

GOVERNANCE FRAMEWORK FOR SENIOR MENTAL HEALTH PRACTITIONERS

Newry & District GP Federation

April 2020



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1. Introduction

This paper sets out the proposed governance framework to support the introduction of Senior Mental Health Practitioners into General Practice Primary Care teams.

STRATEGIC CONTEXT

The need for, and demands placed on, health and social care in Northern Ireland are growing and will continue to increase, chiefly because of an aging population, higher prevalence of chronic conditions as well as advances in technology and drug therapies. Other pressures arise from increasing patient expectations and changes in the way services are delivered. This is happening at a time when resources available for health and social care are reducing in real terms. There are growing pressures on General Medical Practitioner (GP) Services, whilst spend on services is relatively static.

In order to manage demand better and continue to improve quality of life and life expectancy, there is recognition that the health system needs to change and transform.

Health and Wellbeing 2026 – Delivering together published in October 2016¹ sets out a tenyear plan to reform health and social care. The Minister for Health in delivering this ten-year vision recognised that the current system is at breaking point and no longer sustainable. Her plan sets out a range of priorities including a focus on keeping people healthy and a new model of care involving a team of professionals based around GP Practices. Recognition that effective service provision will only be delivered by multi professional teams to include Senior Mental Health Practitioners.

The Bengoa Report – Systems, NOT Structure October 2016 ² further recognised the need to formally empower and build capacity in GP Federations and develop innovative Primary Care based models that will allow non-medical staff to work in a way that makes the most of their skills.

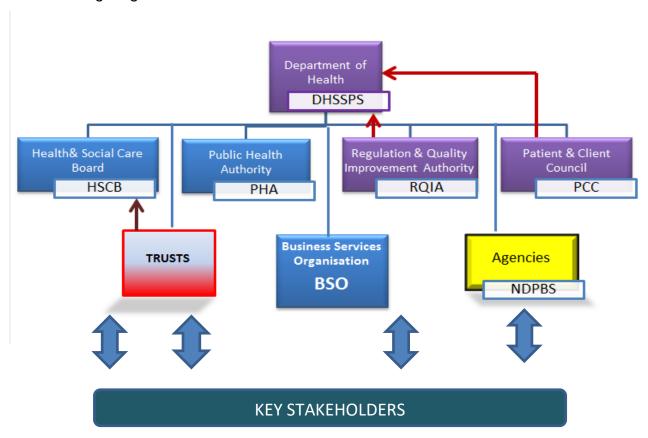
¹ Health and Wellbeing 2026 – Delivering together published in October 2016 ni.gov.uk/publications

² The Bengoa Report – Systems, NOT Structure October 2016 - Department of Health NI Final Version 1.0 April '20

1.2 STRUCTURE OF HEALTH AND SOCIAL CARE DELIVERY IN NORTHERN IRELAND

The Department of Health (DoH) is responsible for the organisation of the delivery of health and social care to the population of Northern Ireland. It does this through various commissioning and delivery organisations and independent contractors such as General Medical Practitioners, Pharmacies etc.

The following diagram sets out the main bodies involved:





KEY

HSCB Health and Social Care BoardLCGs Local Commissioning GroupsPHA Public Health AuthorityBSO Business Services Organisation

RQIA Regulation and Quality Improvement Authority

PCC Patient and Client Council

AGENCIES - Special Agencies (Northern Ireland Blood Transfusion Service, Northern Ireland Medical and Dental Training Agency)

Final Version 1.0 April '20

The Health and Social Care Board (HSCB) is responsible to the DoH for commissioning, performance management and resource management of the entire health and social care system in Northern Ireland. HSCB, through their respective Local Commissioning Group, commissions services from five Health and Social Care Trusts. HSCB also holds contracts for delivery of service from each of the Family Practitioner Service Areas (General Medical Services (351 practices), General Pharmaceutical Services (534 practices), General Dental Services and General Ophthalmic Services). In 2015/2016 GP Practices have formed notfor-profit companies consisting of all GP practices in an area. These Federations of practices cover populations of 100,000 people with membership drawn from 20 GP practices in that area. Seventeen Federations have now become incorporated and they are proposing to organise the delivery of primary care services in their area. HSCB currently contracts with GP practices which can then subcontract to another provider. With the establishment of Federations, GP Practices will, as a group, sub-contract to their local Federation.

1.3 WORKFORCE CONTEXT

General practice in the region is experiencing enormous pressure. Evidence as outlined in 'The Case for Change' ³ published in 2015 indicates that the growth in the GP workforce has not kept pace with the demand for GP services. The shortage of GPs to meet the ever-growing demand is one of the current critical workforce constraints in the region. Current trends will also show that young doctors are choosing not to enter general practice, and many are looking to work less than full time or retire early.

"Health and Wellbeing 2026: Delivering Together" is a 10-year plan for transforming health and social care in Northern Ireland. This report sets out a vision for an enhanced Primary Care service as part of a wider set of Health and Social Care (HSC) reforms. Central to this vision is the need to move away from a system based largely on health and social care professionals working independently to a genuine multidisciplinary form of working. It is therefore proposed that the reform of Primary Care should focus on the introduction of Multidisciplinary Teams (MDT) in General Practice.

Northern Ireland is reported to have the highest prevalence of mental ill health in the UK with 25% higher overall prevalence of mental health problems in Northern Ireland than in

England^{4.} In addition, GPs estimate that Mental ill-health accounts for a significant percentage of their daily workload in general practice, either as the sole problem or a major part of the presenting problem. GPs also indicate that patients who present with mental health problems tend to consult more frequently and have longer consultations than those without mental illness and therefore place a high workload demand on general practice.

