



**East London**  
NHS Foundation Trust

**Information Governance**

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8 July 2021

**Our reference: FOI DA3810a**

I am responding to your request for information received 10 June 2021. This has been treated as a request under the Freedom of Information Act 2000.

I am now enclosing a response which is attached to the end of this letter. Please do not hesitate to contact me on the contact details above if you have any further queries.

Yours sincerely,

Keshia Harvey  
Information Governance Manager

If you are dissatisfied with the Trust's response to your FOIA request then you should contact us and we will arrange for an internal review of this decision.

If you remain dissatisfied with the decision following our response to your complaint, you may write to the Information Commissioner for a decision under Section 50 of the Freedom of Information Act 2000. The Information Commissioner can be contacted at:

Information Commissioner's Office  
Wycliffe House  
Water Lane  
Wilmslow  
Cheshire  
SK9 5AF

Tel: 0303 123 1113  
Web: [www.ico.org.uk](http://www.ico.org.uk)

**Please note that the data supplied is not allowed to be re-used and/or published without the explicit consent of East London NHS Foundation Trust. Please contact the signatory to request permission if this is your intention**

Chair: Mark Lam

Chief Executive: Paul Calaminus

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**Request**  
Thank you for your email.

In light of the information you have provided, I would like to refine my FOI request. Please could you provide information, where possible, for the following questions from my original request: 1; 2; 3; 7; 8. I have copied over these questions, with the original numbering for clarity, below.

**Question 1. How many referrals did the IAPT service receive?**

Answer: Please see table below:

Year	No. of referrals
2019	41,222
2020	40,032

**Question 2. How many people entered treatment with the IAPT service?**

Answer: Please see table below:

Year	No. entered treatment
2019	29,535
2020	29,095

**Question 3. How many people were judged not suitable for treatment by the IAPT service with the following outcomes (as a number and % of total referrals):**

- a. No action taken or directed back to referrer
- b. Signposted elsewhere
- c. Not assessed
- d. Referred to another therapy service

Answer: Please see table below:

2019	No action taken or directed back to referrer	1,084	2.6%
	Signposted elsewhere	1,471	3.6%
	Not assessed	8,542	20.7%
	Referred to another therapy service	191	0.5%
2020	No action taken or directed back to referrer	1,631	4.1%
	Signposted elsewhere	1,921	4.8%
	Not assessed	7,067	17.7%
	Referred to another therapy service	94	0.2%

**Questions 7/8 refer to the IAPT service's operational procedures affecting people who self-harm.**

**Question 7. Does the IAPT service offer treatment for people who self-harm?**

Answer: The Trust IAPT services offer interventions to individuals presenting with common mental health problems. We are appropriate for those presenting with risks to self and others which can be safely managed at primary care level.

**Question 8. On what basis are judgments around treatment for people who self-harm made?**

**a. Is self-harm included as part of the IAPT service's operational policy (for example, in exclusion/ inclusion criteria or equivalent thresholds)?**

**i. If possible, please attach your IAPT operational policy or other internal documents that are used to determine exclusion and/or inclusion in treatment from the IAPT service.**

**b. If possible, please attach any other relevant documents which support judgements for treatment related to self-harm.**

**c. If possible, please attached the service's risk assessment questions or outline.**

Answer: The decision on accepting referrals or referring onwards is based on overall risk, self-harm is not in itself an exclusion criteria. A service user with a high risk profile requiring secondary care input and/or crisis intervention would be referred onwards to appropriate secondary care provision.

Please find attached Appendix 1 - Risk Management policy (the diagram on "risk to self" on page 4 is particularly relevant) and Appendix 2 - "Brief Guide – Risk Assessment".

**Original Request:**

I'd like to make a request under the Freedom of Information Act 2000 about Improving Access to Psychological Therapies (IAPT) programme(s) delivered by East London NHS Foundation Trust. I am part of a group of researchers carrying out an evaluation of NHS IAPT services across England. As part of this project, we are submitting FOI requests to a number of NHS Mental Health Trusts to ask about local policy and practice. In 2019 and 2020 (please provide data for each year):

**Question 1. How many referrals did the IAPT service receive?**

Answer: This question would take under one hour to collate.

