Wiltshire Council

Health and Wellbeing Board

15 December 2016

Subject: Mental Health Crisis Care Concordat Update

Executive Summary

The report provides an update on the quality of care for those experiencing mental health crisis and how well partners in the system are working together to provide this.

Proposal(s)

It is recommended that the Board:

- i) Notes the outcomes of the mental health summit in October
- ii) Receives an updated and combined action plan for the new Wiltshire and Swindon Mental Health Crisis Care Concordat Action Group in the new year.
- iii) Considers the latest available data against key indicators at Appendix 1; and agrees to a further update in the new year.

Reason for Proposal

At the last meeting the Board agreed to receive a further update on the delivery of the Mental Health Crisis Care Concordat Action Plan, following a meeting of lead chief executives, together with an update on the delivery of the Mental Health and Wellbeing Strategy.

It also considered appropriate indicators for monitoring the implementation of the Action Plan and an update is provided against these.

Ted Wilson

Chair, Wiltshire Mental Health Crisis Care Concordat Action Group NHS Wiltshire CCG

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Purpose of Report

1. This report presents an update following the September 2016 Mental Health Crisis Care concordat update and learning from incidents report, detailing progress in Wiltshire to improve Crisis Care Pathways.

Background

- 2. Following the last Board meeting, key stakeholders and partners (Wiltshire Police, Wiltshire Clinical Commissioning Group, Swindon Clinical Commissioning Group, Wiltshire Council, Swindon Borough Council and AWP) involved in managing crisis care for individuals experiencing mental health crisis in Swindon and Wiltshire attended a Mental Health Summit in October. Discussions of mental health crisis care pathways identified key areas requiring improvement. Corresponding actions were agreed (reflected in the key points below) and there will be a follow up meeting in early 2017 to share progress updates and ensure momentum towards improvement of the identified areas.
- 3. The Wiltshire Mental Health Crisis Care Concordat Action Group continues to meet on a bi-monthly basis, reviewing and proactively addressing crisis care pathways, and developing the action plan through the multi-agency forum.

Update on Key Areas

Mental Health Crisis Care Concordat Delivery

- 4. To further enhance the effectiveness of crisis care pathways the Wiltshire and Swindon Crisis Care Concordat will unite from January 2017 onwards; enabling crisis care pathways to be more holistically developed across provider footprints, many of which cover both CCG areas. Merger of the Wiltshire and Swindon CCCs will enable a unified focus on ensuring all providers supporting the 136 pathway are prepared and able to manage the expected changes to the Police and Crime Bill [expected April 2017], including the reduction of the maximum length of stay a Place of Safety from 72 to 24 hours. The updates presented in this report highlight some of the service developments being progressed to guarantee the changes to the Bill can be managed effectively.
- 5. Following the merger of the Wiltshire and Swindon CCC Action Groups the Year 2 action plan will be accordingly combined and updated; it is

recommended that the united Swindon and Wiltshire CCC Action Plan is presented to the board at the next meeting on 9 February 2017.

- 6. Several key areas were stated as the focus of the CCC action plan during the last Health and Wellbeing meeting, progress against the areas is as follows:
 - Development of an enhanced Access Service Model for secondary care mental health services: The AWP Primary Care Liaison Service has been reviewed by Commissioners, an options appraisal summarising options to reconfigure the service model to improve ease of access and timeliness of assessment will be considered through the CCG governance in December 2016. An update can subsequently be presented to this board.
 - Implementation of the Section 12 Doctor review: Wiltshire CCG is working
 in collaboration with Swindon CCF to complete a review of the s12
 provision which will make recommendations to ensure the timely
 availability of s12 Drs, in line with the statutory responsibility of the CCGs.
 The review will be considered through CCG governance in December
 2016; a brief summary of the review is provided in a section below.
 - Development of an emergency department liaison model; update provided later in this paper.
 - Ensuring availability of Approved Mental Health Professionals (AMHPs); additional AMHPs have been appointed.
- 7. The following aspects have already been identified as key requirements:
 - Provision of services to support individuals experiencing a mental health crisis; providing alternatives to admission to mental health wards.
 - Commissioning of 24/7 mental health services.
 - Provision of Places of Safety environment and clinical management which meet mandated standards (CQC, Mental Health Act, Commissioned specification).
 - Ensuring Health Based Place of Safety (HBPoS) availability to support
 Wiltshire and Swindon residents requiring a mental health act assessment
 following detainment under section 136 of the Mental Health Act.
 - Ensuring timely availability of Section 12 approved Doctors to complete Mental Health Act Assessments and clear routes of escalation.

