# ANNUAL ACTIVITY AND PERFORMANCE REPORT

2018 - 2019



NSCAP is hosted by Leeds and York Partnership NHS Foundation Trust

# **NSCAP** Annual Activity and Performance Report 2019

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### **ABOUT NSCAP**

The Northern School of Child and Adolescent Psychotherapy (NSCAP) is a Leeds-based resource centre, established in 2003 to deliver clinical and pre-clinical training in Child and Adolescent Psychoanalytic Psychotherapy across the large and geographically diverse Northern Region. This training is commissioned by Health education England (HEE) and the school is an NHS entity hosted by Leeds and York Partnership NHS Foundation Trust (LYPFT). NSCAP has incrementally extended its range of activity to include the provision of a specialist psychoanalytically informed clinical service and a research and evaluation function as well as continuing to deliver high quality "escalator" and CPD programmes to the infant, child, adolescent and adult mental health workforce.

# **Introduction to the Annual Report 2019**

The compilation of the Annual Report presents a seminal opportunity for stock-taking and reflection as well as providing an overview of activity and outcome. This particular report comes at the end of a period of unprecedented uncertainty not least in relation to the prospect of radical change to the salary support system of funding for Clinical Training in Child and Adolescent Psychoanalytic Psychotherapy. We have worked hard as an organisation to ensure that we are positioned to respond effectively to the changes that may be ahead and have contributed to presenting a compelling case for maintaining investment in intensive trainings in order to meet the needs of some of the most vulnerable children and young people in the health care system. The solid working relationship established with our regionally based Health Education England colleagues, the development of national links forged by our professional body, the Association of Child Psychotherapists, and the unfailing support of our host Trust, Leeds and York Partnership NHS Foundation Trust have been invaluable in this work.

Of equal significance is the contextual combination of the economic and service pressures brought to bear in relation to the delivery of high quality mental health provision, specifically the exponential increase in prevalence, severity and complexity of clinical presentations and the difficulty in recruiting and retaining a well-trained workforce to meet the diverse needs of infants, children, young people, parents/carers and networks. Considerable resource has been directed at securing and maintaining high quality CAMHS clinical training placements essential to enabling the doctoral training requirements to be met within the 4 years of the programme. Some of the factors in play are familiar but have become more pronounced – high staff turnover, loss of experienced clinicians, waiting time directives with the inevitable emphasis on short term/crisis interventions and high re-referral rates, pressures on therapeutic space and turbulence in management and organisational structures. This has increased the load on the accreditation and re-accreditation of placements and has compromised the development of new clinical training opportunities across the Northern Region.

Challenge is always testing for organisations and for the individuals working within and into them; challenges always test the capacity both to hold steady and to manage change and adaptation, they can come when least expected and even when they are anticipated may be experienced as a threat. To paraphrase Martin Luther King Jr, the ultimate measure is not where we stand in times of comfort and convenience but where we stand in times of difficulty, challenge and controversy. We have navigated the necessary internal shifts to a leadership team structure and culture and to a future-focussed position particularly with regard to succession planning. It is testimony to the resilience of this organisation and the commitment and imagination of our staff that we are able also to report on a level of achievement and innovation that is remarkable and a cause for celebration. Of particular note are the development of robust models of impact assessment evaluation, a range of publications, the on-going development of a specialist clinical service including extending our perinatal offer, the production of a manualised short term

intensive treatment model for 16-25 year olds, the delivery of a range of CPD training opportunities and the further development of organisational/clinical consultancy

The Report is set out in 4 Parts. Part I of the report provides information about core training activity as follows:

- The North of England doctoral clinical training scheme for Child and Adolescent Psychoanalytic Psychotherapists
- Postgraduate programmes and continuing professional development across both the child and adult sectors
- Short courses and events to facilitate access to learning/training

In Parts II and III, we demonstrate the range of additional activity that is rooted in the establishment of NSCAP as a regional resource. This added value is the product of HEE investment, LYPFT support and the strategic generation of new business by NSCAP which has led to the successful implementation of our integrated "tripod" model of



A compact Part IV outines financial arrangements, business and organisational structure.

Lynda Ellis

**Director, NSCAP** 

# 1 Professional Doctorate in Child and Adolescent Psychoanalytic Psychotherapy (M80N)

Programme delivered in partnership with:







The NHS funded 4-year clinical training is HEI validated to provide an academic qualification at doctoral level as well as accredited as a professional clinical qualification with the **Association of Child Psychotherapists (ACP)**. Trainees are registered through the Tavistock Clinic with University of Essex for the postgraduate degree of Professional Doctorate in Child and Adolescent Psychoanalytic Psychotherapy.

The overriding conclusion of the last ACP re-accreditation panel was that NSCAP provides an excellent training:

'it sets child psychotherapy squarely within the framework of the NHS, and the training provides a solid foundation for child psychotherapy training, with a broad and comprehensive curriculum'.

The panel also commented that there is an excellent group of teaching staff, who are very committed and attuned to the trainees. The training will undergo the next re-validation process in 2020 and we have begun to collate, analyse and evaluate data for scrutiny by the re-validation panel.

### 1.1 Delivery and Learning Experience

Our teaching team continues to consist of active frontline clinicians and researchers who draw on substantial and on-going experience in the NHS and independent sectors. This is linked with the placement curriculum delivered by a network of regional child and adolescent psychoanalytic psychotherapists working in CAMHS who provide service supervision to our trainees. The team comprises professionals who have significant managerial, strategic and leadership roles in services and professional bodies such as the ACP, the Institute of Psychoanalysis, (IOPA) and the Psychological Professional Network (PPN). This ensures that the quality, innovation and reputation of the training is both maintained and enhanced, root and branch, bolstering our core task of developing an effective, accessible and relevant child mental health workforce. As the Director of Training worked towards retirement after 13 years, NSCAP undertook a comprehensive process of role review culminating in a redesign of the post to reflect organisational change and development. A successful appointment was made to the post of Programme Director: Clinical Training in Child and Adolescent Psychoanalytic Psychotherapy

after a recruitment process that involved key stakeholders. This enabled an effective transition by the beginning of 2020.

### **Challenges**

The training has been under a protracted HEE funding review process comparable to that of other professional trainings, (e.g. clinical psychology) and is yet to be fully and finally resolved. NSCAP has worked hard to ensure that we are centrally involved in the consultation and negotiation processes. This challenge has given rise to opportunities to:

- 1. Develop a comprehensive training competency framework.
- 2. Clearly articulate the training and the profession's alignment with the NHS Long Term Plan.
- 3. Focus proactively on the need for regional equitable workforce access.

The established, constructive and close working relationships with our partners are essential in navigating the uncertainty and complexity of funding pressures and the exponential increase of perinatal, child and adolescent mental health difficulties. This has placed regional CAMHS under significant strain as services are overwhelmed with increasing numbers of referrals, high levels of co-morbid complexity, risk and systemic adversity. Correspondingly, we have seen high levels of staff turnover, chronic instability and services shrinking to risk management, diagnosis and medication. This in turn has led to volatility in training placements that has required considerable support from the training school to ensure trainees are able to access the substantial clinical experience and effective supervisory support required to complete their training. Established regional networks have helped with this on a case by case basis. However, the need for a comprehensive review in order to update our strategy and operational approach to CAMHS training posts has been highlighted and is underway.

