

# Guidance for recording Digital Enabled Therapy

## Background

To provide consistency across all NHS England mental health programmes, Internet Enabled Therapies (IETs) will now be referred to as Digital Enabled Therapies (DETs) in guidance and webinars. The exception will be within the IAPT dataset and related documentation that will continue to refer to these related data items as Internet Enabled Therapies until the next dataset change.

DETs started to be collected in September 2020 following the move to v2 of the IAPT dataset. We have analysed submissions and collated feedback from providers and patient record system suppliers on how this collection could be improved with changes being made to better reflect the patient care pathway.

The data items have not changed but the timing of the data being submitted has been revised. The main changes are:

- Only record DETs for patients that have accessed the software. Previously they were recorded if login details for the software were provided.
- Only submit a weekly therapist time log if the therapist has supported the patient during the course of the week. This will stop the automatic generation of DET weekly logs when it is evident the patient is not using the DET.

This guidance describes how the completion of DET programmes should be reflected in the data set using the existing data items. These changes will allow more accurate representation of service activity and enable better comparison between DET and non-DET care, and between different DET programmes, with regard to throughput, waits, outcomes and patient experience.

## What is Digital Enabled Therapy

DET is defined as the delivery of therapy through an internet-based programme, which is accessed by the PATIENT in their own time.

Products, which facilitate communication between a patient and therapist, but rely on the therapist delivering treatment (whether that be typed, vocal, video-conference etc) during a pre-arranged appointment wouldn't meet this definition.

## Who should submit this data?

Any NHS Talking Therapies services that offer one or many DET programmes must now return the associated data points listed below as part of their monthly IAPT Dataset submission.

## IDS205 Internet Enabled Therapy Care Professional Activity Log

The IDS205InternetTherLog table is designed to capture the DET programme used and the overall clinical time spent. The data items are detailed below

### **Table 1:** IDS205 Internet Enabled Therapy Care Professional Activity Log

<i>IAPT v2.0 Data Item Name</i>	<i>Guidance</i>
SERVICE REQUEST IDENTIFIER	To allow linkage back to the IDS101 table
START DATE (INTERNET ENABLED THERAPY ACTIVITY LOG)	The start date of the IET Activity Log. Please note this should not be recorded until the patient is actively using the DET.
END DATE (INTERNET ENABLED THERAPY ACTIVITY LOG)	The end date of the IET Activity Log
INTERNET ENABLED THERAPY PROGRAMME	Free text field. (20 Characters)
<i>DURATION OF INTERNET ENABLED THERAPY IMPROVING ACCESS TO PSYCHOLOGICAL THERAPIES CARE PROFESSIONAL CLINICAL TIME</i>	The duration of clinical time in minutes spent by the NHS Talking Therapies Care Professional supporting Internet Enabled Therapy for the patient within the specified time period.  If no clinical time has been spent by the IAPT Care Professional within the specified time period, no log should be submitted.
<i>CARE PERSONNEL LOCAL IDENTIFIER</i>	This allows linkage into the 'IDS902 Care Personnel Qualification' table to allow capture of additional information about the Care Professional's qualifications
<i>INTERNET ENABLED THERAPY INTEGRATED SOFTWARE ENGINE USED INDICATOR</i>	A 'Y/N' indicator  An Integrated Software Engine is software that enables information, such as progress notes and outcomes, to be shared electronically between an Internet Enabled Therapy Programme and a patient's clinical record.  The use of this software reduces the burden and associated risk of duplicate data input and can provide real time feedback regarding the efficiency of Internet Enabled Therapy for the patient.

## Data Points required

With consideration for data entry and submission burden, services are not expected to record each individual element of care throughout a course of DET as discrete sessions. For example, where short exchanges of online messages are undertaken throughout the day.

Instead, key elements of the DET are to be submitted to enable such patient experience, outcomes and service efficiencies to be monitored. These elements include the new IDS205 Internet Enabled Therapy Care Professional Activity Log table and the existing routine outcomes measures.

The following data points (summarised as a diagram in Annex 2) must be submitted in the data set by services as part of the delivery of DET:

### **A) Patient demographics and referral details**

Patient demographic details (IDS001MPI and child tables) and referral details (IDS101Referral and child tables, such as IDS603 Presenting Complaints and IDS602 Long Term Physical Health Condition) should be submitted to the data set in the usual manner.