CQC Inspection of AWP

- 8. As previously reported the Care Quality Commission undertook an inspection of Avon and Wiltshire Mental Health Partnership (AWP) in May. Overall AWP services were markedly improved across the trust and recognised as effective, caring and responsive. However, the Health Based Places of Safety the service was rated as inadequate. The inspection report for this service, which covered the whole AWP area, was published on 8 September 2016.
- 9. Wiltshire CCG continues to monitor AWP's progress against the CQC action plan as part of contract management and performance governance. The Trust has responded to the action plan by:
 - Addressing environment in the Places of Safety in the East to minimise potential sources of risk, improving the quality of suites layout and furnishings.
 - Policies and procedures including rapid tranquilisation have been updated.

- Governance and management of the provision is now robust.
- Levels of trained staff meet the required standard.

AWP Developments to the Places of Safety in the East

- 10. AWP, with the support of the Wiltshire CCC chair, acquired £320,000 capital funding from the Department of Health to improve health based places of safety in Wiltshire and Swindon by increasing the number of places available across the county from three to four. The motivation to change and improve the provision relates to the need to ensure facilities are fit for purpose, also to resolve the difficulties regarding provision of adequate staffing to; currently ward staff are heavily relied upon. If these services are not reprovided, there is a risk that some of the current facilities will need to be closed, which may result in out of area placements being required.
- 11. AWP are currently considering staff and public consultation and engagement regarding the proposed developments. A value engineering exercise has been completed and a contractor appointed to enable works to commence, if appropriate, following consultation. An update on this will be provided at the meeting.
- 12. Completion of this project would result in the re-provision of the two places of safety beds within Wiltshire into a fit for purpose two bedded unit at Green Lane Hospital site, with the potential to also amalgamate the suite in Swindon & create (up to) a 4 bed unit staffed by a dedicated multi-disciplinary team to serve the East side of the Trust. This option has been identified by AWP as the preferred option for development from a clinical, sustainability and economical perspective. The perceived benefits of the development are:
 - The unit will provide an environment that is fit for purpose and safe for both the service users and the staff managing their care during the period that they are held within the Place of Safety under section 136 & section 135.
 - The consolidation of the suites to one site will enable further options for service development of preventative care which include two Urgent Assessments Areas across the East of the Trust and STP footprint. One based in Fountain Way, Salisbury, and the other at Sandalwood Court, Swindon.
 - The proposal is aligned to the Five Year Forward planning, and would be a significant development within the BSW STP.
 - The unit would meet the proposed changes outlined by Government stating that no u18 (and in future possibly no adult) will be detained under section 136 into police custody.
 - The Unit would provide increased capacity across the East of the Trust and the consolidation of the suites will enable opportunity to develop cohesive cross boundary working arrangements between agencies.
- 13. It is recognised that there are a number of areas which will need to be addressed to enable a smooth implementation of the proposed changes and for the identified benefits to be fully realised:
 - Cross boundary agreements will be required between CCG and Local Authorities, particularly regarding AMPH cover.

- There are an insufficient number of Section 12 Approved Doctors within the area, potentially contributing to delays in assessment.
- The current initiate utilised by Avon and Somerset Police, and the regular saturation of the Mason Place of Safety may have significant detrimental effect on the East Place of Safety's increased capacity.
- 14. The number of referrals from other police force areas is set out in **Appendix** 1.

Alexander Group s136 Review

15. The Alexander Group have been commissioned to complete a system wide review of s136 pathway and experiences with the objective to improve the experience that people and organisations have of 136. The review was commissioned owing to the acknowledgement across AWP commissioners, AWP and local respective authorities that general experience of the s136 pathway is poor, and provision environmentally and from supporting services requires improvement to address quality and safety. Furthermore a system wide understanding and preparation to manage the imminent changes to the management of s136 through the Policing and Crime Bill is required. The review is in process and has entailed interviews and workshops with all partners and individuals with lived experience. The review will conclude at the end of December with a report summarising the findings and presented recommendations to address issues identified.