#### **Evaluation**

Data is routinely gathered on:

- Structure/organisation of seminars and style of teaching
- Support from seminar leader in encouraging participation
- Quality of teaching and learning
- Clinical relevance
- Teaching & learning environment

Median response values for scales across all seminars are consistently rated 4-5 where 1 = poor and 5 = excellent.

## 1.2 Course Statistics: Student Profile and Trajectory

Trainee retention remains high with only two withdrawals between 2016 and 2019, one stating health reasons and the other family. Five NSCAP trainees qualified in 2019. Two are currently on maternity leave but are planning to work in the North East and Yorkshire. Three took up child psychotherapy posts:

Child & Adolescent Psychotherapist – Manchester Eating Disorder Service

Child & Adolescent Psychotherapist – Liverpool CAMHS

Child & Adolescent Psychotherapist – Wakefield CAMHS

**Table 1: Current Trainees - 2018-19** 

| Year                           | Number |
|--------------------------------|--------|
| First Year                     | 6      |
| Second Year                    | 5      |
| Third Year                     | 6      |
| Fourth Year                    | 7      |
| Extensions                     | 3      |
| Total                          | 27     |
| Doctoral Students              |        |
| Completing Doctorate           | 2      |
| Completed Doctorate in 2018/19 | 1      |

Table 2: Regional Location of NSCAP 2018-19 Trainees by Year

| North East (3) | North West (10)        | Yorkshire and the Humber (14) |
|----------------|------------------------|-------------------------------|
| County Durham  | Stockport              | Leeds (4)                     |
| Newcastle      | Manchester/Salford (4) | Sheffield (4)                 |
| Sunderland     | Oldham                 | Bradford (2)                  |
|                | Stalybridge            | Northallerton                 |
|                | Wigan                  | Halifax                       |
|                | Sefton                 | Castleford                    |
|                | Runcorn                | York                          |

2018-19 Clinical Trainee Year groups by whole time equivalent (wte) status and sex

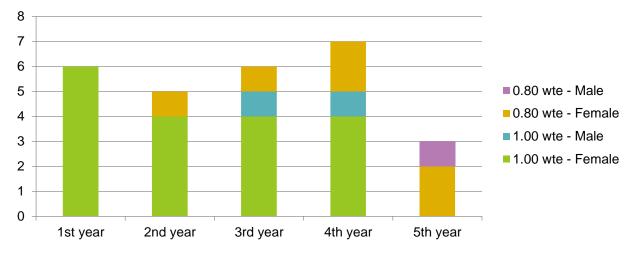


Figure 1: Distribution of trainees in each year group by sex and whole time equivalent

### **Clinical Trainee Contract Type 2018-19**

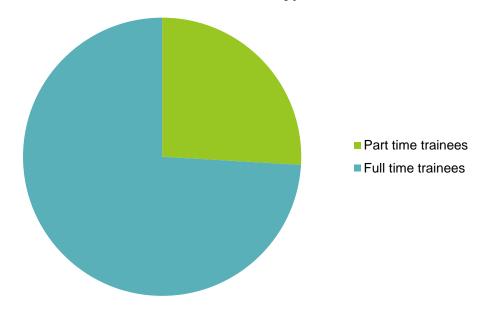


Figure 2: Ratio of part time to full time trainees for all years in 2018-19



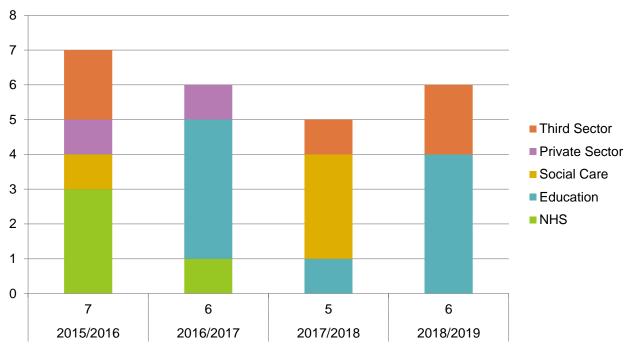


Figure 3: Trainee employment sector prior to commencement of training

### **Occupation of CAPt Trainees on Entry**



Figure 4: Clinical trainee occupation prior to commencement of training

# 1.3 Professional Doctorate in Child and Adolescent Psychoanalytic Psychotherapy Trainee feedback

### **Small Group Clinical Seminars**

Excellent, I have learned so much about myself and my work

Good opportunity to bring complicated things, advice and support to take back to clinical work

Developed my thinking in a supportive environment

### **Research Methods Seminars**

High quality of learning

It isn't an easy seminar but I feel that the seminar leaders make it as understandable as possible

Participation always encouraged

### **Parent Work Seminars**

Useful in establishing a frame for parent work in my mind

Cases were extremely complex...opening up thinking and group discussion

Helped me to understand parent work better

#### **Adolescence Seminars**

Learnt a lot this year, enjoy adolescent work

Challenging but in a constructive way

Very relevant having taken several adolescent cases this year

Encouraging in opening out thinking

#### **Brief Work Seminars**

I was really anxious about brief work and the seminar leader really helped

Very relevant at this stage of training

Mix of some theoretical material helped

### Adoption, Looked after children and Kinship Cares

Very relevant for the patients I see

Helpful thinking around technique

I struggled with a sense of problem solving rather than thinking about communications

Very relevant

Excellent, thorough, comprehensive, systematic

#### **Doctorate Seminars**

Tutorial structure extremely helpful

I found the research supervisions really helpful this year

Focus on individual needs

# 2. Postgraduate Programmes

### 2.1 Psychoanalytic Observational Studies

This programme of study in Leeds reaches its 30th anniversary this year, validated by the University of Leeds (UoL) and coming under the auspices of NSCAP in 2003. The modules delivered meet the pre-clinical training requirements as set by the ACP as well as being a standalone Masters programme which functions as a multi-disciplinary course of study and training for a diverse children's workforce. The availability of an accessible pre-clinical training offer is essential to the viability of the clinical training and this has been recognised in HEE contractual arrangements. NSCAP has a long established and successful collaborative partnership with UoL, formally reviewed on a five year cycle. In 2019, the External Review Panel described the programme as

"...running within a mature, committed, strong and successful collaborative relationship between NSCAP and UoL. The embedding of strong and close support to students; a rigorous admissions process and the confidence expressed by student's about their ability to progress, as expressed by the students, External Examiner and External Reviewer were highlighted for commendation. Indeed the Leeds programme is seen as an exemplar and comparable to the larger founding programme at the Tavistock Centre London, as repeatedly stated by successive External Examiners, the Association of Child Psychotherapy, (ACP) and external accrediting and review bodies"

The programme is integral to the successful delivery of the HEE funded, NSCAP doctoral level clinical training in Child & Adolescent Psychoanalytic Psychotherapy as it provides a steady supply of eligible applications to the Training. It is a substantial part of NSCAP's activity. The strategic aim of the programme is to recruit talented and diverse multi-disciplinary students from across the North so as improve equity of access across a large and geographically contrasting region.

The challenges facing the programme are threefold:

### Economic

The proposed re-structure of funding for the Child & Adolescent Psychoanalytic Psychotherapy Clinical training, the final outcome which has yet to be determined has had a significant impact on planning, delivery and access. The NSCAP Leadership group is closely working with HEE and the ACP to ensure that we are well positioned for any change. NSCAP and our partners are aware that the funding concerns are not unique to this programme.

