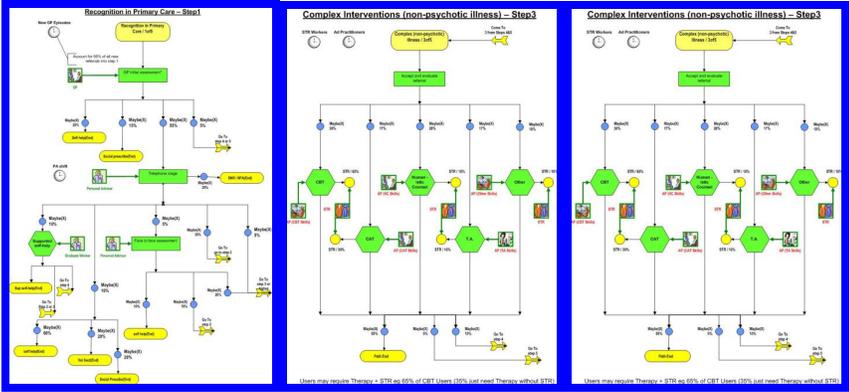
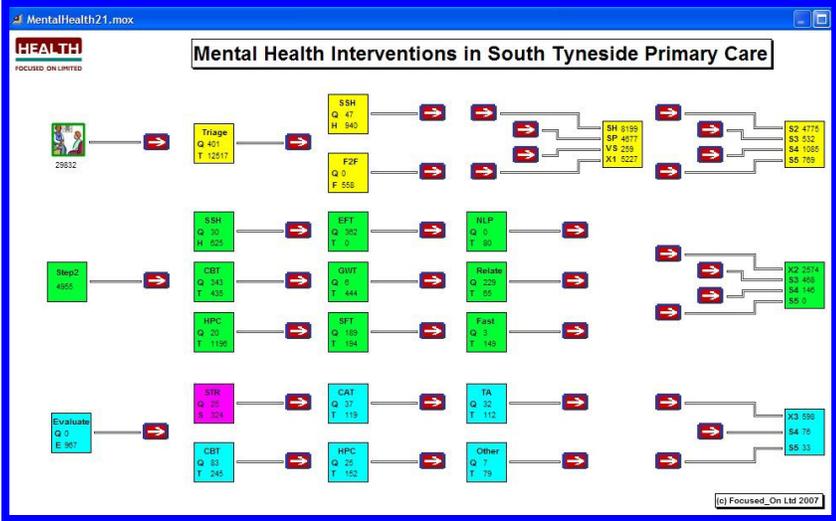


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Case Study 3

Title:	Improving Access to Psychological Therapies (IAPT)
Initiator /s:	South Tyneside PCT
Date:	2007 – 2008
Funding:	South of Tyne Commissioners of Adult Mental Health Services, modelling undertaken by <i>Focused-On Ltd.</i>
Purpose:	To find new ways of designing processes that achieve better patient flow, deliver greater care, are supported by staff, and provide better value-for-money for the delivery of mental health services in South Tyneside.
Method:	A discrete event simulation – FlowModel implement in <i>Extend (ImagineThat Inc)</i> ..
Details:	<p>Staff moved from paper process maps to PC-based PatientFlow planning. Their drawings linked to source data, reference material plus shift profiles, duration (usually defined as a triangular distribution) of value-adding activities and courses of treatment, and identify which staff and facilities are needed.</p> <p>The focus was on the first 3 Steps:</p> <ul style="list-style-type: none"> • Recognition in Primary Care • Brief Interventions • Complex Interventions (non-psychotic illnesses) <div style="text-align: center;">  <p>Three PatientFlow plans showing patient pathways in the model. The first plan is titled 'Recognition in Primary Care - Step1' and shows a flow from 'New GP Consultation' through 'Recognise the need for a mental health problem' to 'Referral to a mental health professional'. The second and third plans are titled 'Complex Interventions (non-psychotic illness) - Step2' and 'Complex Interventions (non-psychotic illness) - Step3' respectively, showing more complex flows involving 'Complex intervention (non-psychotic illness)' and 'Treatment plan'.</p> </div> <p>PatientFlow plans - charting patient pathways in the model</p> <p>This phase gave everyone a shared-understanding. Clinical staff were reassured by its “fairness” and it engendered both “integrity & respect”. It also provided a good understanding of the therapy skills within the teams.</p> <p>The resulting simulation FlowModel could then be used to identify and measure likely patient queues and test the impact of organisational changes and the appropriate engagement of services that might be better provided via service level agreements with voluntary sector and other external providers.</p>

	 <p>FlowModel used for the simulation.</p>
<p>Outcomes:</p>	<p>The PatientFlow plans and the simulation FlowModel are being used very successfully in collaboration by the local commissioner, the lead GP, and providers to build and deploy their ‘dream team’ of therapists in a way that can meet the 50% increase in referrals within approved headcount and budget.</p> <p>Now, commissioners for adult mental health services across all South of Tyne are taking this work right through to crisis resolution & home treatment and in-patient psychiatric beds</p>