24/7 availability of Mental Health Services

- 16. **Mental Health Liaison**. In September, NHS England's National Clinical Director for Mental Health stated there will be new standards relevant to crisis care which are intended to help deliver the Five Year Forward View. In response to this:
 - Wiltshire CCG has an ongoing commitment to commissioning of 24/7
 Crisis resolution and home treatment teams, locally referred to as
 Intensive Teams. A Commissioner review of this provision is underway
 and will complete in Q4 2016/2017, where recommendations will be made
 to ensure the delivery of this provision is optimised to meet service user
 need and service efficacy and efficiency. The service continues to be
 monitored against their commissioned requirement to provide treatment
 within 4 hours of referral receipt through contract management and
 performance governance.
 - Wiltshire CCG and respective co-Commissioning CCGs have extended the operational hours of the three Acute Hospital based mental health liaison services. All Mental Health Liaison services are currently commissioned to respond to A&E referrals within 4 hours; from December 2016 SFT will implement a 1 hour response time to all A&E Mental Health referrals. It is intended that this will be mirrored in other Mental Health Liaison services.
 - A review of Mental Health activity in Salisbury FT is underway to inform whether further extension is required to improve parity of access to Mental Health services.
 - The RUH Bath Mental Health Liaison extended their A&E operational hours to 8am-midnight in Q3, after 3 months of implementation there will

- be a CCG led review to again determine whether further extension is required.
- From the 1st of November 2016 the Swindon Intensive Team has been based in the GWH A&E department, providing the OOH response for all A&E Mental Health presentations.
- 17. **Street Triage:** At the last Health and Wellbeing Board Wiltshire CCG updated that funding had been committed to mainstream the Street Triage Service, funded through a tripartite agreement with Swindon CCG and Wiltshire Police. Through the October 2016 Mental Health Summit the need to further extend the operational hours of Street Triage to 24/7 was identified and committed to by the tripartite commissioners. An AWP business case presenting the options to realise this expansion has been received by the commissioners and is in the process of being approved to enable the expansion to commence; anticipated start date of April 2017.
- 18. **Section 12 Doctors:** Section 12(2) of the Mental Health Act 1983 requires that, in those cases where two medical recommendations for the compulsory admission of a mentally disordered person to hospital, or for reception into guardianship, are required, one of the two must be made by a practitioner approved for the purposes of that section by the Secretary of State as having special experience in the diagnosis or treatment of mental disorder. Statutory responsibility for approving Section 12 Doctors is delegated to the Strategic Health Authorities; these authorities maintain a register and have mechanisms in place to authorize approval, re-approval and removal from the register. In respect of Wiltshire, the South of England SHA Register is maintained by Winterhead Ltd Mental Health Act Approvals Office England South.Within the geography (Wiltshire and Swindon) there is a concern of a serious lack of s12 Doctor availability when needed to carry out mental health assessment in-and-out of hours at the Places of Safety (PoS). Reasons for being: -
 - No contract in place which ties the already meagre s12 Doctors to legally bind them to perform s12 duties
 - Lack of funding to train a cohort of willing GPs to become s12 approved doctors
 - The current locally agreed flat rate of £173 for the s12 does not attract s12
 Dr to wake up in the middle of the night and go and do an assessment
 prior to report back to the GP Practice for a normal day duty
- 19. CCGs are responsible for ensuring that arrangements are in place for 24-hour on-call rotas of approved doctors (or equivalent arrangement) sufficient to cover each area for which they are responsible. Due to the shared PoS, mental health services and police provision, Wiltshire CCG and Swindon CCG are working together to deliver a local solution for the provision of Section 12 Doctors. Commissioners are considering options to establish a contract for a s12 Doctor provision on a dedicated rota, as opposed to the current non-contract authority basis. This will ensure there is timely availability of a dedicated Section 12 Doctor resource, which will contribute to reducing the length of stay in the places of safety. The review detailing proposed recommendations to improve Section 12 Doctor resource is being considered through CCG governance in December 2016.

