

CARE OF PEOPLE WITH MENTAL ILLNESS DIRECTED ENHANCED SERVICE SPECIFICATION 2013-2014

Introduction

1. All practices are expected to provide essential and additional services they are contracted to provide to all their patients. This Directed Enhanced Service specification outlines the more specialised services to be provided. The specification of this service is designed to cover enhanced aspects of clinical care of the patient with severe mental illness, which go beyond the scope of essential services or the Quality and Outcomes Framework. No part of the specification by commission, omission or implication defines or redefines essential or additional services.

Policy Background

2. Together for Mental Health, the Strategy for mental health and well being in Wales was issued in autumn 2012. An all age strategy, it gives much greater emphasis on supporting all individuals to maintain and improve their health and wellbeing, greater engagement of patients in choices about their care and care close to home where appropriate. The Mental Health Strategy aims to address stigma and discrimination and ensure the values, attitudes and skills of those treating or supporting individuals of all ages with mental health problems is improved.
3. General Practice has a particular role to ensure that the physical health needs of people with mental illness are recognised and better met in terms of both prevention and addressing physical problems that may arise. It also has a key role in engaging with specialist services to ensure appropriate access and management and providing longitudinal care for those with identified mental health problems. The Mental Health Measure and Primary Care Mental Health Support services will support GP's and their teams in facilitating timely interventions in the primary care setting.

Background

4. This DES complements and builds on the Mental Health Clinical Area of the Quality and Outcomes Framework (QOF). The severe mental health indicators, including dementia but excluding depression are

currently allocated 66 quality points and represent an investment of £4.1M across Wales. The current Mental Health indicators are designed to ensure patients with specific severe mental illnesses receive a substantive annual review of their health needs and an agreed comprehensive care plan.

Aim

5. The aim of the Directed Enhanced Service is to engage the whole practice team including clinical, managerial and administrative staff to develop a clear and shared understanding of the experience of patients with mental health issues, the links to physical health, the needs of young people and the elderly and the management of self harm and threatened suicide. Informed teams can ensure that services respond effectively to patients needs, with patient experience a key priority.

Service Outline

6. Practices delivering the DES will be required to run an annual, practice based, mental health education study session of a minimum of 2 hours in length. This should aim to include the entire practice team in order to achieve some of the key objectives outlined in the Mental Health Strategy "Together for Mental Health."
7. Final payment will be based on a report to the LHB within 28 days after the end of the financial year, confirming the date of training sessions, programme content, a reflection of the learning achieved and any recommendations for service improvement.
8. The Practice must confirm that 85% of the primary care team have completed one of the priority topics training sessions.
9. Practices can select one each year from the following list of training topics:
 - Service user led training on understanding the experience of mental illness from a service user's perspective;
 - Mental health and physical co morbidities; health promotion and reducing risks and inequity in primary care;
 - Diagnosis and management of depression in the elderly;
 - Understanding the mental health needs of young people and local pathways and support, working with local CAMHS services;
 - Recognition and management of threatened suicide and self harm;
 - Early identification, effective management, advice and support for people with dementia and their carers.

Professional Quality Assurance

10. An evaluation of the appropriateness and impact of the training will be

undertaken in the 3rd year of the DES.

11. The practice must retain a record of the training sessions, including attendees, programme content, a reflection of the learning achieved and agreed actions. The record must be available to the Local Health Board on request.

Costs

12. Practices undertaking the DES will be able to claim a fee linked to their practice list size as recorded on the “Exeter” payment system. A fee of £100 per 1000 registered patients will be payable. Payments should be rounded down to the nearest whole pound, e.g. a practice with a registered patient list of 6,587 will be able to claim a payment of £658.