

Appendix 1



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Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board



CYNGOR
Sir Ddinbych
Denbighshire
COUNTY COUNCIL



The Mental Health (Wales) Measure 2010

Part 1 Scheme

Local Primary Mental Health Support Services

for

BETSI CADWALADR UNIVERSITY HEALTH BOARD

ANGLESEY COUNTY COUNCIL

GWYNEDD COUNCIL

CONWY COUNTY BOROUGH COUNCIL

DENBIGHSHIRE COUNTY COUNCIL

FLINTSHIRE COUNTY COUNCIL

WREXHAM COUNTY BOROUGH COUNCIL

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1. INTRODUCTION

This document sets out a joint Regional Scheme which determines how the statutory partners are to formally meet the requirements of Section 2, Part 1 of the Measure, the development and implementation of Local Primary Mental Health Support Services (LPMHSS); it is not an operational plan. However it does identify the care and treatment available for the Betsi Cadwaladr University Health Board area and secures provision for that area of the local primary mental health support services.

Part 1 of the Mental Health (Wales) Measure 2010 requires local mental health partners for a local authority area to take all reasonable steps to agree a scheme which identifies the treatment which is to be made available for that area and secures the provision of services for that area.

The Mental Health (Regional Provision) (Wales) Regulations 2012 enables schemes to be made on a Regional basis.

The Mental Health (Wales) Measure 2010 is a law made by the National Assembly for Wales. It has similar legal status to an Act of Parliament. The Measure introduces a number of important changes relating to the assessment, care and treatment of people with mental health problems in Wales.

The Measure is divided into six Parts and two Schedules:

- Part 1 – Local Primary Mental Health Support Services
- Part 2 – Coordination of and Care and Treatment Planning for Secondary Mental Health Users
- Part 3 - Assessments of Former Users of Secondary Mental Health Services
- Part 4 - Mental Health Advocacy
- Part 5 - General
- Part 6 – Miscellaneous and supplemental
- Schedule 1 - Consequential amendments to the Mental Health Act 1983
- Schedule 2 - Repeals

Part 1 of the Measure – Local Primary Mental Health Support Services, seeks to strengthen the role of primary care in delivering effective mental health care and treatment, and sets out the requirement that LPMHSS will be provided throughout Wales.

The statutory duties on LHBs and Local Authorities to provide these services will come into force from 1st October 2012. These services will be delivered by Local Health Boards and local authorities in partnership, and it is expected that these services will operate either within, or alongside, existing GP practices.

The 5 key functions of LPMHSS are:

- i. Comprehensive mental health assessments
- ii. Local primary mental health treatments
- iii. Supporting onward referral and co-ordination
- iv. Provision of information and advice to individuals and carers
- v. Provision of support and advice to professionals

As described in the National Service Model the objectives of LPMHSS are to:

- Increase the availability and uptake of mental health services at the primary care level in order to improve outcomes for individuals of all ages and to increase effectiveness and efficiency in accessing secondary care, where this is indicated;
- Provide for people of all ages across North Wales area, i.e. Gwynedd, Anglesey, Conwy, Denbighshire, Flintshire, Wrexham; effective LPMHSS that are accessible and close to those who require them. These services should be appropriate, acceptable and outcome-focussed, with an emphasis on promotion of an individual's well-being, recovery and resilience, in partnership with the third sector;
- Work with and develop close relationships with GPs, practice staff and other relevant partners and stakeholders, and to provide support, consultation, advice on clinical management, education, training, and liaison in order to develop capacity for, and approaches to, managing mental health problems in primary care.