### **B) Non-DET Care Contacts and Activities**

One or more appointments may take place prior to the commencement of DET, such as the appointment at which DET was agreed with the patient. Non-DET related appointments may also take place during the time DET is being completed e.g. psych-educational group sessions. Non-DET related appointments may also take place after the DET is complete. These appointments MUST flow in the IDS201 Care Contact table in the usual manner.

Non-DET care contacts should be used to capture clinical activity that is not related to the DET. IET activity logs should be used to capture clinical activity that is related to the DET. Clinical time should not be double counted and entered into both non-DET care contacts and IET activity logs.

### C) Care Professional Activity Logs

Throughout the completion of DET, frequent contact may be undertaken between the patient and care professional. There is no national requirement for DET contacts to be returned to the data set as individual sessions. E.g. if messages are exchanged regularly throughout the day.

Whilst every instance of contact is not required as a Care Contact record, services must provide weekly activity logs summarising the clinical time spent by care professionals supporting the delivery of DET. This should no longer be automatically generated every week. This should only be generated when it is known that the patient has engaged with the DET and when therapist time is greater than 0.

**Table 2:** What should/should not be included in the weekly log

Activity to <u>include</u> in the duration of clinical time:	Activity to <u>exclude</u> from the duration of clinical time:
All therapeutic communication with the patient (phone calls, composing and sending emails, within digital programme secure messages, SMS texts, video calls, and any face-to-face contact).	Writing clinical notes.
Time spent logged into the internet programme and reading what the patient has done.	Entering questionnaire scores into the service's IT system.
Risk assessment.	Liaising with other professionals about the patient's care.
Reviewing patient's completed questionnaires.	Sending routine communications that apply to all therapies (e.g. arranging appointments and sending assessment/discharge letters).
Time spent sorting out any technical difficulties that the patient has in accessing the online programme.	Reviewing patient in supervision.

Care professional activity logs should be completed on a weekly basis.

The submitted weekly activity logs must cover the full period during which the Care professional is supporting the patient with their digital enabled therapy. This is defined as:

First activity log:

- Start – The first start date should be when the care professional starts to support the patient with their DET i.e. they first log some DET activity for the patient  
AND  
the patient has confirmed they have logged in to the DET. The next activity log start date will be 7 days later.
- End – The activity log end date will be 7 days after the start date.

Subsequent activity logs:

Subsequent activity logs should only be submitted when a therapist has supported the patient to use the DET. i.e. they should not be automatically generated every 7 days if there is zero therapist time given to support the DET.

Final activity log:

The final end date is when the patient has completed using the DET .  
AND

The therapist is no longer supporting that DET. This could be when finishing the programme or a discontinuation such as changing therapy.

NB. Information is only expected for completed IET Activity Logs.  
i.e. an IET Activity Log may span multiple submission windows, e.g.

START DATE: 31 August 2023

END DATE: 6 September 2023

This IET Activity Log would not be complete in your August 2023 submission data so should not be included in your August 2023 submission file. You would submit this completed IET Activity Log in your September 2023 submission file.

The activity logs may start and finish on any day of the week. The activity log may cover less than a week. For example, if a programme takes 3 and half weeks to complete, the final log would cover the half week.

Annex 1 lists the commonly used **Internet Enabled Therapy Programmes**. This list does not indicate NHS England endorsement of the product. We have produced this list to improve the quality, and the ease of creating the final DET publication reports.

If a DET programme is being used locally that is not listed, it can still be submitted (remembering the definition of a DET and the max 20 characters). The list of submitted DET programmes will be reviewed periodically with those frequently used added to the published list.

#### **D) Routine Outcome Measures**

All routine outcome measures completed throughout DET must be submitted in the IDS606 or IDS607 tables, depending on whether or not these are linked to a Care Contact.

### Further information and guidance

The 'Internet Enabled Therapy Programme' data item listed within IDS201 Care Contact Table should not be completed if the IDS205 Internet Enabled Therapy Care Professional Activity Log is completed. This can be assumed if IDS205 is completed. 'Internet Enabled Therapy Programme' has been included within IDS201 as forward protection but is not required at this time.

