

Thames Valley Strategic Clinical Networks

GP Study Sessions in Psychiatry Evaluation and Highlight Report

December 2017 – October 2018



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Foreword

I am delighted to introduce this evaluation and highlight report on GP Study Sessions in Psychiatry authored by the Thames Valley Strategic Clinical Network for Mental Health. In total over 400 GPs across Berkshire, Oxfordshire and Buckinghamshire have attended our study sessions run in partnership with the University of Oxford. By 2019, it is anticipated that the Strategic Clinical Network will have trained over 500 GPs in a variety of mental health topics. It is encouraging to see GPs with such passion and motivation to provide high quality mental health care in primary care.

We are all aware of the pressures being faced by primary care and the increased and necessary focus on mental health and wellbeing. The Five Year Forward View for mental health outlines opportunities to improve patient experience and outcomes across primary and secondary care. However, with the increasing stretch of resources in primary care it is important for the Strategic Clinical Network and partners to equip GPs with education and training in mental health to support their clinical practice.

The Strategic Clinical Network has provided an opportunity for local secondary mental health experts and primary care professionals to come together and learn from each other and share ways of enhancing the care they provide.

The need for education in primary care and the success of the study sessions are summarised throughout this report. This proactive approach to quality improvement and education has been able to bring together an array of stakeholders from GPs, secondary care professionals, CCGs and people with lived experience.

Dr Rob Bale

*Clinical Director and Consultant Psychiatrist, Oxford Health NHS Foundation Trust
Clinical Director, Strategic Clinical Network (Mental Health)*

“The Strategic Clinical Network has provided our GPs with invaluable training in mental health. The sessions across Thames Valley have been jointly owned by each locality in order to tailor sessions to local needs and priorities, to support further education in primary care.”

Dr David Chapman, Oxfordshire CCG Clinical Lead

Executive Summary

Appropriate training and education in mental health is vital in supporting the transformation agenda in primary care.

This document highlights the positive steps the Thames Valley Strategic Clinical Network has taken to support GPs locally with education in psychiatry.

In Thames Valley patients with a mental health condition reported that their experience varies when consulting their GP.

By working in partnership with the University of Oxford, CCGs and local GPs the set of six GP Study sessions has supported attendees to develop practical skills and improve their mental health awareness related to:

- Acute Mental Illness
- Serious Mental Illness
- Perinatal Mental Health
- Anxiety & Depression
- Personality Disorder
- Children & Young People's Mental Health
- Dementia & Older Adults Mental Health
- Psychological Skills Training
- Eating Disorder
- Addiction & Substance Misuse
- All-Age Mental Health

This report summarises the six GP Study Sessions held across Thames Valley.

The GP Study Sessions in Psychiatry were well attended by primary care professionals across Berkshire, Oxfordshire and Buckinghamshire. On average around 80 GPs attended each session and 93% of those who attended would be interested in similar event.

In all topic areas GPs stated the presentations had supported an increase in their understanding. Additionally, GPs commented on how the information from secondary care experts may support a change in their clinical practice, improving the experience and outcomes for patients.

Acknowledgements

The Thames Valley Strategic Clinical Network would like to thank all the speakers who presented at the study sessions, the GPs and primary healthcare professionals that attended the study session and the University of Oxford for their continued support.

It is also important to thank the contribution of the CCG Mental Health GP Leads for their continued support and guidance both in planning the study sessions and driving engagement locally.

Education in Primary Care

Understanding the Need

Mental health problems are widespread; around one in four adults experience at least one diagnosable mental health problem in a year¹. On average, nine out of ten adults with mental health problems are supported in primary care¹.

The role of Primary Care in Mental Health

One in four GP appointments involve significant mental health issues², yet mental illness still remains under diagnosed and under treated.

In 2013, the Joint Commissioning Panel for Mental Health suggested that mental health problems should be managed mainly by primary care working collaboratively with other services and expertise as required.

However, a recent survey conducted by MQ, a mental health charity (2018)³ identified:

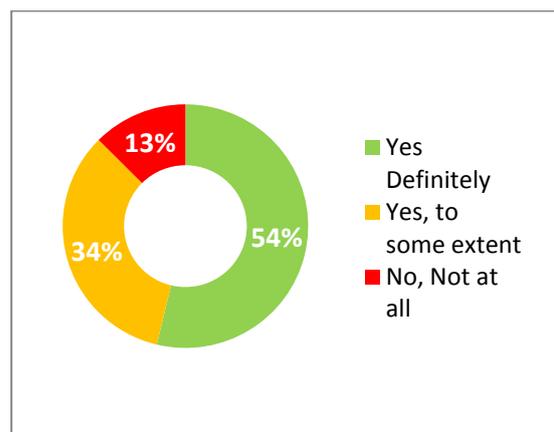
- 53% of GPs stated that it can be difficult to diagnose mental health conditions.
- 49% of GPs found it difficult to answer mental health related questions.

Patient Experience

On average 54% of patients in Thames Valley felt that that a primary care professional 'definitely recognised and understood their mental health needs'⁴ (see figure 1). Patient experience varies in Thames Valley with 49% of patients in the lowest performing CCG and

57% of patients in the highest performing CCG definitely feeling that their GP recognised and/or understood their mental health needs.

Figure 1. Percentage of patients in Thames Valley who felt the GP recognised and/or understood mental health needs



For children and young people's mental health, the service viewed most unhelpful is primary care. A recent report by NHS Digital found that 17% of 5 to 19 year olds who had made contact with primary care described their experience as either unhelpful or very unhelpful⁵.

The GP Study Sessions have been a great vehicle to enhance GPs understanding of a range of mental health conditions and may support positive changes to clinical practice.

Purpose of this Report

This report summarises the evaluation forms completed by GPs after each study session and highlights the common themes from their feedback.

¹ Five Year Forward View for Mental Health (2015)

² [Guidance for commissioners of primary mental health care services \(volume two\): Practical mental health commissioning, Joint Commissioning Panel for Mental Health \(2012\)](#)

³ [It's trial and error for mental health patients, say GPs \(MQ, 2018\)](#)

⁴ [Based on GP Patient Survey CCG Slidepacks \(2018\)](#)
Q27. During your last general practice appointment, did you feel that the healthcare professional recognised and/or understood any mental health needs that you might have had?

⁵ [Mental Health of Children and Young People in England, 2017](#)

Overview of Thames Valley GP Study Sessions

Background

In early 2017 the mental health network received a specific GP enquiry about the possibility of study days around mental health as previously held in 2012 in partnership with the University of Oxford.

The GP mental health commissioners' forum discussed this on 8 June 2017 and there was support for sessions to share latest thinking and research and to share details of initiatives in secondary care. The mental health network decided to run a pilot Thames Valley wide study session in December 2017.

Aims

The aim of the study sessions were identified as follows:

- 1) To raise GP awareness and knowledge of mental health conditions**
- 2) To enhance relationships and communication between primary and secondary care specialists**
- 3) To increase skills around management of mental health issues within primary care**
- 4) To support the achievement of the Five Year Forward view deliverables**
- 5) To create a primary care community of GPs interested in mental health.**

Principles

It was agreed that the agendas for the study sessions should be based on the following principles:

- 1) Alignment to the Mental Health Five Year Forward view commitments**
- 2) Informed by CCG local priorities for mental health**
- 3) Informed by feedback from GPs about those topic areas where they believed more training and skills would be valuable and would enhance their confidence and patient outcomes.**

- 4) Take an All-age approach with each meeting to include a topic around Children and Young People's mental health.**

Partnerships

In order to maximise the effectiveness of the sessions, partnerships with stakeholders from across the mental health system within the Thames Valley are vital. These are described below:

University of Oxford

Professor John Geddes, Head of the Department of Psychiatry at the University of Oxford kindly agreed to support the project and to provide a chair for each event. He recognised the benefit of having a link to primary care and an opportunity to communicate details of recruitment to current trials at the NIHR **Oxford Biomedical Research Centre**, which aims to bring the best science to the complex problems of mental disorders and dementia.

CCG Clinical Leads for Mental Health

All of the CCG Clinical leads from across the Thames Valley (as follows) have been involved in developing the programme, presenting on CCG priority areas, communicating to their GPs and helping support the sessions:

David Chapman, Oxfordshire CCG/Katie Simpson, East Berkshire CCG/Angus Tallini, Berkshire West CCG/ Sian Roberts, Buckinghamshire CCG

Psychological Perspectives in Education and Primary care (PPEP Care) and (PPIP Care)

At each study day, there has been a presentation about the mental health training available to GP Practices in their premises

through PPEP care (skills to support Children and young people mental health) and PPIP care (Primary care consultation skills) and signposting to other online resources.

