

PBC Business Case Approval sought
from the Governance Sub Committee - March 2008

Provision of Primary Care
Counselling Services in Dacorum

Introduction

Since the introduction of Primary Care Organisations in 1999, primary care counselling has been the focus of change in structure, management and funding. Many GP practices have used individual self employed counsellors on a variety of contracts to provide this primary care service.

In the Dacorum area, GP practices have felt this approach provided patients with the best and most appropriate pathway to counselling services and remain of that opinion. However, there is a need to provide a more standardised approach across Dacorum to ensure equal opportunity to surgeries and their patients to access the counselling service, more regularised treatment of the counsellors employed to provide the service and improved rigour.

In order to achieve these aims, it is proposed that a Locally Enhanced Service (LES) is created which GP surgeries across Dacorum sign up to in order to continue providing a Primary Care Counselling service for their patients. The LES will be an agreement between the surgeries and West Herts PCT. Within the LES will be an agreement to sign between the practices and the counsellors providing the counselling service.

The LES will provide:

- cost savings by addressing the current inequalities where patients do not attend sessions
- introduce counsellor “levels” and pay bands according to the counsellor’s qualifications and accreditation
- require regular meetings between counsellors to enable on-going training, potential cross referrals of patients (e.g. to a more experienced counsellor etc.), and significant event reviews
- rigour by way of standardised referral and feedback forms

It is considered that this approach will provide a cost effective, non-discriminatory counselling service to the patients of Dacorum. Full details of the proposed LES can be found in the enclosed documentation.

The benefits of implementing this LES

There have been various papers published which support the clinical effectiveness of counselling in primary care namely:

- “National Survey of Counsellors working in Primary Care: evidence for growing professionalism?” (Royal College of General Practitioners) concluded “that the majority of counsellors met national criteria for good practice”
- “Treatment Choice in Psychological Therapies and Counselling (DoH) confirms recognition of the distinct practice of primary care counselling and its place within the range of therapies offered within the NHS”
- “Depression: management of depression in primary and secondary care (NICE Guidelines) stated “..in mild and moderate depression, short term psychological treatment of 6 – 8 sessions over 10 – 12 weeks should be considered”

We also believe the proposed LES fits strategically with recent proposals issued under the Mental Health review e.g.:

“Commissioning a brighter future: improving access to psychological therapies – a positive practice guide” (CSIP Choice and Access Team May 2007) - this document describes services that provide everyone with depression and anxiety disorders with access to the right treatment. It also sets out the learning so far from the demonstration sites. We believe the counselling service to be provided by this LES will help achieve one of the main aims within the guide i.e. successful psychological therapies ensure that the right number of people are offered a choice of the right services at the right time with the right results.

There has been increasing demand on the counselling service within Dacorum over the last few years but issues in meeting this increase. Most of this has been caused by budget restraints. In order to ensure more of the right numbers of people are receiving the right services with the right results, the LES includes:

- A 10% increase in counselling budget approved by the DacCom PBC Ltd Executive (see financials page 3)
- A standardised referral form for GP use which contains suggestions on other alternatives to counselling before the referral is completed
- Cross referral of patients to a more appropriate counsellor if needed as part of the proposed regular counsellor meetings

In addition, The Improving Access to Psychological Therapies (IAPT) programme is at the heart of the Government’s drive to give greater access to, and choice of, talking therapies to those who would benefit from them. One of its key policies is to ensure there is no discrimination over access to such therapies. The counselling LES does not discriminate with regard to age, sex, gender or race and so fits in with this policy. We also believe that the counselling service LES provides for the first steps in the “Stepped Care Model” illustrated by this programme as the intended patient pathway.

Finally, the Mental Health Act 2007 Guiding Principles state 5 guiding principles at the heart of its review and this counselling LES will meet all 3 of the 5 appropriate principles for counselling i.e. the Respect principle (discrimination), the Participation principle (patients involved in making their own decisions about their own care and treatment) and the Resources principle (a good and fair service to everyone without wasting money or time).

Another key improvement to counselling services this LES will deliver is in the financial area which in itself leads on to increased service availability to all Dacorum patients requiring access to counselling services. This will be achieved as follows:

- Currently there are a majority of counsellors who are being paid for a session even if the patient did not keep his/her appointment. The LES seeks to provide uniformity across Dacorum on such matters and therefore it proposes that a flat rate payment of £5.00 is made if the patient fails to turn up and has not cancelled their appointment within 2 working days (see LES for full details).

As counsellors are currently paid between £20 and £50 per session (average £35.39) this represents potentially significant costs savings.

Figures produced from Dacorum practices for the period 1st Jan – 30th Jun 2007 show the “Did Not Attend” (DNA) rate averaging at 7% of total appointments available. Therefore potential savings of this proposal are:

Average Cost per Session	Annual Dacorum Budget	No of sessions p.a. at average cost	Average No of Sessions DNAd	Cost of all DNAs
£35.39	£169,319.00	4785	335	£11,852.00
After adjustment for payments made to some counsellors and not others			201	£7,111.40
Add back flat rate £5.00			335	£1,675.00
Net potential saving			3.2%	£5,436.40

This change could therefore deliver around 155 more counselling sessions available for patients

- An increase in the annual budget by 10% will also lead to additional sessions being available as the DES is expected to deliver minimal/zero increase in payments made to the counsellors within the new Levels :

Average Cost per Session	Annual Dacorum Budget after 10% uplift	No of sessions p.a. at average cost	Extra No of Sessions (Gross)
£35.39	£186,250	5,263	478

- A sample exercise comparing current session rates paid to counsellors and the pay bands applied to the new levels indicate that there will be virtually no change to the average rate of pay per session and therefore all savings made will be directly available for additional sessions for patients

The uptake by practice of this LES will be monitored; as will the number of sessions each patient receives, as a measure of their involvement and appreciation of the counselling offered.