

## **Project Title: Healios – Working to empower patients and families affected by mental illness**

### **Background**

The NHS Five Year Forward View stresses the need to reshape how care is delivered, increase access to the right care at the right time, drive down variations in the quality of care on offer, and improve outcomes. They acknowledge people want care in the least restrictive setting that is appropriate to meet their individual needs, at any age, and is close to home.

One way in which they propose to meet this challenge is by expanding access to digital services ensuring more people have increased access and choice to high quality care when they need it. They state *“We see a pivotal role for digital technology in driving major changes to mental health services over the next five years.”*

The National Institute for Health and Care Excellence (NICE) have published clinical guideline for psychosis and schizophrenia in adults (CG178; National Institute for Clinical Excellence. Clinical Guidance 178, 2014), supported by NICE quality standard (QS80; National Institute for Clinical Excellence. Quality Standards 80, 2015). The benefits of family intervention are outlined within the guidelines and are recommended for all families of people with

psychosis or schizophrenia who live with or are in close contact with the service user, not only those with first episode psychosis. NICE also outline three key aspects for family intervention, these are:

- How to deliver psychological interventions, section 1.3.7
- Monitoring and reviewing psychological intervention, section 1.3.8
- Competencies for delivering psychological intervention, section 1.3.9

The first set of mental health targets which have been introduced are the new Access & Waiting time Standards which came into effect on 1<sup>st</sup> April 2016 (Guidance to support the introduction of the access and waiting time standards for mental health services 2015/2016, 2015).

These targets will initially focus on people experiencing their First Episode of Psychosis (FEP). The expectation is that, within a maximum of two weeks from referral, more than 50% of people with suspected FEP:

- have been assessed by the EIP service and, where appropriate:
- have been accepted onto the EIP service caseload
- have been allocated an EIP care coordinator who has actively engaged with the person to develop a plan of care and commence treatment in line with NICE recommendations.

Importantly there will be an accreditation process for providers where they will have to demonstrate their ability to not only offer, but actually have the means and capacity to deliver all the aspects of the NICE concordant care package. This is likely to be a significant challenge for providers.

## **Project Description:**

### **Healios credentials**

Founded in 2013, Healios philosophy is to improve the lives of those affected by disabling illnesses. Healios does this by providing evidence based services focused on delivering clinically meaningful outcomes for client and families/carers. They recognise the great work and care being delivered within the NHS, whilst appreciating the strain the health service is under. Healios strives to support and optimise this great work by collaborating with NHS treatment teams to enhance the 'triangle of care' between clients, families/carers and the NHS clinician.

Core to Healios is their safeguarding, risk management, information governance and supervision responsibilities. Healios values and respect the trust NHS partner organisations place in us and therefore the safety of all clients and family/carer/significant others is our first priority.

At the heart of Healios is a very experienced clinical leadership team made up of Dr. Lars Hansen, Consultant Psychiatrist with over 20 years' experience and current EIP lead within Southampton. Dr. Katie Ashcroft, Consultant Clinical Psychologist with nearly 20 years' experience and previous training and supervision lead for Southern Health. Dr. Angharad Rudkin, Child Clinical Psychologist with nearly 15 years' experience within CAMHS. Alison Joyce, Clinical Team Manager with over 18 years' experience working within NHS mental health teams.

