





Canopi is funded by Welsh Government and administered by Cardiff University

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## **Foreword**

It gives me great pleasure to write this year's foreword and to see that the service has been utilised incredibly well.

Since Canopi expanded to support both NHS and social care workforces across Wales, it has seen continued growth, particularly as recovery from the pandemic continues and as individuals continue to work under high levels of psychological strain, both on a professional and personal level.

The workforce is key in any health setting and any investment to shore up the health and wellbeing of our staff will ultimately lead to improvements in the delivery and quality of health and social care services. The provision of timely support by Canopi is just one of the solutions needed if we are to reduce the high levels of staff absences, and staff turnover, retaining staff in the longer term.

Canopi is a service with collaboration at its heart, working alongside and complementing existing mental health and wellbeing support. It offers targeted psychological support through effective use of its own services but also those of its collaborative partners such as Able Futures.

However, what remains of real importance is that the service is confidential. For those who do not have access to, or are concerned about contacting employer-based options, utilising this service will be of great benefit to them.

It is important to Canopi, as it is to me, that this service can reach as many people as there are that need it. The statistical information in this report speaks for itself both in relation to the numbers supported but also the breadth of roles reached. I see the service going from strength to strength as it builds upon its future priorities.

Finally, I wish former Director, Jon Bisson all very best wishes on his retirement. I look forward to working with Thomas and Jake as they take this valuable service into 2023-2024.



**Dr Frank Atherton**Chief Medical Officer for Wales

# **Co-Directors' summary**

It is with great privilege that we, as the new Co-Directors of Canopi, come together to write this summary and lead the organisation into its next chapter.

Firstly, we would like to recognise the exceptional leadership demonstrated by Canopi's former Director, Professor Jon Bisson who retired earlier this year. Professor Bisson's vision was instrumental in shaping the current service and we hope to build on this progress into the future. The Canopi team wish Jon all the very best in his retirement.

It is apparent that working in health and social care environments across Wales remains diversely challenging. This report demonstrates a continued need for the Canopi service as it endeavours to provide free, confidential and personalised mental health support to two essential workforces in Wales.

With over 50,000 website visits and nearly 2,500 individuals accessing the service this year, there is one clear message: if you need support with your mental health then you are not alone.

Reaching out for help is an important first step.

While our Canopi team continues to grow, we would also like to recognise the continued work and value of the wider network of support available to the NHS and social care workforce in Wales.

Canopi is only one service within a wider network of support available and we have been grateful for the positive and collaborative working relationships we have been able to maintain and develop over the last year.



**Dr Jake Hard**Co-Director



**Dr Thomas Kitchen** Co-Director

# What are we trying to do?

### Our mission

Canopi offers free mental health and wellbeing support to NHS and social care staff in Wales.

The current Canopi service grew from the team's past experiences of offering mental health support to doctors in Wales. The COVID-19 pandemic saw a significant increase in the number of self-referrals from those not just on the front line but throughout NHS Wales.

We also received a number of enquiries from the social care sector during this time. Therefore, after a successful re-tender in April 2022, we expanded our service to include social care staff who are now able to access our service.

Funded by Welsh Government and administered by Cardiff University, we are pleased to say that our service now covers a wide range of professionals working across both NHS and social care sectors in Wales.



### **Aims**

- To offer timely, confidential and free mental health support to those who are seeking a confidential service
- To help break down the stigma around the disclosure of mental health challenges that people face in the workplace
- To extend the services and therapies available through Canopi to make sure we have a service that offers clients a diverse choice of appropriate therapies and services.
- To build on and increase our collaborations with organisations such as Health Education and Improvement Wales, the National Centre for Mental Health, the British Medical Association, Social Care Wales, the Association of Social Services, NHS England and the Welsh Ambulance Service.

## Who's who



**Dr Jake Hard**Co-Director



**Dr Thomas Kitchen**Co-Director



**Dr Gill Toms**Deputy Director



**Professor Fiona Verity** Deputy Director



**Naomi Marfell** Centre Manager

## **Support team**

17 Dr Advisors 2 Supervisor Dr Advisors

11 Wellbeing Allies

2 Specialist Dr Advisors

49 Therapists

## Strategic advisory group

Professor Debbie Cohen, Chair Dr Majd Al Shamaa, Health Professionals Dr Sheila Brennan, Psychological Therapies Jeremy Brown, Care Home Managing Director Peter Hunt, MyMEDIC Team Leader Dr Julia Lewis, Addictions and Psychiatry
Dr Adrian Neal, Employee Wellbeing
Stacey Taylor, Community Resource Team