1.4 THE ROLE OF THE SENIOR MENTAL HEALTH PRACTITIONER

- 1. <u>Part of Integrated MDT:</u> The senior mental health practitioner will work alongside GPs as a core member of the General Practice MDT.
- 2. <u>Lifespan Perspective:</u> The senior mental health practitioner will work across the lifespan and be capable of providing initial care and treatment to children, young people, adults and older people.
- 3. <u>Assessment and Clinical Formulation:</u> The senior mental health practitioner will provide first contact care and will undertake consultations and based on a standardised assessment pathway will provide an initial formulation of need, provide advice, watchful awaiting, provide initial treatment and/or signposting to other services.
- 4. <u>Early Intervention:</u> The senior mental health practitioner will provide initial treatment or intervention for patients experiencing emotional distress and common mental health problems, within Step 1 & 2 of the Stepped Care model (See Appendix 1), and in partnership with Primary Care Hub co-ordinators ensure effective case management for those requiring more intensive Primary Care talking therapies.
- **5.** Physical Health and Psychological Management: of GP patients who are stable and in recovery and no longer require secondary mental care.
- 6. Mental Health Primary Care Co-ordination: The senior mental health practitioner will have a critical role in signposting patients and will have a critical interface role with Child and Adolescents Mental Health Services, Primary Mental Health Workers, Primary Care Mental Health and Wellbeing Hubs, Recovery Colleges and Dementia Psychiatry of Old Age Team.

^{4.} A scoping report for the implementation of multidisciplinary teams in Primary Care, July 2018

Senior Mental Health Practitioner –Governance Framework

2.1 PROPOSED DEVELOPMENT

As part of the development of the General Practice MDT it is proposed that the Newry & District Federation will employ Senior Mental Health Practitioners who are experienced mental health practitioners with professional qualifications in either nursing, social work or occupational therapy.

2.2 ROLES OF EACH ORGANISATION

The Roles of Parties are as follows:

HSCB - **HSCB** will provide funding to each individual Practice via contractual agreement (Enhanced Service per GMS Contract 2004). This contract provides HSCB with shared responsibility for the management of this initiative.

A specification will be prepared and issued to the relevant practices detailing:

- Background and timeframe
- Aim
- Service outline
- Verification process
- Funding
- Payment process
- Reporting requirements

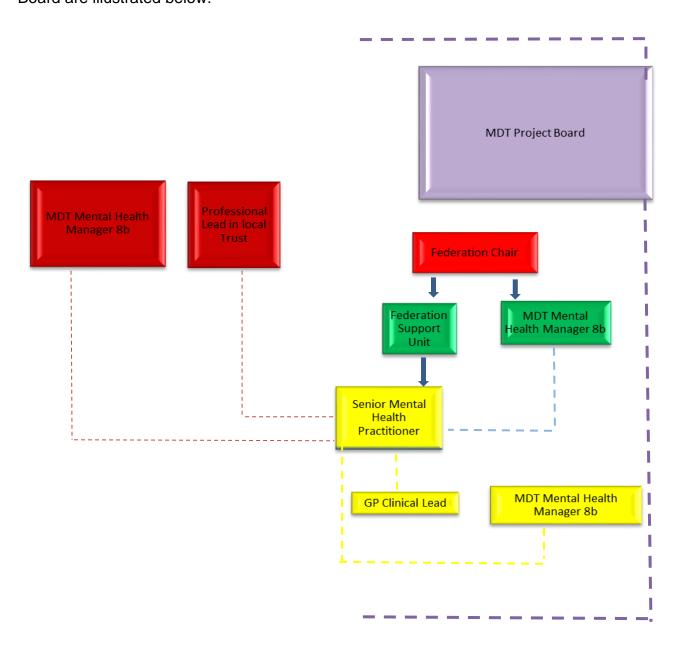
The staff within the HSCB integrated care directorate will use the good working relationship they already have with GP practices and their staff to support the introduction of Senior Mental Health Practitioners.

GP FEDERATIONS - The Newry & District Federation will employ Senior Mental Health Practitioners. The GP Federation will retain employer's responsibilities for these staff. The Federation will provide information to GP practices and HSCB where necessary in line with the terms of the specifications. The Federation will remain accountable to the GP

Practices for the provision of Senior Mental Health Practitioners to the terms of the subcontract agreement. The Chair of the Federations will be invited to the MDT Project Boards. Federation Support Units have been set up and will provide business and administrative support to the Newry & District Federation alongside operational management of the senior mental health practitioners.

2.3 LINES OF RESPONSIBILITY

The relationships between team members within a Federation, the Trust and the Project Board are illustrated below:





2.4 **SENIOR MENTAL HEALTH PRACTITIONER ROLE** -The Senior Mental Health Practitioner will be employed by the GP Federations. The role and function of the senior mental health practitioner is to work alongside the GP in his/her practice providing a first contact mental health service to patients who present in General Practice with a mental health issue (see job description and job specification at appendix 2).

The Senior Mental Health Practitioner will deliver skilled, evidenced based mental health assessments and short-term interventions to GP patients with a range of needs. The post holders will work primarily with people who are not eligible for or availing of other services from the Health and Social Care Trust either primary or secondary care services. It is envisaged that while the Senior Mental Health Practitioner may assess patients with the full range of mental health issues, they will only provide short term interventions with patients at step one or with patients on the perimeter of step two. The Senior Mental Health Practitioner will refer patients with higher level complex mental health conditions to more appropriate Health and Social Care Trust services.

The Senior Mental Health Practitioner will have specific areas of specialist or expert practice and will mentor and develop other members of staff and contribute to the training and professional development agenda according to their particular area of expertise. They will also contribute to the creation of a learning environment within the MDT. The Senior Practitioner will also provide consultation and advice to colleagues within the wider GP service.

The Senior Mental Health Practitioner will have additional skills that will enable them to work in a way that enhances general practice building up real, sustainable capacity and strengthening Mental Health and Multidisciplinary team working capability. The senior

Mental Health Practitioner will over time, up skill the current General Practice workforce to ensure a cohesive, flexible team.

Staff from a range of backgrounds and with a range of skills will be recruited as Senior Mental Health Practitioners including social workers, nurses and occupational therapists. Care will be taken to ensure that Senior Mental Health Practitioners do not duplicate the work of Trust based primary mental health care teams with clear protocols and referral pathways.

