

NHS Standard Contract 2022/23

Primary and Community Mental Health Services

Schedule 2Aii

The 2021/22 Contract included, at Schedule 2Aii, detailed requirements for mental health providers to support PCNs by employing mental health practitioners (MHPs) embedded in local PCN teams. The national intention for 2022/23 is to encourage an expansion in the numbers of MHPs, the funding flow for this coming in part via the PCN Additional Roles Reimbursement Scheme in the GP contract – confirmed details of which have now been <u>announced</u> for 2022/23. We have therefore now published, as a stand-alone document, this revised draft Schedule 2Aii. This allows for numbers of MHPs to be increased where there is local agreement and includes a slightly revised role description, with scope to employ non-registered staff. We invite comments on the draft, which should be made to <u>england.contractsengagement@nhs.net</u> by Friday 18 March 2022.

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SCHEDULE 2 – THE SERVICES

Aii. Service Specifications – Primary and Community Mental Health Services

This Schedule will be applicable, and should be included in full, where the Provider is to be the main provider of secondary community-based mental health services in the local area. If that is not the case, delete the text below and insert Not Used.

As part of the arrangements described below, the Provider must put in place a separate written agreement for provision of services with the PCN, setting out the detail of the local arrangements. In developing these agreements, providers may find the ARRS employment models materials (<u>https://future.nhs.uk/P_C_N/view?objectId=21555568</u>) produced by NHS England helpful.

Primary Care Networks in respect of which the requirements of this Schedule apply to the Provider:
PCNs with a registered population of 100,000 patients or fewer:
 [] PCN (acting through lead practice []/other) [] PCN (acting through lead practice []/other)
PCNs with a registered population of more than 100,000 patients:
 [] PCN (acting through lead practice []/other) [] PCN (acting through lead practice []/other)
Specific requirements in respect of any PCN with a registered population of 100,000 patients or fewer
Where requested by the PCN and where provided by that PCN with Match Funding, identify in agreement with the PCN at least one Additional whole-time-equivalent adult / older adult Mental Health Practitioner, employed <u>or engaged</u> by the Provider <u>or a Sub-Contractor</u> , to work as a full member of the PCN core multidisciplinary team (MDT) and act as a shared resource across both the PCN core team and the Provider's primary care mental health / community mental health team.
Where agreed with the PCN and where provided by that PCN with Match Funding, identify at least one further Additional whole-time-equivalent adult / older adult Mental Health Practitioner, employed or engaged by the Provider or a Sub-Contractor, to work from 1 April 2022 (or such later date as shall be agreed between the Provider, the Commissioner and the PCN) onwards as a full member of the PCN core multidisciplinary team (MDT) and act as a shared resource across both the PCN core team and the Provider's primary care mental health / community mental health team.
Where agreed with the PCN and where provided by that PCN with Match Funding, identify in agreement with the PCN at least one whole-time-equivalent children / young people's Mental Health Practitioner, employed <u>or engaged</u> by the Provider <u>or a Sub-Contractor</u> , to work as a full member of the PCN core multidisciplinary team (MDT) and act as a shared resource across both the PCN core team and the Provider's children and young people's primary care mental health / community mental health team.
Specific requirements in respect of any PCN with a registered population of more than 100.000 patients

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Requirem	ents to support the role of a Mental Health Practitioner in any PCN
arrangem without th	erate in agreement with the PCN, appropriate triage and appointment booking ents so that Mental Health Practitioners have the flexibility to undertake their role e need for formal referral of patients from GPs and that the PCN continues to have
	the Provider's wider multidisciplinary community mental health team. ement. in agreement with the PCN. to define and implement an effective role for
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Work <u>Impl</u> Mental He	ement, in agreement with the PCN, to define and implement an effective role for ealth Practitioners, so that each Practitioner is able to provides any or all of the functions, depending on local context, supervision and appropriate clinical
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WorkImpl Mental He following governan i) ii)	ement, in agreement with the PCN, to define and implement an effective role for ealth Practitioners, so that each Practitioner is able to provides any or all of the functions, depending on local context, supervision and appropriate clinical ce: provide mental health advice, support, consultation and liaison across the wider local health system provide a combined consultation, advice, triage and liaison function, with the aim of; supporting shared decision-making about self-management facilitateing onward access to evidence-based treatment servicesmental and physical health, well-being and biopsychosocial interventions; provideing seme-brief psychological interventions, where qualified to do so and

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DEFINITIONS

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Additional over and above:

- (i) any Mental Health Practitioner already employed <u>or engaged</u> by the Provider <u>or a Sub-Contractor</u> to work as a member of (i.e. working full-time or part-time, including on a rotational basis, within) the relevant general practice or PCN core multi-disciplinary teams as at 31 January 2021; and
- (ii) any IAPT Practitioner already employed <u>or engaged</u> by the Provider <u>or a Sub-Contractor</u> and working co-located within the relevant general practice as at 31 January 2021.

IAPT Practitioner an individual employed as a low-intensity Psychological Wellbeing Practitioner or high intensity therapist, to provide services under the Improving Access to Psychological Therapies programme

Match Funding a financial contribution of 50% of the actual salary, National Insurance and pension costs of an individual Mental Health Practitioner, to be paid on an ongoing basis to the Provider by the PCN or the PCN lead practice, under the terms of a separate written provision of service agreement

Mental Health Practitioner an individual:

employed <u>or engaged</u> in any <u>practitionerregistered mental health clinical</u> role (<u>registered or non-registered</u>) at Agenda for Change Band <u>4-8a</u>5 or above, to support adults and older adults with <u>complex mental health needs that are not suitable for IAPT provision</u> (-including but not limited to a Community Psychiatric Nurse, Clinical Psychologist, <u>or</u> Mental Health Occupational Therapist, <u>Peer</u> <u>Support Worker or Mental Health Community Connector</u>, but not including any IAPT Practitioner)

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