### Diversity

Attracting students from black and minority ethnic, (BAME) and male students is a long standing challenge. This contrasts the high level of diversity we have achieved in relation to socio-economic background and the wide range of professional experience and work settings of our students. We are aware of the cultural and societal contexts that contribute to BAME and male recruitment to mental health professions. However it is concerning that our reach has not extended to these key demographics. NSCAP set up an Equality and Widening Participation Steering Group to address this both in relation to this programme and the wider training portfolio. External expert consultants were used to look at the

possible facilitators and obstacles to the representation of BAME students within NSCAP programmes.

The key recommendations were

- to conduct a formal equality impact assessment
- to establish systems for leadership, steering and student consultation
- to conduct outreach work to inform curriculum development

This consultation and steering group process increased the profile of this issue across our organisation and we are attending to these action points. This model of addressing Equality and Widening Participation has been adopted by the ACP, highlighting NSCAPs capacity for innovation and creative problem solving. Although there is a long way to go, it is central to our strategy, operation and organisational ethos.

#### Regional remit

NSCAP's HEE remit is to provide a child psychotherapy clinical training, accessible across the north of England. This in turn requires a regional pre-clinical training offer to be available and accessible across the whole region. The Masters/Postgraduate Diploma in Psychoanalytic Observational Studies was for many years available at three locations in northern England. In Liverpool (M7L), provided by NSCAP and validated by the **Tavistock Clinic with the University of East London**; in Leeds provided by NSCAP and validated by **the University of Leeds**; and in Newcastle, provided by Northumbria University with NSCAP support. Cost pressures resulted in a contraction in two centres with HEE funding withdrawn from the Newcastle programme entirely. NSCAP resources were directed at a phased teach-out ensuring the satisfactory completion of the programme in Liverpool. Currently, the Leeds based programme is the sole pre-clinical training provider for the Northern Region and it has not proved possible to establish satellite provision within budget. Alternative offers, notably variations on blended learning programmes are being explored.

Psychoanalytic Observational Studies takes part in rigorous formal evaluation processes through NSCAP and the UoL. We consistently achieve high percentages in gold standard questions on student satisfaction, high standard of teaching and engagement in learning. We are proud that it is programme delivered by talented and experienced clinicians, researchers and teachers, drawn from across the North of England, many of whom are NSCAP Alumni.

# 2.2 Programme Statistics

Table 3: 2018-19 Psychoanalytic Observation Studies students by year

| Psychoanalytic Observational Studies 2018-19 |              | Students |
|--|--------------|----------|
| Leeds  | First Year   | 18       |
|  | Second Year  | 7        |
|  | Third year   | 5        |
|  | Dissertation | 6        |
|  | Intermitting | 5        |
|  | Total        | 41       |

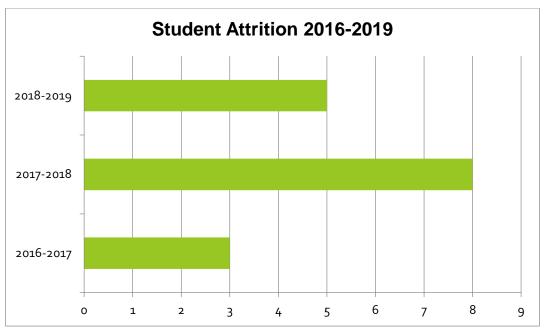


Figure 3: Student withdrawals by academic year 2016-2019.

The spike in rate observed in 2017-18 is coincides with a higher student intake to the programme and employment-related reasons for withdrawal.

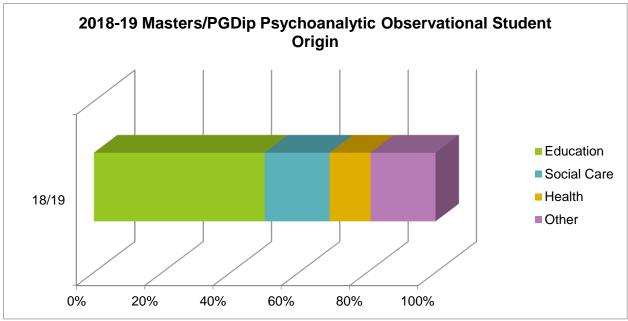


Figure 4: Employment sector of 2018-19 Psychoanalytic observation students at commencement of course

# 2.3 Masters/PGDip Psychoanalytic Observational Studies Programme Feedback

CDRM reading - very evocative and thought provoking

The reading was so diverse. The seminars and chance for open discussion [were the most helpful].

I particularly found work discussion helpful this year as I started a new type of work on a 1-1 basis with children. This allowed me to directly use what I have learnt and the techniques given to me.

Seminar groups - great support, help to self-reflect and feed back

Work observation was the module I found most reflective and it enabled me to develop my practice and my thinking

[The course content/experience] informs all of my thinking at work and I try to model to colleagues an approach to being with children and families that I have developed through studying at NSCAP.

The essays really challenged me but on reflection they really helped me grow and develop

I found CDRM really helpful as it has changed the way I think about children who could be classed as "naughty" in schools.



Figure 5: Occupation of Psychoanalytic Observation Studies students at commencement of course

# 2.2 Working with Adults

NSCAP's Post-Graduate programmes for professionals working with adults are hosted in collaboration with:







# 2.2.2 Foundation Course in Psychodynamic Psychotherapy: part 1 (D58L)

The MA/PG Dip programme is aimed at professionals working in services with adults and is delivered in Leeds in collaboration with the **Tavistock Clinic and University of Essex**. It introduces students to psychoanalytic concepts which enhance their understanding of patients and develops their clinical work through a combination of theoretical and clinical seminars and supervised practice. The programme continues to recruit solidly, with five students this year opting to study for the MA.

Table 4: Number of 2018-19 Psychodynamic Psychotherapy foundation course students by year

| Foundation Course in Psychodynamic Psychotherapy | Students |
|--|----------|
| First Year                                       | 4        |
| Second Year                                      | 11       |
| Third year                                       | 3        |
| Total  | 18       |

# 2.2.3 Inter-cultural Psychodynamic Psychotherapy: part 2 (D59L)

The course provides students with the essential skills necessary for working therapeutically with adults in the NHS in multicultural Britain. It comprises Part 2 of a qualifying course in Psychodynamic Psychotherapy accredited by the **British Psychoanalytic Council (BPC)**. D59L and, in certain cases, the D58L are acceptable as foundation courses for the IAPT approved Dynamic Interpersonal Therapy training. D59 has benefitted from the graduates of the D58 in Manchester joining the Leeds programme and so is thriving. There are on-going links with the Masters in Psychoanalytic Observational Studies, notably joint study days, and potential students across both courses are encouraged to access NSCAP short courses prior to application to broaden their experience of analytic thinking.

Table 5: 2018-19 D59L Students by study year

| Inter-cultural Psychodynamic Psychotherapy | Students |
|--|----------|
| First Year                                 | 9        |
| Total                                      | 9        |



Figure 3: Occupation of D58L and D59L students at commencement of course

# 3. NSCAP Training Portfolio

There have been significant changes in the short trainings and courses provided by NSCAP largely due to shifts in funding policy and practice including an increase in student self-funding. We have reviewed and consolidated to ensure that our training offer continues to provide psychoanalytically informed escalator and access trainings to a diverse group of practitioners and to broadening the pool of candidates to the pre-clinical and clinical trainings. The portfolio continues to attend to NSCAP's strategic aim of providing psychoanalytically informed high quality, cutting edge and fully evaluated trainings. Wwe have drawn on our specialist clinical, training and research experience and knowledge to create responsive, relevant and financially viable courses particularly for the perinatal and child and adolescent workforce. Robust analysis of impact and evaluation data and detailed fully costed templates for delivering these trainings, are integral to successful delivery. We continue to develop with a commitment to meet the needs of children, young people, families and adults with emotional, relational, learning and behavioural difficulties, especially where these are severe or complex, by providing teaching and learning to the professionals who work with them.

