

Perinatal Mental Health Community Services Development Fund: Application Guidance



NHS England INFORMATION READER BOX

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Description	This guidance has been prepared to support those making applications to the Perinatal Mental Health Community Services Development Fund. The fund aims to enable early investment either for the expansion of existing community teams into a wider geography, or to resource the creation of small teams in order to meet the needs of the population more comprehensively.	
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Contact Details for	ails for Perinatal Mental Health Team	
further information	Mental Health Clinical Policy & Strategy Team	
	6th Floor, area 6B	
	Skipton House, 80 London Road	
	SE1 6HL	
Decument Statu		

Document Status

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1 Introduction

NHS England has established a new perinatal mental health community services development fund to support quality improvement and service development, and demonstrate the impact of access to high quality care and interventions for women, their babies and families.

This guidance has been prepared to support Clinical Commissioning Groups (CCGs), NHS mental health trusts and foundation trusts and Sustainability and Transformation Plan (STP) footprints submit funding proposals.

Interested organisations are invited to submit an application to <u>ENGLAND.PerinatalMH@nhs.net</u>, using the enclosed form, before **5pm on Friday 16 September 2016**. Further instructions are set out in Sections 3–4.

2 Background information

Delivering significant service improvement for specialist perinatal mental health services and improving outcomes for women and their families has been identified as a national priority. We know that there is currently variation and fragmentation in provision of and access to specialist perinatal mental health services across the country.

NHS England is therefore building a phased, five-year transformation programme to enable delivery of key ambitions to build capacity and capability in specialist perinatal mental health services across England. This supports delivery of the objective in the *Mental Health Five Year Forward View*¹ that, by 2020/21, there will be increased access to specialist perinatal mental health support in all areas in England, in the community or in-patient mother and baby units (MBUs), allowing at least an additional 30,000 women each year to receive evidence-based treatment, closer to home, when they need it.

High quality, integrated services delivering key interventions and care as identified in evidence-based good practice such as the National Institute for Health and Care Excellence are central to this. They need to be part of integrated pathways of care in localities, engaged both with MBUs and wider mental health services, but also critical partners such as maternity, health visiting, primary care and other acute services.

Significant investment is being made available to support delivery of these ambitions – a total of **£365 million** between 2015/16 and 2020/21. Given the level of transformation required and the current significant gaps, it will take time to grow the

¹ <u>https://www.england.nhs.uk/mentalhealth/taskforce/</u>

workforce with appropriate skills and competences to deliver the expansion in services and associated improved outcomes and experience for women and families. In light of this, overall levels of funding will increase across the five year period. The recently-published plan *Implementing the Five Year Forward View for Mental Health*² summarises the allocation and range of investment.

In earlier years, funding is broadly focused on infrastructural activities and includes supporting workforce development, increasing MBU capacity, and the development of perinatal mental health clinical networks and local implementation teams to support strategic planning across localities. This funding will be held and disseminated centrally by NHS England, including through specialised commissioning for the MBU capacity work.

From 2019/20 onwards, significant proportions of funding will be channelled through CCG baseline allocations to support the development of specialised community perinatal teams. The planning work in earlier years should enable CCGs to have a clear plan for how they spend this funding when it begins to flow through.

NHS England is also keen to take opportunities in the earlier years to enable targeted investment in specialist perinatal mental health community services. This is the focus for the development fund and further information is below.

3 Service requirement

3.1 Overview

The primary purpose of the perinatal mental health community services development fund is to enable early investment **either:**

- for the expansion of existing specialist community teams into a wider geography, **or**
- to resource small new teams with limited provision to meet the needs of the population more comprehensively.

In all circumstances care and interventions should be in line with national standards and guidance, particularly for NICE-recommended care and interventions. A clear plan for development in order to deliver the best care and outcomes for women and families is essential. Learning from these projects will be used to inform and support other areas as they prepare to develop their own perinatal mental health community services.

² https://www.england.nhs.uk/mentalhealth/taskforce/

The development fund is expected to operate through two waves of funding, one starting in 2016/17, and one in 2018/19. From 2019/20, funding is mainstreamed into CCG baseline allocations.

	Estimated total funding available (£m)		
Development fund – wave of funding	2016/17	2017/18	2018/19
Wave 1	5.0	15.0 ³	15.0 ⁴
Wave 2			25.0

NHS England now invites organisations to submit proposals for service development and implementation from **2016/17–2018/19**.

Funding for 2016/17 assumes part-year effect with activities to be delivered by 31 March 2017. Funding in later years will be on a full-year basis, subject to demonstration of progress against key outcome criteria. Services should start in 2016/17. We anticipate working with up to 25 areas in Wave 1, although there is no minimum or maximum funding proposal requirement.

The precise funding arrangements will be determined, where required, based on the evaluation of the proposals and agreement of outcomes and deliverables.