Number of GPs trained in PPEP care in Thames Valley:

Berkshire – 1812

Oxfordshire – 18

Buckinghamshire - 507

Provider colleagues in Berkshire Healthcare and Oxford Healthcare

Providers have willingly suggested specialists to present at these sessions and have welcomed the opportunity to talk to large groups of GPs about their service. It is recognised they are a good vehicle to discuss any change in service or pathway and to talk about referral criteria and mechanisms.

Using feedback from the pilot day to adapt future sessions

Location

The pilot day in Oxford was mainly attended by GPs from Oxfordshire, although it was widely communicated across the whole of the Thames Valley. It was also noted that as pathways through Oxford Healthcare and Berkshire Healthcare are different for some specialties, there is value in GPs hearing from their local secondary care clinicians. It was

therefore decided to run events in each of the CCG areas on a rolling basis with presentations from OHFT in Oxfordshire and Buckinghamshire and from BHFT in East and West Berkshire.

Presentation topics

After the pilot it became clear that GPs valued those presentations tailored to the GP perspective and management in primary care rather than an academic exploration of the topic. Future presenters were therefore asked to take this approach.

The feedback from each event has helped frame the agenda for following events. The need for skills training was identified and topics such as “10 minute CBT training” and Motivational Interviewing skills have been included. The agendas have also developed to include input from service users and from the voluntary sector.

Increasing number of participants

The number of participants has increased over the year and several GPs have attended more than one session. A table showing the spread of attendance across practices is included in this report.

Continuing Professional Development

CPD certificates are now provided at each session and can support GPs with their appraisals/revalidation.

Themes & Highlights

The study sessions in psychiatry have supported GPs to learn from local secondary care experts in Berkshire, Oxfordshire and Buckinghamshire. After each study session, GPs were asked to identify which elements of their practice will change as a result of the presentations. We categorised their

comments to identify common themes across all study sessions. The majority of comments related to GPs improving their understanding of mental health conditions (including diagnosis and management), as well as enhancing their consultation skills.

Consultation Skills & Resources

GPs noted that presentations have provided them with more confidence to discuss mental health concerns with patients and valued the supporting resources such as risk and other assessment tools.

Mental Health Awareness (including diagnosis and management)

A number of GPs reported that the study sessions have increased their awareness of mental health. Notably, GPs recognised their understanding of signs and symptoms of eating disorder, bipolar disorder and personality disorder had improved.

Local Services & Referrals

GPs knowledge of local secondary and tertiary services has improved. GPs also noted that it was useful to hear about service developments, particularly the use of IAPT for long-term conditions and access to child and adolescent mental health services (CAMHS).

Medication Management & Prescribing

GPs found advice on medication and prescribing for common mental health conditions such as anxiety and depression useful. The presentations on Dementia have also supported GPs understanding of medication and sleep problems.

Management of Physical Health

The presentations on physical health in patients with serious mental illness raised GPs awareness of the importance of physical health checks. A number of GPs identified after the event that these presentations have prompted them to check their registers and proactively review patients.

Skills Training

GPs knowledge of therapeutic interventions to use during consultations was low. However, after the study sessions GPs stated that the skills training presentations relating

to CBT and Behavioural Activation will benefit their consultations with patients.

Five Year Forward View

The study sessions have been structured to also complement the Five Year Forward View for Mental Health (2015)⁶

Improving Access to Psychological Therapies (IAPT)

GPs in Oxfordshire and Buckinghamshire received an update on the integrative IAPT services. This provided GPs with a valuable link to local psychological therapy services. Notably, GPs identified that the presentations improved their awareness of IAPT and the referrals process (including for long-term conditions). There are plans to have a similar presentation in Berkshire next year (2019).

Five Year Forward View Target: By 2020/21, NHS England should increase access to psychological therapies by 25%.

Suicide Prevention

A quarter of people who took their own life have made contact with a health professional, usually a GP. Suicide and self-harm has featured strongly in the GP study sessions. GPs commonly noted that this was a useful topic and has improved their understanding of risk assessment tools and local support services.

Five Year Forward View Target: By 2020/21 the number of people taking their own lives will be reduced by 10% nationally compared to 2016/17 levels and all areas will have a multiagency suicide prevention plan.

⁶ [The Five Year Forward View for Mental Health \(2016\)](#)

Physical Health and Serious Mental Illness (SMI)

People with severe and prolonged mental illness in Thames Valley are at risk of dying earlier. In Buckinghamshire, Oxfordshire and Berkshire West, the average life expectancy for women with SMI is 17.2 years less and 20 years less for men with SMI. For Frimley, life expectancy for women with SMI is 17.1 years less and 22.2 years less for men with SMI. The Strategic Clinical Network has been able to highlight this healthcare inequality locally by providing GPs an update on local SMI plans.

Five Year Forward View Target: By 2020/2021, at least 280,000 people living with SMI should have their physical health needs met.

Perinatal Mental Health

One in five mothers are likely to suffer from depression, anxiety or psychosis during pregnancy. The study sessions have provided GPs an opportunity to learn from secondary care experts in how to facilitate discussions with mothers and guidance on prescribing medication during pregnancy.

Five Year Forward View Target: NHS England should invest to ensure that by 2020/21 at least 30,000 more women each year access evidence-based specialist mental health care during the perinatal period. This should include access to psychological therapies.

Older Adults & Mental Health

Depression affects one in five older people living in the community. Secondary care experts in Old Age Psychiatry provided GPs in Buckinghamshire useful diagnostic guidance on depression and anxiety in Older Adults. GPs identified the practical advice on prescribing medication as useful.

Five Year Forward View highlights that diagnosing depressive symptoms can be difficult and we know that some clinicians

believe treatment for depression is less effective in older people, despite evidence to the contrary.

Children & Young People's Mental Health (CYP)

Children & Young People are another area of key focus within the five year forward view. The study sessions have helped to shed light on eating disorders, suicide risk and autism in children & young people. GPs in Oxfordshire also noted that it was useful to hear about the new CAMHS single point of access service.

Five Year Forward View Target: By 2020/2021, Children should have access to high quality mental health care when they need it.

“Practical tips in older adults’ with depression and anxiety”

“More of a push to encourage physical health management in patient with SMI”

Attendance across Thames Valley

The Strategic Clinical Network for Mental Health held 6 study sessions in psychiatry for GPs across Thames Valley. These sessions were well attended by over 400 GPs, GP trainees and other primary care professionals. To date, the Mental Health Network has engaged with 61% of GP practices across Thames Valley (figure 2) and provided valuable learning and networking opportunities between primary and secondary care systems.

The Mental Health Network has held three study sessions in Oxfordshire, two in Berkshire and one in Buckinghamshire. (Two further study sessions are planned in the first quarter of 2019; one in Berkshire and one in Buckinghamshire to ensure equity across Thames Valley.)

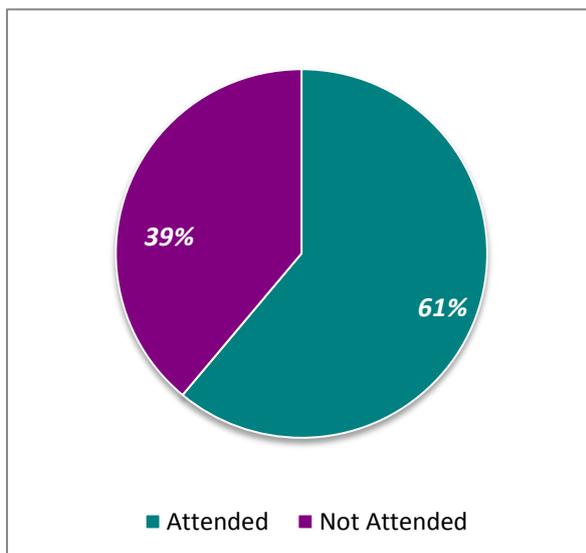


Figure 2. Percentage of Practices that have attended at least one study session

- Most notably, 82% of GP Practices in Oxfordshire CCG have attended at least one study session.
 - 60% of GP Practices in East Berkshire CCG have attended at least one study session.
 - 57% of GP Practices in Berkshire West CCG have attended at least one study session.
 - 36% of GP Practices in Buckinghamshire CCG have attended at least one study session.
- **93% of GPs would be interested in attending a similar event.**

