT is provided by various members of the multidisciplinary team including but not limited to practitioner psychologists, psychotherapists, therapists or nurse therapists. In one of our Clinical Divisions, there are three CBTpd (CBT for Personality disorders) qualified practitioners etc	Depends on client need with CBT not CBT-PD. when CBT-PD there are 20-30 sessions.	Yes	Yes	Under review
Dialectical Behavioural Therapy (DBT)	Yes	Clinical Psychologist	Months; maximum 24 months	Yes	Yes	DBT- CASCADE provides full DBT provision/group/individual therapy and coaching for those who meet the criteria. DBT skills provision is under review and development

						As part of community transformation this new provision will be reviewed and hopefully increased.
Mentalisation Based Therapy (MBT)	Yes	Clinical psychologist/Counselling psychologist/art psychotherapist	A full course could be up to 18 months but not everyone does the full course. MBT is a shorter course	Yes	Yes	As part of community transformation this new provision will be reviewed and hopefully increased.
Cognitive Analytical Therapy (CAT)	Yes	Currently minimal availability from various members of the multidisciplinary team including but not limited to practitioner psychologists; psychotherapists, therapists or nurse therapists	16,24 sessions	Yes	Yes	Remove existing and re-phrase as: As part of Community Transformation there are place to increase this provision which is dependent on access to and availability of suitable training programmes for our workforce
Remove existing and re-phrase as: As part of Community Transformation there are place to increase this provision which is	Yes	Specialist Psychotherapy Services lead on this across the Trust	2 year	No	Yes	

dependent on access to and availability of suitable training programmes for our workforce						
Psychodynamic Therapy/psychoanalytic						
Schema Therapy	Yes	Small number of individuals (various members of the multidisciplinary team including but not limited to practitioner psychologists; psychotherapists, therapists or nurse therapists) trained in schema therapy	TBC	Yes	TBC	
Interpersonal Psychotherapy 1:1	No	No	No	No	No	No
Interpersonal Psychotherapy Group Interpersonal Psychotherapy Group (therapeutic day programme multimodal : analytic, CFT, Peer support	Yes	Specialist Psychotherapy Services provide 1 day programme. Clinical psychologist and Nurse psychotherapist trained in group and individual analytic approach or CFT	2 years	No	Yes	

Transference-focused Therapy (TFP)	No	No	No	No	No	No
Eye Movement Desensitisation and Reprogramming (EMDR)	Yes	Various member of the Psychological Professions to include practitioner psychologists; psychotherapists, therapists or nurse therapists	Depends on service user need	Yes	Yes	
Family Intervention	Yes	Clinical Psychologist : DBT service (known as CASCADE)	12 weeks	Yes / No	Yes / No / TBC	Planned pilot of the Family Connections programme as part of DBT service , autumn 2023. Future plan is to have this provision available across the organisation.
Acceptance and Commitment Therapy (ACT)	Yes	No	TBC	Yes	TBC	
STEPPS	No	No	No	No	No	
Structured Clinical Management	Yes	No	TBC	Yes	Yes	Under community transformation we are developing a pilot site for SCM in 2023

<p>Other (please specify)</p> <p>Compassion Focused Group Psychotherapy</p>	<p>Yes</p>	<p>Specialist Psychotherapy Services Clinical Psychologists, psychotherapists, Occupational Therapists</p>	<p>Primary Care: 12 weeks</p> <p>Secondary Care: 20-32 weeks</p> <p>Tertiary Care: 15 months</p>	<p>Yes</p> <p>6-year research program 2014- 2020</p> <p>(results in press with academic Publication)</p>	<p>Yes</p> <p>Following review waiting list and Moving on groups established (monthly groups cofacilitated by an EBE)</p>	<p>Continuation of program</p> <p>7 year follow up study underway – (qualitative and quantitative components)</p>
<p>Other (please specify)</p> <p>OAKS group therapy programme</p> <p>Building emotional coping skills group which utilises DBT principles</p>	<p>Yes</p>	<p>Various - the OAKS teams is made of a multi-disciplinary team. Some of which hold a certificate in DBT, however all have had or are in the process of having some form of DBT training.</p>	<p>13-week programme which consists of a 2 hour group session.</p>	<p>As a team we continuously review the content and delivery of the group.</p>		

DBT Specific Questions

If your Trust currently offers Adult DBT Therapy in Community setting, please answer the following questions regarding the structure of this service, as it was in April 2023.