The Senior Mental Health Practitioner will work within the MDT Mental Health Team in GP Practice promoting effective inter-disciplinary and inter-agency relationships and acting as a link between patients, professionals and other services to ensure continuity of care. The senior mental health practitioner will work collaboratively with Trust community Mental Health teams and the Community and Voluntary sector to ensure effective management of the patient and carers needs.

The Senior Mental Health Practitioner will be accountable to the Federation Chair, responsible to the mental health manager within the practice(s) that they work and be professionally responsible to their identified professional supervisor. They are required to be professionally registered with their own professional body (NISSC, NMC, HCPC).

2.5 **MENTAL HEALTH SENIOR MANAGER -** The Mental Health manager will be employed by the GP Federation. The Mental Health manager will provide leadership and day to day management for the team of practice based Senior Mental Health Practitioners (see job description and job specification at appendix 3).

The Mental Health manager will set individual appraisal plans and review performance regularly against the agreed action plan. The mental health manager will share responsibility for the clinical supervision of practice based Senior Mental Health Practitioners with an appropriately qualified professional supervisor. In addition to 1:1 meetings with staff, regular team meetings will provide the vehicle to support and supervise Senior Mental Health Practitioners through activities such as case presentation and review.

The Mental Health manager will be accountable to the Federation Chair and responsible to the mental health lead GP within the practice(s) that they work. They are required to be professionally registered with their own professional body (NISSC, NMC, HCPC).

GP PRACTICES – all practices will sub-contract with the Newry & District Federation for Senior Mental Health Practitioners. Subject to a Local Enhanced Service all practices will remain accountable to the HSCB for meeting the requirements within their own practice. It is a requirement that practices will delegate authority for the operational management of the Practitioners to the Federation. Practices will also be required to have in place an agreement with each Federation to allow adequate reporting to be carried out. All GPs will support the senior mental health practitioners and in doing so ensure full understanding of their role.

PROJECT BOARD - The Project Board is jointly chaired by the Newry & District Federation Chair and the Director of Performance & Reform in the local Trust. Its membership includes the Director of Older People & Primary Care, the Director of Mental Health, the MDT GP Lead for Mental Health and the Primary Care MDT Project Manager at the Department of Health.

3. WORKFORCE DEVELOPMENT

Employment models for mental health practitioners in general practice across the UK have been wide and varied. To that extent there has been significant variation in Roles and Responsibilities and access to professional governance. As Northern Ireland begins the introduction of MDTs in Primary Care the Federated model of employment has been recognised as an opportunity to ensure a consistent, coherent and systemised approach to the introduction of these new roles. This model of employment will be used to reduce variance, promote consistency of practice, and support governance through shared models of professional supervision, mentorship learning sets and continuous professional development.

The professional governance arrangements, agreed with Professional Leads for the Southern HSC Trust, for senior mental health practitioners within the Newry & District GP Federation is detailed in appendix 4.

3.1 DEVELOPING THE ROLE OF SENIOR MENTAL HEALTH PRACTITIONER

The role of the Senior Mental Health Practitioner has been shaped by a scoping report of MDTs in Primary Care (July 2018).

The Senior Mental Health Practitioner will be from one of these professional backgrounds, namely nursing, social work or occupational therapy. As such they will be competent to practice autonomously using highly developed mental health assessment skills. They will be required to deliver first contact care, provide brief interventions and refer to other services as appropriate. Each practitioner will work within a defined scope of practice as set out by their professional regulator and agreed with their employer.

The Senior Mental Health Practitioner can:

- Provide care for patients of any age.
- See patients with undiagnosed, undifferentiated mental health conditions and deliver interventions based on a mental health assessment.
- Refer patients to secondary care.
- Undertake appropriate home visits.

The Senior Mental Health Practitioner working in the general practice team will have a wide range of skills, a broad knowledge base and the ability to deliver specific aspects of mental health services.



Appendix 1.

Stepped Care Model

Stepped Care is a system of delivering and monitoring treatments, so that the most effective yet least resource intensive, treatment is delivered to patients first; only 'stepping up' to intensive/specialist services as clinically required.

"Having the right service in the right place, at the right time delivered by the right person."

W	ho is resp	onsible for care?	What is the focus?	What do they do?
	Step 5:	Inpatient care, crisis teams	Risk to life, severe self-neglect	Medication, combined treatments, ECT
Si	tep 4:	Mental health specialists, including crisis teams	Treatment-resistant, recurrent, atypical and psychotic depression, and those at significant risk	Medication, complex psychological interventions, combined treatments
Step	3:	Primary care team, primary care mental health worker	Moderate or severe depression	Medication, psychological interventions, social support
Step 2:		Primary care team, primary care mental health worker	Mild depression	Watchful waiting, guided self-help computerised CBT, exercise, brief psychological interventions
p 1:		GP, practice nurse	Recognition	Assessment

JOB DESCRIPTION

JOB TITLE: Senior Mental Health Practitioner – Multidisciplinary Team

Primary Care (GP Practice)

REPORTS TO: Primary Care Mental Health Manager

ACCOUNTABLE TO: Federation Chair

PROFESSIONALLY

RESPONSIBLE TO: Identified professional supervisor (Social work, Nursing,

Occupational Therapy, and Psychology)

INITIAL BASE

LOCATION: Designated GP Practice(s) in Newry & District Federation area

GP Federations

In 2015/16, GP practices formed not-for-profit companies known as GP Federations. These Federations cover populations of 100,000 people with membership drawn from all of the GP practices in that area. The Health and Social Care Board (HSCB) currently contracts with GP practices which can then subcontracted to another provider. With the establishment of Federations, GP practices now, as a group, sub-contract to their local Federation. It is the GP Federation who will be the employer of the Senior Mental Health Practitioners in Primary Care.

Multidisciplinary Team (MDT)

In October 2016, "Health and Wellbeing 2026: Delivering Together" a 10-year plan for transforming health and social care in Northern Ireland was launched by the Department of Health (DOH). This plan was the response to a report produced by an Expert Panel led by Professor Bengoa tasked with considering the best configuration of Health and Social Care Services in Northern Ireland. A key element of this plan is the development of multidisciplinary teams (MDTs) of professionals working alongside GPs as first responders in general practice. Following a period of engagement with the Health and Social Care (HSC) system and service users the Department of Health (DOH) proposed that the HSCB commission multidisciplinary teams (MDTs) in General Practice in 2018/19. These MDTs are intended to deliver the vision set out in "Delivering Together" with an increased emphasis on a holistic model of health and wellbeing which includes physical, mental and social wellbeing with a greater focus on prevention and early intervention. The teams will be community facing and will use community development approaches.