Similarly, care providers are not expected to capture DET in the 'Consultation Medium Used' data item in the IDS201 Care Contact table as this can also be assumed if IDS205 is completed. Care providers should continue to submit the IDS201 Care Contact table with the appropriately populated data items including Consultation Medium Used where this relates to a regular care contact.

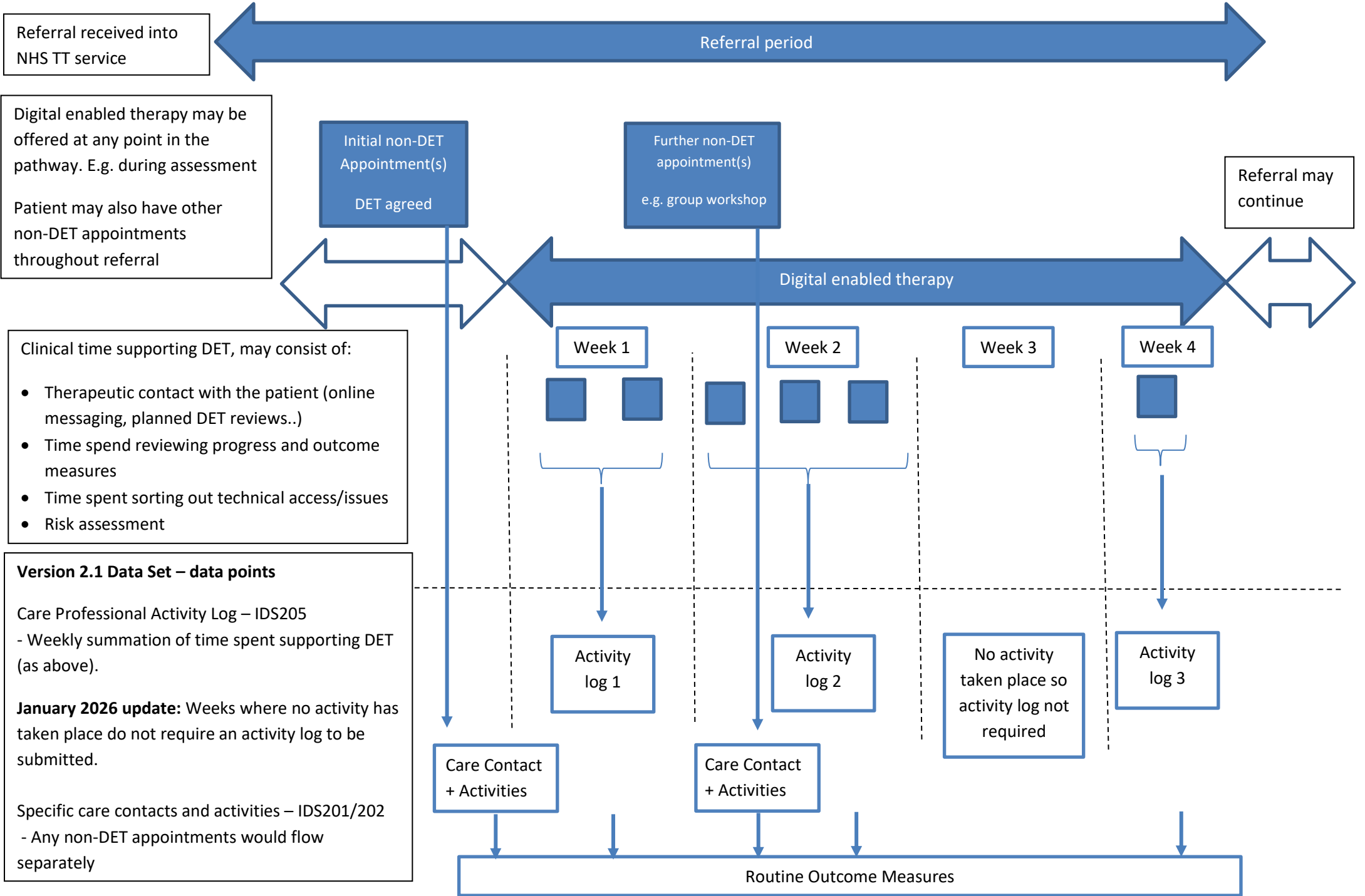
Please note that the requirements for the data set should not influence local requirements for data recording. Care professionals should continue to follow standard procedures for recording clinically important information locally in the IT system, such as risk, in the usual manner.

