What was done

- To improve the well-being of people with psychological and physical co-morbidities, in particular those who experience **persistent physical symptoms** (medically unexplained symptoms).

- To reduce primary and secondary care health service utilization costs by reducing unnecessary health seeking behaviour.

- BHFT was selected as an IAPT Pathfinder Site to design and deliver a pilot project to improve the care of people with persistent physical symptoms.

- The trial included setting up Step 2 groups and Step 3 individual psychotherapy within the standard IAPT service.

- The bespoke service is now embedded within IAPT and Berkshire West Psychological Medicine Service (PMS) and is delivered by a small group of dedicated psychological therapists who receive specialist supervision and training to work with this client group.

Results

- Training and supervision provided to a cohort of General Practitioners .

- Stepped care model instituted and over 200 referrals received. 82 clients received treatment over the two year period of the pilot project.

- Statistically significant improvements in pre-post therapy demonstrated in self-report scores of the symptoms of depression, anxiety and somatic symptoms, measures of Work and Social Adjustment, Health Anxiety and subjective ratings of health state.

- Service commissioned 2014/15 by all Berkshire CCG's and embedded into ongoing contracts.

Results – Table of cast benefit of treatment

Secondary care utilisation - totals

Table 1 - Total secondary care **attendance** of MUS patients in year one (inpatient, outpatient, A&E combined)

	Treatment group (n = 19)			Control group (n = 18)		
	Pre	Post	Change	Pre	Post	Change
Total	71	61	decrease	38	49	increase
Mean	3.74	3.21	decrease	2.1	2.7	increase
Range	0-24	0-16		0-9	0-8	