# 3.1 Psychoanalytic Approaches

This series of Saturday Workshop Seminars has run annually in Leeds for several years and has been one of our major successes in introducing psychoanalytic learning to a wider audience and providing access to continuing professional development. It is also a very important opportunity for colleagues in the region to develop their teaching skills as each seminar is delivered by a different facilitator and the series is led by a Child and Adolescent Psychotherapist who gains experience in course delivery and management. A recent development has been the extension from 7 to 10 seminars to take the lifespan development approach into older age. As a way of enhancing communication and clinical skill development we have added the option of extended input in relation to infancy – Therapeutic Communication with Infants (TCI) and adolescence – Therapeutic Communication with Adolescents (TCA). The plan is to introduce a school/learning-based offer for the middle years of childhood. This addition to the programme is particularly aimed at the frontline workforce in the public and private sectors.

**Table 6: Attendance at Psychoanalytic Approaches Seminars** 

|  | Attendance |  |
|--|------------|--|
| Personality Development                    |            |  |
| Leeds                                      | 40         |  |
| Therapeutic Communication with Infants     |            |  |
| Leeds                                      | 20         |  |
| Therapeutic Communication with Adolescents |            |  |
| Leeds                                      | 20         |  |
| Manchester                                 | 20         |  |

# 3.2 Pregnancy to Preschool

There have been a range of ways in which we have delivered (Leeds and Greater Manchester) or supported the delivery (Newcastle) of trainings in infant mental health, early years development and parenting across the region. The most substantial piece of work has been the 12 week Pregnancy to Pre-school (P2P) programme which combines observation, theory and clinical practice and is followed up by a sequence of practice workshops aimed at embedding learning. Whilst the take up in Leeds has been healthy there is no doubt that directly commissioned programmes as we have seen rolled out in Greater Manchester are a much more effective way of ensuring training needs are met. As with all NSCAP activity, a robust impact assessment evaluation process is undertaken.

Table 7: Attendance at Pregnancy to Preschool training in 2018-19

| Pregnancy to Preschool | Attendance |
|------------------------|------------|
| Leeds                  | 8          |
| Manchester             | 10         |
| Tameside               | 12         |

# 3.3 Working with Organisations – Organisational Development Series

NSCAP's organisational development programme aims to provide participants with the opportunity to develop their understanding of the psychodynamics of work, organisations, and the individuals and groups within them. The seminars, 'Exploring personal and team effectiveness at work' and 'Exploring authority and leadership at work', are led in Leeds by Tabitha Arulampalam who is a management consultant and an organisational and occupational psychologist with training and experience with psychoanalytic group work.

**Table 8: 2018-19 attendance at Organisational Development Seminars** 

| Organisational Development Seminars                       | Attendance |
|---|------------|
| Exploring personal and team effectiveness at work – Leeds | 10         |
| Exploring authority and leadership at work – Leeds        | 7          |

### 3.4 NSCAP Open Evening

We hold an annual open evening in Leeds. The event is well attended and enjoyable, including a welcome from the NSCAP Director and a sample Work Observation Seminar.

Table 9: Attendance at 2018-19 NSCAP Open Evening

| Open Evenings 2019 | Attendance |
|--------------------|------------|
| February 2019      | 35         |

# 3.5 Group Relations Conference (GRC)

The conference is an immersive 3 days experiential event that develops capacities for exercising authority, exploring vulnerability and power as necessary components of taking up management and leadership roles. The conference has been delivered to date on a bi-annual basis drawing in clinical trainees alongside a range of participants from different professions and organisational positions.

**Table 10: Group Relations Conference 2018 Attendance** 

| Group Relations Conference | Attendance |
|----------------------------|------------|
| 13-15 April 2018           | 25         |

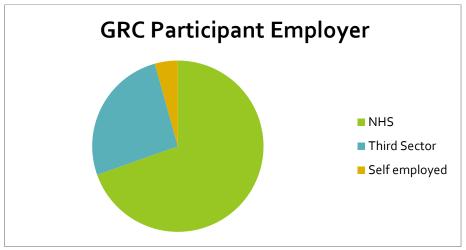


Figure 4: 2018 Group Relations Conference employment sector

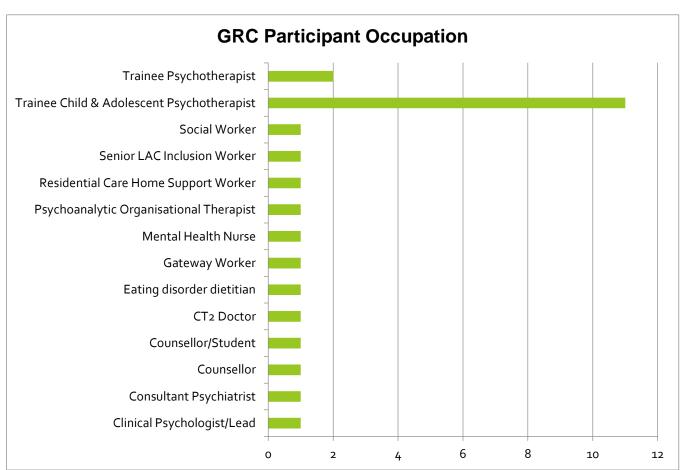


Figure 5: 2018 Group Relations Conference Occupation

### **GRC Feedback**

- I learnt that group dynamics influence you in ways that are not always known about or overtly seen. This GRC allowed me to experience first hand how powerful group dynamics are and offered the space to begin to think about how this impacted on me as an individual but also the people around me
- The conference has highlighted to me how the process of thinking can be attacked in less visible ways, leaving groups unable to function.
- I feel more skilled in all areas of my life as a result of attending this conference. It has been quite literally life- changing as my experience of being in a group has transformed and I am much more aware of many different aspects.

### 3.6 Selected Short-Courses feedback

### 3.6.1 Psychoanalytic Approaches:

Personality Development across the life cycle Therapeutic Communication with infants, toddlers and their parents

- I found the Saturday seminars helpful as a whole. They were really interesting and having different people each week made it enjoyable and different
- I found the opportunities for group discussion regarding others experiences and thoughts very interesting and insightful
- This course has been useful in helping me to think more about adolescent behaviour and helps me to apply meaning to behaviour. I have found ideas around reciprocity valuable to my practice as how our interactions impact young person.
- Really really enjoyed the course and have benefitted so much. Slide/handouts would have been really helpful
- I really enjoyed listening to clinical cases and then discussing them as a whole group

### 3.6.2 Pregnancy to Preschool

- I've absolutely LOVED the papers that we had to read at home they were so helpful when learning concepts. I also love the stance 'There is never nothing going on' it will help me stay focused and help with observations in future
- Baby observations and analysis of [were the most helpful]. This made real the deep thought processes needed to try and emotionally interpret the emotions/thoughts of all parties involved in a relationship.
- First time I have attended a course delivered in this style and it opened my eyes to a new way to learn and how effective it has been for me personally
- I will be able to use the content and experiences when on home visits with under 3s and their care givers. I am already able to pick up on subtle cues when face to face with families.

