

Appendix A

Introduction

The Mental Health Crisis Care Concordat, Improving Outcomes for people experiencing Mental Health Crisis was published in February 2014. Since then, Bedfordshire and Luton have identified its key partners, developed a shared and agreed statement for a commitment to local action which was then signed by senior representatives and developed a comprehensive action plan.

The Crisis Care Concordat outlines what needs to happen when people are in mental health crisis and need help. It sets out expectations for local performance in policy development, investment and financial decisions, in anticipating and preventing mental health crises where possible and in making sure effective emergency response systems operate locally, when a crisis does occur.

The plan for Bedfordshire and Luton is overseen by the Senior Officers Group and an operational group with representation from each of the signatory organisations is now being developed to progress the actions identified.

Progress to date

On 16th November 2015, a workshop to review progress one year on took place and was well represented by partners who had signed the declaration. The workshop had speakers from NHS England, National Mental Health Crisis Concordat Team, The Home Office Health and Policing Team, a service user, ELFT and the Police and Crime Commissioner for Bedfordshire.

To Develop a Street Triage model

Street Triage services work proactively to support people in a crisis, accessing the most appropriate pathway, which in the pilots undertaken, has seen a reduction in A & E attendance rates. The Street Triage outline business case has already been submitted to the Senior Management Group and the full business case is due at the Senior Officers Group in December 2015.

To work with all local provider organisations to ensure that all commissioned services adhere to approved staffing, bed occupancy and caseload levels in line with national guidance.

Due to the increased demand for out of area beds in Bedfordshire in 2015, developing a sustainable local bed model was one of our priorities for the first year of the ELFT contract. A business case has been developed and is with NHSE for a decision on funding.

ELFT have commenced a review of all community mental health teams. This will include how they contribute to the enhancement of the crisis support pathway and ensuring they operate to best practice regarding safe caseload levels

To review the governance structure in place and all joint policies, procedures and protocols to build effective partnerships across all organisations involved in crisis care including the voluntary sector

A paper proposing the governance arrangements across Bedfordshire and Luton has been presented to the Senior Officers Group, an operational group with representation from all partners who signed the declaration for Bedfordshire is now being developed.

To ensure outcome based commissioning is in place

This has been achieved, the ELFT Contract commenced in April 2015 and has been commissioned on outcomes that were developed through comprehensive engagement with service users, carers and wider stakeholders.

Develop robust feedback mechanisms from partners and stakeholders

A stakeholder event for partners was held in November 2015 and the operational group is now being established, which will ensure regular and effective engagement

Clear reporting and monitoring of quality of care of people in crisis

Access to comprehensive information from ELFT has been difficult in the first year of the contract due to the legacy system for care records. ELFT are currently rolling out an electronic records system, RIO and this will be in place in all services by March 2016.

To enhance psychiatric liaison services within local acute hospitals.

There is currently no commissioned service for the population of Central Bedfordshire at either Luton and Dunstable or Bedford Hospital, however ELFT have been providing a service at risk. A business case has been developed and will be considered in 16/17. BCCG has received an allocation of £173k which will part fund a limited service from December 2015 to March 2016.

Review and transform Mental Health Criminal Justice Service in line with national model

The review of the local Criminal Justice Team to transform into the model for Court Liaison and Diversion Teams as specified by NHS England has commenced. The timescale for the new model is April 2016.

Improve Integration of Mental Health into Urgent Care

Local Luton and Beds System Resilience Groups are taking forward Mental Health Integration in Urgent Care including the opportunities for inclusion in the re-procurement of NHS 111 jointly across Bedfordshire.

Re-modelling of the AMPH service to match capacity with demand using the ADASS toolkit.

The AMPH service provides qualified practitioners to respond to people in a crisis to make a formal assessment under the Mental Health Act. A review of the current AMPH service has been completed and a number of proposals have been shared with Central Bedfordshire for consideration. A decision on the preferred option is expected in December 2015.

Zero tolerance of people to be held in custody and develop and publish approved places of safety

There has been significant progress in this area locally and the reductions in use are now averaging 0.2 admissions per month of people held in police custody.

To work with all local providers and organisation across the community to develop and implement mental health training. Including police, probation and ambulance staff.

Bedfordshire Police have been implementing Mental Health training across their police force over 2 years. To build upon this, EEAST, ELFT and Beds Police have developed and piloted bespoke Mental Health Crisis Partnership training. The pilot was very well attended and received very positive feedback. There are also plans for the Mental Health Liaison Service to provide Mental Health training in the L&D Hospital.

Develop a multi -agency approach to substance misuse and dual diagnosis.

Public Health have completed their procurement and the new Adult Integrated Drug and Alcohol services contract, Path to Recovery (P2R)/ELFT, commenced in September 2015. Work on the development of clear and robust pathways is being undertaken by P2R, in collaboration with ELFT, to ensure that key partners and stakeholders are aware of the services available to achieve successful outcomes for people with a diagnosable mental health condition and at risk of harm/experiencing harm from drugs/and or alcohol.

To review the current processes and restraint procedure in place across the whole system and implement the “Positive and Proactive Care” guidance.

National standards and guidance has been reviewed across all inpatient units and recommendations based on the Positive and Proactive Care document on the best model of delivering physical restraint to patients when displaying extreme challenging behaviour and training are being implemented. Physical restraint by health professionals is always a method of last resort and this guidance promotes the use of various diversion techniques which should be used, to stop a situation escalating to the point that the patient becomes violent.

Guidance.

National standards and guidance has been reviewed across all inpatient units and recommendations and training being implemented.

To Review Local and National Safeguarding Arrangements.

The Crisis Care Concordat was discussed at the CBC Safeguarding Operational Group and regular reports on progress will now be provided at that meeting.