Data

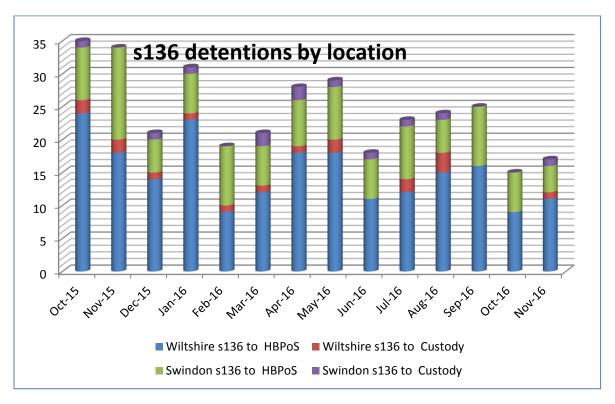
- 20. At its last meeting the Board considered appropriate system wide indicators, including:
 - Time to assessment once in place of safety
 - % of cases exceeding 3 hours till assessment as per Mental Health Act Code of Practice
 - Reasons for any delay (e.g. intoxication or availability of AMHPs or s12 doctors)
 - % of cases exceeding 72 hours in a place of safety
 - Use of health based places of safety (HBPoS) by out of area patients
- 21. These indicators are to be augmented by additional indicators specific to Police use of s136 powers:
 - Total s136 to custody and to Health Based Places of Safety
 - Total s136 in custody when threat of harm to self or others; and % and number of times 'non-exceptional' patients are held in custody
 - Age, gender and ethnicity of those detained under s136.
 - Whether those detained are previously on medical caseloads.
 - Average time s136 detainee held in custody (including average time till assessment and time to leave thereafter).
 - How often Wiltshire police are able to consult mental health professionals before using Section 136 (availability of triage)
 - how many detentions under s136 are appropriately conveyed for a full Mental Health Act assessment (usually s2), once assessed by medical authorities
 - Number of times the Police are required to escort a mental health patient due to the non-availability of an ambulance
- 22. Work continues to collate and check the data for some of the indicators in para 20 (notably times to assessment, in detention and reasons for delay); however some of these are included together with the latest information for those indicators set out in para 21. The data is set out in **Appendix 1**.

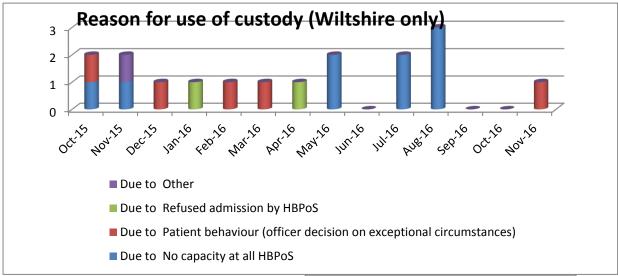
Ted Wilson Chair, Wiltshire Mental Health Crisis Care Concordat Action Group NHS Wiltshire CCG

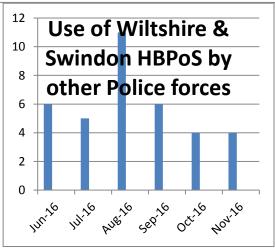
Report Authors:

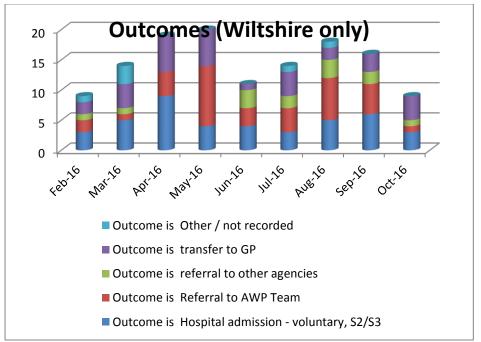
Georgina Ruddle, Wiltshire CCG David Bowater, Wiltshire Council Sgt Mike Hughes, Wiltshire Police

Appendix 1

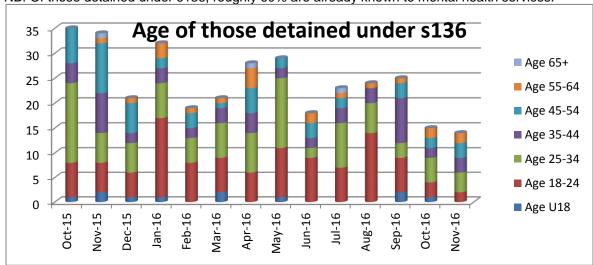


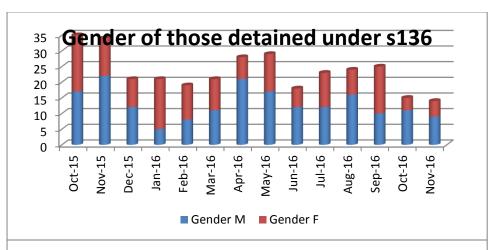


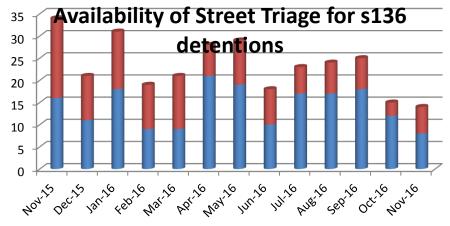




NB: Of those detained under s136, roughly 60% are already known to mental health services.







- Street Triage Outside operating hours n/a
- Street Triage During operating hours *Oct to Feb operating hours 1400to 0000hrs March onwards 0830hrs to 0000hrs n/a