In the North Wales area this will be achieved by:

Preventing deterioration and promoting recovery and well-being by;

- Providing support, consultation, advice on clinical management, education, training, and liaison;
- Increasing the capacity at primary care level for appropriate assessment, targeted brief interventions, onward referral, advice and information for people of any age with any form of mild to moderate mental health problems. This will include psychosocial, behavioural and emotional difficulties experienced by children and young people, and memory impairment experienced by older adults;
- Providing wider access to effective psychological therapies;
- Promoting the rights of individuals to access these services in the Welsh Language;
- Providing wider access to an availability of mental wellbeing services, at the primary care/universal level delivered in languages (other than English or Welsh) according to the needs of the local population;
- Ensuring intervention to promote early and accurate diagnosis, and appropriate and timely follow up, to improve emotional wellbeing and mental health outcomes, reduce the risk of the individual's condition worsening and, where appropriate, helping individuals to sustain employment and education by signposting to appropriate services;

- Involving individuals, and their carers where appropriate, in the individual's care and treatment and supporting and encouraging them in their own mental and physical health self-management;
- Appropriate prescribing for mental health conditions at primary care level, improving medication management and encouraging compliance with medication that is prescribed;
- Non-medical prescribing e.g. bibliotherapy, exercise
- Assisting Primary Care in promoting and addressing the physical health needs of those who access mental health services at primary care level;
- Increasing the speed and appropriateness of referrals to secondary care mental health services through streamlined referral processes and effective communications, ensuring that individuals are supported at the level of care most appropriate to their need;
- Developing and maintaining effective interfaces with relevant services in all sectors to support individuals in their social and physical health needs to benefit their mental health;
- Reducing discrimination and improving community awareness through increased local provision and local access; and
- Assuring the effectiveness, efficiency and quality of the services provided.

In conjunction with the scheme an Operational Framework is being developed. The Operational Framework will provide greater operational detail and guidance as to how the scheme and its accompanying service models will be implemented.

2. PARTNERS

The Scheme covers the area of North Wales and the statutory partners are:

- Betsi Cadwaladr University Local Health Board
- Gwynedd Council
- Anglesey County Council
- Conwy County Borough Council
- Denbighshire County Council
- Flintshire County Council
- Wrexham County Borough Council

Who provide the service in non-statutory partnership with the following:

- General Practitioners and General Practice staff
- Third Sector
- Service Users
- Families and Carers
- Independent Sector
- Criminal Justice System

3. PURPOSE/SCOPE OF THE SCHEME

This scheme identifies the local mental health partners who have responsibility under the Measure for providing LPMHSS to the local authority populations covered by BCUHB. It identifies the local primary mental health treatments which are to be made available and sets out the arrangements for securing the provision of those services. It identifies the extent of the responsibilities of each of the local mental health partners for the provision of these services and sets out how referrals from secondary care will be accepted under the scheme.

LPMHSS provide local access to support people of all ages who have mild to moderate mental health problems. This includes psychosocial, behavioural and emotional difficulties experienced by children and young people as well as memory impairment experienced by older people.

The principal focus of the primary mental health response is about promoting, prevention, early intervention and de-stigmatising approaches to mental health issues.

The service enriches and enhances relationships between primary and secondary mental health care without creating duplication. The specific primary mental health services that are delivered include:

- Comprehensive fit for purpose mental health assessments for individuals who have first been seen by a GP, and for whom the GP considers a more detailed assessment is required, or who are referred through secondary mental health services;
- Short term interventions either individually or through group work, if the initial assessment has identified this as appropriate. Such interventions include counselling, a range of brief psychological interventions including cognitive behavioural therapy, solution focussed therapy, online support, stress management, bibliotherapy and education;
- Supported onward referral and the coordination of next steps within a stepped care process, where this is felt to be appropriate for an individual;
- For Children's services, provision of support, consultation, advice on clinical management, education, training, and liaison to a range of health, education, social care and other professionals to enable them to safely manage and care for people with mental health problems;
- Provision of support, training and advice to GPs and attached staff to enable them to safely manage and care for people with mental health problems, promoting a recovery approach and a positive attitude to mental health wellbeing;
- Provision of information and advice to individuals and their carers about interventions and care, including the options available to them, as well as 'signposting' to other sources of support and helping them to access these services.

4. VISION

The National Service Model for LPMHSS (2011) sets out that the overall objectives of LPMHSS are to:

- a) Increase the availability and uptake of mental health services at the primary care level
- b) Provide for people of all ages across Wales, effective primary mental health support services that are accessible and close to those who require them.
- c) Work with and develop close relationships with GPs and practice staff.

In North Wales our vision for LPMHSS are:

- To deliver responsive and flexible services which put the individual at the heart of the service which enables people to recover and lead a good quality of life which supports choice.
- Individuals, their carers and families are fully involved in the centre of care and treatment.
- For children and young people, services that focus on the early detection of risk, the development of resilience and the development of life skills.
- For people of working age, services that focus on ensuring that they live as full and independent lives as possible.
- For older people particular emphasis on prevention and re-ablement.

Clear communication in terms of language and culture is essential to ensure patients and carers are truly involved, and receive the best possible care and treatment. In Wales, this means bilingual (Welsh and English) services available wherever possible.

5. RESPONSIBILITIES OF PARTNERS

Part 1, section 3 of the Measure states that local mental health partners for a local area must provide local primary mental health support services in accordance with a scheme for their agreed area.

The Health Board is the lead agency for the scheme and each of the partner organisations will maintain employment responsibility for those staff providing LPMHSS either as direct LPMHSS workers (BCUHB, Flintshire County Council and Wrexham County Borough Council) or as part of general mental health staff in the other counties.

For North Wales the mental health partners are committed to meeting the requirements of Part I of the Measure in partnership and it is agreed that any

new Welsh Government investment will be used to supplement the existing LPMHSS services in place across North Wales.

The Health Board is the lead agency for the scheme and each of the partner organisations will maintain employment responsibility for those staff providing LPMHSS either as direct LPMHSS workers (BCUHB, Flintshire County Council and Wrexham County Borough Council) or as part of general mental health staff in the other counties.

General Practitioners will remain responsible for providing services to patients as outlined within the general medical services contract. The LPMHSS will enhance the range of services available to patients in primary care.

Primary mental health practitioners are responsible for providing:

- Assessment (within 28 calendar days)
- Treatment (individually or through group work and normally within 6-10 sessions,)
- Signposting
- Education and training to primary care staff, and
- Advice and support for individuals, carers and families

6. ELIGIBILITY FOR ASSESSMENT AND REFERRAL

LPMHSS are available for individuals of all ages; from children and young people to older adults who have been referred by a GP, or, as this scheme allows, from secondary care, for an initial assessment.

Sections 6 -8 of the Measure set out the duties to carry out primary mental health assessments in relation to the three categories of referrals which may be made to the service

- Patients who live in the local authority area and are registered with the GP (practice) who refers them (s6)
- Patients not living in the local authority area,/not having a usual address/ not registered with the GP – (s7) and these are now covered by the Mental Health (Primary Care Referrals and Eligibility to conduct primary mental health assessments) (Wales) Regulations 2012 or particular categories of individual would not otherwise be entitled to an assessment, if the scheme so provides – (s2 (4) (b) and (c) refers and then s7 applies)
- Referrals from secondary care if the scheme allows (s S4 refers and then s8 applies)

This scheme allows for referrals to be made from secondary mental health services to the local primary mental health support services but does not provide for referrals to be made in respect of any particular categories of individual, as all are now covered by the Mental Health (Primary Care

Referrals and Eligibility to conduct primary mental health assessments) (Wales) Regulations 2012. In respect of referrals from secondary care, this scheme provides that a consultant or manager working in secondary mental health services may make a referral to the LPMHSS in respect of an individual subject to the provision of the Mental Health Act 1983, or in receipt of secondary mental health services.

The mental health partners also support the continued right of allied professions to refer to the LPMHSS where appropriate and as agreed in local pathways so as not to break existing and effective routes into equivalent services, recognising that they are not provided for under the terms of the Measure.

Referrals should only be made in respect of individuals (of any age) who present with any form of mild to moderate and/or stable severe and enduring mental health problem, regardless of whether that individual may also be experiencing any co-occurring condition such as a learning disability or a substance misuse problem. An individual subject to section 117 of the Mental Health Act 1983 may be referred to the service, provided that they are eligible via one of the referral routes outlined above, and it is appropriate to do so given their clinical presentation.

A referral will be a request from a GP to the LPMHSS to see someone in the surgery where possible or if not in the locality, and the referral systems is designed to not be overly complex. Appropriate record keeping together with a secure method of information sharing is in place.

The BCUHB standard for the maximum length of time between a referral being received by a LPMHSS and the assessment being carried out is 28 calendar days, in accordance with the target set in the National Service Model.

Operational Frameworks have been developed (adults and children) which include Clinical Protocols for referral for assessment and will be reviewed at least annually to ensure they remain relevant to local need, and that the skills of the LPMHSS staff are being used appropriately.

The North Wales LPMHSS is not appropriate for all individuals with mental health problems who present to GPs. Where a GP considers that other services within the mental health care system would be appropriate to meet an individual's needs, the GP should continue to refer them to these local services (e.g. Community Mental Health Teams, specialist CAMHS, substance misuse services etc). The GP may wish to be guided and supported in relation to the appropriate referral of individuals through consultation with, and/or advice from, the LPMHSS. The aim is to facilitate all new requests for mental health services for children and young people through a single point of access based on discussion of presenting concerns.

The agreed referral process including boundary issues and associated documentation is included in the Operational Frameworks.

7. EQUALITY

The Equality Act 2010 extended the public sector equality duty to all protected characteristics, which are defined as age, disability, sex, religion and belief, pregnancy and maternity, gender reassignment, ethnicity, sexual orientation and marriage/civil partnership.

Each partner organisation has published a Strategic Equality and Human Rights Plan (SEP) which includes a commitment to embedding equality impact assessment into everything they do in order to ensure that the services they are responsible for are delivered in ways that are consistent with the duty which requires us to:

- eliminate unlawful discrimination, harassment and victimisation;
- advance equality of opportunity; and
- promote good relations between different groups.

The Partners will undertake a full Equality Impact Assessment of the Scheme by 30th September 2012 and publish the outcome.

8. PROVISION OF SERVICES IN WELSH AND ENGLISH

The Welsh Language Strategy 2012-17, 'A Living Language: a language for living' sets out a clear aim to strengthen the use of the Welsh language in everyday life.

The Welsh Language Measure imposes duties on organisations to: provide services in Welsh; consider the impact of policy decisions on the Welsh language; promote the use of Welsh in the workplace; promote and facilitate the use of Welsh more widely; keep records of compliance with standards and complaints.

LPMHSS will wherever possible be provided in the language of choice of the service user, and where local services find this difficult, make every effort to arrange for the language choice to be fulfilled. The chosen language of the service user will be recorded.

9. WHERE SERVICES ARE TO BE PROVIDED

The LPMHSS are a specialism in the community and they operate within or alongside existing GP practices, or other settings as deemed appropriate.

10. LOCAL PRIMARY MENTAL HEALTH SUPPORT SERVICES

A schedule of the primary mental health treatments and services secured by the scheme, is set out in appendix 1

LPMHSS are operationally managed by the Health Board. and interventions are recovery-focussed, with clear expected and documented outcomes, and are underpinned and quality assured by evidence-based approaches. They are based on a thorough assessment of each individual and delivered by suitably skilled and trained staff that are appropriately supervised and managed. Wherever possible, the interventions agreed will support individual self-management, health promotion and prevention of deterioration.

Care plans that are proportionate to need, will be developed for individuals treated within the service. The care of people who are seen within the LPMHSS under the services listed in Appendix 1 will not normally be subject to care and treatment planning, although some individuals whose care is already subject to care and treatment planning may also be seen within the LPMHSS. In such circumstances their care coordination and care and treatment plan will remain in secondary care.

Currently different arrangements exist for record keeping but the LPMHSS will move towards primary care held records within appropriate governance frameworks.

Discharge from the LPMHSS will occur at the point that no further intervention is required. This may be due to:

- Successful completion of treatment
- Signposting to other services
- Referral to secondary mental health services
- Service user no longer wishes to use the service

LPMHSS spend approximately 10% of their time in supporting primary care practitioners to develop capabilities in mental health. In addition, time will be spent supporting practitioners from other relevant agencies to develop skills and capabilities in recognising and (where appropriate) providing community based support to promote mental health and well-being and enhance coping skills e.g. staff from Education or Social Services.

11. PARTNERSHIP ARRANGEMENTS AND GOVERNANCE

While accountability and responsibility for the scheme rests with the individual partner organisations, the health Board is the lead agency for LPMHSS.

A Mental Health Collaborative for adults, families and children (including involvement from education) will be established by the Partners, and administered initially by Health Board, to oversee the operation of the Scheme and the other parts of the Mental Health Measure. Detailed Terms of Reference will be developed. The Mental Health Collaborative will report to

the North Wales Social Services Improvement Collaborative (NWSSIC) and BCUHB Quarterly Strategic Forum, who will ensure onward reporting to appropriate governance arrangements in the partner organisations.

The North Wales Mental Health Collaborative will monitor the resources associated with the LPMHSS and will in the first instance consider and attempt to resolve any disputes regarding finance.

12. MANAGEMENT ARRANGEMENTS FOR THE LOCAL PRIMARY MENTAL HEALTH SUPPORT SERVICES

For adult services, LPMHSS are jointly managed by the partners with each organisation accountable for their own staff.

For children and families the LPMHSS provision will be managed through the BCUHB CAMHS arrangements.

13. FUNDING

The additional indicative funding notified to BCUHB, from Welsh Government, for the provision of services in relation to Part 1 of the measure is £810,000, although only partial funding is available for Year 1 (2012/2013). This funding will supplement existing investment and be utilised to employ additional primary mental health workers and commission additional allied services from the third sector.

There is no intention at present to pool funds formally and enter into a Section 33 agreement in relation to the scheme.

The Partners are committed to undertaking an extensive process of resource mapping to identify existing and new investment in LPMHSS

A review of third sector commissioned services will be undertaken, separately to the Measure, to reduce any duplication and maximise investment potential.

In addition to the allocation from Welsh Government, the partner organisations will take into account existing resources and will identify where resources can be re-allocated or shared with LPMHSS.

Funding arrangements and the sharing of information, resources, accommodation, staff and reporting will be managed through the North Wales Mental Health Collaborative

14. PERFORMANCE MANAGEMENT

Robust performance management arrangements will be developed to monitor the impact of the services. As a minimum the following information will be collected and reported to the Partnership, with a view to developing more sophisticated outcome measures.

- The number of primary care practitioners per 20,000 population (all ages)
- The number of assessments undertaken
- Waiting times for assessment (in calendar days) against the target of 28 calendar days
- Waiting times for interventions, where indicated (in calendar days)
- The number of completed interventions (to include treatment, referral or information)
- User, carer and GP satisfaction levels
- Demand for and delivery of services through the Welsh language

Requirements for reporting against these performance measures are to be issued by the Welsh Government.

Additionally, the service will undertake regular local audits against standards in relation to access, outcomes, appropriateness and acceptability for the five functions of the service. This will support improvements in practice and give stakeholders assurance about service delivery. The expected benefits and required quality standards should be determined at the outset of service development and reviewed regularly.

15. GOVERNANCE OF THE LOCAL PRIMARY MENTAL HEALTH SUPPORT SERVICE

Throughout the duration of an individual's contact with the LPMHSS, clinical responsibility for the individual is shared between the service and the GP, in respect of individuals who have accessed the service via the GP.

Clinical responsibility for individuals who access the LPMHSS via secondary mental health services remains with the secondary mental health service. Individual professionals are however, accountable for their own professional decisions.

The Mental Health (Primary Care Referrals and Eligibility to Conduct Primary Mental Health Assessments) (Wales) Regulations 2012 sets out the professional requirements for a person to be eligible to conduct primary mental health assessments. The mental health partners will establish arrangements to ensure that they are satisfied with the skills and experience of the staff that are to conduct mental health assessments. The North Wales Mental health Collaborative will monitor the LPMHSS workforce and ensure the mental health partners are adequately fulfilling this role.

16. FREEDOM OF INFORMATION

The Partners acknowledge that they are subject to the requirements of the FOIA and the Environmental Information Regulations and shall assist and cooperate with each other (with costs being shared between the partners) to enable any Partner to comply with any information disclosure requirements.

The Partners acknowledge that each is subject to the requirements of FOIA, and shall assist and co-operate with one another to enable each Partner to comply with these information disclosure requirements, where necessary.

17. DATA PROTECTION AND INFORMATION SHARING

Each Partner will ensure that they comply with any notification requirements under Data Protection Legislation.

The Partners will share information about Service Users to improve the quality of care and enable integrated working under established arrangements in place.

18. CONFIDENTIALITY

As per section 42 of the Measure local mental health partners may supply to other partners information obtained in the discharge of its functions under Part 1 or 3 of the Measure which relates to an individual for whom LPMHSS are being or might be provided in respect of.

19. CONCERNS

The partners recognise that suggestions, comments, incidents and complaints can be a valuable source of information in maintaining and improving standards of care. The aim is to learn from these and use them positively to improve quality of care.

A “concern” means any complaint, notification of a patient safety incident or, save in respect of concerns notified in respect of primary care providers or independent providers, a claim for compensation.

All “concerns” are dealt with in line with policy and procedure of the provider of LPMHSS or commissioner of any third sector services as identified in this scheme.

20. PROMOTING THE LOCAL PRIMARY MENTAL HEALTH SUPPORT SERVICES

An integrated communication plan for the LPMHSS will be implemented across the partnership, including stakeholders groups, service users and carers.

The communication hubs of the Partners will be used to signpost the LPMHSS for primary, community and secondary services to enhance access and awareness.

21. ARRANGEMENTS FOR REVIEW OF THE SCHEME

The scheme will be reviewed quarterly by the North Wales Mental Health Collaborative and recommendations for any changes communicated to NWSSIC and BCUHB for formal approval.

Signatories to the Scheme

Each partner by way of signature confirms that the information contained in this scheme together with all appendices and attachments, is current and correct as at the date of signing, their acceptance and their acquiescence to comply. Should a revised edition of the scheme be produced it will not be legally binding until all partners have agreed by way of signature. In these circumstances the existing fully signed version will stand.

Betsi Cadwaladr University Health Board

Designation

Signed

Date

Anglesey County Council

Designation

Signed

Date

Gwynedd Council

Designation

Signed

Date

Conwy County Borough Council

Designation

Signed

Date

Denbighshire County Council

Designation

Signed

Date

Flintshire County Council

Designation

Signed

Date

Wrexham County Borough Council

Designation

Signed

Date

Mental Health Measure Part 1
Schedule of Primary Mental Health Treatments and Services

Adult and Older People

Primary Mental Health Services (providing assessment, evidence based psychological therapies and counselling, information and advice to primary care staff service users and carers, some of which will be provided by the third sector)

Mental Health General Hospital Assessment Services
Criminal Justice Service (as relevant to assessed needs)
Veteran's Mental Health Service (as relevant to assessed needs)
Prescribed Medication Service
Memory Clinics

Children and Young People

Primary Mental Health Services (providing assessment, evidence based psychological therapies and counselling, information and advice to primary care staff service users and carers)

Mental health awareness training for professionals
Skills training with on-going support for professionals
Bibliotherapy
Information and resources to support self help

'Initial Discussion' to determine mental health service need

Advice and information
Signposting
Universal and targeted group work for young people
Targeted group work for parents
Professional consultation including joint work where appropriate

Mental health assessment in primary care and community settings

Outcome focused brief work with children, young people and parents

- Guided self help
- Cognitive behavioural therapy
- Solution focused therapy
- Interpersonal therapy
- Behavioural programmes
- Family work

Outcome focused evidence based group programmes for young people and parents

- 'Friends' (children and young people)
- Incredible Years (parents)

Additional programmes defined at local level through Children and Young People's Plans (CYPP) e.g. universal approaches to parenting, Seasons for Growth