This is a long-term programme of transformation and ultimately funds will be mainstreamed into CCG baselines from 2019/20. In light of this, it is vital that local systems have clear plans for ensuring sustainability of services following baselining. Proposals should fit into local systems' overall approach to improving access to and quality of perinatal mental health services for women and families to maintain the transformation and change achieved.

Wave 2 funding will be subject to a separate submission process in 2017/18 to fund a further cohort of localities in 2018/19.

3.2 Essential criteria and key principles

Funding proposals must demonstrate how they will support achievement of core outcomes for the perinatal mental health programme. These are:

- all women can access appropriate, high-quality specialist mental health care, closer to home, when they need it during the perinatal period
- women and their families have a positive experience of care, with services joined up around them

³ Future funding made available subject to progress against key outcome criteria in prior year and final confirmation of NHS England budgets in-year.

⁴ As above.

- there is earlier diagnosis and intervention, and women are supported to recover, and fewer women and their infants suffer avoidable harm
- there is more awareness, openness and transparency around perinatal mental health in order that partners, families, employers and the public can support women with perinatal mental health conditions.

In addition, successful applications will be aligned with the following principles.

- They will demonstrate a clear understanding of the needs of women, and their families, with perinatal mental ill health in their locality and actively promote and consider equality issues in service development, design, delivery and evaluation.
- They are explicit about how they will deliver improved outcomes for women and families within their population, and how information on this and progress will be collected, measured, and how they will evaluate the overall impact of the work.
- They will emphasise a holistic, multi-disciplinary approach to care and treatment, with a focus on individual recovery and the provision of services close to home.
- They will demonstrate strong clinical support and leadership as well as commitment and sign up from local commissioners, providers, people with lived experience and carers, and other stakeholders central to the care model (including local authorities and the voluntary and community sector, for example) to enable collaborative and integrated working.
- They will demonstrate how the service is linked into an integrated pathway of care with both specialist inpatient MBUs and other critical partners, for example maternity services, wider mental health services (CYP and adult), health visiting, primary care, social care, other acute services, etc.
- They are explicit about how the growth or creation of the team will provide additional care to greater numbers of women, and provide information on how new staff will be trained adequately to fill the specialist roles.

Proposals need to include a clear breakdown of the funding being requested in each year and how this will be used to achieve the key outcomes.

Applications need to demonstrate how they plan to achieve sustainability for the work and how it fits with perinatal mental health as a local priority, given the overall ambitions of the programme and baselining of funding from 2019/20. This includes a timetable of project activity and any associated funding or other work (e.g. CCG matched funding in current or future years).

The application form clearly states the range of information necessary for any funding proposal.

3.3 Assessment and scoring

All proposals will be reviewed by an expert panel, including clinical, managerial, expert by experience/carer/family representatives. Proposals will be assessed against a value for money framework covering three key themes:

- outcomes (clinical, patient experience, safety/quality and sustainability)
- resources
- risks (ability to: achieve value; collect and report information; expand workforce with appropriate skills; build relationships).

Scoring will be broadly equally weighted across the three areas as this should demonstrate an effective proposal that is deliverable and measurable.

3.4 Progress and outcome monitoring

Successful applicants will be expected to monitor progress in delivering outcomes and activities, use of funds, and evaluate the success of their work locally.

They will need to provide progress updates on these areas to NHS England, likely to be on a quarterly basis. These updates will also be used to determine and finalise the release of any future funding. Template reports will be provided by NHS England as required.

By applying, localities also agree to actively contribute to the sharing of learning and outcomes as requested by NHS England – this sharing will be done widely to support all localities as they prepare to develop their own perinatal mental health community services and promote good practice.

3.5 Eligibility

Applications can only be accepted from CCGs, NHS organisations (including NHS trusts and NHS foundation trusts) and STP footprints in England.

A partnership between two or more eligible organisations is actively encouraged where it strengthens the overall proposal.

NHS trusts/foundation trusts are advised to seek approval from their CCG before submitting an application.

Applications are only eligible if they meet the following criteria:

- applications must be led by a CCG, NHS trust/foundation trust, or STP footprint in England and have a named lead available
- where the lead is not a CCG, there is a named CCG sponsor who can agree to receive funding to support the work (funding is likely to flow through CCGs)
- applications are particularly focused on development of specialist community perinatal mental health services
- the application form must be completed in full.

4 **Process and timetable**

Proposals should be submitted by **5pm on 16 September 2016** to <u>ENGLAND.PerinatalMH@nhs.net</u> using the attached template.

Activity	Date
Proposal application process launched	19 August 2016
Deadline for applications and selection process begins	5pm on 16 September
Expert panel reviews proposals	21September – 5 October
Successful applicants informed	By 28 October
2016/17 funding released to successful organisations	November – December
Implementation and delivery, including progress reports	From December 2016

Following the start of implementation:

- progress will be monitored at least quarterly, and templates will be provided by NHS England
- progress updates will be used to determine release of funding in future years.