## 3.6.3 Organisational Development Series

- I have enjoyed Seminar A and Seminar B muchly and will continue my reading and my thinking about organisational dynamics. Thank you very much.
- I will use the concepts in order to understand organisations where I work.
- Joint discussions during seminars were helpful.
- I plan to keep in mind the central idea of 'primary task' in my role, those of colleagues and that in the organisation and organisation of the network.

# 4. Partnership Events and Courses

THE INSTITUTE OF PSYCHOANALYSIS

# 4.1 Institute of Psychoanalysis (IOPA) Training in Psychoanalysis

The IOPA training in psychoanalysis which leads to registration with the British Psychoanalytical Society is London based and whilst a regional training route has been in place for some years there have been restrictions on growing the psychoanalytic community at the rate needed in the North. Sufficient numbers of analysts/psychoanalytic psychotherapists are vital to the delivery of the clinical training as personal psychoanalysis is an essential requirement. NSCAP have worked to forge close organisational links with IOPA leading to the establishment of a Memorandum of Understanding and the collaborative hosting of both a psychoanalytic training and related clinical consultative provision. The first cohort (5) qualified in 2019 with a second (4) cohort of trainees underway.

### 4.2 Institute of Psychoanalysis Introductory Lectures

NSCAP continues to host the IOPA Annual Introductory Lectures, a series of lectures, followed by discussion in small groups, which provides an overview of the core concepts in psychoanalysis and their main applications. The lectures attract a diverse range of participants, seeding an interest that can lead to the pursuit of other learning opportunities.

Table 10: 2018-19 Attendance at Institute of Psychoanalysis Introductory Lectures

| Introductory Lectures Oct 2018 – Mar 2019 | Attendance |
|---|------------|
| Autumn Term                               | 17         |
| Spring Term                               | 21         |

# 4.3 CPD for Child and Adolescent psychoanalytic Psychotherapists



We continue to work with colleagues from **Central Manchester University Hospitals NHS Foundation Trust** to deliver regular CPD events for recently qualified Child and Adolescent Psychotherapists in the North West area.

This CPD group was established to attend in a serious way to the CPD specific needs of newly and recently qualified child and adolescent psychotherapists though in practice some colleagues find it helpful to attend well into the post-qualification period. It is a termly forum with an identified

theme and the format combines theoretical papers, clinical discussion and exploration of professional issues, challenges and developments. Themes in 2019 included Sexuality, Organisations and The Body/Disability. The group is facilitated by NSCAP's Director and a very senior colleague based in the North West. Alternative provision currently exists in the North East and Yorkshire and the Humber though we are poised to extend the model to these areas should the opportunity present.

# 4.4 Tyne, Esk and Wear Valley (TEWV) Adolescent Course - 12 weeks

This is an example of a programme which is delivered by Child Psychotherapy colleagues in the North East and supported by NSCAP as part of our commitment to extending our reach across the region.

**Table 11: Attendance at TEVW Adolescent Course 2018-19** 

| Adolescent Course | Attendance |
|-------------------|------------|
| Series 2          | 10         |

## 4.5 Transpennine Partnership

The Trans-Pennine Partnership was established in 2015 by a small group of clinicians, based in Manchester, working in Partnership with NSCAP. The primary aim is that of developing further a psychoanalytic culture and network in Manchester and by extension the North West in order to

- Encourage and support individuals and organisations in their thinking and working in ways informed by psychoanalytic and observational approaches.
- Assist individuals seeking psychoanalytically orientated training and continuing professional development
- Foster a diversity of approach to learning and understanding in relation to human and organisational functioning

The main focus has been and remains the delivery of high quality study events presented by those eminent in their field and drawing in a wide range of psychotherapists, mental health practitioners, social care workers, social scientists and those working at one removed from these fields but with an interest in psychoanalytic ideas and what they have to offer. Our events are designed to appeal to people working with all ages and in a variety of roles and settings. To date we have organised "Across the Lifecycle" conferences on:

- Narcissism
- Trauma
- Sexuality

We have in addition delivered half day study events on

- Psychoanalytic Perspectives on Race and Difference
- Eating Disorders
- Working with Couples A Couple State of Mind

A new development is a series of Clinical Seminars for Adult Psychotherapists led by experienced Psychoanalytic Psychotherapists and Psychoanalysts drawn from across the region. These seminars are in their second run and are a valued CPD opportunity.

The task now for the Partnership is to move forward as an entity and to determine what shape that will take.

Table 12: 2018-19 Attendance at Transpenine Partnership conferences and events

| Transpennine Partnership Event Conferences                 | Attendance |
|--|------------|
| Psychoanalytic Perspectives on Eating Disorders – Nov 2018 | 53         |
| Sexuality Across the Life Cycle – Jul 2019                 | 78         |
| Clinical Seminars  |            |
| Series 1   | 7          |

### 4.6 Meltzer Study Group

This started in 2015,has been well attended, and is now in its fifth year. The Study Group, is open to qualified Child & Adolescent and Adult Psychoanalytic Psychotherapists wishing to deepen their understanding of Kleinian and post-Kleinian psychoanalytic theories and their application to clinical practice.

Table 13: 2018-19 Attendance at Meltzer Study Group

| Meltzer Study Group | Attendance |
|---------------------|------------|
| Leeds               | 9          |

### 4.6.1 Meltzer CPD Event

The fourth annual Meltzer CPD conference was presented by Dr. Alberto Hahn. The event was open to Qualified and Trainee Child and Adolescent Psychoanalytic Psychotherapists, adult psychoanalytical psychotherapists, psychoanalysts and candidates in clinical training.

Table 14: 2018-19 Attendance at Meltzer CPD Event

| Meltzer CPD Event                  | Attendance |
|------------------------------------|------------|
| 29 <sup>th</sup> June 2019 - Leeds | 25         |

# 5. IAPT Practitioner Training



In 2013 NSCAP was commissioned by Health Education England (HEE) to co-ordinate the delivery Adult IAPT Practitioner Training in three IAPT-approved high intensity therapies across the North of England (north East, North West and Yorkshire and the Humber). This commission has been renewed each year with NSCAP and for March 2018 – March 2019, NSCAP has co-ordinated the delivery of the training by the nationally recognised providers for the following modalities:

- · Couple Therapy for Depression,
- Brief Dynamic Interpersonal Therapy (DIT) and
- Interpersonal Psychotherapy (IPT).

In 2018-2019, additional HEE funding was identified for Supervisor Training for 2 of the 3 modalities; Couple Therapy for Depression and Interpersonal Psychotherapy, and these were also co-ordinated by NSCAP, working with the providers.







**Table 15: IAPT Training at NSCAP 2018** 

|                | Couple Therapy Practitioner Training | <b>DIT</b> Practitioner Training | IPT Practitioner Training |
|----------------|--------------------------------------|----------------------------------|---------------------------|
| Dates          | September 2018<br>March 2019         | September 2018                   | November/December<br>2018 |
| Trainees       | 23                                   | 1                                | 8                         |
| Trainee origin | 12 Y&H, 9 NW, 2 NE                   | Y&H                              | 5 Y&H, 3 NW               |

**Table 16: IAPT Supervisor Training at NSCAP 2018** 

|          | Couple Therapy Supervisor Training | IPT<br>Supervisor Training |
|----------|------------------------------------|----------------------------|
| Dates    | Feb 2019                           | Jul 18 - Jan 19            |
| Trainees | 5                                  | 9                          |

Kev

Y&H = Yorkshire and Humber; NW = North West; NE = North East

## 6. NSCAP Clinical Services

### 6.1 Clinical Service Offer

As a regional specialist resource NSCAP is able to offer a range of clinical interventions and consultation to support professionals and organisations with the complex challenges inherent in providing multi-agency services for vulnerable children, young people, their parents or carers.