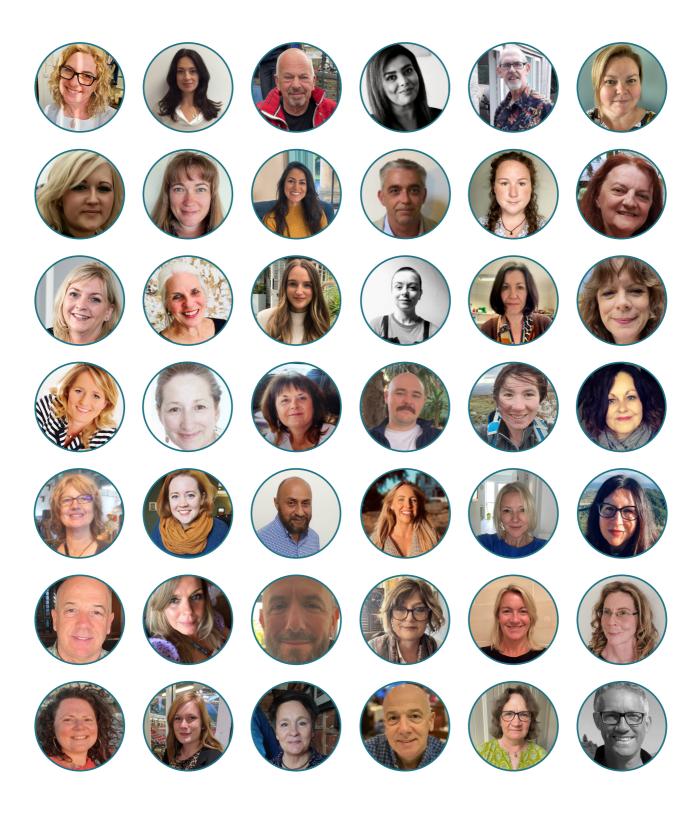
### **Administration**

Zuleika Gregory Lizzie Hobbs Catherine Aymar Dylan Johns Aimee Grimstead Catrin Hopkins Julia Pearce

### Public advisory group

Natalie Harper, Interim Chair Jade Smitherman Geraint Jones Sarah Sutton Becca Louch Yvonne Dignam

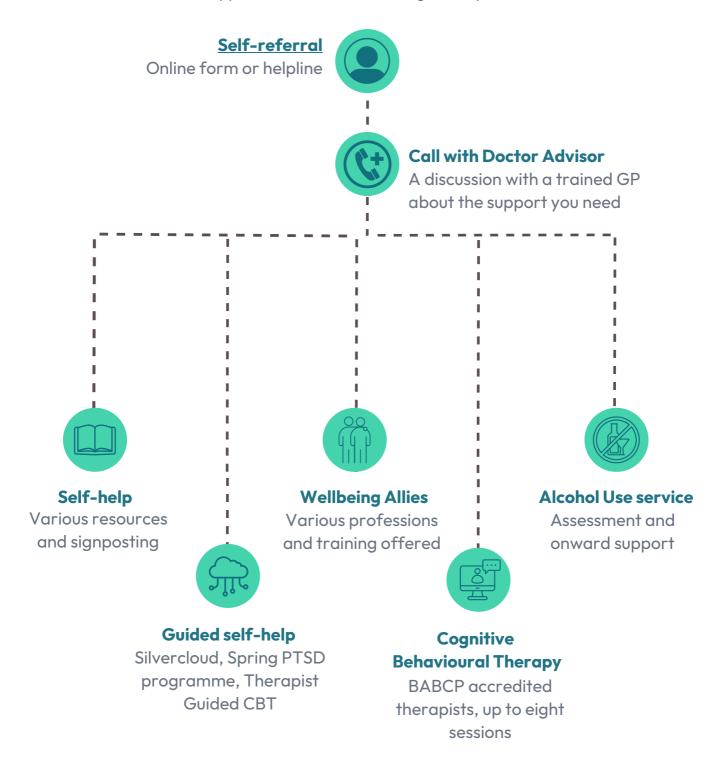
# Canopi team



## How to access our service

People can refer themselves for support at any time using our online form. After submitting the form, the individual is invited to book an assessment with a Doctor Advisor (DA). During the assessment, the DA will discuss support options and decide on tailored approach together with the client.

Below is a structure of support that is available through Canopi:



## **Our services**

#### Self-help

In collaboration with Health
Education and Improvement Wales
(HEIW) and the NHS England
Practitioner Health service, we are
able to sign-post to numerous
applications, self-help guides, virtual
groups and other services.

#### **Wellbeing Allies**

This gives users access to volunteer wellbeing allies.

Doctors are directed to the services run by the British Medical Association (BMA). Other health and social care staff are directed to a Canopi service.

#### **Guided self-help**

Following initial consultations with either a SilverCloud or Canopi therapist, individuals are directed to specific self-help materials. As appropriate, a follow-up consultation reviews the need for additional support.

