

Review of urgent mental health services across Lancashire and South Cumbria

Stakeholder briefing: 23/05/2019

This briefing is intended to update on the results of a review of the urgent mental health pathway and summarise how the Healthier Lancashire and South Cumbria Integrated Care System, a partnership of NHS, local government, police and other organisations, is taking action together to address this situation.

Background

Since early 2018 there has been a significant increase in waiting times for urgent mental health services across Lancashire and South Cumbria.

Lancashire Care NHS Foundation Trust is the main provider of mental health services in Lancashire. The Trust works in collaboration with commissioners from all eight Clinical Commissioning Groups across Lancashire and South Cumbria, with local authorities, the police and a wider range of partners.

People have been waiting too long for admission to hospital and there has also been an impact on the ambulance service and police which is not sustainable. In response a Risk Summit was held for health leaders across Lancashire and South Cumbria on 18 April 2018, which resulted in the development of a Mental Health Improvement Plan and a partnership approach to reducing the demand on mental health services.

Independent review of mental health services

On behalf of all partners, including NHS, local authority, voluntary and charitable sector, police and other emergency services, the Healthier Lancashire and South Cumbria Integrated Care System (ICS) decided to commission an independent review of urgent mental health services. This is because it was clear that no single organisation could provide a solution on its own.

The review aimed to develop future plans for mental health services for the 1.7million people in Lancashire and South Cumbria and look for ways to support Lancashire Care NHS Foundation Trust, and other mental health providers across the region, to enhance the quality of services for people with mental health conditions.

Northumberland, Tyne and Wear NHS Foundation Trust, as a provider of high performing mental health services, was commissioned to independently lead the review with additional input and oversight from senior clinicians independent of both Trusts.

The review consisted of a number of phases which included:

- Analysis of data related to mental health services.
- A visit for senior mental health staff to observe and see in practice the services provided by Northumberland Tyne and Wear NHS Foundation Trust.
- A series of events held in November 2018 for people that use mental health services and for people who care for them to share their experiences of using services and their ideas for how services can be improved. 100 service users were listened to in total at these events.
- A series of events held in November and December 2018 for staff from NHS, local authorities, police, voluntary, community and faith organisations to share their experiences of working in services and their ideas for improvement. 105 members of staff, 50 GPs and more than 60 staff from voluntary, community and faith organisations were involved in discussions at these events.

The review began in October 2018 and has now been completed. The results have been made available on the Healthier Lancashire and South Cumbria website here: healthierlsc.co.uk/MentalHealth

The final report is now being shared and will inform a system wide strategy for mental health services.

What does the report tell us?

The review was commissioned to provide an independent perspective of the issues across all partners that are affecting the delivery of urgent mental health services. We are grateful to the service users, members of staff and stakeholders who contributed to the review. Their open and honest input has helped to create a clear picture of a system that is not meeting the demands of local people, and needs to improve significantly.

The report includes 27 recommendations for improving mental health services. There is a strong commitment by all partners to act upon these recommendations in order to improve services and deliver better mental health care for people across Lancashire and South Cumbria.

What happens now?

We have listened to what our service users, staff and other stakeholders have to say and we understand people will want to see action as quickly as possible. We understand that people will be quite rightly concerned, but we know we have dedicated staff who want to improve services and the experiences of service users.

Northumberland, Tyne and Wear noted that, while many of these recommendations draw upon the need to improve, there are many positives to build upon. These include:

- A willingness by senior leadership to hear the views of service users and carers, and to act upon these.
- A willingness to also hear from staff of all kinds, and to encourage openness and honesty about the challenges faced.
- Many pockets of good practice described across all providers and commissioners which can be spread and shared beyond organisational boundaries.
- The strong desire of staff across the frontline to deliver better services.

The following commitments have been made by partner organisations in Lancashire and South Cumbria in response to the recommendations from the review:

Commitments from the Healthier Lancashire and South Cumbria leadership:

- Work has already begun between commissioners and providers to develop a whole system strategy for Mental Health. This will be informed by the outcomes of this review.
- One of the ICS identified priorities is “To strengthen the mental health and resilience of people and communities”. This commits us to continue working in partnership at neighbourhood, ICP and ICS levels.
- As an ICS, we will support Lancashire Care NHS Foundation Trust, commissioners, local authorities and community/voluntary organisations to agree clear actions arising from this review.
- The ICS Mental Health Oversight Group will oversee the system response and ensure local partnerships (ICPs) demonstrate the impact of agreed changes on delivery of frontline services which are effective and joined-up in order to meet people’s needs.