NSCAP Clinical Service (NCS) directly delivers child and adolescent psychoanalytic psychotherapy services for children and young people and contributes a psychoanalytic perspective to partner services and organisations. Clinical services are funded independently by individual commissions for psychotherapy, service commissions and inter-Trust collaborations, including Inpatient CAMHS, Perinatal in-patient and community services and Eating Disorder inpatient and community teams.

Integration is an underpinning principle of all of the activity undertaken and delivered by NSCAP across the region. We aim to encompass and integrate core elements of each area of activity, clinical service delivery, work based learning and training, research and evaluation into all aspects of our practice and business.

NCS provides:

- Highly specialised psychoanalytically informed interventions to support children and young people's development
- A range of contributions to wider models of care
- Innovative models of clinical practice particularly short term intensive interventions
- Opportunities to enhance and extend the range of clinical experience available to child and adolescent psychoanalytic psychotherapy clinical trainees.

# 6.1.1 Child and Adolescent Psychoanalytic Psychotherapy Services

The provision of accessible and responsive child and adolescent psychoanalytic psychotherapy services is at the heart of the NCS clinical offer.

We take referrals from a number of Local Authority Services seeking access to specialised therapeutic input for children and young people in their care. We are also an approved provider for post-adoption support services and work with a number of post adoption services across the region. Individual work with children and young people is central to all areas of our wider activity and an area we would like to extend to address inequity of access to psychoanalytically informed specialist provision. Child psychotherapy services include assessments for psychotherapy, psychoanalytic state(s) of mind assessment (PSOMA), and weekly or when indicated more intense, two-three times weekly psychoanalytic psychotherapy, long and short term.

### **6.1.2 Clinical/Organisational Consultation**

An area of provision that is currently limited by capacity but one with potential for growth is that of clinical/organisational consultation. It is not unusual to find that when we are approached for consultative input in relation to a clinical situation there are other factors in play which are to do with team functioning, service culture or organisational anxieties and challenges. We have designed a structured model which combines psychoanalytic observational perspectives with those of occupational psychology and coaching to meet diverse organisational needs in a flexible and effective way. In parallel an impact assessment evaluation model is building core data on outcomes which can inform future developments including publications.

### 6.1.3 Clinical Supervision

As specialist clinicians we provide individual clinical supervision to Child and Adolescent Psychoanalytic Psychotherapists and to professionals from related disciplines including, counsellors, clinical psychologists, psychiatrists and members of multi-disciplinary teams who want to have a psychoanalytic contribution to their practice and understanding about their work. Clinical supervision may be provided to professionals who contact us independently, we also provide supervision for organisations wanting to access highly specialised supervision for their colleagues and staff.

### **6.1.4 Reflective Practice Groups**

A demand-led growth area for NSCAP has been the provision of reflective practice groups (RPGs) across NHS mental health services and within the independent sector particularly for those working with highly vulnerable sections of the clinical population, notably

- Eating Disorders in-patient and community, in adult and child mental health services
- In-patient provision for young people with severe mental health difficulties
- Perinatal in-patient and community
- Residential provision for Looked after Children and Young People

Enquiries into child fatalities and serious incident reviews have underlined repeatedly the vital importance of close observation and the development of analytical skills and our reflective practice model addresses both, facilitating the observation of self as well as other and the effective management of anxiety required to remain open to disturbing experience. We have developed a robust system of evaluation which is focussed on impact assessment, that is, the impact of the learning experience on actual practice and capacity to deliver.

### 6.2 Partnerships: The Whole System Model

### 6.2.1 Dove Adolescent Services



NCS has worked in partnership with Dove Adolescent Services since 2011. Dove provides residential care and education to vulnerable children and young people with complex backgrounds and multiple needs. They have ten registered children's homes and a school.

NCS is commissioned to provide a specialist model of psychoanalytically informed practice and a whole organisational approach to residential care which we have developed both independently and in partnership with Dove - the integration of education/training, clinical practice, and research and evaluation is fed into all areas of residential care. This innovative approach to residential care recognises the complex nature of organisational life arising from supporting children whose ordinary development has been compromised by adverse experiences such as deprivation, sexual abuse, neglect and disrupted attachments.

The children and young people cared for by Dove are often hard to reach and display heightened emotional states characteristic of experiencing complex trauma throughout earlier development. A psychoanalytic perspective with a focus on the internal world of an individual can help staff to understand what children may be communicating though their behaviour and why. This level of understanding, which also takes account of the emotional dynamics of the staff group, is central to supporting children's recovery from traumatic experiences.

Work therefore takes place with and across the whole organisation – from Associate Directors, Managers, senior staff and child care workers through to direct therapeutic work with young people.

The different strands of work aim to support a psychoanalytic informed model of care and include:

- Reflective Practice group and organisational consultation for children's home managers.
- Individual Children's Home Consultation to staff teams from each of the ten children's homes and school
- Supervision and role consultation to Associate Directors
- Direct psychotherapeutic work for children and young people

The different strands of work are monitored and reviewed with the Directors on a quarterly basis.

#### Testimonial

".... the impact within the homes and approaches staff use with the young people are clearly influenced by the work the psychotherapists are doing, and are making real positive changes to the young people we look after. "

"I think the model we have agreed on ensures the learning is across all layers of the organisation and this works well, making sure all benefit from this structure. " – Associate Director

As an organisation Dove Adolescent Services experienced a lack of therapeutic support for the young people we care for. ... a clear partnership has been established seeing us embedding NSCAP and its therapeutic support within our organisation's culture. Our Dove NSCAP partnership work ultimately benefits the staff by supporting and equipping them within care delivery ultimately benefitting the outcomes for young people in our care" - Associate Director

# 6.2.2 Perinatal Services: Regional Mother & Baby Unit, Leeds Community Perinatal Mental Health Service

Leeds and York Partnership NHS

NCS has a longstanding collaborative relationship with Perinatal Services within LYPFT reaching back to 2011. The current involvement is with the In-patient Mother and Baby Unit (MBU) and Community Perinatal Mental Health Service providing assessment and treatment to women experiencing mental health difficulties in the Perinatal Period (conception until infant is one year of age). Child Psychotherapists' in-depth training in the close observation of infants and the early mother-infant relationship enables NCS clinicians to bring highly-specialist understanding and clinical perspectives to this sensitive and complex area of work. The primary focus is the emotional experience and psychological development of the infant in the context of maternal mental health difficulties, and the inter-connectedness of mother and infant's states of mind and development.

The collaboration is made up of three core strands of Specialist Training, Reflective Practice and Direct Clinical Presence and Input.

