

Psychological Therapies Spotlight Audit of Practice Tool

This Audit of Practice Tool reviews the care and treatment of service users who ended contact for therapy within the audit period. It collects information on the service user's demographic details, their waiting times, care data and outcome measures if available.

This tool has been developed to assess standards derived from national and professional guidance. A list of the psychological therapy standards is av

SERVICE USER INFORMATION

- 1

Age at the point of referral
- 2

Gender

7

Does the service user have a disability according to the definition in the Equality Act 2010?

Please select ALL that apply

- | | |
|--|---|
| ☐ No disability | ☐ Perception of physical danger |
| ☐ Behaviour and emotional | ☐ Personal, self-care and continence |
| ☐ Hearing | ☐ Progressive conditions and physical health |
| ☐ Manual dexterity | ☐ Sight |
| ☐ Memory or ability to concentrate, learn or understand | ☐ Speech |
| ☐ Mobility and gross motor | ☐ Other |
| | ☐ Unknown/not documented |

Diagnosis not known / not recorded

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Problem for which psychological therapy was offered

Please select ONE only

- | | |
|---|--|
| ☐ Bipolar disorder | ☐ Panic disorder (with or without agoraphobia) |
| ☐ Body dysmorphic disorder (BDD) | ☐ Personality disorder |
| ☐ Depression | ☐ Post-traumatic stress disorder (PTSD) |
| ☐ Eating disorder | ☐ Specific (isolated) phobias |
| ☐ Generalised anxiety disorder | ☐ Social phobia |
| ☐ Mixed anxiety and depression | ☐ Other anxiety disorder |
| ☐ Obsessive-compulsive disorder (OCD) | ☐ Other reason |

[IF THERAPY WAS PROVIDED FOR ANY OTHER REASON]If Other, please specify

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APPOINTMENT DATES AND ATTENDANCE

10

Date referral received (DD/MM/YYYY)

11

Which type(s) of psychological therapy did the service user receive?
Please select ALL that apply

☐ Individual Therapy

☐ Family/Couples Therapy

☐ Group Therapy

Please specify the therapy received under ALL applicable settings

	Individual Therapy	Group Therapy	Family / Couples Therapy
Acceptance and Commitment Therapy (ACT)	☐	☐	☐
Applied relaxation	☐	☐	☐
Arts Psychotherapies (e.g. Art, music, movement)	☐	☐	☐
Behavioural Activation	☐	☐	☐
Behavioural Couples Therapy	☐	☐	☐
Cognitive Analytic Therapy (CAT)	☐	☐	☐

Problem Solving Therapy	☐	☐	☐
Psycho-Education	☐	☐	☐
Short-term Psychodynamic/Psychoanalytic Psychotherapy	☐	☐	☐
Signposting/Referral Facilitation Schemes	☐	☐	☐
Solution Focused Therapy (SFBT)	☐	☐	
Structured Exercise	☐		

Support and advice in adherence of
psychotropic/p15.12 chotrtotropic/p15.5i8j857.94 0 sS c66610.02 37.98 694.58 cm/lm4 DoQq17.94 0 066

[ONLY COMPLETE THIS SECTION IF INDIVIDUAL THERAPY RECEIVED] Individual Therapy

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Date of **first** appointment (DD/MM/YYYY)

13

What was the reason for this **first**

[ONLY COMPLETE THIS SECTION IF GROUP THERAPY RECEIVED]Group
Therapy

18

Date of **first** appointment (DD/MM/YYYY)

19

What was the reason for this **first** appointment?

☐

Assessment only

☐

Treatment only

[ONLY COMPLETE THIS SECTION IF FAMILY / COUPLES THERAPY RECEIVED] Family / Couples Therapy

24

Date of **first** appointment (DD/MM/YYYY)

25

What was the reason for this **first** appointment?

30

Were there any other outcome measures completed?

☐ Yes

☐ No

Please enter the outcome scores you have for this service user

	Initial Score	Score at 12 weeks
Appearance Anxiety Inventory (AAI)		
Beck Anxiety Inventory (BAI)		
Beck Depression Inventory (BDI)		
Body Image Disturbance Questionnaire (BIDQ)		
Brown Assessment of Beliefs Scale (BABS)		
Centre for Epidemiological Studies - Depression Scale (CES-D)		
Clinical Outcomes in Routine Evaluation (CORE-10)		
Clinical Outcomes in Routine Evaluation - Outcome Measure (CORE-OM)		
Clinician-administered PTSD scale for DSM-5 (CAPS-5)		
Dysmorphic Concern Questionnaire (DCQ)		
DIALOG		
EuroQOL Five Dimensions Questionnaire (EQ-5D)		
Generalised Anxiety Disorder Assessment (GAD-7)		
General Health Questionnaire (GHQ)		
Geriatric Depression Scale (GDS)		
Hamilton Anxiety Rating Scale		
Hamilton Depression Rating Scale		
Health of the Nation Outcome Scale (HoNOS)		
Health of the Nation Outcome Scale 65+ (HoNOS 65+)		
Hospital Anxiety and Depression Scale (HADS)		
Impact of Events Scale - Revised (IES-R)		
Inventory of Interpersonal Problems (IIP)		
Leibowitz Social Anxiety Scale (LSAS)		
Major Depression Inventory (MDI)		
Montgomery-Asberg Depression Rating Scale (MADRS)		
Obsessive Compulsive Inventory (OCI)		
Panic and Agoraphobia Scale (PAS)		
Panic Disorder Severity Scale (PDSS)		
Patient Health Questionnaire (PHQ-9)		
Questionnaire about Process of Recovery (QPR)		

Recovering Quality of Life (ReQoL)

Social Phobia Inventory (SPIN)

Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS)

Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS)

Work and Social Adjustment Scale (WSAS)

Yale-Brown Obsessive Compulsive Scale (Y-BOCS)

Yale Brown Obsessive Compulsive Scale Modified for BDD (BDD-YBOCS)

Please enter the details of any other outcome measures used that are not listed above.

Name (in full)	Initial Score	Final Score

Thank you for participation in the NCAAD Psychological Therapies
Spotlight Audit