The main role and function of these new multidisciplinary teams (MDTs) is to provide a first contact and brief intervention service to patients presenting in General Practice. Each multidisciplinary team will be made up of GPs, nursing staff, practice based social workers, senior mental health practitioners, pharmacists and physiotherapists.

The Senior Mental Health Practitioner can be from one of four professional backgrounds Social Work, Nursing, Occupational Therapy or Psychology. The Senior Mental Health Practitioner will be an integral part of the MDT working alongside other professionals in a seamless and coordinated way effectively meeting the holistic needs of the GP patient and their families.

Job Purpose

The post holder is responsible for ensuring the delivery of safe and effective care to the whole practice population. S/he will be highly specialist resource providing clinical expertise in care, advice and support within General Practice. S/he will lead and/or work within the multi-disciplinary team in order to ensure a seamless, coordinated approach to person-centred care, across the clinical pathway, and provide timely onward referral to other professionals and agencies as appropriate. Clinically the focus of the role is the delivery of evidence-based practice for patients/families, providing an initial assessment to patients of any age, presenting with undifferentiated undiagnosed mental health problems providing initial management including brief interventions or prescribing, where appropriate, and reviewing patients at the request of the GP S/he will work collaboratively with the whole general practice team to lead and/or participate in the provision of expert advice in developing, implementing and monitoring policies, procedures and protocols which meet national, regional and local requirements.

The fundamental role for mental health care practitioner within a GP Practice is to ensure that individual needs are met in a timely, appropriate and accessible manner. GPs estimate that mental ill-health accounts for a significant percentage of their daily workload in general practice, either as the sole problem or a major part of the presenting problem. GPs also indicate that patients who present with mental health problems tend to consult more frequently and have longer consultations than those without mental illness, and therefore place a high workload demand on general practice.

The role and function of the Senior Mental Health Practitioner is to work as a core member of the new MDTs alongside the GP in his/ her practice providing a first contact mental health service to patients across the lifespan who present in General Practice with a mental health issue.

The Senior Mental Health Practitioner will undertake consultations with patients registered with the practice presenting with a range of needs and based on a standardised assessment pathway will provide an initial formulation of need, provide clinical advice, watchful waiting, prescribe if appropriate, provide initial short-term treatment and/or signpost to other services. The post holders will work primarily with people who are not eligible for or availing of other services from the Health and Social Care Trust either primary or secondary care services. It is envisaged that while the Senior Mental Health Practitioner may assess patients with the full range of mental health issues, they will only provide short term interventions with patients at step one or with patients on the perimeter of step two (see appendix 1 stepped mental health model) The Senior Mental Health Practitioner will have a critical role in signposting and / or referring patients and will have a critical interface role with Trust primary mental health care teams, primary care mental health and wellbeing hubs, recovery colleges, and the community mental health teams for older people. The Senior Mental Health Practitioner will refer patients with higher level complex mental health conditions directly to more appropriate Health and Social Care Trust services.

The Senior Mental Health Practitioner will have specific areas of specialist or expert practice and will mentor and develop other members of staff and contribute to the training and professional development agenda according to their particular area of expertise.

The post holder will also know and understand Health and Social Care Trust services and will provide advice and guidance to other multi-disciplinary team members on Trust pathways and Trust thresholds for intervention. The post holder will be expected to provide cover for colleagues within the Primary Care MDT and deputise for the Team Leader / Manager as required and work evenings as required.

Main Responsibilities

The post holder will:

Deliver first contact care to both pre-booked and patients presenting with undifferentiated, undiagnosed mental health problems in General Practice.

Lead in providing a person-centred holistic approach to assess both the physical, psychological and social needs of the patient/client, families and carers.

Make professionally autonomous decisions for which s/he is accountable and provide safe, evidence based, cost effective, individualised patient care.

Provide individual, time-limited, mental health assessments, provide brief interventions and prescribe for patients as necessary.

Assess and manage when required risk of self-harm or harm to others.

Accept referrals from GPs, undertake comprehensive mental health assessment of individuals' and identify and manage potential risks.

Act as a specialist expert resource within the general practice team in planning and communicating complex programmes of care to all disciplines and in partnership patients/clients, families and their carers, to support timely access to relevant care.

Support service users to identify, shape and manage their own health and well-being needs using recognised recovery models.

Lead on the establishment of procedures to support the physical health monitoring of services users, in accordance with NICE Guidelines.

Monitor, and where appropriate, carry out physical health monitoring assessments with patients identified, in accordance with NICE Guidelines.

Agree a plan in conjunction with the service user (and significant others) and signpost or refer to the local recovery college, mental health hub or other organisations providing Step 2 services such as "Psychological Talking Therapies", or signpost/ refer to step 1 service in the locality.

Co-ordinate and act as liaison between Professionals/Agencies ensuring the patient receives continuity of service.

Work collaboratively with Trust Mental Health teams and the Community and Voluntary sector to ensure effective management of the patient and carers needs.

Plan and implement skilled, evidence-based brief interventions in conjunction with the Service User and significant others as part of the overall package of care.

Provide accurate written and electronic records, reports, statistical data and other associated documentation in accordance with GMS requirements and standards set by professional regulators.

To ensure that all significant events are recorded, reported, reviewed and action taken within the context of the culture of continuous improvement.

Adhere to the provisions contained in the Mental Health (N.I.) Order 1986, other relevant legislation including The Children (NI) Order 1995, and to MDT policies and procedures.

Ensure that practice does not duplicate the work of Trust based primary mental health care teams adhering to clear protocols and referral pathways.

To be actively involved in group modular programs and to demonstrate specialist group work skills to assist in appropriately engaging clients during group sessions.