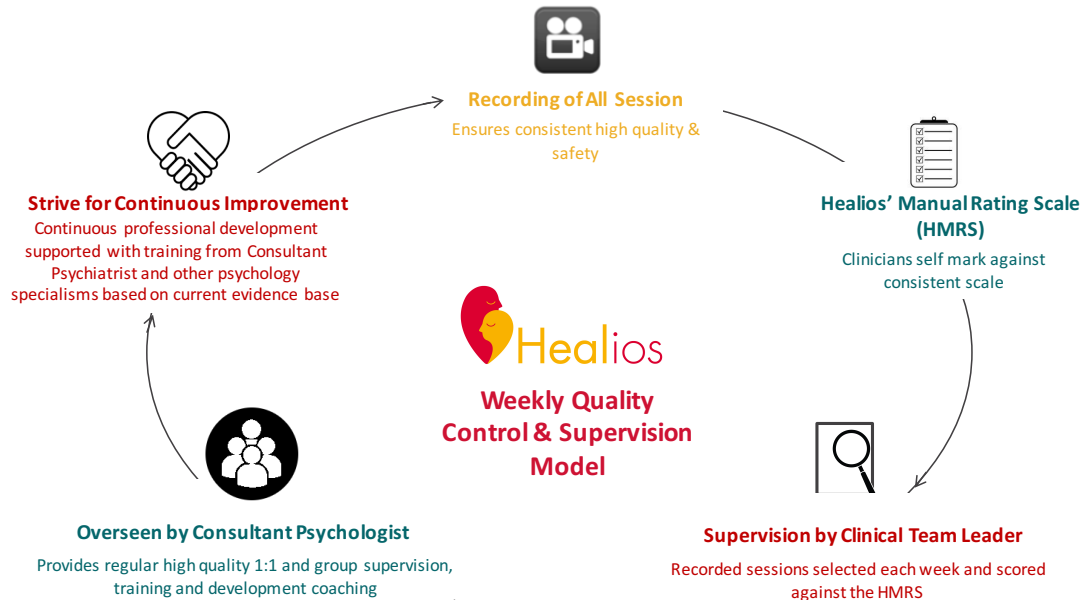
Since 2013, Healios have been commissioned across the UK by NHS Trusts, CCG's, local authorities and charities to deliver psychological interventions to people and their families/carers affected by mental illness. Healios have delivered thousands of psychological sessions and have demonstrated, by using validated scales, improved clinical outcomes. These outcomes include improved patient functionality, reduced substance use, reduction in overall burden and distress, increased treatment adherence, increased service user experience for both patients & families/carers and more.

Healios family intervention service is built upon components of behavioural family therapy, brief systemic family therapy, systemic family therapy and underpinned by Healios's proprietary 5 tier quality supervision model and Manual Rating Scale. Healios uses the best of modern technology providing video access to a trained clinician who will work with the client and family/carer to deliver structured intervention to address their specific needs. Healios uses a variety of multimedia tools to support understanding and learning which helps facilitate a very engaging and interactive session. Each course will be structured around the needs of the family, as is the pace of delivery.

T: 01772 520263  
E: [info@innovationagencynwc.nhs.uk](mailto:info@innovationagencynwc.nhs.uk)  
[www.innovationagencynwc.nhs.uk](http://www.innovationagencynwc.nhs.uk)

Vanguard House  
Daresbury Sci Tech  
Keckwick Lane  
Daresbury  
Warrington  
Halton  
WA4 4AB

Healios has established a new gold-standard in clinical supervision to deliver a consistently high quality FI service



In addition, Healios follow the requirements set out by the National Institute for Health and Care Excellence (NICE) for what family intervention should encompass, this is set out within CG178, sections 1.3.7, 1.3.8 and 1.3.9.

NICE have endorsed the training provided by Healios as part of their family intervention services to support families impacted by psychosis.

**NICE endorsement statement for resource producer E0094 - Healios**

**Family Intervention service manual**

“This service manual supports the recommendations on family intervention in the NICE guideline on psychosis and schizophrenia. The service manual describes the content to be used by those providing training for family intervention in line with NICE guidance. It also supports the statement on family intervention in the NICE quality standard for psychosis and schizophrenia.” *National Institute for Health and Care Excellence May 2016*

Healios is transforming how care is delivered, by providing innovative solutions to the complex challenges faced within the NHS. This is very much aligned with the NHS Five Year Forward View and

T: 01772 520263  
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Vanguard House  
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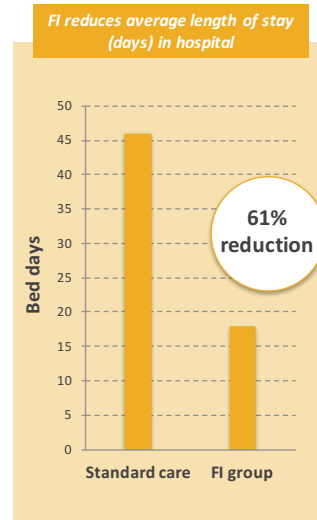
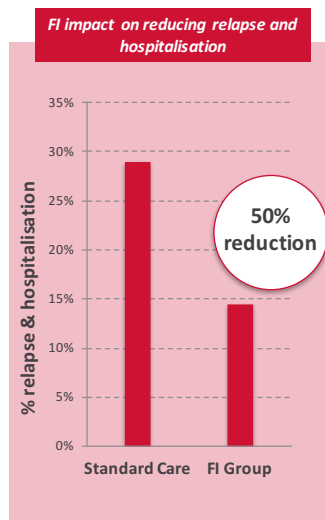
a key component of this, is being able to find ways in which to provide services in a more sustainable way. Future services need to meet both the increasing demand by the population in terms of when, where and how they wish to access care, but also the financial pressures of being able to realise efficiency savings.