### 6.2.2.i Training

In 2018/19 NSCAP Clinical Services designed and delivered specialist bespoke Training Programmes for all clinical staff: 'Working with the Perinatal Period in the Community: Developing relationships' (3 days) and 'Working with the Perinatal Period on a Mother and Baby Unit: Developing relationships' (6 x  $\frac{1}{2}$  days). These two programmes are informed by psychoanalytic theory, research and practice, neuroscience and developmental psychology and are underpinned by an impact evaluation in line with the Core Competencies of the 'Tavistock/ Health Education England Perinatal Competencies' and the 'Royal College of Psychiatrists Standards for Community Perinatal Services'

#### 6.2.2.ii Reflective Practice

A psychoanalytically informed Reflective Practice group is available to all clinical staff weekly at the MBU and monthly to the Community Perinatal Team. The group experience informs and supports the development of staff's capacities to emotionally process the psychological distress and disturbance of acutely unwell mothers and their infants, facilitating the sharing of professional perspectives within a multi-disciplinary forum and embedding reflective practice with clinical practice.

#### 6.2.2..iii Clinical Presence/Input

A time-limited pilot between NSCAP Clinical Services and the Community Perinatal Mental Health Service has been underway since September 2019 with a planned end date of March 2020. This innovative collaboration has focused on developing and implementing treatment pathways for time-limited psychoanalytically informed perinatal interventions. These include:

- Parent-infant psychotherapy (6 and 12-week model)
- Perinatal therapeutic work in pregnancy
- Psychoanalytic observational assessments as contributions to MDT assessments
- Care-planning and the availability of specialist consultation to all clinical staff.

This clinical work has been undertaken by two Child and Adolescent Psychotherapists providing an embedded clinical presence

Impact assessment evaluation is underway in collaboration with the NSCAP Research Lead to inform future on-going partnership work. Early indications are that a whole system approach inclusive of reflective practice/consultation, work-based learning and clinical practice has added value to routine service delivery and enhances clinical output, outcomes and service user experience. In addition two innovative models of practice have been developed - an assessment and formulation intervention and a time-defined model of parent-infant psychotherapy. It is anticipated that detailed evaluation and outcome data reports will be available by summer 2020

# 6.2.3 Vision Housing: Specialist Housing Support for young people with complex needs



NCS and Vision Housing (VH) have been working together since 2016. The initial focus of the partnership was to provide a psychoanalytically informed consultation to the Directors of the organisation.

Vision Housing provides a wide range of housing support accommodation for young people with complex needs. They are a specialist provider in Leeds delivering services to young people who have often experienced many and different forms of provision over the course of a young life beset by difficulty including residential care, inpatient units or secure settings. A responsive emotionally robust and dedicated model of care is provided on a needs-led basis for each of the people placed within Vision Housing.

NSCAP Clinical Services contributes a psychoanalytically informed perspective to Vision's care model. The Directors attend regular consultations to think about their work and roles, attending both together and individually. Vision Housing Staff have attended NSCAP portfolio courses including the three day Therapeutic Communication with Adolescents: Psychoanalytic Approaches (TCA: PA).

Since October 2019 ,the NCS offer has been extended to include monthly input to whole staff group which takes the form of a psychoanalytically informed reflective practice group followed by an education seminar where topics related to their work can be considered in focused detail.In parallel regular meetings take place with the Directors to think about the shape and content of this whole package of psychoanalytically and developmentally informed work.

NCS see this whole service model of intervention and support as the most helpful and developmental given the complex needs of the young people worked with and how this is often reflected in complex organisational issues. A whole system model of reflective practice can contribute to better communication, understanding and action.

#### **Testimonial**

The collaboration with NSCAP has supported our organisation to develop a self-reflective, therapeutic culture. We now have a unity in thinking and working practice that we hadn't managed to create or achieve on our own.

As leaders of the organisation, the only way we can describe the partnership with NSCAP as life changing, on a personal and professional level. We have learnt to be thoughtful in our leadership and have gained a deeper understanding of the emotional complexities of individuals, ourselves and the organisation. This has provided a 'golden thread' between ourselves, the staffing team and the young people we support.

### 6.2.4 Consultation Work with East Leeds CAMHS

The consultation model developed and piloted combines psychoanalytic perspectives on individual, group and organisational functioning with learning and experience from occupational psychology and coaching. The format involved consultative work with the Leadership Team alongside sequenced workshops.

Outcome data reveals a high level of translation of learning into practice – rating of 4 out of 5 for all measures of impact on work as follows:

- Thinking differently about work
- Decision-making at work
- Use of content/experiences gained through consultation
- Shared insights and experience gained
- Attribution rate of 70% i.e. participants reported that an average of 70% of the change they have observed in their thinking and actions in the workplace is directly attributable to the consultations they received

# 7. Research and Development Activity

NSCAP employs a part-time Research and Development Lead to increase the research-mindedness of the psychoanalytic psychotherapy workforce, develop the evidence base for child and adolescent psychoanalytic psychotherapy and lead on the evaluation of NSCAP's range of activity particularly training. There have been a number of significant developments on the research and development front at NSCAP over the last year.

The Research function at NSCAP aims to work in synergy with the different aspects of NSCAP's areas of activity in order to both enhance and demonstrate the effectiveness of the work which we undertake. This implies designing evaluation and feedback methods to support the clinical services, consultation work, short courses and central vocational training, psychoanalytic observation course, the doctorate in child and adolescent psychoanalytic psychotherapy training delivered by NSCAP colleagues, conferences and other events. In addition to the evaluation of our training activity, the research and development lead is also responsible for designing and delivering the research methods teaching which underpins the research element of the doctorate in child and adolescent psychoanalytic psychotherapy.

### 7.1 Evaluation of NSCAP Training Programmes

Since 2017, the evaluation approach with regard to NSCAP training programmes has been to understand the degree to which practitioners who access our training translate their learning back into the workplace.

Employers who fund training for their staff are understandably keen to ascertain whether their investment is value for money. We therefore seek to understand the degree to which the content of our training programmes as well as the teaching and learning approaches adopted support participants to address the challenges of working with vulnerable children, young people and families such that their wellbeing, perceived stress and perceived ability to undertake their roles are improved. We have adopted a number of approaches to measure training effectiveness using self-ratings of competencies at the beginning and end of the trainings and assessing the outcomes and impact of learning on participants' working lives.

### **Case studies**

The evaluation of the 'Therapeutic Communication with Adolescents' sub-element of the 'Personality Development' training programme has demonstrated a strong trend towards positive improvements in wellbeing, perceived stress and self-efficacy by the end of the training.

In working with the Clinical Services team, we have embedded an assessment of professional competencies (Tavistock-Health Education England Perinatal Competencies) into the evaluation of specialist bespoke training provided to professionals who work with women who are experiencing significant mental health difficulties and their families on the In-patient Mother and Baby Unit as well as in the Community Perinatal Mental Health Service within LYPFT (Tavistock-Health Education England Perinatal Competencies and Royal College of Psychiatrists Standards

for Community Perinatal Services). In this way, we have begun to collect data which suggest that the current perinatal mental health training may be an effective means of imparting relevant professional competencies to professionals who work with the perinatal period. These programmes also demonstrate a trend towards improvements in wellbeing, self-efficacy and a reduction in perceived stress at work by participants.

Our ambition is to undertake more consistent impact evaluation which demonstrates the long-term impact of NSCAP training programmes on participants in the workplace and beyond. Impact evaluation is particularly challenging as it requires follow-up at 6-12 months after a programme has completed. We were however able to conduct an impact evaluation of our 15 week perinatal mental health training over 2 years (2017-2018) which demonstrated a statistically significant improvement in the self-reported wellbeing and self-efficacy of participants. In addition, participants reported that the programme led to improvements in their confidence to undertake more detailed observations of the vulnerable children and families with whom they worked, to create the space to reflect on the challenging issues with which they came into contact and also the courage to raise concerns with senior managers where they might otherwise not have done so. Thus, the programme led to improvements in the professional curiosity of participants and a greater confidence to advocate on behalf of infants who cannot speak for themselves. The group learning approaches adopted, underpinned by the psychoanalytically-based reading therefore led to an important change in perspectives which was transformational.