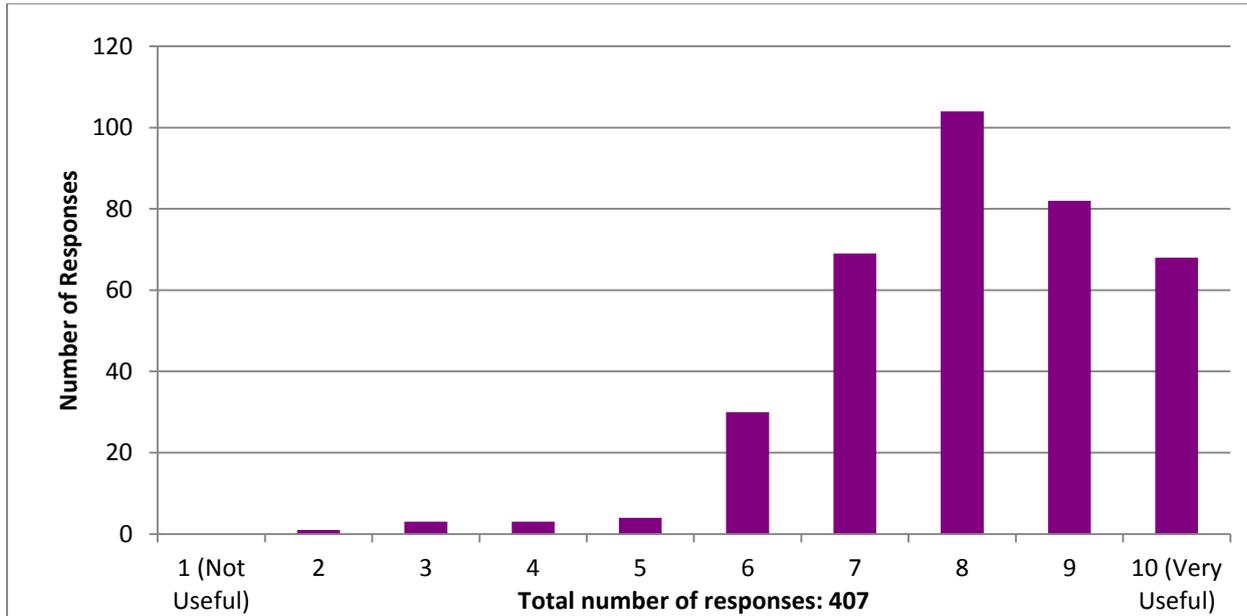
GP Study Sessions

- 13th December 2017, Oxfordshire
- 17th March 2018, Oxfordshire
- 16th May 2018, Berkshire
- 4th July 2018, Buckinghamshire
- 26th September 2018, Berkshire
- 31st October 2018, Oxfordshire
- 24th January 2019, Berkshire
- TBC March 2019, Buckinghamshire

Evaluation Summary

The study sessions are tailored to match key areas within the Five Year Forward View for Mental Health and identified areas of need as requested by the Clinical Commissioning Group or GPs to ensure these learning events remain relevant. On average, GPs rated the usefulness of the study session as 8 out of 10 with **88% of attendees rating the usefulness of the session as 7 or above (see figure 3).**

Figure 3. How Useful Was Today's Event? 1 (not useful) – 10 (very useful)



“[I have] gained a better understanding and differentials of bipolar disorder”

“[I will have] more awareness in general consultations”

“[I have learnt the] importance of offering a 'therapeutic' relationship to patients with suicide risk”

“Better management of patients with personality disorders and referrals to third sector for support.”

“Increased awareness of current evidence base for benefit of interventions, and their availability locally”

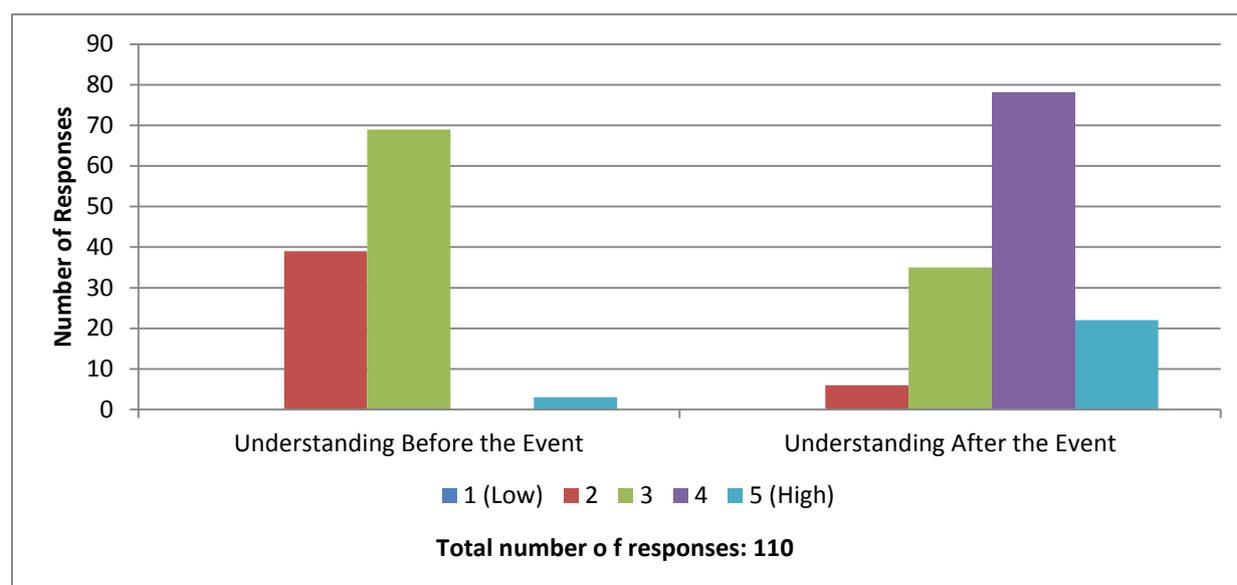
Section Summary

A recent study by MQ found that only 60% of GPs in the UK feel equipped to provide personalised mental health treatments, which can provide tangible benefits to a patient's quality of life⁷. In order to ensure the Study Sessions remained beneficial to GPs, we measured their level of understanding before and directly after the event. Across all topic areas, GPs recorded an increase in their level of understanding after the event. For the purpose of this report, feedback on all presentations has been aggregated by topic area (see table 1 for the number of presentations in each area). Below is a breakdown of results categorised into; acute mental illness, serious mental illness, perinatal mental health, anxiety & depression, personality disorder, children & young people's mental health, dementia & older adults mental health, skills training, eating disorder, addiction & substance misuse and all-age mental health (see appendix 2 for study day agendas).

Table 1. The number of the presentations in each topic area Dec 2017 – Oct 2018.

Children & Young People's Mental Health	Dementia & Older Adults Mental Health	Psychological Skills Training	Eating Disorder	Addiction & Substance Misuse	All-Age Mental Health
4	3	2	3	2	2
Acute Mental Illness	Serious Mental Illness (incl. Physical Health)	Perinatal Mental Health	Anxiety & Depression (incl. Medication)	Personality Disorder	
3	5	2	4	4	

