National and local challenges for leading psychological services

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Current issues

- CCGs in different levels of maturity
- Financial pressures how to deliver more with less
- Reduction in Local Authority budgets
- Business continuity/organisational memory/CSUs
- Integration
- Role of NHS England
- Parity of Esteem
- Relationships with providers
- Future of IAPT
The NHS 5 Year Forward view

- £30 billion pound challenge
- Control demand, increased efficiencies to have staged funding increases
- Action on prevention
- Whole system models
- Implications of an election year
Action on 4 fronts

Do more to tackle the root causes of ill health. The future health of millions of children, the sustainability of the NHS and the economic prosperity of Britain all now depend on a radical upgrade in prevention and public health. The Forward View backs hard-hitting action on obesity, alcohol and other major health risks.

Commit to giving patients more control of their own care, including the option of combining health and social care, and new support for carers and volunteers.
The NHS must change to meet the needs of a population that lives longer, for the millions of people with long-term conditions, and for all patients who want person centred care.

It means breaking down the boundaries between family doctors and hospitals, between physical and mental health and between health and social care. The Five-Year Forward View sets out new models of care built around the needs of patients rather than historical or professional divides.

Action needed to develop and deliver the new models of care, local flexibility and more investment in our workforce, technology and innovation.
What will this mean for the NHS?

- Radical upgrade in prevention and public health.
- When people do need health services, patients will be expected to have far greater control of their own care – including the option of shared budgets combining health and social care.
- The NHS will take decisive steps to break down the barriers in how care is provided between family doctors and hospitals, between physical and mental health, between health and social care.
England is too diverse for a ‘one size fits all’

One new option will permit groups of GPs to combine with nurses, other community health services, hospital specialists and perhaps mental health and social care to create integrated out-of-hospital care – the Multispecialty Community Provider.

Primary and Acute Care Systems

Redesign of urgent care
Primary care focussed – CCGs with more control – the new system is not going away

Local payment flexibility

Increased use of technology

Making every contact matter
NHS England and the government have published *Achieving Better Access to Mental Health Services by 2020*, a five-year ambition to put mental health on a par with physical health services.

NHS England will invest a further £120 million over the next two years on improving mental health services, including a £40 million investment this year to build capacity to meet new access and waiting time standards from next year.

NHS England will be working closely with CCGs to identify the areas of most need to specifically address improvements in early intervention and mental health crisis services, including liaison psychiatry.
Parity of esteem and integration

- £7 m to avoid young people being admitted to adult wards or beds far from home
- £33 m to support people in crisis and boost early intervention services
- £80 m investment to introduce standard waiting times:
  - Treatment within 6 weeks for 75% of people referred to IAPT, 95% within 18 weeks
  - Treatment within 2 weeks of 50% of people with first episode psychosis
- A £30m targeted investment to help people in crisis to access support in acute hospitals
What do we need to be able to do

- Understand the landscape and the pressures the Commissioner faces
- To be able to write a good business plan/coherent argument for investment
- Knowledge of care pathways and how they impact on other areas of Commissioning
- Provide an evidence base
- Provide/interpret data to support what we claim
- Co produce work with service users and other providers
- Contribute to national guidance and service developments to increase local influence e.g. NICE
An ability to prioritise and meet key targets
The ability to work in effective Partnerships
Provide leadership
Ability to accept change
Work in a flexible way and embrace new styles of working
Ability to communicate about what we can offer – Added value
Using opportunities to provide a psychological viewpoint
Quality and compassionate care

- Response to Francis and Winterbourne view
- Tension between quality and cost savings
- Pressure of KPIs
- Accreditation and professional regulation
Workforce issues

- How can we prepare for the future challenges for the NHS?
- How can we maintain staff morale?
- How can we assist staff to be resilient?
- How can we develop the workforce to meet new challenges?