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Early Intervention - Improving Physical Health Outcomes for People with Psychosis and Serious Mental Illness

Somerset Team for Early Psychosis (STEP)

Annie Hodgkins STEP Team Manager / Mental Health Nurse

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About STEP

The service has a hub and spoke structure. Assessment workers (led by a band 6 senior assessment worker) work closely with the CMHTs, Specialist CAMHS and inpatient units in each of the four service areas. These workers are supported by the 'hub' consisting of the STEP team manager (0.6 wte), and consultant psychologist (lead for early interventions, 0.2 wte)

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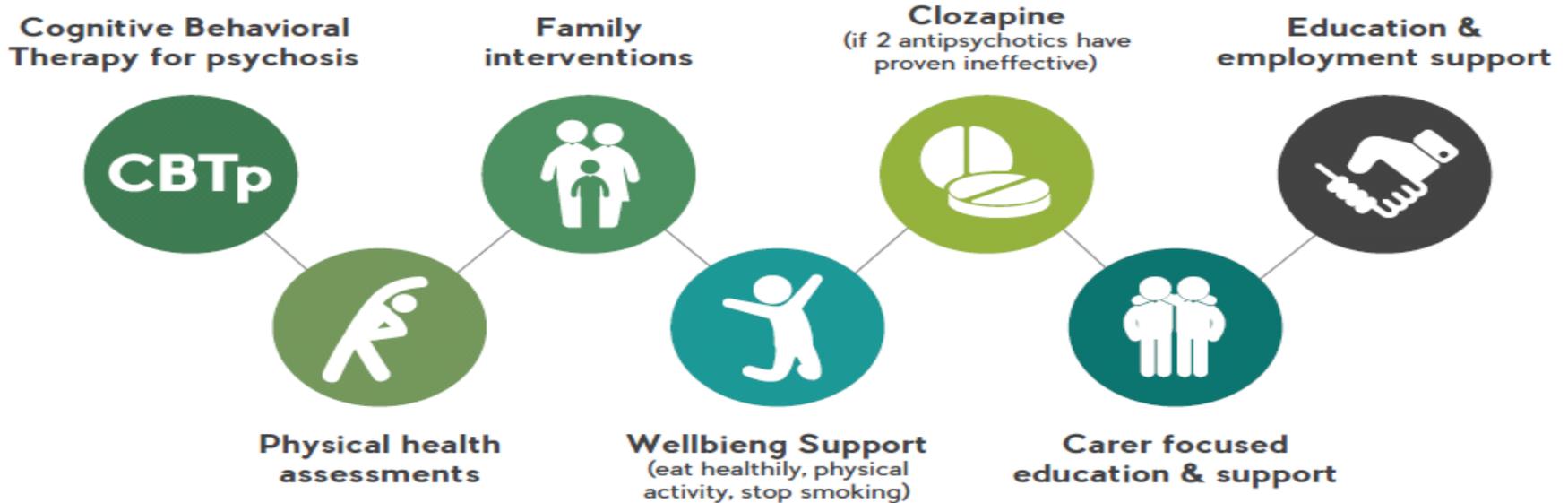
NICE Guidance Quality Statements for Adults with Psychosis and Schizophrenia

- Adults with a first episode of psychosis start treatment in early intervention in psychosis services within 2 weeks of referral
- Adults with psychosis or schizophrenia are offered cognitive behavioural therapy for psychosis (CBTp).
- Family members of adults with psychosis or schizophrenia are offered family intervention.
- Adults with schizophrenia that has not responded adequately to treatment with at least 2 antipsychotic drugs are offered clozapine.
- Adults with psychosis or schizophrenia who wish to find or return to work are offered supported employment programme
- **Adults with psychosis or schizophrenia have specific comprehensive physical health assessments. Adults with psychosis or schizophrenia are offered combined healthy eating and physical activity programmes, and help to stop smoking.**
- Carers of adults with psychosis or schizophrenia are offered carer-focused education and support programmes.



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A NICE concordant EIP service is able to offer and deliver the following NICE recommended treatments to >50% of people within 14 days of referral:



time4recovery.com



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An audit carried out in 2016 / 2017 indicated only **4%** of STEP clients had received a comprehensive physical health check during the previous 12 month. The target was **90%**

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How have we responded?

- STEP have appointed 2 Consultant Psychiatrists - one operating on each side of the county, this is equivalent to a full time post.
- STEP is a proactive member of the South West Early Intervention in Psychosis Network, a forum to share innovative ideas for a high quality service provision.
- An eLearning package 'Improving Physical Health for People with Severe Mental Illness' is available to all clinical staff.
- Smoke free wards / NHS sites and smoking cessation training for all staff
- Improved liaison with GP's regarding physical health checks.

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Improved Communication with Primary Care

- **Health Resources:**

- *** Integrated Physical Health Pathway:**

<http://www.rcpsych.ac.uk/pdf/NAS%20Integrated%20Physical%20Health%20Pathway%20Dec%2012.pdf> or typed into your search engine

- **** Lester UK framework for patients with psychosis on antipsychotic medication:**

http://www.rethink.org/how_we_can_help/physical_health/physical_health_resources/positive_cardiometab.html or typed into your search engine



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Healthy Lifestyle Interventions



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EIP Consultant Psychiatrists are raising awareness of Early Intervention prescribing guidance with Inpatient and Outpatient colleagues.

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Positive Cardiometabolic Health Resource

- **Specific lifestyle and pharmacological interventions**
- Specific lifestyle interventions should be discussed in a collaborative, supportive and encouraging way, taking into account the person's preferences:
- Nutritional counselling: reduce take-away and "junk" food, reduce energy intake to prevent weight gain, avoid soft and caffeinated drinks and juices, and increase fibre intake.
- Physical activity: structured education-lifestyle intervention. **Advise physical activity such as a minimum of 150 minutes of 'moderate-intensity' physical activity per week (<http://bit.ly/Oe7DeS>)**. For example suggest 30 minutes of physical activity on 5 days a week.
- If the patient has not successfully reached their targets after 3 months, consider specific pharmacological interventions:
- Anti-hypertensive therapy: Normally GP supervised. Follow NICE recommendations <http://publications.nice.org.uk/hypertension-cg127>.
- Lipid lowering therapy: Normally GP supervised. (If total cholesterol >9, non-HDL chol >7.5 or TG>20 (mmol/l), refer to metabolic specialist.) Follow NICE recommendations <http://www.nice.org.uk/nicemedia/pdf/CG67NICEguideline.pdf>.
- Treatment of diabetes: Normally GP supervised. Follow NICE recommendations <http://www.nice.org.uk/CG87>.
- Treatment of those at high risk of diabetes: FPG 5.5-6.9 mmol/l; HbA1c 42-47 mmol/mol (6.0-6.4%)
• *Follow NICE guideline PH 38 Preventing type 2 diabetes: risk identification and interventions for individuals at high risk (recommendation 19) – <http://guidance.nice.org.uk/PH38>.*

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Recording of data

- Clinical staff are completing comprehensive cardio metabolic forms in electronic patient records in accordance with Somerset Partnership Medication Monitoring guidance.
- Clarification of responsibility between primary and secondary care

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Challenges

- Disparity of in-house Wellbeing Clinics across the county
- STEP covering a large demographic area with unfilled posts.
- STEP has a predominantly Psychological focus so a change in working culture has been necessary.
- Non nursing staff lack confidence in management of physical health care and promotion of interventions.
- Shared care – e.g. inconsistent liaison between Primary and Secondary care regarding monitoring of abnormal results between Out-patient appointments.

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Thank You 😊

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