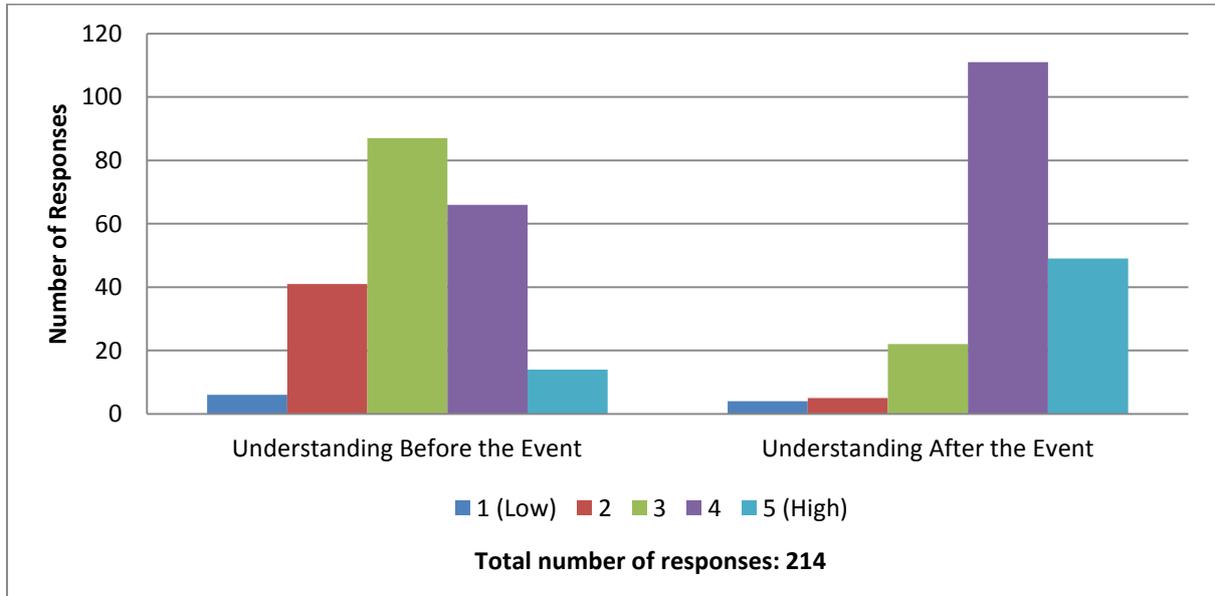
Acute Mental Illness



⁷ [It's trial and error for mental health patients, say GPs](#) (Oct. 2018)

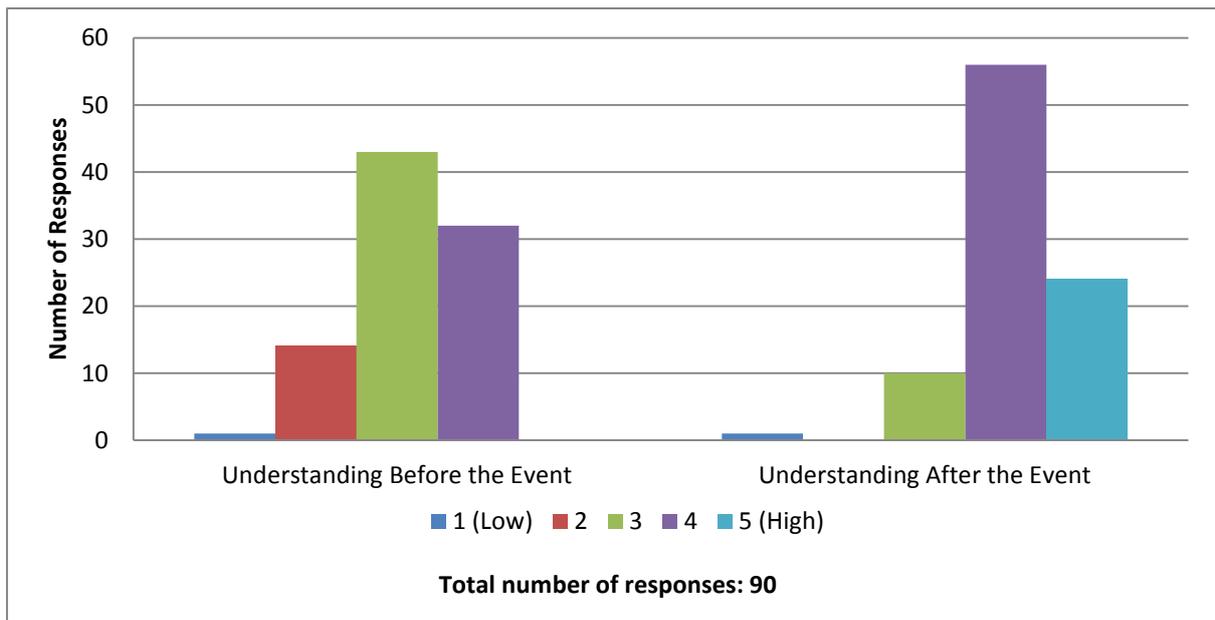
- Before the event, 22% of GPs rated their understanding of acute mental illness below 3.
- After the event, 4% of GPs rated their understanding of acute mental illness below 3.
- **The average level of understanding increased from a rating of 3 before the event, to a rating of 4 after the event.**

Serious Mental Illness (SMI)



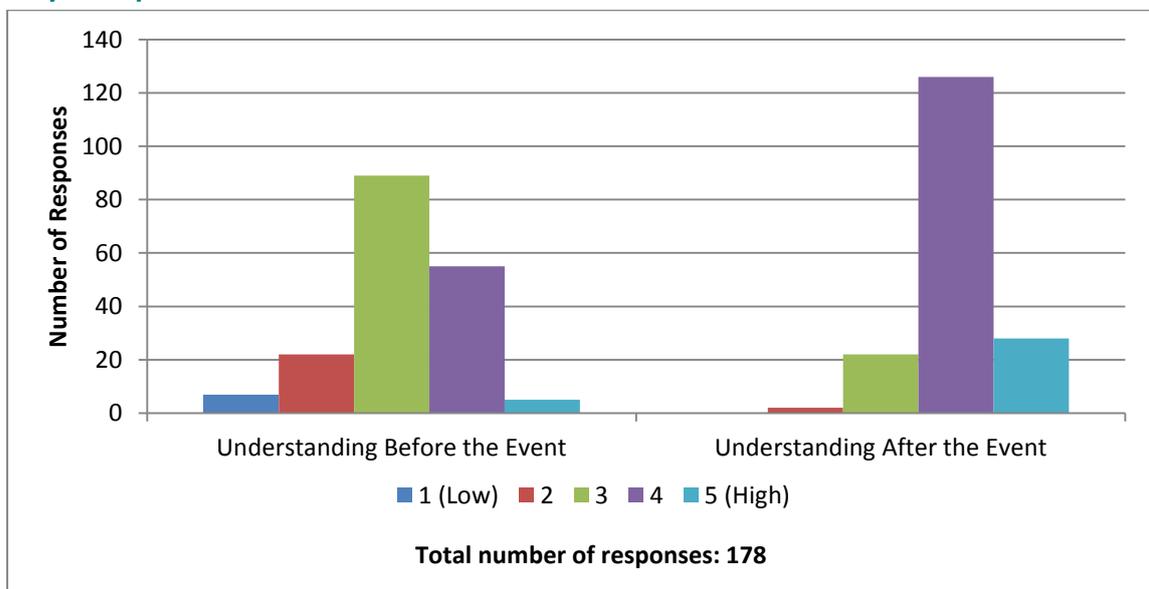
- Before the event, 21% of GPs rated their understanding of SMI below 3.
- After the event, 19% of GPs rated their understanding of SMI below 3.
- **The average level of understanding increased from a rating of 3 before the event, to a rating of 4 after the event.**

Perinatal Mental Health



- Before the event, 16% of GPs rated their understanding of perinatal mental health below 3.
- After the event, 0.9% of GPs rated their understanding of perinatal mental health below 3.
- **The average level of understanding increased from a rating of 3 before the event to 4 after the event.**

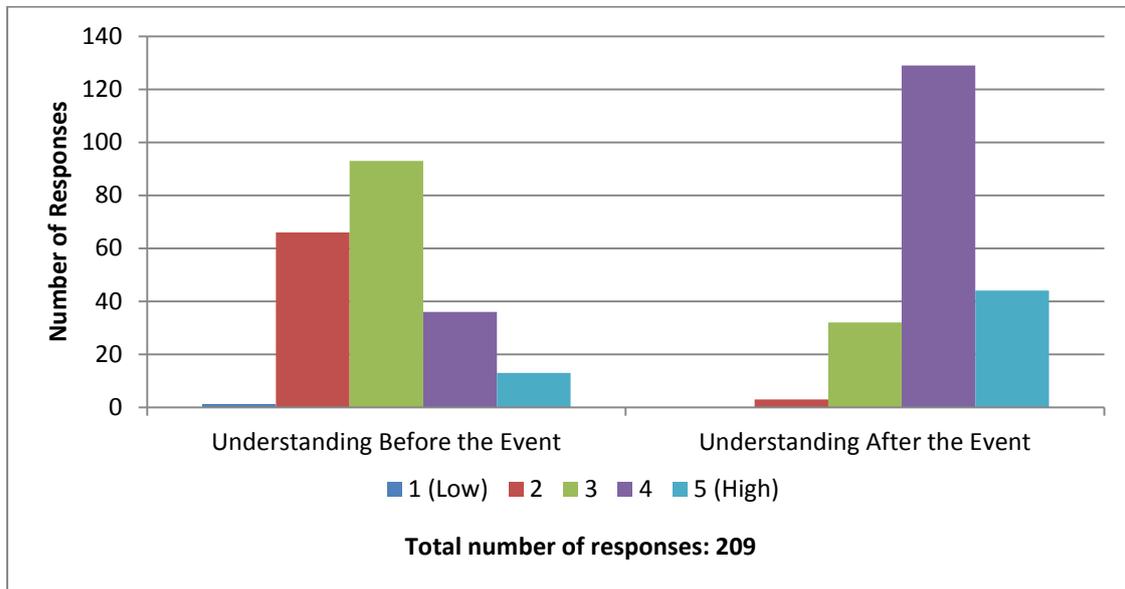
Anxiety & Depression



- Before the event, 16% of GPs rated their understanding of anxiety & depression below 3.
- After the event, 3% of GPs rated their understanding of anxiety & depression below 3.