Healios are able to deliver upon both these critical challenges. Firstly, due to the model of their service delivery they are able to deliver family intervention service at pace and scale. Healios deliver greater access, choice, flexibility and convenience for people. The service can allow partner Trusts and CCG's to realise important savings, these may include direct cost of delivery savings, freeing up valuable staff time to reprioritise in other areas of need and significant downstream savings in hospitalisation costs.

Family Intervention should be prioritised within the NICE concordant care package for psychosis

Through 38 randomised clinical trials, FI has consistently proven to:

- Reduce overall cost of care
- Reduce relapse
- Reduce hospitalisation
- Reduce burden
- Improve treatment adherence
- Increase functionality
- Many other parameters



Service user experience is key to Healios and to date have demonstrated some exceptional results with 98% of users being very satisfied or satisfied and 95% who would definitely recommend the service.

As the service is delivered online, it means as long as the person or family member has a smart device, tablet or computer with access to the internet or 3G connection, they are able to access support from Healios. Recent independent data published by Ofcom suggests 80% of adults have broadband with a further 66% having a smartphone. This increases to 90% for persons aged 16-24 years. Ofcom also found that persons aged between 7-16 years spend on average 3 hours per day online, increasing to 4.8 hours when looking at persons aged between 15-16 years. They reported a sharp increase in ownership of tablet computers by children, up 50% compared with the previous year.

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E: info@innovationagencynwc.nhs.uk  
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Vanguard House  
Daresbury Sci Tech  
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Daresbury  
Warrington  
Halton  
WA4 4AB

Healios service is available Monday to Friday 8am - 8pm. Clients/family/carers schedule their own appointments with the same clinician at a time which is convenient for them. It's important to note that multiple users can access the same online session at the same time, meaning if family members are not in the same geographical location, they are still able to connect and support each other in the same session.

This partnership between approach is aligned to national guidelines and the NHS direction of travel. At the same time this partnership will ensure Trusts and CCG's are able to continue to deliver high quality care, greater access, choice, convenience, flexibility for 'when and how' people and their families affected by psychosis wish to access support.

**More about Healios**

Healios provide psychological and behaviour change therapies across a wide range of mental and physical health condition such as psychosis, schizophrenia, CAHMS, dementia, bipolar, PTSD, anxiety and depression, eating disorder, diabetes and cardiovascular. Healios also have App based technologies which provide real time feedback on the patients' status to treatments teams supporting clinical decision making and resource prioritisation.

Healios provides innovative solutions across multiple conditions with new therapy offerings in development

**Mental illnesses/Neurological conditions**

|                          |                               |
|--------------------------|-------------------------------|
| Psychosis, Schizophrenia | Anxiety                       |
| Dementia                 | Adjustment disorder           |
| Bipolar                  | PTSD                          |
| Child & Adolescent       | Depression (incl. perinatal*) |
| Substance misuse*        | Eating Disorders              |

*Built on components of behavioural family therapy, brief systemic family therapy & functional family therapy*

**Physical conditions**

|               |
|---------------|
| Diabetes & CV |
| COPD/Asthma*  |
| Obesity*      |
| HIV/AIDS*     |

*Underpinned by relevant national clinical guidelines on behavioural change*



\* In development

**Logo of Organisation :**



Changing the lives of families affected by mental illness

**Any other images, documents or videos relevant to the project:**

**1. outcomes & measures**

The aim of the service is to deliver a number of outcomes which can be categorised into four main groups:

**Clinical related outcomes for clients & family/carer:**

- Improved patient and family functioning
- Reduction in substance misuse
- Improved treatment adherence
- Reduction in overall family burden
- Reduction in overall family distress

**Service user experience outcomes:**

- Client and family/carer experience, choice, service engagement and satisfaction
- Client and family preference data