Education and Development

The post holder will:

Lead and/or support in the development, delivery and evaluation of education and learning activities specific to the area of expertise, both internal and external to the federation, as required.

Lead and/or support the development, delivery and evaluation of patient education, working in collaboration with the multidisciplinary team and colleagues as appropriate.

To liaise with the Service User, Peer and Carer Advocates and contribute towards User and Carer participation in the delivery of services.

To provide consultation, advice and guidance to others in respect of the practitioner's professional role.

To take an active role in the MDT's academic programme and participate in mandatory training and evaluation.

To represent the MDT as required, participating in meetings, attending courses and conferences.

Contribute to the creation of a learning environment within the MDT providing consultation and advice to colleagues within the wider GP service.

Work in collaboration with Education Providers as appropriate.

Research and Evidence-Based Practice

The post holder will:

Promote a learning environment for patients and other health professionals and facilitate a research culture to support continuous improvement activities.

Facilitate the use of evidence-based practice, audit and peer review to enhance patient/client care and/or the service and disseminate relevant findings.

Collate and record quantitative and qualitative data to demonstrate evidence of outcomes and quality and produces relevant reports.

To evaluate the effectiveness of interventions and contribute to MDT review.

Undertake regular audits and evaluations to determine compliance with practice standards.

To adhere to agreed protocols pertaining to Governance including implementation of standards, risk management strategies and audit processes.

Leadership and Management

The post holder will:

Work as an effective and responsible team member, supporting others and exploring the mechanisms to deliver transformation.

Lead in the analysis of areas of need, working collaboratively to identify gaps in service provision, providing leadership in the co-design and development of new initiatives and management of services that take account of the needs of patients/clients, their families and carers.

Participate in regular supervision and support and provide professional expert advice to other staff within Primary Care MDT.

Participate in the recruitment and selection of staff.

Lead multidisciplinary/multiagency practice development and service improvement projects.

Engage Service Users and Carers and involve them in the planning and delivery of services.

<u>Professional Responsibilities (Social Work, Nursing, Occupational Therapy or Psychology)</u>

To be professionally and legally responsible and accountable for all aspects of professional practice including the management of patients in their care.

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To maintain professional registration.

To ensure personal accountability in accordance with their own professional Code of Practice.

To attend the relevant professional forums as part of Continuous Professional Development.

To support and supervise students on placement if appropriate.

To participate in identifying and addressing own development needs through the Supervision Process.

To work within Health Board and Primary Care clinical protocols, procedures and guidelines and Professional Standards set by the HCPC/ NMC /NISSC other professional bodies.

To have an excellent working knowledge of national and local standards and monitor own and other's quality of practice as appropriate.

Provide a high standard of care using safe effective, evidence-based interventions in accordance with current research and professional standards.

To identify and manage clinical risk within own caseload. To be aware of the boundaries of own practice and to manage the associated risk effectively.

General Responsibilities

Employees of the GP Federations and FSU will be required to promote and support the mission and vision of the service for which they are responsible and:

At all times provide a caring service and to treat those with whom they come into contact in a courteous and respectful manner.

Demonstrate their commitment by the efficient completion of all tasks allocated to them. Comply with the No Smoking Policy.

Carry out their duties and responsibilities in compliance with health and safety policy and statutory regulations.

Adhere to equal opportunities policy throughout the course of their employment, as in Section 75 of the Northern Ireland Act 1998.

Ensure the on-going confidence of the public in service provision.

Support the GP Federations and FSU in complying with its obligations under Human Rights legislation.

Comply with the GP Federation and FSU and relevant professional codes of conduct.

Equality

The GP Federation is an Equal Opportunities employer and welcomes applications from all sectors of the community irrespective of their religious belief, political opinion, race, gender, marital status, dependants, age, sexual orientation or disability.

All staff are required to comply with our Equal Opportunities Policy and each employee must make him/herself aware of their obligations. Managers/Supervisors have a responsibility to ensure compliance with this requirement and promote equality of opportunity.

Records Management

All employees of the GP Federation are legally responsible for all records held, created or used as part of their business within the Federation including patient/client, corporate and administrative records whether paper based or electronic and also including emails. All such records are public records and are accessible to the general public, with limited exceptions, under the Freedom of Information Act 2000, the Environmental Information Regulations 2004 and the Data Protection Act 1998. Employees are required to be conversant with the Federation's policy and procedures on records management and to seek advice if in doubt.

Environmental Cleaning

The GP Federation recognises the key principle that cleanliness Matters. It is everyone's responsibility, not just the cleaners to ensure a hygienically clean environment. Whilst there are staff employed by the Federation who are responsible for cleaning services, all staff employed by the Federation have a responsibility to ensure a clean, comfortable and safe environment for patients, clients, residents, visitors, staff and members of the general public.

<u>Infection Prevention & Control</u>

All Staff should co-operate fully with regard to Federation policies and procedures relating to infection prevention and control.

Staff, in delivery of all care must:

Wash their hands thoroughly between each patient contact.

Be compliant with Standard Infection Control Precautions, Hand Hygiene and decontamination and other relevant infection prevention and control measures. Be aware of the Federation's Infection Control guidance and the Northern Ireland Regional Infection Control Manual and ensure they obtain mandatory Infection prevention control training or other specific infection control related training as required.

User involvement

Staff members are expected to involve patients, clients and their families in developing, planning and delivering our services in a meaningful and effective way

Location

Co-location of the members of the MDT within general practice is highly desirable, however, not always practical. Where the estate does not facilitate co-location creative use of alternative accommodation within the federation area may be required. The mental health senior practitioner will as far as practicable be based in a GP Practice however they may be expected to provide services across more than one GP Practice.

This job description is subject to review in the light of changing circumstances and is not intended to be rigid and inflexible but should be regarded as providing guidelines within which the post holder works. Other duties of a similar nature and appropriate to the grade may be assigned from time to time.

Please note that the GP Federations and FSU operate a "No Smoking" Policy and all employees MUST comply with this.

We are an Equal Opportunities Employer.