We have recently introduced Therapist-Guided CBT, offering evidenced-based materials for clients to access through Canopi with support from a select group of therapists. In conjunction with Traumatic Stress Wales, we also offer access to a PTSD guided self-help service for mild-moderate PTSD.

# Virtual face-to-face consultations

Individuals can receive up to eight sessions of Cognitive Behavioural Therapy (CBT) from a British Association for Behavioural and Cognitive Psychotherapies (BABCP) accredited therapist.

#### **Alcohol service**

Individuals are supported through a specialist alcohol use assessment and accessing onward interventions where appropriate.

We recognise that an individual's mental health can be affected by many aspects of their personal and professional lives.

We work with an organisation called <u>Able-Futures</u> to offer support to those experiencing challenges with relationships, finance, housing, working environments as well as other difficulties.

## **Achievements**

April 2022 -March 2023

This infographic shows some key figures from our activity over the last year.



people accessed our service this year



Advisors and therapists supporting our clients





website



people received Cognitive Behavioural Therapy



members in our **Public Advisory** Group



Wellbeing Ally support







Group



people received Therapist-**Guided Cognitive Behavioural** Therapy

## **New connections**

Collaboration with our partner and stakeholder organisations is essential to ensure the Canopi service is reaching everyone within NHS Wales and our new partners in the social care sector.

We continue to regularly liaise and collaborate with a range of partner and stakeholder organisations both within and outside Wales.

We remain focused on building relationships and developing network links with occupational health departments and wellbeing teams across Wales.

Over the last year, we have been particularly focused on engagement within the social care sector. We have established connections with Social Care Wales (SCW) and the Social Care Wellbeing Network.

Working with these networks as well as Health Education and Improvement Wales (HEIW), NHS Practitioner Health and the Scottish Workforce Specialist Service provides many opportunities to collaborate and share information as the situation and environment we work in continues to evolve.

Other stakeholder groups include all NHS Wales Health Boards and Trusts, The European Physician Health Group, the Samaritans, Welsh and UK Government officials and the British Medical Association (BMA).

Canopi has presented to a wide number of organisations to support increased collaboration and we are grateful for all the work done to promote the service.



Canopi has a growing team of volunteer Wellbeing Allies providing peer support.

For more information, visit <a href="mailto:canopi.nhs.wales/work-with-us">canopi.nhs.wales/work-with-us</a>

# One year of supporting NHS and social care colleagues

We're marking one year of supporting both NHS and social care colleagues across Wales after expanding our services last May.

Those in caring professions report among the highest rates of stress, anxiety and depression. That's why we made the decision to expand our services to the social care sector last year, under the new name 'Canopi.'

Now, NHS and social care staff from across Wales can access mental health support through Canopi. We are here particularly for those who do not have access to, or are concerned about contacting employer-based options.

Since our expansion, 347 staff from social care have contacted our service to ask for support with mental health difficulties such as depression and anxiety.



Canopi has been a further source of support to social care staff from across Wales. As we enter our second year, ongoing promotion of Canopi to the social care workforce continues to be a priority.



**Professor Fiona Verity**Deputy-Director of Canopi

#### Help us spread the word

Genuine conversations around the wellbeing of our colleagues are important to raise awareness of mental health.

Why not order some promotional posters for your workplace? Email canopi@cardiff.ac.uk

# Who did we help from the NHS?



The number of clients accessing support through our service from non-professional and other specialist areas of NHS staff has continued to grow.

The numbers below give an idea of the broad spectrum of people we supported in 2022-23:

313 Allied health professional

104 D

181 Clerical and administrative

28 Dental

20 Estates team

151 Health care assistant

19 Health visitor

75 Managerial

260 Medical 60 Midwifery

401 Nursing

53 Other non-clinical staff

28 Scientific

28 Support worker

34
Technical staff

# Who did we help from social care?

Since expanding our service last May, we also have helped people in a range of roles across the social care sector:

























#### Are you a social care manager?

We want to help more social care staff across Wales. Spread the word about our service by ordering some promotional posters for your workplace.

Email canopi@cardiff.ac.uk

# Jade's story

Advanced nurse practitioner, Jade was transferred to a COVID-19 ward during the pandemic. She recalls her experiences, from her initial diagnosis of PTSD to accessing Therapist-Guided CBT through Canopi.



During the pandemic, I was transferred to a ward to look after patients who were critically ill with COVID, as well as other pre-existing health conditions.

Every patient was different and came to us to try a procedure called CPAP, which created a huge viral load and made our chances of getting ill even higher.

It wasn't long before one of my colleagues died and another was admitted to ITU for months, so I took on their night shifts.

Meanwhile, I ran around like headless chicken in full PPE, as my patients became more hypoxic (carrying dangerously low amounts of oxygen), with very little time left.