**NHS Efficiency related outcomes:**

- Number of working days freed up for staff

**NHS Financial outcomes:**

- Reduced cost of delivery
- Reduction in hospitalisation costs

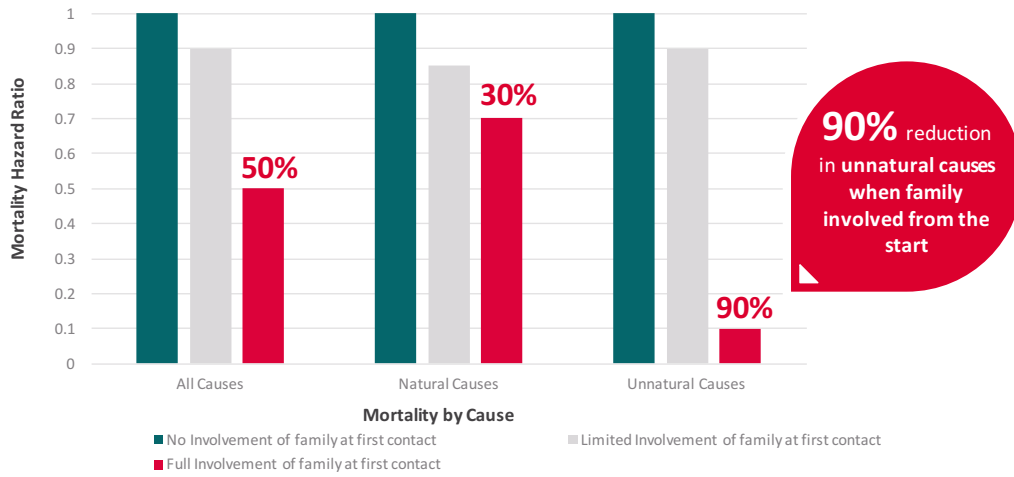
Savings can be modelled on the basis of data supplied by Trusts/Commissioners to support the development of a detailed business case. An example of direct cost savings based on 100 families receiving 12 sessions is highlighted in the table below. This does not include the significant saving that can be obtained through reduction of relapse rates and reduction in hospital length of stay

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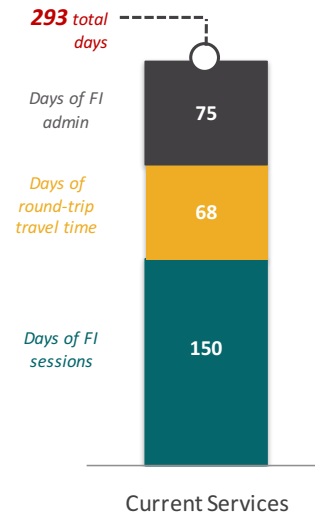
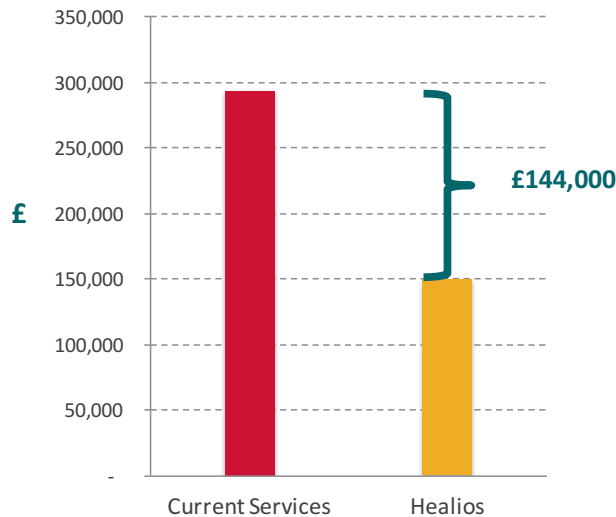
,through effective early delivery of Family Intervention. Studies have also shown significant impact on mortality where family interventions have been provided .

Family involvement from the start significantly reduces mortality rates



Reininghaus et al 2014: 10 year follow-up data of early intervention services in psychosis

Commissioning Healios helps you save Time and Money to re-prioritise in other areas of need (based on 100 patients/families receiving 12 sessions of FI)



Cost of Delivery

Working Days

### Measures:

- **Substance use** - (Substance Use and frequency)
- **Treatment adherence** - (Therapy and Medication Compliance)
- **Distress** – (Hospital Anxiety and Depression Scale – HADS)
- **Burden** – (Involvement Evaluation Questionnaire – IEQ)
- **Service user satisfaction** – (Client Satisfaction Questionnaire – CSQ8)
- **Work and social functioning** – (Work and Social Adjustment Scale)
- **Life satisfaction** - (Brief Multidimensional Student's Life Satisfaction Scale; BMSLSS)
- **Reduced cost of delivery** – Trust data
- **Relapse, hospitalisation & length of stay** – Trust data
- **Number of days freed up for staff** – Trust data