PERSONNEL SPECIFICATION

Senior Mental Health Practitioner – Multidisciplinary Team Primary Care (GP Practice)

A shortlist of candidates for interview will be prepared on the basis of the information contained in the application form. It is therefore essential that all applicants demonstrate through their application how and to what extent their experience and qualities are relevant to this post and the extent to which they satisfy each criterion specified.

Essential Criteria

Registered Mental Health Nurse, live on NMC register, <u>or</u>, Professional Social Work qualification and registration with the Northern Ireland Social Care Council (NISCC), <u>or</u>, Registered Occupational Therapist, <u>or</u>, practitioner psychologist registered with The Health and Care Professions Council (HCPC).

Three years post qualifying experience in one of the above disciplines at Band 6 or equivalent, of which two years should be in an adult mental health setting.

The successful candidate must hold a full current driving license (valid in the UK) and have access to a car at the closing date or have ** access to a form of transport which will permit the applicant to carry out the duties of the post in full.

(** this relates only to any person who has declared that they have a disability, which debars them from driving).

Demonstrate relevant knowledge and experience of working in adult services including knowledge of relevant legislation, best practice guidelines as well as an understanding of the role of all statutory agencies, and community services.

The following are essential criteria which will be measured during the interview stage.

KNOWLEDGE & SKILLS

Have relevant knowledge of developments in mental health care, including legislation, policies, procedures and current issues.

Demonstrate a commitment to delivering the optimum standard of patient centred/ client centred care

Demonstrate an understanding of clinical governance including risk management

Have an excellent understanding of a range of appropriate therapeutic interventions and evidence of application of same

Have a commitment to on-going personal and professional development

Effective Planning & Organisational skills with an ability to prioritise own workload.

Desirable Criteria

Experience of working in a primary care/ community care setting

Experience of community development approaches to addressing the needs of service users with mental health difficulties

Applicants please note:

Whilst elements of the essential criteria of the Personnel Specification will form the basis for shortlisting, these may become more stringent by introduction of desirable criteria (if stated).

The appointment is subject to proof of the attainment of any qualifications deemed essential to the post and used as a basis for shortlisting. Failure to provide evidence of the required qualifications prior to taking up the post will result in the offer of employment being withdrawn.

Appointments may be subject to assessment by an Occupational Health Service.

Please note that the GP Federations and FSU operate a "No Smoking" Policy and all employees MUST comply with this

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Appendix 3

JOB DESCRIPTION

Title of Post: Primary Care Mental Health Manager

Reports to: Federation Chair

Accountable to: Federation Board

Location: Designated GP Practices in the Newry & District Federation

GP Federations

In 2015/16, GP practices formed not-for-profit companies known as GP Federations. These Federations cover populations of 100,000 people with membership drawn from all of the GP practices in that area. The Health and Social Care Board (HSCB) currently contracts with GP practices which can then subcontract to another provider. With the establishment of Federations, GP practices now, as a group, sub-contract to their local Federation. It is the GP Federation who will be the employer of the Primary Care Mental Health Manager.

Multidisciplinary team (MDT)

In October 2016, "Health and Wellbeing 2026: Delivering Together" a 10-year plan for transforming health and social care in Northern Ireland was launched by the Department of Health (DOH). This plan was the response to a report produced by an Expert Panel led by Professor Bengoa tasked with considering the best configuration of Health and Social Care Services in Northern Ireland. A key element of this plan is the development of multidisciplinary teams (MDTs) of professionals working alongside GPs as first responders in general practice. Following a period of engagement with the Health and Social Care (HSC) system and service users the Department of Health (DOH) proposed that the HSCB commission multidisciplinary teams (MDTs) in General Practice in 2018/19.

These MDTs are intended to deliver the vision set out in "Delivering Together" with an increased emphasis on a holistic model of health and wellbeing which includes physical, mental and social wellbeing with a greater focus on prevention and early intervention. The teams will be community facing and will use community development approaches.

The main role and function of these new multidisciplinary teams (MDTs) is to provide a first contact and brief intervention service to patients presenting in General Practice. Each multidisciplinary team will be made up of GPs, nursing staff, practice based social workers, senior mental health practitioners, pharmacists and physiotherapists.

The Primary Care Mental Health Manager can be from one of four professional backgrounds Social Work, Nursing, Occupational Therapy, or Psychology. The Primary Care Mental Health Manager will be an integral part of the MDT working alongside other professionals in a seamless and coordinated way effectively meeting the holistic needs of the GP patient and their families.

Job Purpose /Summary

The fundamental role for mental health care within a GP Practice is to ensure that individual needs are met in a timely, appropriate and accessible manner. GPs estimate that mental ill-health accounts for a significant percentage of their daily workload in general practice, either as the sole problem or a major part of the presenting problem. GPs also indicate that patients who present with mental health problems tend to consult more frequently and have longer consultations than those without mental illness, and therefore place a high workload demand on general practice.

The post holder will be responsible for leading, managing, clinically overseeing and coordinating a GP Practice mental health service. In particular they will manage the team of 15 senior mental health practitioners based in general practice. Senior Mental Health practitioners are new role and as such can come from a variety of professional backgrounds (nurses, social workers, psychology or occupational therapist). Practice based mental health teams aimed at enhancing general practice and resourcing mental health promotion and prevention of ill health. These teams are designed to deliver a holistic model of health and wellbeing which includes physical, mental and social wellbeing with a greater focus on prevention and early intervention.

The post holder will be the most senior mental health professional with a high degree of independence and freedom to act/ manage the service and will be directly accountable to the Federation Board.

MAIN RESPONSIBILITIES

Service Delivery

- To be the most senior decision maker in the Federation area relating to mental health issues holding a high degree of authority to make clinical decisions and interpret organisational policies and protocols. They will be responsible and accountable for the provision of high quality GP based mental health services, fulfilling an operational and clinical lead role.
- To be managerially accountable and clinically responsible for a team of senior mental health practitioners based in general practice.
- To ensure that appropriate systems, policies, procedures, governance and management arrangements are in place in the GP based mental health service.
- To work with the department of health and other GP federations to contribute to the development of regional mental health policies and procedures in primary care within the context of the transformational agenda.
- To work within Health Board and Primary care clinical protocols, procedures, guidelines and professional standards and monitor the quality of practice within the GP based mental health service.
- To oversee mental health assessments in the GP practice and ensure appropriate interventions are made or appropriate onward referral to the local Trust primary or secondary care services.
- To provide highly complex analysis and judgements in service delivery to high risk patients presenting at GP practices.
- To provide advisory, education and consultative service to members of the primary care team including GPs, primary care nursing, social work, physiotherapy staff and other health care staff and patients.

