Case study

City & Hackney Talking Therapies

Outcome Feedback

City and Hackney Talking Therapies

NHS City & Hackney Talking Therapies (formerly Talk Changes) is a large and dynamic Talking Therapies (TT) service. The service sees over 6000 patients a year and offers a range of evidence-based psychological therapies.

The challenge

City & Hackney was looking to harness innovation to improve quality of care for the diverse local population it serves. With high levels of income inequality, deprivation and other determinants of poor mental health, the need to reduce local health inequalities and variation in outcomes was a key focus and ambition.

The solution

Following a national Outcome Feedback trial, City & Hackney agreed to be an 'early adopter' site to help gather further evidence on how prediction technology can improve the effectiveness of psychological therapies.

The outcome

After an "excellent, engaging and very clear" training session, City & Hackney began using Outcome Feedback technology to "inform clinical supervision and decision making during treatment."

"Since we started using Outcome Feedback technology we have seen an increase in our Recovery Rates."

> Recommended by City & Hackney Clinical Lead, Dr Jon Wheatley

1 in 3 NHS TT services use the digital health Case Management System, PCMIS to facilitate effective evidence based treatment management and data capture.

Previously there has been insufficient data for data researchers to develop accurate prediction algorithms. PCMIS has captured data from over 5 million patients, including measurements of the intensity of their depression and anxiety symptoms every week during the course of treatment. As one of the world's largest and most complete psychological service data sets, this offered an opportunity to develop comprehensive and accurate data-driven insights and tools to improve the effectiveness of large scale psychological services.

On this basis, the PCMIS developers collaborated with world leading mental health researchers to develop the "Outcome Feedback" technology to support thousands of psychological therapists using the PCMIS system in routine care. This award winning evidence-based technology has been clinically proven to improve clinical outcomes and to prevent deterioration, in the world's largest randomised controlled trial of feedbackinformed therapy [The Lancet Psychiatry 2018, Vol 5 Issue 7].

PCMIS have recently been awarded:



Mental Health Solution of the Year



Best use of Data in Health Innovation.







Outcome Feedback

Now proven to significantly increase reliable recovery rates. Outcome Feedback involves alerting psychological therapists to cases that are not responding well to treatment, prompting them to identify and resolve difficulties.

How the Feedback Tool works:



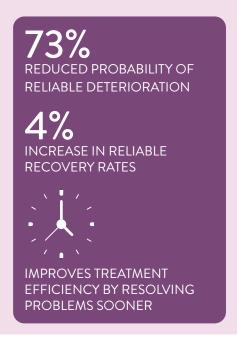
COLLECT routine outcome measures for depression (PHQ-9) and anxiety (GAD-7).



ASSESS whether treatment is on-track or not-on-track using the feedback tool that compares the patient's symptoms to those observed in thousands of other cases.



ADAPT the treatment plan if the patient's symptom trajectory is not-on-track. This helps to improve outcomes and prevent deterioration.



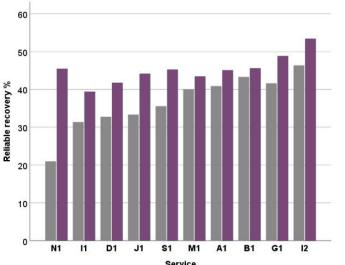
An additional 4,405 patients experiencing reliable recovery...

Method: This service evaluation project collected anonymised clinical records from 10 NHS-TT services (N=107,455) that had access to the feedback tool and 9 "control" services (N=69,351) that had not yet implemented it. Data for all patients who were discharged from participating services within a 2-year period (2022-24) were included. Clinical outcomes were compared between feedback-using and control services using logistic regression controlling for individual differences in available demographic and clinical variables.

"Implementing the feedback tool resulted in an additional 4,405 patients experiencing reliable recovery in the group of feedback-using services during a 2-year period".

Professor Jaime Delgadillo, University of Sheffield.

Results: Services using the feedback tool had 5% higher recovery and 4% higher reliable recovery rates. These differences were statistically significant (p <.001). Implementing the feedback tool resulted in an additional 4,405 patients experiencing reliable recovery in the group of feedback-using services during a 2-year period. Furthermore, within the feedback-using services, therapists chose to view the feedback graphs in some cases and not others.



The figure demonstrates a clear pattern across feedback-using services: reliable recovery rates were higher in cases where therapists used the feedback tool.







Feedback graph viewed

■ No