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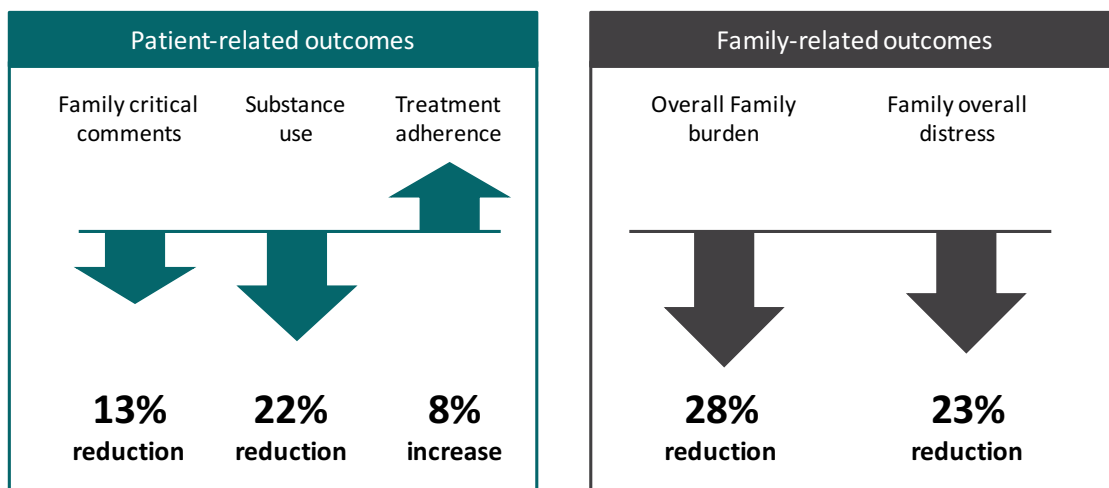
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A Healios Clinical Researcher will lead the assessment approach with the client and family/carer at baseline, after 8 and 12 weeks. A majority of these assessments will be conducted online to allow flexibility and convenience for clients and families. For those who are unable to complete the online assessments for whatever reason, the Healios Clinical Researcher will conduct recorded telephone assessments. All patient data will be anonymised and analysed using a specialist statistical software package.

Scales used to measure outcomes can be varied to match Trust requirements. Details of results from Healios projects are attached as Powerpoint presentation.

**Healios improves the lives of people with mental illness and their family members**



*Healios data from over 3,000 sessions in psychosis between Jun 2013 – Mar 2015 based on users having 8 sessions with a Healios clinician*



### 1.1 Risks identification and mitigation

| Risk  | Mitigation  |
|---|---|
| <b>Safeguarding and risk management incidence may be missed</b> | Healios has a proven track record of delivering family intervention for other Trusts. They also have established processes in place overseen by a clinical governance team of qualified |

|  |  |
|--|--|
|  | healthcare professionals (led by a Consultant Psychiatrist, Dr. Lars Hansen) who have all previously worked within the NHS. This is further enhanced by Healios incorporating the commissioning Trust's specific requirements into their safeguarding and risk management procedures for the project. All Healios staff in contact with clients and families have completed levels 1,2,3 safeguarding training for adults and children |
| <b>Information Governance and sharing identifiable data</b>                          | The level of information sharing will be kept to an absolute minimum required in order for Healios to fully carry out the interventions. Healios is registered as IG level 2 within the NHS IG toolkit and ISO certified. Healios has robust systems and processes in place that provide assurance and as mentioned have successfully worked with other NHS Trusts in the same capacity .  |
| <b>Failure to gain buy in from staff impacting the number of referrals generated</b> | Healios will provide comprehensive training for relevant Trust staff on the service. Staff will be provided with how to guides and a resource pack to support engagement and clarity. Healios will be included within the monthly MDT meetings and a monthly performance report produced by them to facilitate and identify areas for improvement.   |
| <b>Difficulty in recruiting therapists to support phase 2 of the project</b>         | Due to the model of delivery, Healios are able to recruit from the entire UK and as such are able to provide services at pace and scale.   |
| <b>Failure to reduce relapse rates and hospitalisations</b>                          | These outcomes will take at least 12-24 months to demonstrate at a local level. A number of surrogate markers can be agreed as the primary outcomes for any pilot. If achieved, they can be used to trigger a wider roll out of the services.  |