Commitments from health and social care commissioning:

- As ICS partners, we will review the skills, competencies and experience required to effectively commission mental health services and implement a development programme where identified.
- We will be transparent on spend across all commissioning organisations and understand how this links to demand and capacity.
- We will agree what looks and feels good for the people of Lancashire and South Cumbria including developing an outcomes framework we can all sign up to.
- We will understand in greater detail what other areas (national / international) invest in as part of the Adult Mental Health pathway and understand how transferrable that might be to Lancashire and South Cumbria.
- We will collaborate with all stakeholders (including service users, carers and voluntary, community faith and social enterprise organisations) and deliver a mental health strategy for Lancashire and South Cumbria linked to the points above which enable a seamless system of care and support.
- We will work to understand how, and against what areas, we can better align budgets to ensure we reduce duplication and maximise the value of the limited resources we all have available – this will include working collaboratively to align budgets of other partners such as district councils and bodies such as the Department of Work and Pensions and Criminal Justice System.

Urgent actions from Lancashire Care NHS Foundation Trust:

Crisis pathway

| Theme | Action | Due |
|---|--|------------|
| Strengthen Clinical Pathways in adult services (Pennine Lancs and Blackpool, Fylde and Wyre) | • Implement new leadership posts across liaison / Mental Health Decision Units / Crisis / Home Treatment Teams | Complete |
| | • Review and strengthen Crisis / Home Treatment Teams operating | 30.07.19 |

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| | model, including bringing teams together in Pennine Lancashire and ensuring robust 24/7 operating | |
| A&E Liaison | <ul style="list-style-type: none"> • Increase staffing in line with Mental Health Improvement Standard and change staffing capacity to meet demand patterns • Relocate liaison team to A&E in Blackburn | 31.08.19 |
| S136/Place of safety | <ul style="list-style-type: none"> • Implement a substantive dedicated staffing model | Complete |
| Mental Health Decision Units | <ul style="list-style-type: none"> • Review clinical acceptance criteria • Develop operational Standard Operating Procedure for function of Mental Health Decision Units | Complete 31.05.19 |
| Crisis Houses | <ul style="list-style-type: none"> • Review acceptance criteria including time of day for admission | 30.06.19 |
| Frequent Attenders | <ul style="list-style-type: none"> • Establish a Frequent Attenders clinical team | 30.06.19 |
| Joint working with acute trusts | <ul style="list-style-type: none"> • Develop Standard Operating Procedure for admission thresholds for acute sector including service users requiring detoxification and stable older adults | 30.06.19 |

Bed Management

| Theme | Action | Due |
|--------------------------------|--|----------|
| Short-term bed capacity | <ul style="list-style-type: none"> • Ensure 50/50 risk share of excess Out of Area Placements with CCGs is within LCFT contract | 31.05.19 |
| | <ul style="list-style-type: none"> • Commission adult rehabilitation & Learning Disability beds | 30.06.19 |
| | <ul style="list-style-type: none"> • Confirm with NHS Improvement that PRIORITY beds are not defined as Out of Area Placements | 31.05.19 |
| | <ul style="list-style-type: none"> • Review early identification and management of Out of Area Placement capacity | 30.06.19 |
| Assessment wards | <ul style="list-style-type: none"> • Review length of stay to bring down to 72 hours | 31.07.19 |
| | <ul style="list-style-type: none"> • Strengthen clinical leadership | 31.07.19 |
| Delayed discharges | <ul style="list-style-type: none"> • Implement red to green enabling appropriate discharge planning | 31.07.19 |

System Redesign

| Theme | Action | Due |
|--------------------------|---|----------|
| Clinical Pathways | <ul style="list-style-type: none"> • Develop system-wide Mental Health Risk Register | 31.05.19 |
| | <ul style="list-style-type: none"> • Review primary and secondary care | 31.05.19 |

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| | interfaces | |
| Street Triage | <ul style="list-style-type: none"> Evaluate Blackpool pilot and develop a plan to roll out across Lancashire | 30.06.19 |

Longer Term

- Strategic partnership with Lancashire Care NHS Foundation Trust and Northumberland, Tyne and Wear NHS Foundation Trust and improvement programme agreed.
- Partnership approach with service users, staff, commissioners and partners.
- Immediate priority - redesigning the adult acute pathways across Pennine Lancashire and Blackpool, Fylde and Wyre.
- Care pathway redesign across all mental health and learning disability services.

