



Case Study: Tower Hamlets – Primary Care Networks

Background

The development of Primary Care Networks (PCN) within Tower Hamlets began with one 'pioneer' PCN in the borough; now there are four PCNs covering the whole borough of Tower Hamlets.

The service has found it is very important for IAPT to be present at the discussions, otherwise there is a risk that the PCN becomes focussed on secondary mental health. IAPT can then contribute to discussions regarding care pathways, and provide input regarding where IAPT fits within them.

Within Tower Hamlets, the IAPT service took a proactive approach, and used existing contacts (for example through secondary care, psychological therapies director, mental health transformation manager) to ask to be invited to the PCN discussions.

How does it work?

There is a daily referral huddle for each PCN, which lasts for 20 minutes, attended by GPs, CMHT, secondary care psychotherapy and IAPT. The huddles support GPs review their referrals to mental health services – particularly where they are not sure which service to refer to. IAPT staff attending these huddles have to be able to make decisions on behalf of the service re: which patients IAPT will accept.

Senior IAPT managers attend PCN planning meetings in order to feed into the shaping of the operational protocols of each PCN and to ensure that IAPT is kept in mind throughout these planning processes.

Attending the discussions regarding setting up PCNs and the daily huddle can be very time consuming, as there are lots of meetings, but the benefits to the service have been great.

Benefits

As well as improving understanding by the GPs, the huddles have helped IAPT understand secondary mental health service referral criteria and provision, and vice versa.

PCN discussions have helped build relationships between primary care and various mental health providers.

Joint working has fostered an increased recognition and awareness of IAPT amongst other services.