## 2. Healios reference

| Name              | Role/Position   | CCG/Trust   | e-mail                            | Contact                 |
|-------------------|---|---|-----------------------------------|-------------------------|
| Debbie Hustings   | Partnership Manager Carers  | Guildford and Waverley, East Surrey and Surrey Downs CCG                                | debbie.hustings@nhs.net           | 07917 158971            |
| Janine Sanderson  | Mental Health Senior Commissioning Manager, Mental Health & Learning Disabilities Surrey CCG  | Mental Health & Learning Disabilities Surrey CCG<br>Carers Bucks & Carers Milton Keynes | janinesanderson@nhs.net           | 7872423227              |
| Stephen Archibald | Chief Executive   |   | stephen.archibald@carersbucks.org | 01296 310 461           |
| Frank Burbach     | Consultant Clinical Psychologist, South West IRIS EIP Preparedness Lead, Early Intervention in Psychosis Preparedness Programme (South of England), Head of Clinical Psychology & Psychological Therapies | Somerset Partnership Trust  | Frank.Burbach@sompar.nhs.uk       | 01823<br>368555/368379  |
| David Kingdon     | Clinical Services Director (Southampton)/ Professor of Mental Health Care Delivery  | Southern Health Trust   | D.Kingdon@soton.ac.uk             | 023 80718520            |
| Mike Kenny        | Associate Director MH services  | 5 Boroughs Partnership Trusts   | mike.kenny@5bp.nhs.uk             | 1925664119              |
| Rob Harvey        | Divisional Manager - Adult MH Services  | Lincolnshire Partnership Trust  | Rob.Harvey@LPFT.nhs.uk            | 01522 526827 ext<br>231 |

## 3. Summary

**In summary, a partnership with Healios will:**

- 1) Provide greater access & choice for where, when and how service users and their families/carers wish to access support
- 2) Provide greater convenience as service users and family members are able to access care from the comfort of their home, or indeed on the move providing they have a smart device and 3G connection
- 3) Provide greater flexibility with service users scheduling sessions around their existing commitments, anytime between the hours of 8am-8pm Monday to Friday
- 4) Support families to stay connected and feel supported as people can dial into the same session from different geographical locations
- 5) Supporting clients & carers to stay in employment as they can more easily support themselves and their loved ones
- 6) Reduce relapse and hospitalisation rates by an estimated 50% and shorten the length of hospital stay by an estimated 61% .

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- 7) Deliver the highest standards and quality of care through the Healios five-tier quality control and supervision model
- 8) Provide documented evidence for the clinical intervention that have been delivered and the outcomes achieved. Data Trusts could use as evidence to support performance reviews with local CCG's, national bodies such as Monitor and to meet the new Access and Waiting Time Standards for EIP services
- 9) Deliver exceptional service user experience ratings which the Trust could use as part of their overall quality ratings
- 10) Provide care in accordance with clinical guidelines such as NICE
- 11) Support Trust accreditation requirements for EIP services
- 12) Transform how care is delivered by embedding innovative solutions to optimise existing service in-line with the NHS Five Year Forward View
- 13) Help local Trust demonstrate the implementation of a number of important policies: NHS Five Year Forward View, NHS and Adult Social Care Outcomes Framework, Personalised Health and Care 2020, Personalisation of Care, The Better Care Fund and The Care Act
- 14) Realise important financial savings in cost of delivery,
- 15) Deliver important efficiency savings in staff time,
- 16) Reduce hospitalisation costs

**Do you wish to make your project private and only viewable to you and the Innovation Agency NO?**

**Contacts:      Name: Steve Roberts**  
**Website: [www.healios.org.uk](http://www.healios.org.uk)**

**Email: [Stephen.roberts@healios.org.uk](mailto:Stephen.roberts@healios.org.uk)**

**Telephone:07971770584**

T: 01772 520263  
E: [info@innovationagencynwc.nhs.uk](mailto:info@innovationagencynwc.nhs.uk)  
[www.innovationagencynwc.nhs.uk](http://www.innovationagencynwc.nhs.uk)

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