Setting Direction

- To strategically review and develop the GP based mental health service within the Federation, ensuring implementation of relevant regional policies and will advise at regional level on the future strategic planning and development of GP based mental health services in the wider context of service redesign across the health economy.
- To promote and develop the role of primary mental health in community development.
- To promote and develop the concept of primary care multidisciplinary teams.
- To collaborate with GP Mental health service managers across the region and other key stakeholders to develop long term plans and strategies for GP mental health services.
- To participate in regional primary mental health care networks.
- To provide written complex reports to the GP Federation and the Department of Health on progress against strategic targets relating to the development of the MDTs in primary care.
- Produce evaluation reports to the GP Federation relating to mental health in primary care on a regular basis and contribute to the overall evaluation of the service across the region.
- To lead the development of the GP based mental health team within the Federation.
- To lead multidisciplinary/multiagency practice development and service improvement projects.
- To maintain communication systems with a wide range of service users, staff and providers within both the statutory services (HSC Trusts) and the community and voluntary sector.
- To review the service on an ongoing basis and proactively lead and manage change within the team.
- To lead on the development of a culture that improves quality and drives improvements within the GP based mental health service.

Staff Management

- To provide line management to Senior Mental Health Practitioners working in the GP based Mental Health Team. Including the development and monitoring of performance targets, career development, recruitment, promoting good working relations, work evaluation, leadership and people management
- To be clinically accountable for the safe delivery of the mental health service within the GP practice.
- To provide specialist knowledge and expertise in field of mental health to both team members and the wider multidisciplinary team including GPs
- To provide regular supervision and support to other staff.
- To lead in the recruitment and selection of staff within the mental health team.
- To plan and deliver training to up-skill current practice staff and the new multidisciplinary team staff members
- To initiate and develop staff induction and training as required.
- To identify and manage clinical risk within the workload of the Senior Mental Health Practitioners.

Information management

- To use all the information available to plan and organise the effective use of resources both financial and workforce both operationally and strategically.
- To undertake with a data analyst a needs assessment of the GP Federation and establish an accurate mental health register.
- To plan and oversee the implementation of the critical information, governance, induction and evaluation.
- To analyse and take action on the mental health information and statistics gathered across all the GP practices within the Federation
- To support the data analyst to establish accurate clinical coding for common mental health conditions.
- To undertake a review of consultation rates to identify stratified patients most at risk
- To work collaboratively to establish a searchable directory or servicing to include selfmanagement and well-being services, prevention services as well as community and voluntary sector services.
- To undertake regular audits and evaluations are undertaken to determine compliance with practice standards
- To participate in research including the evaluation of services and undertake projects when required.

Financial and Resource Management

- To hold the budget for the mental health within the GP Federation, responsible for all elements of budgetary control including staff, goods and services, procurement of equipment and supplies.
- To manage and monitor budgets including the requisitioning and use of goods and services, managing service level agreements (SLAs) contracts and meeting contract compliance requirements.
- To negotiate and manage Service Level agreements with community and voluntary sector providers.
- To procure services on behalf of the GP Federation for mental health services.
- To deliver all budgetary requirements for GP Practice based mental health services
- To identify and inform the management team of unmet need and gaps in services.

Strategic and Resource Development

- To plan for population mental health wellbeing initiative using a mental health stratification patient population approach contributing to the strategic direction of the Multidisciplinary Teams (MDTs).
- To develop feasible and sustainable innovative plans to recruit the future workforce.
- To scope the potential economies of scale and required professional mix to deliver services at Federation level.
- To participate and or lead on any appropriate for a in relation to community wellbeing and development.

Collaborative Working

- To coordinate communications relating to the mental health service in primary care, working in a highly sensitive environment and communicating complex messages both internally and externally.
- To be pivotal in the development of good working relationships within the GP practice and with external stakeholders including HSC Trust management, psychiatrists, mental nurses/social workers, community and voluntary sector.
- To work in partnership with GP Federation based social work, nurse and physiotherapy managers to identify and address the physical and social determinants of mental health.
- To work in co-production with service users, the local community and other stakeholders to support and grow approaching to the delivery of education, use of patient self-assessment and self-management tools.
- To work in co-production with service users, carers and local communities and involve them in the planning and delivery of services.
- To develop partnerships and effective working relationships, with key strategic partners in the statutory sector and in community-based services.
- To develop partnerships and effective working relationships between GP mental health teams and local Trust mental health services
- To develop partnerships and effective working relationships with other professional leaders and managers working in primary care.

<u>Professional Responsibilities (Social Work, Nursing, Occupational Therapy or Psychology)</u>

- To be professionally and legally responsible and accountable for all aspects of professional practice including the management of patients in their care.
- To maintain professional registration.
- To ensure personal accountability in accordance with their own professional Code of Practice.
- To attend the relevant professional forums as part of Continuous Professional Development.
- To support and supervise students on placement if appropriate.
- To participate in identifying and addressing own development needs through the Supervision Process.
- To work within Health Board and Primary Care clinical protocols, procedures and guidelines and Professional Standards set by the HCPC and RCOT / NMC /NISSC other professional bodies.
- To have an excellent working knowledge of national and local standards and monitor own and others quality of practice as appropriate.
- Provide a high standard of care using safe effective, evidence-based interventions in accordance with current research and professional standards.