**Question 2. How many people entered treatment with the IAPT service?**

Answer: This question would take under one hour to collate.

**Question 3. How many people were judged not suitable for treatment by the IAPT service with the following outcomes (as a number and % of total referrals): a. No action taken or directed back to referrer b. Signposted elsewhere c. Not assessed d. Referred to another therapy service**

Answer: This question would take under two hours to collate.

**Question 4. How many referrals did your service receive where self-harm was present?**

**a. If possible, please answer with reference to the sub-questions below:**

**i. How many people were assessed as presenting with intentional self-harm e.g. those whose problem descriptor(s) included 'intentional self-harm' (code X60-X84)?**

**ii. How many people were assessed as presenting with 'non-accidental self-injury or repeated self-harm' rated 2-4 when determining their mental health care cluster?**

Answer: The Trust has reviewed your request for information under the Freedom of Information Act 2000. In order to collate this information, staff would need to manually review every referral individually and count cases where self-harm is mentioned.

Therefore, the Trust is unable to comply with this particular part of your request as the cost of compliance and extracting your exact requirements would exceed the appropriate cost limit of £450 which is specified in Section 12 of the Freedom of Information Act 2000. This is based on a rate of £25 per hour, regardless of the rate of pay of any individual involved in the retrieval of requested information, and equates to 18 hours work.

**Question 5. How many referrals were judged not suitable for treatment by the IAPT service where self-harm was present?**

**a. If possible, please answer with reference to the sub-questions below:**

**i. How many referrals were rejected that were assessed as presenting with intentional self-harm e.g. those whose problem descriptor(s) included 'intentional self-harm' (code X60-X84)?**

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**ii. How many referrals were rejected that were assessed as presenting with 'non-accidental self-injury or repeated self-harm' rated 2-4 when determining their mental health care cluster?**

Answer: The Trust has reviewed your request for information under the Freedom of Information Act 2000. In order to collate this information, staff would need to manually review every referral individually and count cases where self-harm is mentioned.

Therefore, the Trust is unable to comply with this particular part of your request as the cost of compliance and extracting your exact requirements would exceed the appropriate cost limit of £450 which is specified in Section 12 of the Freedom of Information Act 2000. This is based on a rate of £25 per hour, regardless of the rate of pay of any individual involved in the retrieval of requested information, and equates to 18 hours work.

**Question 6. How many people who currently self-harm were offered treatment with your service?**

Answer: The Trust has reviewed your request for information under the Freedom of Information Act 2000. In order to collate this information, staff would need to manually review every referral individually and count cases where self-harm is mentioned.

Therefore, the Trust is unable to comply with this particular part of your request as the cost of compliance and extracting your exact requirements would exceed the appropriate cost limit of £450 which is specified in Section 12 of the Freedom of Information Act 2000. This is based on a rate of £25 per hour, regardless of the rate of pay of any individual involved in the retrieval of requested information, and equates to 18 hours work.

**Questions 7/8 refer to the IAPT service's operational procedures affecting people who self-harm.**

**Question 7. Does the IAPT service offer treatment for people who self-harm?**

Answer: This question would take under one hour to collate.

**Question 8. On what basis are judgments around treatment for people who self-harm made?**

**a. Is self-harm included as part of the IAPT service's operational policy (for example, in exclusion/ inclusion criteria or equivalent thresholds)?**

**i. If possible, please attach your IAPT operational policy or other internal documents that are used to determine exclusion and/or inclusion in treatment from the IAPT service.**

**b. If possible, please attach any other relevant documents which support judgements for treatment related to self-harm.**

**c. If possible, please attached the service's risk assessment questions or outline.**

Answer: This question would take under one hour to collate.