Mental Health Investment Standard

- Ensure appropriate funding is secured in line with the national Mental Health Investment Standard for A&E liaison, Mental Health Decision Units, Crisis / Home Treatment Teams and Community Mental Health Teams.

Mental Health Act

- Reset current clinical practices regarding legal framework.

Clinical pathway redesign

- Develop Quality Improvement transformation programme in partnership with Northumberland, Tyne and Wear NHS Foundation Trust, service users, commissioners and other partners.
- Review drivers of demand and associated capacity.
- Improve efficiency and productivity / reduce waste.
- Develop evidenced based pathways, mapping current and future states and plans to address service gaps and co-produced with service users – to include the Emotionally Unstable Personality Disorder pathway.

Service users' co-production and involvement in care

- Review the service model for access to mental health services.
- Enhance service users involvement in their own care plan.
- Co-produce Pathway Redesigns with service users.

Clinical risk-taking

- Adopt 'home first' approach.
- Optimise service user leave planning.
- Reduce restrictive practices.

Beds Management

- Implement short and medium term automated live bed management tool.
- Review bed gatekeeping function.

Inpatient Services

- Enhance inpatient leadership to ensure clarity of criteria, purpose and performance of wards.
- Review bed capacity against geographical requirements and bed distribution.

- Develop business cases for Adult Rehabilitation and Learning Disabilities assessment and identify capital source.

Partnerships

- Work collectively to develop whole system ICS strategy for mental health.
- Review role of Police Liaison Officer and develop and implement standard operating procedures with Police to ensure appropriate detentions.
- Enhance working relationships with voluntary and charitable sector.
- Strengthen partnership working with Approved Mental Health Professionals and Social Workers.
- Analyse data driving increase in demand for mental health services.
- Collaborate with acute sector to train A&E staff in mental health pathways, develop appropriate pathways for admission to acute beds, ensure appropriate environment for liaison staff to work with mental health patients in A&E.

Commitments from Social Care:

- We recognise the need for clarity of roles and contribution of the social care workforce who provide a distinctive contribution in partnership with NHS funded mental health services. This will require an integrated approach, whilst focusing on the social aspects of people's lives.
- We will work collaboratively across the four local authorities to provide a consistent approach across the ICS, with recognition that each ICP will have specific needs.
- We will continue to support recruitment, retention and professional development of a social care workforce and will keep the skill mix under review to ensure resources are deployed in the most efficient and effective way for the benefit of service users.
- All Local Authority Social Work teams are committed to contributing to and achieving joint outcomes for the ICS / ICP. Supporting discharge of long stay patients fits within these priorities.
- We will work with system partners to review pathways and ensure fully integrated and collaborative approach. Working to strengths and best using skills to optimise efficiency and outcomes with an emphasis on Home First and Community being the preferred pathway.
- We will work collaboratively on an approach to managing mental health in connection to substance misuse pathways including the joining up of resources upstream where required.
- We will implement a quality improvement programme to review the drivers of demand to under the capacity and demand in Social Care workforce. This will include identifying system efficiencies and refocusing on prevention.
- We will use management tools such as LEAN to understand end to end services, map existing and where required redesign services to achieve better outcomes. This will be undertaken collaboratively.
- A focus on prevention will be built into the ICS mental health strategy, which will include an informed and consistent framework. We will work in partnership with the VCFS sector to target resources to outcomes with real measure and grip on commissioning.

Commitments from acute sector:

- The CEOs of the Acute Provider Trusts endorse and support the report, and agree to work actively in partnership to respond to the issues raised including in participating in quality improvement programmes.