General Responsibilities

Employees of the GP Federations and FSU will be required to promote and support the mission and vision of the service for which they are responsible and:

- At all times provide a caring service and to treat those with whom they come into contact in a courteous and respectful manner.
- Demonstrate their commitment by the efficient completion of all tasks allocated to them.
- Comply with the No Smoking Policy.
- Carry out their duties and responsibilities in compliance with health and safety policy and statutory regulations.
- Adhere to equal opportunities policy throughout the course of their employment, as in Section 75 of the Northern Ireland Act 1998.
- Ensure the on-going confidence of the public in service provision.
- Support the GP Federations and FSU in complying with its obligations under Human Rights legislation.
- Comply with the GP Federation and FSU and relevant professional codes of conduct.

Equality

The GP Federation is an Equal Opportunities employer and welcomes applications from all sectors of the community irrespective of their religious belief, political opinion, race, gender, marital status, dependants, age, sexual orientation or disability.

All staff are required to comply with our Equal Opportunities Policy and each employee must make him/herself aware of their obligations. Managers/Supervisors have a responsibility to ensure compliance with this requirement and promote equality of opportunity.

Records Management

All employees of the GP Federation are legally responsible for all records held, created or used as part of their business within the Federation including patient/client, corporate and administrative records whether paper based or electronic and also including emails. All such records are public records and are accessible to the general public, with limited exceptions, under the Freedom of Information Act 2000, the Environmental Information Regulations 2004 and the Data Protection Act 1998. Employees are required to be conversant with the Federation's policy and procedures on records management and to seek advice if in doubt.

Environmental Cleaning

The GP Federation recognises the key principle that cleanliness Matters. It is everyone's responsibility, not just the cleaners to ensure an hygienically clean environment. Whilst there are staff employed by the Federation who are responsible for cleaning services, all staff employed by the Federation have a responsibility to ensure a clean, comfortable and safe environment for patients, clients, residents, visitors, staff and members of the general public.

Infection Prevention & Control

All Staff should co-operate fully with regard to Federation policies and procedures relating to infection prevention and control.

Staff, in delivery of all care must:

- Wash their hands thoroughly between each patient contact.
- Be compliant with Standard Infection Control Precautions, Hand Hygiene and decontamination and other relevant infection prevention and control measures.
- Be aware of the Federation's Infection Control guidance and the Northern Ireland Regional Infection Control Manual and ensure they obtain mandatory Infection prevention control training or other specific infection control related training as required.

User involvement

Staff members are expected to involve patients, clients and their families in developing, planning and delivering our services in a meaningful and effective way

Location

Co-location of the members of the MDT within general practice is highly desirable, however, not always practical. Where the estate does not facilitate co-location creative use of alternative accommodation within the federation area may be required. The mental health senior practitioner will as far as practicable be based in a GP Practice however they may be expected to provide services across more than one GP Practice.

This job description is subject to review in the light of changing circumstances and is not intended to be rigid and inflexible but should be regarded as providing guidelines within which the post holder works. Other duties of a similar nature and appropriate to the grade may be assigned from time to time.

Please note that the GP Federations and FSU operate a "No Smoking" Policy and all employees MUST comply with this.

We are an Equal Opportunities Employer.

PERSONNEL SPECIFICATION

PRIMARY CARE MENTAL HEALTH MANAGER

A shortlist of candidates for interview will be prepared on the basis of the information contained in the application form. It is therefore essential that all applicants demonstrate through their application how and to what extent their experience and qualities are relevant to this post and the extent to which they satisfy each criterion specified.

Essential Criteria

- Registered Mental Health Nurse, live on NMC register, <u>or</u>, Professional Social Work qualification and registration with the Northern Ireland Social Care Council (NISCC), <u>or</u>, Registered Occupational Therapist or a practitioner psychologist registered with the HCPC.
- 2. Have 3 years' experience working in a senior management position (Candidate must have worked at a band 7 equivalent or above).
- 3. The successful candidate must hold a full current driving license (valid in the UK) and have access to a car at the closing date or have ** access to a form of transport which will permit the applicant to carry out the duties of the post in full. (** this relates only to any person who has declared that they have a disability, which debars them from driving).
- 4. Demonstrate relevant knowledge and experience of working in adult mental health services including knowledge of relevant legislation, policies and procedures as well as an understanding of the role of all statutory agencies, and community services.

The following are essential criteria which will be measured during the interview stage.

KNOWLEDGE & SKILLS

Candidates should be able to:

- 1. Demonstrate experience of working with a range of diverse stakeholders and possess the management, leadership and associated interpersonal skills required to operate effectively in complex environments.
- 2. Demonstrate experience of inspirational leadership skills and experience in delivering a clear sense of purpose and direction.
- 3. Demonstrate experience in transforming services, have excellent people management skills and have effective partnership working, integrity and sound ethical judgement.

Desirable Criteria

- Experience of working in a primary care/community care setting
- Experience of community development approaches to addressing the needs of service users with mental health difficulties

Applicants please note:

Whilst elements of the essential criteria of the Personnel Specification will form the basis for shortlisting, these may become more stringent by introduction of desirable criteria (if stated).

The appointment is subject to proof of the attainment of any qualifications deemed essential to the post and used as a basis for shortlisting. Failure to provide evidence of the required qualifications prior to taking up the post will result in the offer of employment being withdrawn.

Appointments may be subject to assessment by an Occupational Health Service.

Please note that the GP Federations and FSU operate a "No Smoking" Policy and all employees MUST comply with this.

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Appendix 4

Professional Governance Framework for Senior Mental Health Practitioners

Nursing

Supervision
1:1 - GP Federation MH Manager
Peer - within & across GP Federations/s

Professional Fora
Trust MHD Nurse Forum - Chair: Lead
Nurse MHD
GP Federation Professional Nurse Forum -

Chair: MH Manager

Link for training & Development

Trust AD Nursing & Midwifery Workforce
& Education

Social Work

Supervison 1:1 - Trust MH SW Peer - within & across GP Federation/s

Professional Fora Trust MHSW Forum - Chair: Lead SW for MHD

Link for Training & Development

Trust Lead SW for MHD

Occupational Therapy

Supervision
1:1 - Trust Clinical Lead MH OT
Peer - within & across GP Federation/s

Professional Fora Trust MHOT Forum - Chair: Clinical Lead MH OT

Link for Training & Development
Head of OT,ICT