If there is no current DBT provision, please skip to Question 15 regarding future plans

6) Are there reasons that Service users may be excluded from DBT?

Yes / No Please specify:

Yes, exclusion applicable to people with a very low BMI, active psychosis, diagnosis of Bipolar Disorder or substance use disorder.

6a) If applicable, Would Service users failing criteria be transferred to another Service for support with the issues preventing their access to DBT?

Yes / Yes, and could then join DBT if criteria are met / No, relevant service not available / No – Service User would be discharged / Other, please specify

CASCADE would suggest a referral to Eating Disorders Service. Detox (provision for substance use disorders) with a view that once these conditions are addressed as a re-referral to DBT can be made.

7) For Trusts offering more than one DBT group, are all groups structured in the same way? E.g. including the same care contact elements over the same duration

The development of DBT skills groups in the wider trust are under review.

7a) Does your Trust offer specialist variations of DBT / additional modules for patients with dual diagnosis?

CASCADE can make adaptations to standard DBT to accommodate patients with dual diagnosis. CASCADE has staff in DBT for Substance Misuse. Additional modules are incorporated into the programme. Staff also trained in DBT for PTSD for those with EUPD and PTSD diagnosis. A separate DBT programme is offered in this case. This is dependent on resource.

8) For Trusts offering multiple DBT courses with varied structure, please answer the questions below for each DBT course type.

The information below relates to CASCADE -DBT service. Other DBT skills courses with varied structure are under review.

E.g. You may run 10 standard DBT groups at various locations, please report these together under Group 1, “Standard”, as long as the structure is similar. If you also have two longer courses including specialist modules, these could be reported under Group 2, “Comprehensive” or other suitable group name.

Please extend to Group Type 3, 4, 5 etc as required if you run DBT groups with multiple variations in structure.

	<i>DBT Group Structure 1: e.g. Standard</i>		<i>DBT Group Structure2: e.g. Comprehensive</i>	
8a) How many DBT groups are run with this structure across your Trust?	Currently 1 – planning for 2		N/A	
8b) Is DBT pre-treatment available?	Yes		N/A	
8c) How long does the DBT course take to complete? e.g. 6 / 12 / 18 months	12-16 months		N/A	
8d) Is the DBT Skills training delivered in a Group environment?	Yes, mainly but also 1:1		N/A	
8e) If yes, please indicate the duration and frequency of the DBT Skills Sessions e.g. 2 hours weekly	2.5 hours, per week		N/A	
8f) Please state the number of skills sessions delivered in each DBT Module Note: If modules are repeated within the DBT course, please count each session per cycle eg In cycle 1, the Mindfulness module is delivered over 8 sessions. In the subsequent cycle, delivery is in 6 sessions. Please record as 8+6	Module	No. Sessions	Module	No. Sessions
	Mindfulness	8+8	Mindfulness	N/A
	Emotional Regulation	7+7	Emotional Regulation	N/A
	Distress Tolerance	6+6	Distress Tolerance	N/A
	Interpersonal Effectiveness	5+5	Interpersonal Effectiveness	N/A

	Other middle path; addictions	Varies	Other	N/A
8g) Please indicate the occupational specialism of the Clinicians having regular direct Service User Contact within the DBT Skills Group e.g. Psychotherapist, Psychologist, CPN, Occupational Therapist. Please list all applicable	Practitioner Psychologists		N/A	
	Clinical Specialist (therapist)		N/A	
	DBT psychological therapists		N/A	
9) Does the Trusts DBT group include regular Individual DBT Therapy Sessions?	Yes		N/A	
9a) If yes, please indicate the duration and frequency of the 1:1 sessions e.g. 1 hour, weekly	Minimum 1hr x 1 per week		N/A	
9b) Please indicate the occupational specialism of the clinician delivering the Individual Therapy e.g. Psychotherapist, Psychologist, CPN, Other.	As above		N/A	
10a) Does the Trusts DBT program include Telephone support?	Yes		N/A	
10b) Please indicate the hours this operates e.g. 9-5 Mon-Fri	7 days a week , no set hours		N/A	