I'd seen many deaths as a respiratory nurse, but this was different. We didn't have time to perform the rituals to help us with our own grief. Nonetheless, we made it through the first wave, but news of a second hit us hard... the trauma and pressure came flooding back.

By this time, I'd noticed changes in myself that were unrecognisable: I felt tight-chested, dizzy and I was avoiding people. After a period of sick leave, I tried to return to work, only to collapse when I reached the ward, breathless and deaf to everything around me.

I saw an advert for Canopi on Instagram and contacted them. They were calm and listened to my concerns. Most importantly, they made me feel like I had a problem that could be fixed.

66

The Doctor Advisor contacted me three days later and arranged for me to begin a course called 'Spring' for Post-Traumatic Stress Disorder (PTSD).

"Spring is a guided internet-based therapy for PTSD. It has eight online steps that are designed to be used with regular guidance from a therapist. A recent clinical trial showed that it can be just as effective as face-to-face therapy in reducing symptoms of PTSD," Dr Catrin Lewis, National Centre for Mental Health.

In counselling sessions, we practised grounding techniques and graded exposure. The therapist was incredibly helpful and the self-help element made me feel more in control of my recovery.

We continued to work together when I went back to work and life couldn't be more different now. I am truly grateful to Canopi as it means I can do the job that I love and help so many more people.

Spotlight on: Therapist-Guided CBT

Last year, we introduced Therapist-Guided Cognitive Behavioural Therapy (TGCBT) which is a combination of self-help materials and counselling sessions. Read on to learn more about its uses for both PTSD and anxiety and depression.

TGCBT is well-established and has been offered within the Improving Access to Psychological Therapies (IAPT) since 2008.

Following on from the successful implementation of Spring, an 8-step therapist guided web-based programme for mild to moderate PTSD, Canopi therapists are piloting TGCBT for mild to moderate symptoms of anxiety, depression and panic disorder.

The TGCBT pilot for anxiety and depression is similar to the Spring model in that it comprises an initial assessment to establish the client's goals.

This is followed by four fortnightly 30-minute online face to face sessions with phone call or email check-ins between sessions.

Instead of a web-based programme, the TGCBT for anxiety and depression uses booklets to support the treatment and the guided self-help nature of the intervention. Canopi therapists use resources and booklets from The CBT Resource or the CCI modules to aid engagement in the treatment and support a focused, goal-oriented therapy experience.



#### The statistics

197 the number of people received TGCBT this year



the number of therapist sessions provided per TGCBT course

the number of minutes required for each therapist session

## Service user feedback

Feedback is important to us. We're always working to improve and streamline our service using the feedback we received from our clients. This year, 153 clients who finished therapy left us feedback. Here's a summary below:



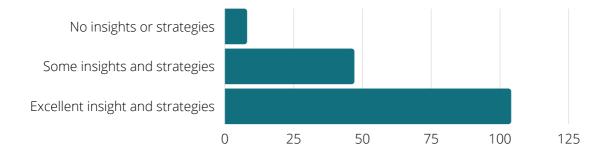
92% of clients found their contact with a Dr Advisor helpful or very helpful.

I'm so happy I sought help through Canopi. The help and support I received was invaluable.

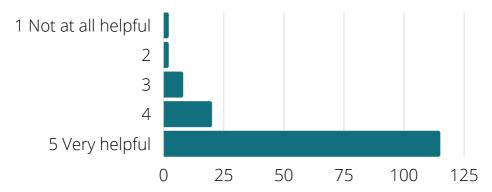
The therapist helped me to re-evaluate my self worth and build self-esteem.

Canopi has allowed me to foster a sense of balance and a measured approach towards the challenges I face at work, and personally. It has given me perspective and optimism.

Did you leave therapy with insight and strategies that may help you in the future?



# How helpful was the Dr Advisor who made initial contact with you?



Communication was timely and helped me to manage my expectations from the very beginning.



95% of clients were likely or very likely to recommend the service to others.



Since the COVID-19 pandemic, clients have been more emotionally dependent on us. It sometimes feels like no one is there for our emotional support but Canopi offered me a lifeline.

# Looking ahead

Canopi is committed to delivering the highest quality support in a timely way.

In order to continue this work, we must adapt and grow alongside the network of support available. With this in mind, we have devised a number of ongoing and future priorities.

Firstly, we will develop our Wellbeing Ally team and integrate our Therapist-guided CBT services so that we can better deliver individually tailored, evidence-based support options.

Secondly, we will build our team of therapists through collaboration between Cardiff University and Cardiff and Vale University Health Board.

Thirdly, we will continue to contribute to the conversation around sign-posting to the network of services at a national level and ensure people can easily find the right place to get the help they need.

Finally, we will continue to collaborate with colleagues to deliver a number of joint events and conferences raising awareness of mental health support and reducing barriers to disclosure.

