

# Evaluation of the TAPP Programme

Academic, Clinical Service and Economic  
Evaluation of the Postgraduate Diploma  
Associate Psychological Practitioner  
(PgDip APP) Programme - Cohort 2

March 2022 - March 2023



University of  
Central Lancashire  
UCLan



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## Executive Summary

### Introduction to the Evaluation

Early in 2019 the NHS Long Term Plan (LTP), followed by the NHS People Plan in 2020, both recognised the need to increase workforce supply of appropriately skilled and motivated psychological practitioners to meet need and improve outcomes. Challenges exist at all career levels: entry, transition and development towards senior clinical and/or leadership roles. Strategic workforce programmes across the North-West Coast system (Lancashire & South Cumbria, L&SC; Cheshire & Merseyside, C&M), anticipating this, commissioned this project to support sustainable expansion of a new psychological professions workforce to support NHS policy aims of improve access to psychological interventions. Sponsored by Health Education England (HEE) and led by The Innovation Agency (IA), The Academic Health Sciences Network for the North-West Coast, in partnership with Lancashire and South Cumbria Foundation Trust (LSCFT) and The University of Central Lancashire (UCLan), the (Trainee) Associate Psychological Practitioner (T/APP) was developed. Cohort 1 included 50 funded roles and ran January 2021 to January 2022, with evaluation of this cohort evidencing the many successes and value of this new role, from the point of patients, services, NHS staff and the TAPPs themselves. Cohort 2 included 90 roles and expanded to Greater Manchester, running from March 2022 to March 2023. Cohort 2 is the focus of this evaluation report.

### Aims of the Evaluation

The overall aim of this report led by UCLan and LSCFT, was to evaluate the success of the programme and TAPP role in Cohort 2, via three criteria:

- 1) TAPP progress and competence development during the 12-month training period alongside academic training experience (academic evaluation);
- 2) The acceptability and impact of TAPPs in clinical settings (clinical service evaluation);
- 3) The cost effectiveness of introducing this new workforce into specific pathways (primary care economic evaluation)

### Method

The academic and clinical service evaluation involved triangulation of data from: 1) patients, 2) clinical supervisors, and 3) the workforce (TAPPs). The economic evaluation used primary and secondary data to estimate and compare the costs and outcomes associated with Primary Care TAPPs' activities and usual care.

## Summary of Key Findings across all three components of the evaluation

1. The PgDip APP educational training programme continues to effectively develop Psychology graduates into competent psychological practitioners, thereby helping to meet the ambitions of the NHS LTP and community transformation to improve workforce supply and meet need.
2. In primary care, secondary care and living well services, support from a TAPP leads to positive patient outcomes (e.g., reduced depression and anxiety and/or improved resiliency and wellbeing), with many patient experience questionnaires also attesting to positive experiences and impact.
3. The positive impact of TAPPs extends beyond the delivery of one-to-one or group interventions to wider service benefits appropriate to the needs of the service and pathway in which they are working, with benefits such as additional capacity to manage referrals, supporting waitlist initiatives, completing service audits, and working with the community.
4. TAPPs generate capacity by providing a psychological presence in PCNs and enhance existing psychology teams/freeing up capacity in other primary and secondary care services.
5. With appropriate support and clear scope of practice for specific pathways, TAPPs effectively embed, add value and are a welcomed workforce.
6. The evaluation highlighted significant areas of strength (e.g., University teaching and learning, the clinical work exposure to enable skill development and broadening career opportunities).
7. Challenging aspects to address inherent in any new role include working with services to ensure service readiness for effective deployment, particularly in PCNs and services where there is complexity in need.
8. Preliminary cost-effectiveness analysis of TAPPs in primary care identified potentially similar costs and gains in patients' generic health-related quality of life (when measured in quality-adjusted life years or QALYs) compared with usual care, which could liberate resources from GP time. A fuller economic analysis is needed to confirm these findings and to expand the cost effectiveness analysis in relation to outcomes other than QALYs and in relation to comparative 'treatment as usual' data.

## Recommendations

The specific recommendations emerging from this evaluation will require joint action from provider organisations, HEE and HEIs. The recommendations from the evaluation report are set out below:

1. Given the success of the TAPP role, to move towards a sustainable commissioning framework to train APPs, working with HEE and NHSE.
2. To obtain BPS accreditation of the APP role and standardise University Quality Assurance processes and governance standards, supporting career development.
3. To support TAPPs in training (Cohort 3) and continue to embed the APP role in local services, starting with locally led approaches to recruitment and engagement with services early in the process.
4. To foster ongoing collaborative partnerships between the education provider and all services.
5. Ongoing evaluation of academic success and clinical and economic impact of TAPPs, and where possible, qualified APPs.
6. To complete the final evaluation of the three year 'test of concept' in May 2024.

## Conclusions

Evaluation of Cohort 2 highlights significant successes, the value the role contributes, and challenges embedding this new role. This project has continued to demonstrate both excellent supply (over 500 applications for cohort 1, over 600 for cohort 2 and over 700 for cohort 3) and the benefits of recruiting career focussed psychology graduates to work in healthcare. This is a key area for development among psychological professions where there is currently no direct route from undergraduate degree completion to working in healthcare in a professional role. The APP role is responsive to current rising demand and gaps in provision for mental health services; the TAPPs are improving population health outcomes. The role is helping to meet the strategic priorities of NHS LTP that relate to growth of the psychological workforce, new career pathways and new ways of working.

The T/APP role has won multiple awards: 1) LSCFT outstanding contribution to education and research, 2021; 2) HSJ Patient Safety, Primary Care Initiative of the Year, 2022; 3) North-West Coast Research and Innovation: Ruth Young award, 2022, and 4) Educate North Employer Engagement award, 2023. There is also reference to the role in the NHS 'Psychological Professions workforce plan for England' (2021).

The evaluation continues for Cohort 3 and this year represents the final year of the proof-of-concept project in developing a new role that can deliver psychological intervention work in a range of settings. The role has been well-received and TAPPs are highly valued within the North West region, as key contributors to workforce supply, delivering improved outcomes for patients. Consideration of future cohorts is an essential priority for this year and clarification around future funding models is required. There has been interest in developing this role outside the North West of England as well as HEI interest in developing the courses more widely. Ensuring sustainability of the model will require investment from HEE/NHSE and a timeline for next steps needs to be determined.

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