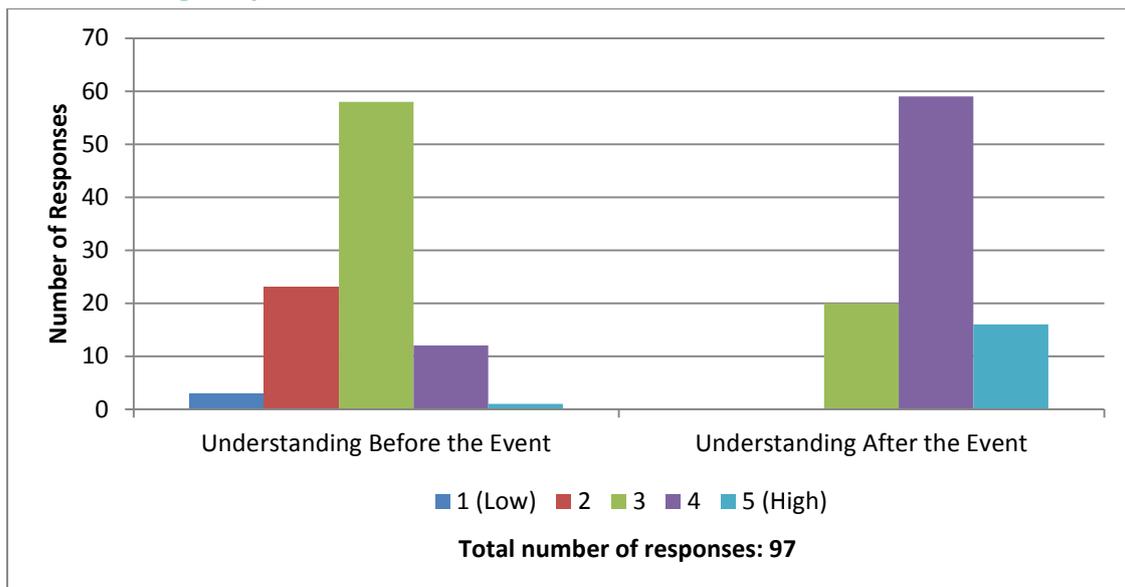
- The average level of understanding increased from a rating of 3 before the event, to a rating of 4 after the event.

Personality Disorder (PD)



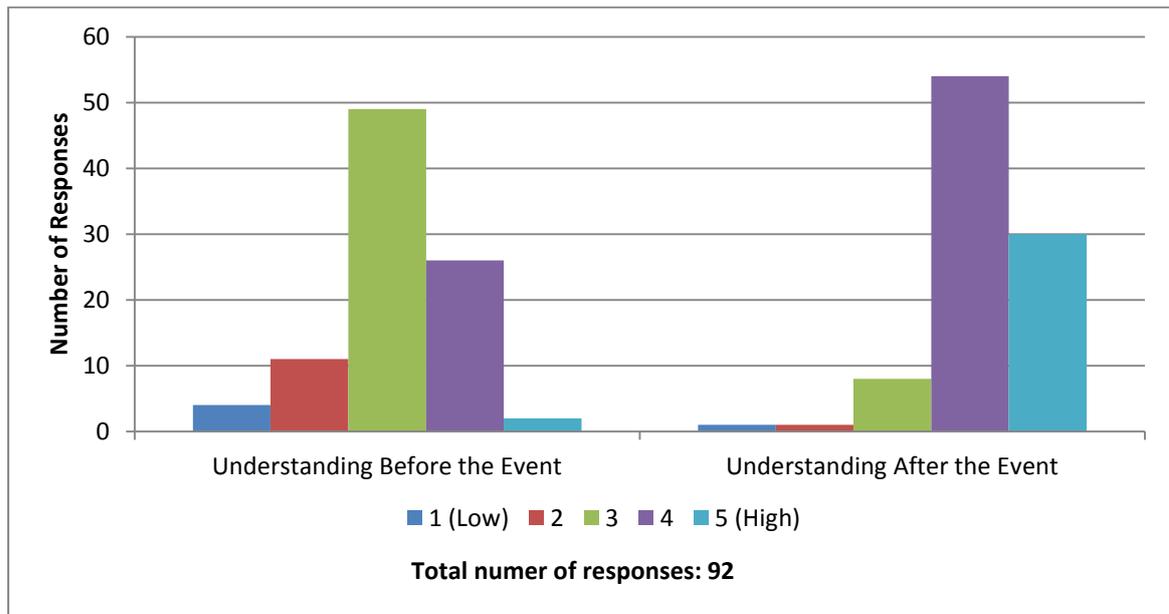
- Before the event, over a quarter of GPs (32%) rated their understanding of personality disorder below 3.
- After the event, 6% of GPs rated their understanding of personality disorder below 3.
- The average level of understanding increased from a rating of 3 before the event, to a rating of 4 after the event.

Children & Young Peoples Mental Health



- Before the event, over a quarter of GPs (26%) rated their understanding of CYP mental health below 3.
- After the event, 0% of GPs rated their understanding of CYP mental health below 3.
- **The average level of understanding increased from a rating of 3 before the event, to a rating of 4 after the event.**

Dementia & Older Adults Mental Health

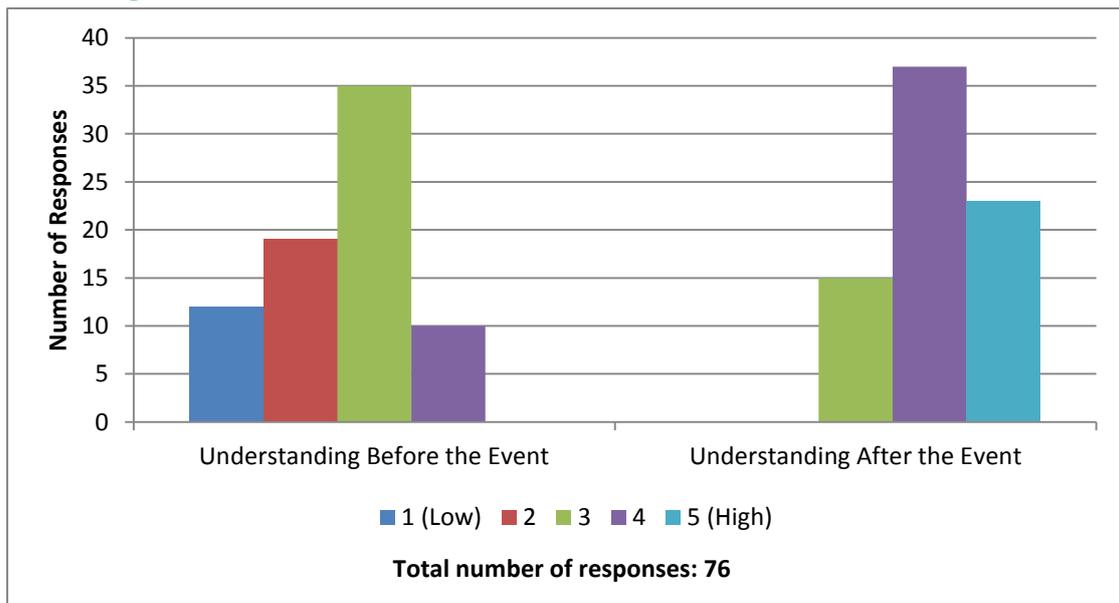


- Before the event, 16% of GPs rated their understanding of Dementia and Older Adults Mental Health below 3.
- After the event, 1% of GPs rated their understanding of Dementia and Older Adults Mental Health below 3.
- **The average level of understanding increased from a rating of 3 before the event, to a rating of 4 after the event.**

