

Improving Access to Psychological Therapies (IAPT)

Improving Access to Psychological Therapies (IAPT) services provide a wide range of talking therapies to people with anxiety & depression disorders (including OCD) across England. IAPT services are part of the NHS and are therefore free to access. They have been around since 2008 but many people who contact us through the Helpline seem unaware of them, as do their GPs. Part of the problem may be that many IAPT services are not called IAPT services but have a number of different names e.g. Wellbeing Norfolk & Waveney, Faversham Counselling Service, Mindsmatter (Lancashire) etc.

You should be able to find details about your local IAPT service on the NHS Choices website: www.nhs.uk

Staffing of NHS IAPT Services

Two types of psychological therapy practitioners are trained to deliver therapies in NHS IAPT services and who you see should depend on the severity of your condition:

- **High Intensity Therapists** trained in Cognitive Behavioural Therapy (CBT) for people with moderate and severe depression and anxiety disorders, and a range of other therapies as recommended by NICE.
- **Psychological Wellbeing Practitioners (PWPs)** trained in cognitive behavioural approaches for people with mild to moderate anxiety and depression. These approaches include guided self-help and delivering psycho-educational groups.

IAPT services may also have administrative staff, employment advisors, a GP advisor and links with other services such as housing, drugs advice and benefits.

Access & Waiting Times

In some areas you will be able to refer yourself to your local IAPT service, while in other areas you will need a GP referral.

OCD Action receives many calls and emails from people who are waiting a long time for treatment from their local IAPT service but the National Standards for waiting times for IAPT services say that 75% of people referred to IAPT services should start treatment within 6 weeks of referral, and 95% should start treatment within 18 weeks of referral.

Choice

It is important that people have a say in what kind of treatment they receive. This helps ensure the best health outcome for them. After your assessment your assessor should explain which treatment they are recommending and why they think it is suitable for you.

Therapies Available

IAPT services provide talking therapies recommended by the National Institute of Health & Clinical Excellence (NICE). Your IAPT service will always provide CBT but it may also offer all or some of the following:

- Couple therapy
- Counselling for depression
- Interpersonal Psychotherapy (IPT)
- Brief Psychodynamic Psychotherapy

The clinically-proven treatment recommended by NICE for OCD/BDD and related disorders is CBT and at your assessment you should be informed of this but given a choice of treatments. OCD Action has found that many people who contact us who are waiting for treatment to start are unsure what treatment they are waiting for and whether it will be one-to-one or in a group. If you're not sure please ask the person assessing you to explain and to put your treatment plan in writing.

Support During Treatment

Through OCD Action's Next Steps service a Helpline Volunteer can give you a weekly / fortnightly call to provide you with support while you're having CBT treatment. Our Helpline Volunteers aren't therapists, their role is to keep you motivated to complete the course and to do the homework you will be set. As many of our volunteers have OCD themselves they may well have had CBT and know what hard work it is.

Also, there is information on OCD Action's website about support groups across the UK and we have a useful resource called the CBT Checklist on the resources page which explains what should be happening in CBT sessions.

Stepped Care

NICE recommends a range of psychological therapies to treat people with depression and anxiety disorders. It also recommends that these therapies are used to provide a system of stepped care. This means that your treatment for OCD/BDD and related disorders should be reviewed and you should be referred onto more or less intensive treatment within IAPT services or to a different service if the treatment or intensity of treatment you need cannot be provided by your local IAPT service.

Rate your IAPT Service

You should be asked for your feedback once you have been assessed by your local IAPT service and a treatment plan has been agreed with you. You should then be asked to rate your satisfaction with the service once you have completed treatment with them. These are Patient Experience Questionnaires (PEQ).