

Additional Roles Reimbursement Scheme – Mental Health Practitioner role Report rapid summary

Context

- Mental Health Practitioners (MHPs) are patient-facing primary care mental health specialists funded by the Additional Roles Reimbursement Scheme (ARRS) and ICB funding since April 2021.
- Unity Insights were commissioned by Health Innovation Kent Surrey Sussex (KSS) to evaluate the impact and implementation of MHPs in Kent and Medway, and to assess the ongoing sustainability of the MHP role in primary care.
- The analysis used mixed methods, including surveys, interviews, quantitative and health economic analysis.

Key results

- MHPs had a positive impact on patients, primary care workforce, and the wider system, as evidenced by qualitative feedback and health economic analysis.
- MHPs provided longer and more specialised appointments for patients with mental health needs, reducing the burden on GPs and improving patient experience and outcomes.
- MHPs were likely to be resource efficient and generate a positive return on investment, but patient outcomes could not be quantitatively assessed due to data gaps.
- MHPs were generally satisfied with their role and the support they received, but some variation was observed across Primary Care Networks (PCNs) and between staff of different experience levels.
- Kent and Medway NHS and Social Care Partnership Trust (KMPT) had a successful recruitment process and implemented a centralised management function to support MHPs and PCNs, which was seen as a key enabler for minimising variation and implementing best practice.
- Career progression opportunities for MHPs were unclear, with a need for these to be identified and communicated. These opportunities are currently clearer outside of primary care.

Recommendations

- Continue to recruit and retain MHPs and allocate dedicated resources for these activities.
- Engage with PCNs that have not yet implemented MHPs and offer support where necessary.
- Ensure workforce satisfaction and management by providing flexibility, autonomy, and support to MHPs.
- Conduct further quantitative assessment of impact once routine datasets can accurately capture MHP activity and outcomes.
- Provide support and guidance to both MHPs and PCNs to avoid misalignment of expectations or understanding and ensure effective integration.
- Maintain a centralised management function through the Mental Health Trust to develop and implement Standard Operating Procedures (SOPs), gather and share learning, provide a link to other MHPs, and to provide an escalation route.
- Identify and communicate career progression opportunities for MHPs and offer funding or flexible hours for external CPD.
- Improve links between MHPs and the wider system, especially secondary care mental health services and KMPT strategy.

Recommendations to enhance recruitment & retention from Kent & Medway

This summary provides some recommendations based on the findings from the review of the Mental Health Practitioner (MHP) role in Kent & Medway conducted by Unity Insights and funded by Health Innovation Kent Surrey Sussex. These tips are intended to help Community Mental Health Teams (CMHTs), Integratef Care Boards (ICBs) and Primary Care Networks (PCNs) with recruitment and retention of the MHP role.

Recruitment

- Use a centralised and standardised recruitment process that is led or supported by a dedicated programme manager from the mental health trust. This can ensure consistency, quality, and timeliness of the recruitment process, as well as provide positive feedback and support to applicants.
- Be transparent and clear about the expectations, roles and responsibilities of the MHP role, both in the job description and in the interview process. This can help to avoid any confusion or disappointment among candidates who may have different assumptions or aspirations about the role.
- Highlight the benefits and opportunities of working as an MHP in primary care, such as the flexibility, autonomy, diversity, and impact of the role. Emphasise how the role can contribute to the integration and improvement of mental health services across the system, and how MHPs can access training, development, and peer support from the mental health trust and the PCN.
- Target candidates who have relevant experience and skills in mental health, preferably from secondary care or IAPT services. These candidates are likely to have a better understanding of the role and the patient group, as well as more confidence and credibility in delivering the role.

Retention

- Provide a comprehensive and supportive onboarding process for new MHPs, including an induction period, introduction to the PCN team and other stakeholders, orientation to the local services and pathways, and clear guidance on the operational and clinical aspects of the role. This is particularly important for MHPs with less prior experience. A dedicated programme manager from the mental health trust is also beneficial to this process.
- Ensure that MHPs have regular supervision and support from both the PCN and the mental health trust, including clinical supervision, case management, performance appraisal, and wellbeing check-ins.
- Provide opportunities for MHPs to network and share learning with other MHPs across the system, as well as to access peer support and mentorship from more experienced colleagues.
- The MHP role is different to that of a GP – they should provide longer appointments to ensure effectiveness, have a degree of autonomy over their schedule and caseload, and the opportunity to work with GPs and link with secondary care services.
- Facilitate MHPs' integration into the PCN team and the wider system, by involving them in team meetings, communication channels, training events, and quality improvement activities. Foster a culture of collaboration and mutual respect between MHPs and other staff members.
- Offer opportunities for MHPs to develop and progress in their career, by providing clear information on the workforce strategy and career pathways, supporting their continuous professional development and learning, and enabling them to access further training, qualifications, or leadership roles.