“[I am more likely to] use ACHEi in Dementia”

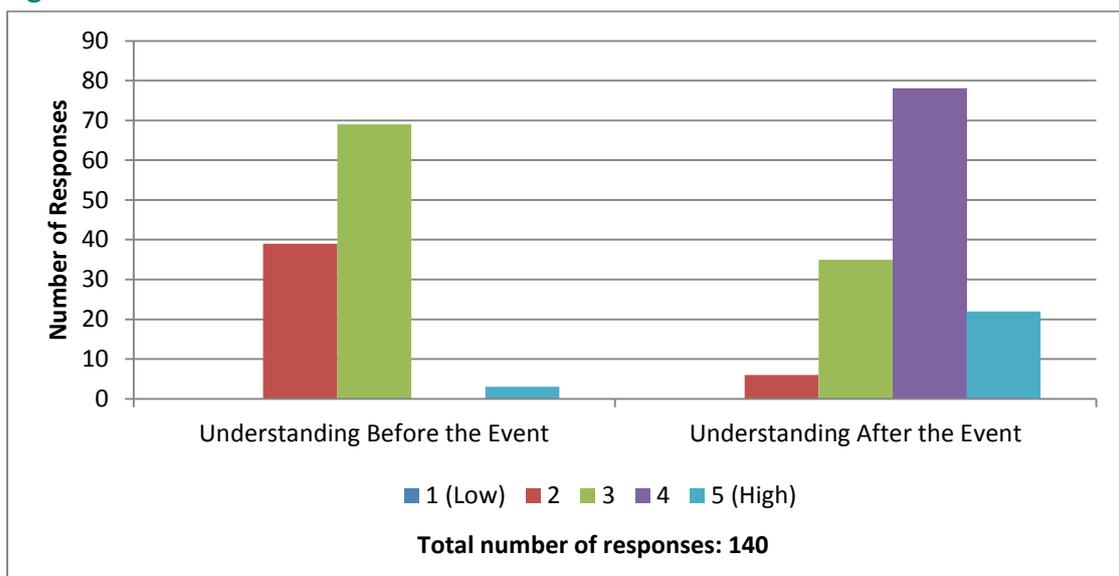
“[I will use] Trazadone for sleep in dementia. Not melatonin in dementia”

Skills Training



- Before the event, nearly half (40%) of GPs rated their understanding of psychological techniques below 3.
- After the event, 0% of GPs rated their understanding of psychological techniques below 3.
- **The average level of understanding increased from a rating of 3 before the event, to a rating of 4 after the event.**

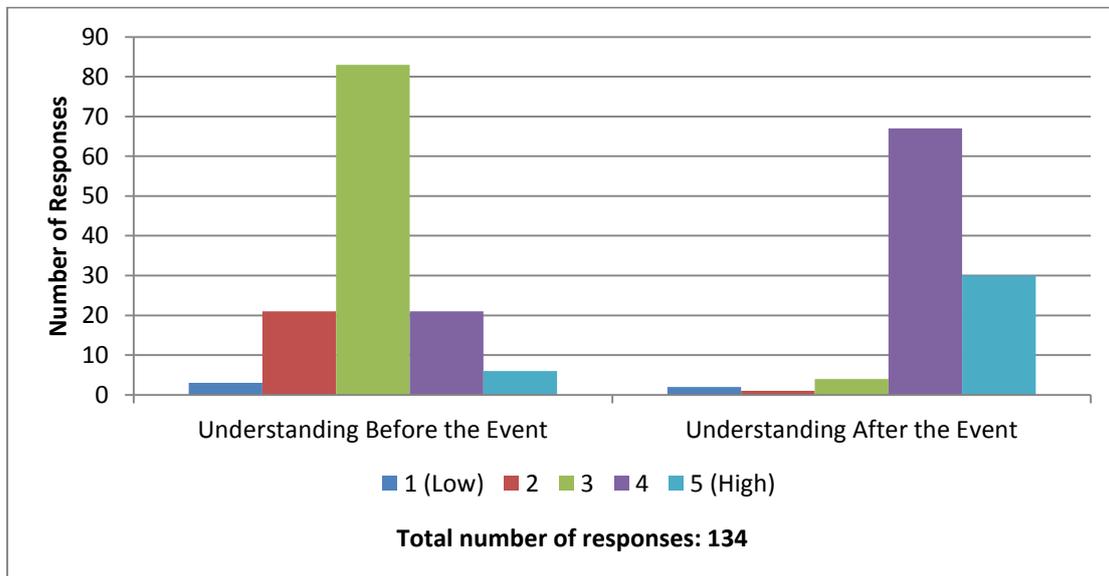
Eating Disorder



- Before the event, over a quarter of GPs (27%) rated their understanding of eating disorders below 3.

- After the event, 8% of GPs rated their understanding of eating disorders below 3.
- **The average level of understanding increased from a rating of 3 before the event, to a rating of 4 after the event.**

Addiction & Substance Misuse

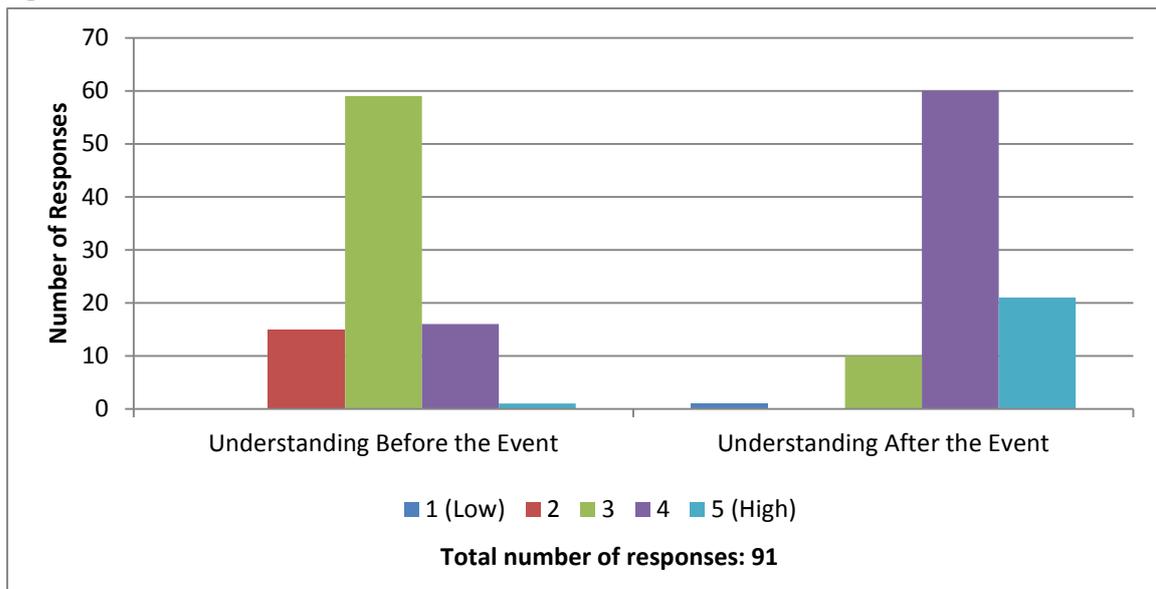


- Before the event, 17% of GPs rated their understanding of addiction & substance misuse below 3.
- After the event, 0.9% of GPs rated their understanding of addiction & substance misuse below 3.
- **The average level of understanding increased from a rating of 3 before the event, to a rating of 5 after the event.**

“I [will change my] approach to a patient with substance misuse”

“[I have] recognised the importance of continuity of care from GP and engagement with Drug & Alcohol services for substance misuse”

All-Age Mental Health



- Before the event, 16% of GPs rated their understanding of all-age mental health below 3.
- After the event, 0.9% of GPs rated their understanding of all-age mental health below 3.
- **The average level of understanding increased from a rating of 3 before the event, to a rating of 4 after the event.**

Below is the percentage of GPs who rated a change in practice as 7 or above, when asked ‘to what extent will each of the presentations support you to change your current practice?’ (1 no change – 10 significant change)

- **75% of GPs stated that the presentations on skills training will support a change in their current practice.**
- **66% of GPs stated that the presentations on perinatal mental health will support them to change their practice.**
- **61% of GPs stated that presentations on Dementia and Older People’s Mental Health will support a change in their current practice.**
- 59% of GPs stated that the presentations on acute mental illness will support them to change their current practice.
- 59% of GPs stated that the presentations on CYP mental health will support a change in their practice.

