

# Increasing Trauma Stabilisation to Reduce Waiting Times

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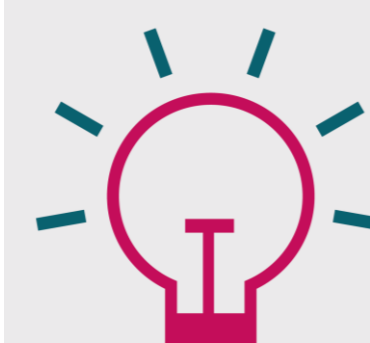
## Background and aim



Long waiting lists (3 years) for individual psychology treatment in PTS service due to under-resourcing. Wanted to provide earlier intervention for those waiting and high incidence of trauma for those referred for psychology. Agreed focus on trauma stabilisation might be appropriate and effective for scope of QI project.

Aim: To reduce waiting time for Psychological Therapies Service treatment by increasing provision of trauma stabilisation by 20% by Dec 2024

## Change ideas we have tested



- Introduction of new six session psychology trauma stabilisation and psychoeducation group (alongside existing art skills for trauma stabilisation group). This is run jointly by psychology and recovery team staff.
- Improve data collection of both outcome measures and demographic information to ensure effectiveness and equity.

## Key learnings from change ideas



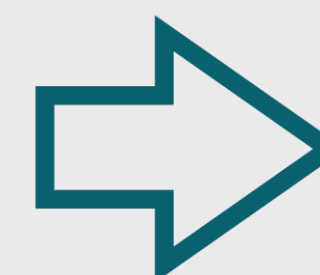
- There is a need among those on waiting list and wider recovery service to attend the group
- Great support and interest from recovery team
- People were more open to a group than we expected
- Process of group set up takes longer than expected

## The impact of the project



- The group seems to be well received by participants
- Evaluation is pending following the final group session

## Looking to the future



- Development of trauma stabilisation training for recovery team staff

## Challenges we faced and how we overcame them

- Our team joined the collaborative late meaning we had less time to develop and test change ideas
- It was difficult to find a realistic and feasible change idea that had enough potential for positive impact
- The QI project is quite process heavy and at times this made it difficult for group members, in particular lived experience members
- Overcame these challenges by commitment from group members to the project by regularly attending meetings and supporting each other

## Find out more: email

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