For further information around the programme to improve access to digital services, please see the [NHS England IAPT Programme webpages](#).

## Annex 1 – Most commonly used Digital Enabled Therapy Programmes (max 20 characters)

IET Programme	Text to submit
Silvercloud – Depression	Slvrclد Deprss
Silvercloud – Anxiety	Slvrclد Anx
Silvercloud – Phobia	Slvrclد Phobia
Silvercloud – Panic	Slvrclد Panic
Silvercloud – Social Anxiety	Slvrclد Soc Anx
Silvercloud – Health Anxiety	Slvrclد Hlth Anx
Silvercloud – OCD	Slvrclد OCD
Silvercloud – Depression & Anxiety	Slvrclد Dep & Anx
Silvercloud – GAD	Slvrclد GAD
Silvercloud – Money Worries	Slvrclد Money
Silvercloud – Bipolar	Slvrclد Bipolar
Silvercloud – Perinatal Wellbeing	Slvrclد Prnatal
Silvercloud – CHD	Slvrclد CHD
Silvercloud – COPD	Slvrclد COPD
Silvercloud – Diabetes	Slvrclد Diabetes
Silvercloud – Chronic Pain	Slvrclد Chronic Pain
Silvercloud – MS	Slvrclد MS
Silvercloud – Rheumatoid Arthritis	Slvrclد Rheumatoid
Silvercloud – Sleep	Slvrclد Sleep
Silvercloud – Stress	Slvrclد Stress
Silvercloud – Resilience	Slvrclد Rslnce
Silvercloud – Positive body image	Slvrclد Pos Body img
Silvercloud – Depression (higher education)	Slvrclد Deprss HE
Silvercloud – Anxiety (higher education)	Slvrclد Anx HE
Silvercloud – Stress (higher education)	Slvrclد Stress HE
Silvercloud – Resilience (higher education)	Slvrclد Rslnce HE
Silvercloud – Positive Body Image (higher education)	Slvrclد Pos Body HE
Minddistrict - ADHD	Mnddstrct ADHD
Minddistrict Anxiety	Mnddstrct Anx
Minddistrict - Depression	Mnddstrct Deprss
minddistrict - difficulty with social interaction	Mnddstrct Soc Intrct
minddistrict eating problems	Mnddstrct Eat prob
minddistrict - low self-esteem	Mnddstrct Low Sif Es
minddistrict - mood	Mnddstrct Mood
Minddistrict - OCD	Mnddstrct OCD
Minddistrict - Panic	Mnddstrct Panic
Minddistrict Phobia	Mnddstrct Phobia
Minddistrict - practical issues	Mnddstrct Prac Iss
Minddistrict - rumination	Mnddstrct Rmntion
minddistrict - sleeping problems	Mnddstrct Sleep Prob
minddistrict - stress	Mnddstrct Stress
Fear Fighter	Fear Fighter
Fighting the Blues	Beating the Blues
Sleepio	Sleepio
Daylight	Daylight
OCD-NET	OCD-NET
BDD-NET	BDD-NET
Deprexis	Deprexis
Regul8	Regul8

# Annex 2 – Digital enabled therapies pathway diagram



Digital enabled therapy may be offered at any point in the pathway. E.g. during assessment

Patient may also have other non-DET appointments throughout referral

- Clinical time supporting DET, may consist of:
- Therapeutic contact with the patient (online messaging, planned DET reviews..)
  - Time spend reviewing progress and outcome measures
  - Time spent sorting out technical access/issues
  - Risk assessment

**Version 2.1 Data Set – data points**

Care Professional Activity Log – IDS205  
- Weekly summation of time spent supporting DET (as above).

**January 2026 update:** Weeks where no activity has taken place do not require an activity log to be submitted.

Specific care contacts and activities – IDS201/202  
- Any non-DET appointments would flow separately