- We agree to work in collaboration with Lancashire Care NHS Foundation Trust to build skills in our frontline staff that are specific to mental health. This will support their own resilience and benefit patients and their families.
- We agree to work in collaboration with Lancashire Care NHS Foundation Trust to improve the A&E environment for mental health patients, including the availability of appropriate ligature safe assessment / therapeutic rooms and dedicated work space for mental health staff to be based within the department.
- We will continue to provide robust challenge as partners in the ICS to areas of concern, these include:
 - Changes to Substance Misuse Services and their significant impact on acute pathways with an increase in alcohol related admissions and liver disease.
 - Working with Lancashire Care NHS Foundation Trust and commissioners to ensure that liaison teams provide an effective 7 day service.
 - The high impact from mental health patient breaches across the whole ICS system
 - The commissioning and decommissioning of third sector partners across the pathways which are specific to meet ICS and ICP requirements.

Commitments from police and ambulance service:

- Lancashire Constabulary and North West Ambulance Service NHS Foundation Trust accept and support the recommendations contained within the Northumberland, Tyne and Wear NHS Foundation Trust report. We recognise the need to work collaboratively to improve the delivery of mental health services to the people of Lancashire.
- In order to support this improvement we agree to deliver improved mental health training to our frontline staff, in order that they may better understand patients with whom they come into contact, and the pathways available to improve their health through appropriate treatment options.
- We will work with partners including Lancashire Care NHS Foundation Trust and Third Sector providers to ensure that the skills developed are appropriate and relevant to the situations faced by our frontline staff, and enable them to deliver effective mental health first aid, whilst ensuring they support patients into the most appropriate longer-term treatment options.
- We will work in partnership with Lancashire Care NHS Foundation Trust to ensure that the most appropriate methods of delivering immediate crisis response are in place throughout Lancashire, providing safeguarding and clinical support to those in most urgent need.
- This will be delivered in a model that ensures the most appropriate resources are deployed and in a position to provide safeguarding and informed clinical assessments. This will minimise the impact on patients, and maximise the opportunities to deliver effective treatment.
- Supporting this development changes will be made to our delivery models in communities alongside improvements to communication processes. This will ensure that patients suffering crisis or about to, are able to access appropriate resources at the earliest opportunity.

Commitments from voluntary and charitable sector organisations:

- We will offer a flexible and unique contribution around providing and delivering consistent person-centred service delivery models involving all partners / commissioners in harnessing this approach.

- We will work productively in a purposeful, cooperative way with commissioners and larger providers to align and deliver holistic expertise within the sector.
- We will contribute to the inception of innovative and diverse ways of working with patients / customers to further gain better and efficient outcomes.
- Our focus will be prioritising the review and quality / effectiveness of all delivery programmes with particular emphasis placed on outcomes and improved service patient / customer experience.
- We will place key focus on service entry and effective flow, to further contribute to seamless and responsive service delivery pathways.

To download a copy of the report visit healthierlsc.co.uk/MentalHealth

This briefing is issued by the Healthier Lancashire and South Cumbria which is a partnership of organisations working together to improve services and help the 1.7 million people in Lancashire and South Cumbria live longer, healthier lives. Find out more at healthierlsc.co.uk

Healthier Lancashire and South Cumbria is the integrated care system (ICS) of NHS, local authority, public sector and voluntary, community, faith and social enterprise organisations, made up of five local areas (Central Lancashire, West Lancashire, Pennine Lancashire, Fylde Coast, and Morecambe Bay). These areas provide a way for organisations and groups involved in health and care to join up locally. Partners include:

- CCGs: Greater Preston, Chorley and South Ribble, East Lancashire, West Lancashire, Blackpool, Fylde and Wyre, Morecambe Bay, Blackburn with Darwen
- Five acute and community trusts: Lancashire Teaching Hospitals NHS Foundation Trust, University Hospitals of Morecambe Bay NHS Foundation Trust, East Lancashire Hospitals Trust, Blackpool Teaching Hospitals NHS Foundation Trust and Lancashire Care NHS Foundation Trust
- Two upper tier councils (Lancashire and Cumbria) and two unitary councils (Blackpool and Blackburn with Darwen).

The integrated care system is clinically led by Dr Amanda Doyle OBE, with support from senior clinicians and managers from every part of Lancashire and South Cumbria.