- 57% of GPs stated that the presentations on serious mental illness will support them to change their current practice.
- 55% of GPs stated that the presentations on All-Age Mental Health will support a change in their current practice.
- 50% of GPs stated that the presentations on Personality Disorder will support a change in their practice.
- 50% of GPs stated that the presentations on eating disorders will support a change in their current practice.
- 49% of GPs stated that the presentations on anxiety & depressions will support a change in their practice.

Areas of Interest

GPs were also asked to note their areas of interest to support planning for future study sessions. The ten main areas GPs identified were:

- Psychological Skills Training (such as CBT and Mindfulness)
- Anxiety & Depression
- Children & Young Peoples Mental Health
- Learning Disability & Mental Health
- Serious Mental Illness
- Complex Needs (including Personality Disorder)
- Dementia and Older Adults Mental Health
- Eating Disorder
- Acute Mental Illness
- Medication, Monitoring and Prescribing

The Strategic Clinical Network has developed an online resource to support GPs to enhance their mental health awareness. All presentations are made available on our website. There are also videos of selected sessions on the website.

For GP Study Session resources, follow the link to our website:
<http://tvscn.nhs.uk/mental-health-primary-care/psychiatry-for-general-practitioners-study-days/>

Sustainability

Since the pilot in December 2017 numbers of attendees have continued to grow and systems for communicating to potential audiences have improved. This includes advertising directly to GPs that have previously attended a study session, as well as, promoting through CCGs, CEPNs and regional communications bulletins.

Also the subject matter and topics have become more aligned to GPs needs and partner's priorities.

The SCN anticipates that the budget will be available to support the momentum created during 2018 to continue to grow, and to utilise the knowledge and skills gained about what makes such events most valuable.

Band 6 organiser – 1 day per week for 40 weeks = **£6,480**

Band 4 Admin – 2 days per event to attend, prepare name badges, presentation etc. = **£1,389**

Band 8a strategic input – 2 days per event to set agenda, write to speakers, encourage partnerships = **£2757**

Total = £22,626 per year.

Assuming 400 GPs attend over the year this equates to £56 per GP for 4-5 hours of specialist mental health training.

Financial Case

The costs for the study days comprise the venue costs, speakers costs where non-NHS, service users expenses and the cost of the mental health network staff involved in planning and organizing the sessions.

On the assumption that there are 6 sessions per year (3 in Oxfordshire and Bucks and 3 in Berkshire), the costs are as follows:

Venue costs: (no lunch provided or AV technician). **£1,500 x 6 = £9,000**

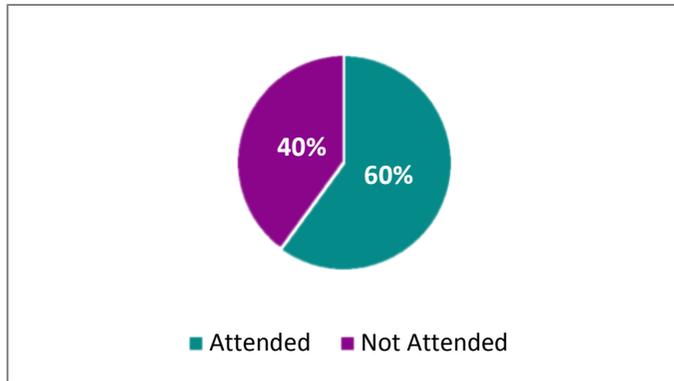
AV costs: When there are over 80 attendees relay screens and technician are required at a cost of £1000.00. This is needed in Maidenhead and Reading (twice per year). **£2,000**

Expenses for speakers/service users:
£1,000 per year

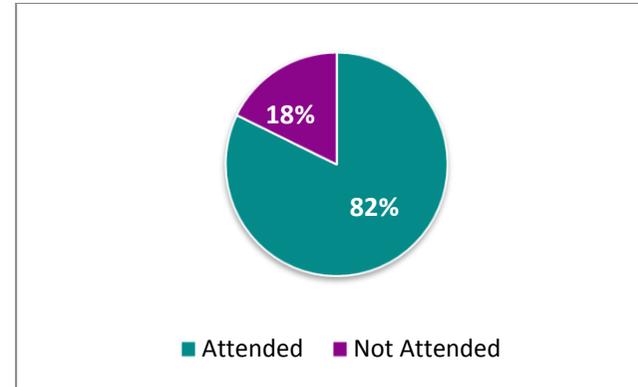
SCN employee costs:

Appendix 1 – Attendance by CCG

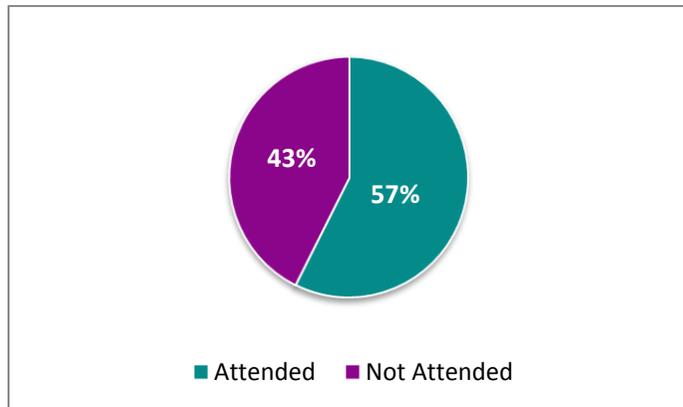
East Berkshire CCG



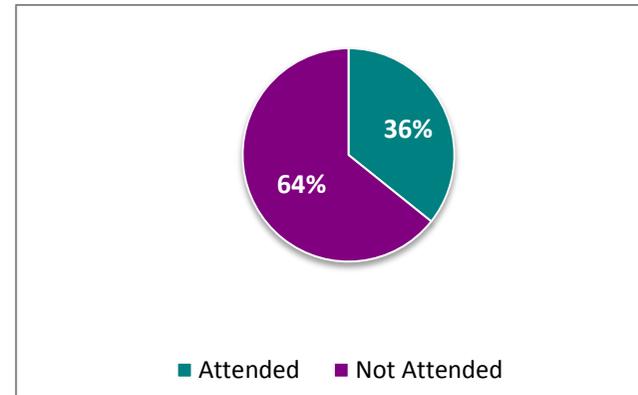
Oxfordshire CCG



Berkshire West CCG



Buckinghamshire CCG



Appendix 2 – GP Study Session Agendas

13th December 2017, Oxfordshire

- 13:00 **Welcome and Introduction**
Professor John Geddes, Head of Department of Psychiatry,
University of Oxford
- 13:10 **Physical health: what primary care does what secondary care can do**
Dr Sian Roberts, Clinical Director for Mental Health, Learning Disabilities and Dementia, Chiltern
and Aylesbury Vale CCGs
- 13:30 **Personality Disorder pathways and interventions**
Dr Steve Pearce, Consultant Psychiatrist, Oxford Health NHS FT
- 14:00 **Suicide risk assessments**
Professor Keith Hawton, Director of Centre for Suicide Research, Department of Psychiatry,
University of Oxford
- 14:30 **Questions and Discussion**
- 15:15 **Eating disorders – recent change to guidelines**
Dr Agnes Ayton, Consultant Psychiatrist and Medical Lead,
Cotswold House, Oxford Health NHS FT
- 15:45 **Addiction and Substance misuse pathways**
Dr Gordon Morse, Chief Medical Officer, Turning Point
- 16:15 **Questions and Discussion**
- 16:35 **Further training opportunities and resources**
Ineke Wolsey, Anxiety and Depression Network Manager,
Oxford AHSN
-

17th March 2018, Oxfordshire

- 13:00 **Welcome and Introduction**
Professor Paul Harrison, Professor of Psychiatry,
University of Oxford and Honorary Consultant Psychiatrist, Oxford Health NHS FT
- 13:10 **Eating Disorders – Children and Young People**
Dr Anne Stewart, Consultant Child & Adolescent Psychiatrist, Oxford Health NHS FT and
University of Oxford
- 13:40 **Bipolar Disorder**
Professor Paul Harrison, Professor of Psychiatry,
University of Oxford and Honorary Consultant Psychiatrist,
Oxford Health NHS FT
- 14:10 **10 Minute CBT – practical skills for GP Consultations**
Dr Lee David, GP and founder and Director of 10 Minute CBT
- 15:30 **Dementia**
Dr Ciaran Abbey, Consultant Old Age Psychiatrist,
Oxford Health NHS FT
- 16:00 **Medication for Depression and Anxiety**
Professor Phillip Cowen, Professor of Psychopharmacology, University of Oxford
- 16:30 **Perinatal Mental Health**
Dr Michael Yousif, Consultant in Psychological Medicine and Perinatal Psychiatry, Psychological
Medicine Service, Oxford University Hospitals NHS Foundation Trust
- 17:00 **Further training opportunities and resources**
Ineke Wolsey, Anxiety and Depression Network Manager,
Oxford AHSN and Iona Wood, Health Education England

16th May 2018, Berkshire

- 13:00 **Welcome and Introduction**
Professor John Geddes, Head of Department of Psychiatry,
University of Oxford
- 13:10 **Eating Disorders – Children and Young People**
Dr Adhiraj Joglekar , Consultant Child and Adolescent Psychiatrist, Berkshire Healthcare NHS
Foundation Trust
Lisa Thomson, Strategic Lead, Psychological Perspectives in Education and Primary Care (PPEP
Care)
- 13:40 **Suicide risk assessments with focus on adolescents**
Dr Tauseef Mehdi, Consultant Child and Adolescent Psychiatrist
Berkshire CAMHS Rapid Response Service, Berkshire Healthcare NHS Foundation Trust
- 14:10 **Addiction and substance misuse management**
Dr Steve Brinkman, GP, Substance Misuse Management Good Practice
- 15:00 **Personality Disorders – Pathways and Interventions**
Dr Dean Rutland, Consultant Psychiatrist in Medical Psychotherapy and Psychotherapy Tutor
for Berkshire Healthcare NHS Foundation Trust
- 15.30 **Physical Health of those with serious mental illness**
Dr Katie Simpson, GP Clinical lead for Mental Health, East Berkshire CCG
- 16:00 **Further training opportunities and resources**
Lisa Thomson, PPEP Care and Ineke Wolsey, Anxiety and Depression Network Manager, Oxford
AHSN
-

4th July 2018, Buckinghamshire

- 13:00 **Welcome and Introduction**
Dr Kate Saunders, Director of Medical Studies, University of Oxford
- 13:10 **Dealing with trauma – managing adverse childhood experiences**
Dr Helen Griffiths, Clinical Psychologist, Children’s Psychological Medicine Department, John
Radcliffe Hospital
- 13:40 **Suicide risk assessments with focus on adolescents**
Dr Isabel Paz, Consultant Child and Adolescent Psychiatrist, Children’s Psychological Medicine
Department, John Radcliffe Hospital
- 14:10 **On the border between the psychotic and neurotic: a framework for working with borderline
states**
Dr Chris Newrith, Consultant Psychiatrist in Psychotherapy, Oxford Health NHS Foundation Trust
- 15:00 **Digital approaches to understanding mental disorder**
Dr Kate Saunders, Director of Medical Studies, University of Oxford
- 15.30 **IAPT – LTC – update and encouraging referrals**
Dr John Pimm, Consultant Clinical Psychologist , Clinical Lead for Psychological Therapies
Pathway – Buckinghamshire, Oxford Health NHS Foundation Trust
- 16:00 **Detecting Depression and Anxiety in Older Adults:**
Dr Nick Woodthorpe, Consultant in Old Age Psychiatry, Berkshire Healthcare NHS Foundation
Trust
- 16:30 **Further training opportunities and resources**
Ineke Wolsey, Anxiety and Depression Network Manager, Oxford AHSN

26th September 2018, Berkshire

- 13:00 **Welcome and Introduction**
Dr Katie Simpson, GP Clinical Lead for Mental Health, East Berkshire CCG (Chair) & Dr Angus Tallini, GP Mental Health Lead, Berkshire West CCG (Co-chair)
- 13:10 **Autism in children & young people and Adults - Dealing with complex cases**
Dr Mairi Evans, CAMHS Neurodevelopmental Lead, Berkshire Healthcare NHS Trust & Dr Trevor Powell, Consultant Clinical Neuropsychologist, Berkshire Healthcare NHS Trust
- 13:50 **Bipolar disorder: making sense of mood swings**
Dr Nav Sodhi, Associate Medical Director, Berkshire Healthcare NHS Foundation Trust
- 14:20 **The importance of early diagnosis in Dementia**
Dr Umar Bedi, Consultant in Old Age Psychiatry, Berkshire Healthcare NHS Foundation Trust
- 15:10 **Medication for Depression and Anxiety**
Dr Katie Simpson, GP Clinical Lead for Mental Health, East Berkshire CCG
- 15:40 **Perinatal Mental Health**
Bryony Gibson, Thames Valley Perinatal Mental Health Project Lead, Thames Valley Strategic Clinical Network and Joint Chair of the Thames Valley Regional Perinatal Mental Health Network, Senior SHaRON GDE Project Manager
- 16:10 **Behavioural Activation – Skills Training**
Angharad Stoodley de Carvalho, High Intensity Cognitive Behavioural and EMDR Level 2 Psychotherapist, Berkshire Healthcare NHS Foundation Trust
- 16:40 **Further training opportunities and resources**
Dr Michelle Lee, Charlie Waller Institute, University of Reading & Oxford Academic Health Science Network
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31st October 2018, Oxfordshire

- 13:00 **Welcome and Introduction**
Professor Phillip Cowen, Biomedical Research Centre, University of Oxford
- 13:10 **Autism in children & young people - Dealing with complex cases**
Maria Bourbon, Acting Clinical Team manager, NDC Pathway Team, Oxford Health NHS Foundation Trust
- 13:40 **IAPT- LTC update and encouraging referrals**
Heather Salt, LTC lead for Oxfordshire and national advisor to the Integrated IAPT programme
- 14:10 **Creating a culture of positivity and hope when working with challenging issues of people with PD**
Gill Attwood, Training and Vocational Initiatives in Personality Disorder and STARS
- 14:50 **Medically unexplained physical symptoms**
Phil Davison, Psychiatrist, Oxford Health NHS Foundation Trust
- 15:40 **Further training opportunities and resources**
Ineke Wolsey, Anxiety and Depression Network Manager, Oxford AHSN
- 16:00 **CAMHS update and tips for managing CYP in primary care while waiting for CAMHS input**
Rebecca Dadswell, Operational Lead CAMHS, Oxford Health Foundation Trust and Gemma Abitabile, Senior SPA Practitioner, Oxfordshire CAMHS Single Point of Access
- 16:30 **Physical Health and SMI plans**
David Chapman, Oxfordshire CCG Mental Health Lead

24th January 2018, Berkshire

- 13:00 **Welcome and Introduction**
Dr Michael Browning, Associate Professor, University of Oxford
- 13:15 **IAPT for Long-Term Conditions**
Judith Chapman, Clinical Director, Berkshire Healthcare NHS FT
- 13:45 **Mental Health in Children and Young People**
Lisa Thomson , Psychological Perspectives in Education (PPEP care), Berkshire Healthcare NHS FT
- 14:30 **Sport in Mind**
Laura Brooks, Berkshire Development Manager
- 14:45 **Berkshire West 'Your Way'**
Rachel Wilson, Your Way Project Manager and Sarah Jackson, Your Way Worker
- 15.15 **Personality Disorder, a GP consultation from a service user perspective**
Fiona Blyth, Gillian Attwood with STARS (ex-service users from the Oxford Complex Needs service)
- 15:45 **Depression and Anxiety in Older Adults**
Julian Mason, Consultant Old Age Psychiatrist, Berkshire Healthcare NHS FT (TBC)
- 16:30 **Early Intervention in Psychosis**
Zoe Emms, Service Manager – Early Intervention in Psychosis, Berkshire Healthcare NHS FT
- 17:00 **Close**



For more information contact:

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Carolyn.Hinton@nhs.net

Website: <http://tvscn.nhs.uk>