### 7.2 Recent Doctoral Successes

Seven professional doctorates were awarded to NSCAP graduates between 2014 and 2017. Our colleague Karl Huntbach also completed his doctorate at UEL in November 2019. The first thesis from the current Essex University doctorate in child and adolescent psychoanalytic psychotherapy introduced in 2015 has also been submitted and is awaiting final approval.

#### Developing a research-minded workforce

- Core research seminars for Child and Adolescent Psychotherapy trainees as a key component of the clinical doctoral training
- Working with key organisations and professionals nationally to develop and influence the child and adolescent psychotherapy research agenda.

### Developing evidence base for child and adolescent psychotherapy

- Scoping study in five regional CAMHS clinics on children with conduct disorders funded by Research Capability Funding (RCF) successfully completed
- Research for Patient Benefit (RfPB) proposal submitted to National Institute of Health Research (NIHR) for feasibility study for major clinical trial with University of Leeds on treatment-resistant conduct disorder.

#### **Evaluation of training**

 Standardised quantitative and qualitative evaluation process fully piloted and implemented across all NSCAP courses

# **PART IV**

**NSCAP** 

Clinical Services Lead

Karl Huntbach

**Child and Adolescent** 

**Psychotherapists** 

Joanne Miley

Laura Liddell

# 8. Funding, Income and Use of Resources

# 8.1 NSCAP Organisational Diagram and Staffing

Lead Director Lynda Ellis

**Director of Clinical Training** Dr Janet Shaw

> **Academic Tutor** Dr Rajni Sharma

**Clinical Training Tutors** 

Simon Cregeen Jason Kaushal Selina Perocevic Penny DeRuyter Research Lead Dr Lerleen Willis

**Intensive Case Supervisors** 

Research & **Development Lead** Dr Lerleen Willis

Research Intern Beth Holt

**Training Portfolio** Lead/Programme **Manager Leeds MPO** Dr Rajni Sharma

MA in Psychoanalytic Observational Studies **Adolescent Mental** Health Lead Jason Kaushal

Short Courses

**Operations and Business Development Manager** Carolyn Wellings

> **Business Manager** Sue McCreath

> > Admin Team:

Clinical Secretary and **Training Administrator** Ellie Pekala

**Academic Services Officer** Anita Mitchell

**Business & Training Officer** Mirriam Maganga

Service Supervisors' Lead

Francesca Calvocoressi

**Service Supervisors** 

### 8.2 Leadership and resource management

In 2018/19 following an in-depth consultation process we moved to a Leadership Team structure. The Leadership, Business and Innovation Group meets monthly, is chaired by NSCAP's Director and membership comprises organisational Leads for the Clinical Training programme, Research and Development, Clinical Services, Operations and Business Development and Administrative/ Business Management. The Group focus is on:

- Strategy development and implementation
- Governance and diversity
- Financial management
- Risk assessment and management
- Business development
- Operational matters requiring cross-school consultation

## 8.3 Funding

The level of HEE funding has remained relatively unchanged since NSCAP was established in 2003. This means that in real terms we have had to manage a reducing income which has presented significant difficulties not least in relation to the costs of delivering the research component of the new doctoral programme. It has been possible to negotiate sporadic increases in a helpfully responsive way but this clearly does not assist effective financial and organisational planning.

The on-going headquarters investment has enabled NSCAP to serve as both an HEE regional resource as well as a provider of high quality clinical training. NSCAP receives the majority of its funding from Health Education England (HEE). Additional income is generated by NSCAP from course fees, commissioned trainings and through clinical and consultancy work and serves to increase the scope of our activity and ensure our sustainability as an organisation.

### 8.4 Improvement and Innovation

A systematic review of organisational systems has been undertaken by NSCAP's Operations and Business Development Manager highlighting some gaps in administrative and business functioning which are now being operationally addressed as part of our quality improvement activity.

Further scoping work is underway to improve NSCAP provision, including our digital offer, particularly digital provision. This incudes a website refresh to improve overall functionality and visitor experience. A thorough, comprehensive review and scoping project is underway to determine:

- Extent of content cleanse/ revamp
- Role in marketing and profile management
- Platform revision
- Introduction of online applications and payments

### 8.3 Marketing and Publicity

The majority of NSCAP publicity is via electronic media and has been primarily focussed on direct email campaigns to our 1200 plus email distribution group that has members across the northern region and a wide range of sectors. Many enquiries result from word of mouth recommendations either through the email network or from previous/ current students and many of our students are 'repeat visitors', accessing short and long courses over a period of years. Another effective enquiry route is via the website and course details and general information are readily available.

Supported by LYPFT we are formulating a more robust marketing strategy. To this end we are developing a marketing and communications plan that draws upon the outcomes of on-going stakeholder engagement and market analysis.

# 8.4 NSCAP Website Analytics

Figure 8 shows use of the NSCAP website between April 2018 and March 2019. There were a total of 27,955 visits by 20,455 different visitors. On average they viewed 2.7 pages during a visit of 2 minutes. The 'spikes' coincide with email distributions of course information.

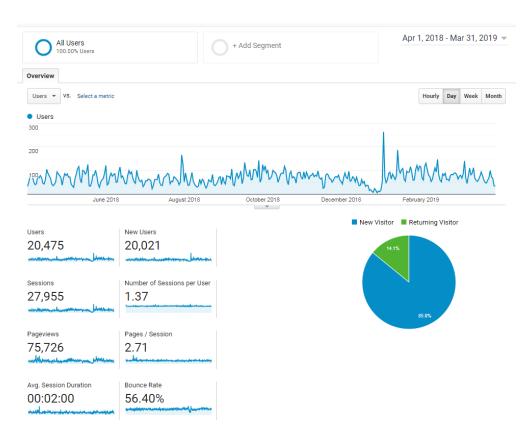


Figure 6: 2018-19 NSCAP website traffic (Source: Google Analytics)

**Table 17: Location of website visitors** 

| City                   | Visits | Visits % |
|------------------------|--------|----------|
| 1. London              | 4,280  | 19.57%   |
| 2. Leeds               | 1,726  | 7.89%    |
| 3. Manchester          | 902    | 4.13%    |
| 4. Sheffield           | 572    | 2.62%    |
| 5. Birmingham          | 446    | 2.04%    |
| 6. Liverpool           | 403    | 184%     |
| 7. Newcastle upon Tyne | 297    | 1.36%    |
| 8. Nottingham          | 237    | 1.08%    |
| 9. Bristol             | 221    | 1.01%    |

### **Concluding Remarks**

Much has been achieved in the period reported on here, a somewhat elastic one stretching as it does across academic and financial years and taking into account an interim period when the annual report took the form of a document prepared entirely for the internal purpose of contract review. The reinstatement of an outward-facing Annual Report engaging with those who know us well and reaching out to those yet to hear about us is just one of the ways in which we will move forward collaboratively, competitively and aspirationally.

Website www.nscap.org.uk

For general enquiries <a href="mailto:nscapadmin.lypft@nhs.net">nscapadmin.lypft@nhs.net</a>

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