11) Patient Safety: How is Service User risk reviewed during the DBT course?	Named Clinical Assessment Tool / Clinical Judgement & Observation / Other Clinical Judgement & Observation	Named Clinical Assessment Tool / Clinical Judgement & Observation / Other N/A
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12) Clinical Effectiveness: How are treatment outcomes assessed to monitor the effectiveness of the therapy?	Named Treatment Outcome Assessment Tool / Other please specify: Named Treatment Outcome Assessment Tool	N/A
12a) At what intervals are treatment outcomes monitored, and for how long after completion of the course are Service Users Followed up?	6 months, 12 months, 18 months, 3 months post discharge	N/A
12a) Where are treatment outcomes analysed / reported?	Internally by DBT Team At Trust Clinical Effectiveness Board Externally, feeding into National Research	Internally by DBT Team At Trust Clinical Effectiveness Board Externally, feeding into National Research
13) Are Service Users asked for feedback on their experience of the DBT programme?	Yes, both individually at set points in the service and collectively at patient involvement events	Yes
13a) Does this feedback get reported into a National Collection eg The Friends and Family Return?	Yes, feedback mainly used to improve the delivery of the treatment. Amendments can be made to the content to make it more socially and culturally relevant. Changes to structure and format of sessions to meet neurodiverse needs. Feedback used to develop modified or adapted DBT therapy, such as specific group for south Asian women.	N/A
13b) How is Service User feedback used to improve the DBT programme?	Please see above.	N/A

<p>14) What criteria are used to decide if the Service User has a need for further Therapy after completion of DBT Course?</p>	<p>No specific criteria. Ideally the referring team will have a treatment plan that will have highlighted needs of patient; therefore some issues will not have been identified as needing to be addressed through DBT therapy. Therefore untreated problems post DBT (such as trauma / loss grief/ OCD) will require further therapy.</p>	<p>N/A</p>
<p>14a) For the last Completed DBT course, what percentage of Service Users had a requirement for further therapy ?</p>	<p>There is no such thing as a last completed DBT course, as the programme is ongoing. On average up to 50% of those completing DBT will require further therapy and are referred on.</p>	<p>N/A</p>
<p>14b) For the last Completed DBT course, what percentage of Service Users left the DBT group due to not finding it helpful?</p>	<p>There is no such thing as completed DBT course. On average people drop out of group for various reasons. Less than 5% have said they did not find it helpful.</p>	<p>N/A</p>

<p>15) Is the provision of the Trusts DBT service(s) Currently under Review?</p>	<p>Yes</p>
<p>15a) If Yes, have changes to the DBT service(s) been finalised and approved?</p>	<p>Under review</p>

15c) Please indicate the Financial year in which these changes will be implemented	To be discussed
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16) Please indicate if the agreed changes include the following aspects of the Service:	Delete any factor NOT applicable	Further Detail:
DBT Pre-Treatment Phase	Added / Removed	Not applicable
DBT Course Duration	Shortened / Lengthened	This could form part of the review
DBT Specialist Modules for Dual Diagnosis	Added / Removed	This could form part of the review
DBT Skills Group	Frequency / duration amended	This could form part of the review for skills groups outside of CASCADE
Specialism of clinicians delivering the DBT Skills Group	New Team Specialism(S):	This could form part of the review
Individual DBT Sessions	Frequency/duration amended /Removed.	Not applicable
Specialism of clinicians delivering the Individual DBT Sessions	New Specialism:	This could form part of the review
Telephone Crisis Support	Added / Removed	Not applicable
Other		Please Specify: