

BRIEFING FOR OSC

County Durham and Darlington Clinical Commissioning Groups' – Talking therapies procurement

Purpose of this paper

NHS North Durham, Durham Dales Easington and Sedgfield and Darlington CCGs are working together to improve the delivery of delivering Mental Health Primary Care Talking Therapies as a key commissioning intention. Talking therapies include primary care psychology, improving access to psychological therapies and primary care counselling.

These services are currently delivered by many different organisations and individuals across each CCG area, both small and large.

The purpose of this briefing is to advise the members of the intention to procure an improved service, giving the reasons for this approach, how local services users, groups and stakeholders are being involved and to ask for any comments they may have about the current services and how this information will be used to shape the model for talking therapy services across Co Durham and Darlington.

Reasons for changing the model

Onward referral – there is a tendency for service users to be referred to one service and stay there. There is a chance that on-going referral to the best clinical support for that individual may be missed and this has been identified as a potential clinical risk, in line with current national best practice.

'Bounce-backs' – there are occasions when an individual has been referred to a service only to be sent back to the GP, and when referred to an alternative service, the individual has been sent back to the practice. This is unacceptable for a good patient experience, not only increases the waiting time for service users but also puts extra pressure on local practice staff.

Minimum dataset – with the current range of providers and under existing contracts, it is not possible to effectively monitor outcomes for individual patients through a minimum dataset using NHS computer links and data systems. This is a national requirement for all talking therapy services.

National tariff for mental health – there is a need to 'Future Proof' the services for each provider to be paid through a forthcoming implementation of a national NHS tariff for mental health

Service standards – the current system means that there are many individual counsellors who are contracted to deliver talking therapy services in the area. There are checks and balances in the current system for individuals, but there are still elements of risk associated with this type of contracting which involves many independent individual providers.

An improved system gives the CCGs the opportunity to make sure:

- there is a single access point
- services are more co-ordinated
- there is an improved choice of therapy and therapist
- people can receive other interventions while they are waiting for a particular type of therapy
- other services for local residents can be included in the future, such as a rapid response suicide prevention service.

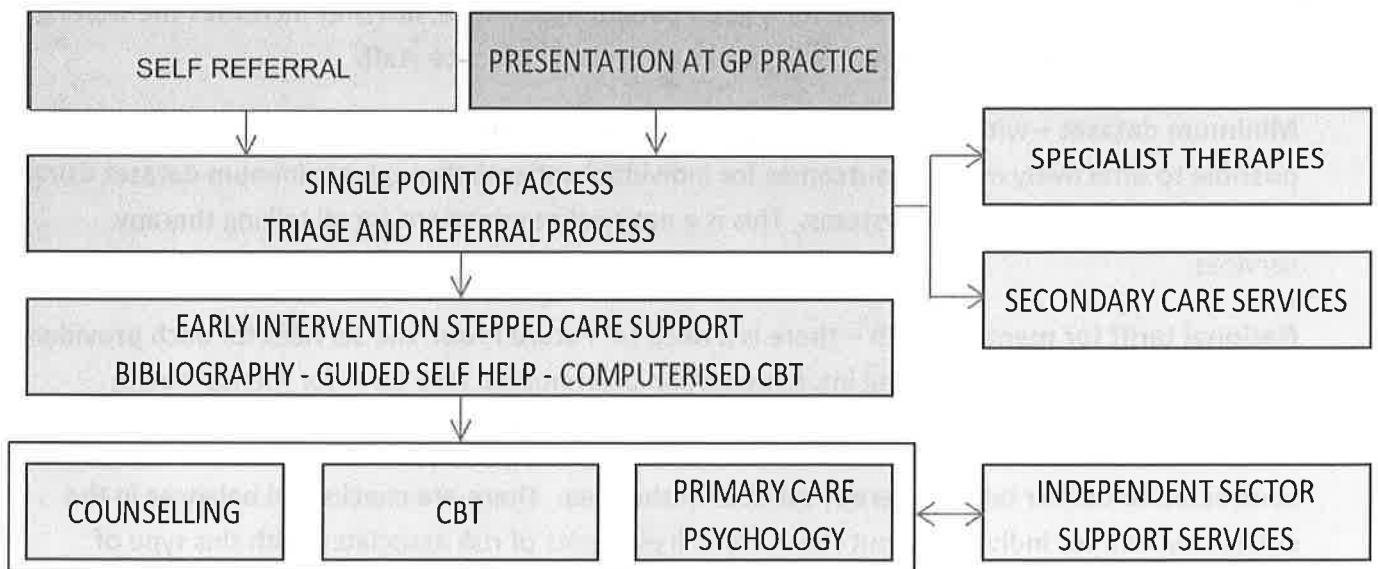
Patients will see an enhanced service as a result. GP commissioners will make sure there is a focus on the same high quality services for a broad range of primary care mental health conditions and reducing duplication across Co Durham and Darlington.

A suggested new model

The CCGs have been discussing this with their member practices and getting feedback on how they feel the system is running. The only agreed elements of the model at the moment are the need for an integrated model of care, a central assessment point and delivery of existing elements of talking therapies: counselling, CBT (cognitive behavioural therapy), and primary care psychology. This is shown in the diagram below.

The key elements will be to improve and streamline the referral process, improve access and develop a stepped model of care to make sure people in need of talking therapies services receive the right level of service at the right time, including a choice of treatment options. There is also work to improve clinical information on patients and outcomes and future proof the service in terms of possible moves to Payment by Results in Mental Health that will need to be undertaken.

The services could be delivered in a number of different locations within the area, which will be identified by the potential provider. However there will be a focus on delivering services locally.



Existing staff

The current services and independent staff will continue to operate during 2014/15 as it has in previous years. Counsellors received a letter for 12 months' notice on the current service they provide and it is recognised there may be some service disruption if staff attempt to find alternative employment. The new provider can decide to employ counsellors, or sub-contract with service providers. There may be little effect to the current delivery model for service users other than the improved access and range of services described.

Current activity and next steps

Pre-engagement is being undertaken during June to gather further views of service users, public, service providers, GPs, practices and other local stakeholders. Their views will be used to shape the service as it is very important that the service specification is developed to meet the needs of the local population and continue to develop talking therapy services as an integral part of the local healthcare system, providing treatment and support for all the people served by the CCGs.

A procurement team is further developing the model and will write a service specification using national best practice, existing information gathered and those key messages from the pre-engagement process. Once finalised, a formal procurement process is expected to start in July and the new service should start to see patients from 1 April 2015.

Talking Therapies

Communications and Engagement Action Plan

Stakeholder	Activity	Task	Who's responsible	Timescale	Progress
Durham County Council Overview and Scrutiny Committee Darlington Borough Council Health and Partnership Scrutiny Committee Healthwatch	Liaison with Adults, Wellbeing and health Overview and Scrutiny	Develop brief and discuss engagement with OSCs	NECS/CCGs	w/c 2 June 2014	Complete
		Develop a brief and liaise with Healthwatch regarding input/support	NECS	w/c 16 June 2014	Complete – briefing circulated by Healthwatch
MPs	Briefing to MPs	Prepare and circulate briefing/letters to local councillors	CCGs	w/c 16 June 2014	Complete – Chief Clinical Officer and Chief Operating Officers to discuss with their MP's.
Counsellors and providers	Link to survey	Prepare email with link to survey to be sent out	NECS	w/c 16 June 2014	Complete – briefing emailed
Local Press	Press release	Press release to be developed	NECS	w/c 16 June 2014	In progress
Local mental health groups	Discussion, briefing and survey to be sent to local mental health groups	Letter and paper copies of survey to be circulated due to meetings already held.	NECS	Early July 2014	Complete

Stakeholder	Activity	Task	Who's responsible	Timescale	Progress
	Engagement documentation	Survey Letter Briefings to be drafted and authorised by CCG's	NECS	w/c 16 June 2014	Complete
Community and voluntary sector, patient reference groups and other identified stakeholders/partners	Circulation of briefing to community and voluntary sector, patient reference groups and other identified stakeholders/partners	Prepare letter, briefing and engagement material Circulate briefings/letters	NECS NECS	w/c 9 June 2014 w/c 16 June 2014	Complete Complete
GP practices	Email practice managers re survey	Email briefing and link to survey to practice managers	NECS	w/c 16 June 2014	Complete
Durham Community Action	Wider engagement	Dedicated wider engagement with specific groups using survey	NECS	w/c 16 June 2014	Complete
My NHS	Wider engagement	Briefing and survey link emailed and posted	NECS	w/c 16 June 2014	Complete
	Websites	Information on CCG websites with link to online survey Information on local authority website with link to online survey Article in community newsletters	NECS NECS NECS	w/c 16 June 2014	Complete

Stakeholder	Activity	Task	Who's responsible	Timescale	Progress
	Evidence log	Prepare log	NECS	On-going	
	Analysis, response handling reporting	<p>Manage ongoing handling of responses</p> <p>Log, collect and collate responses from web, email and meetings</p> <p>Summarise and provide analysis of responses received</p>	NECS	On-going	
	Final Reporting and Communication	<p>Report to be presented to CCG</p> <p>Feedback to be presented on CCG website</p>	NECS	To be completed by July 2014	

