

Overview and Scrutiny Committee Briefing

Subject: Mental Health Crisis Care Briefing Update

Briefing date: 28 January 2019

Purpose

The purpose of this paper is to provide an update to the Overview and Scrutiny Committee on the progress made with the inpatient beds review in Bedfordshire, and provide an update on the work being undertaken to improve crisis care services.

Recommendation

Members of the Overview and Scrutiny Committee are asked to note the update provided and provide any recommendations for further work, as the review is conducted.

Background

In 2017, East London Foundation Trust (ELFT) closed Weller Wing inpatient Mental Health facility in Bedford following an inspection from the CQC, which outlined that the estate was not suitable for patients recovering from a crisis.

Following the closure, inpatients were moved to Townsend Court in Houghton Regis and after engagement with the Overview and Scrutiny Committee, the CCG engaged with local people who have experienced a mental health crisis, to listen to their views on the change and find out what they want from crisis care services. It also have the CCG an opportunity to test out new national policies with residents, to find out what they thought about the introduction of crisis cafes and houses, which could be considered for the area.

The feedback from the public engagement exercise was used to inform commissioning decisions and in collaboration with East London Foundation Trust (ELFT), we have been working to progress Mental Health Crisis Care over the last 12 months.

Mental Health Acute Inpatient Beds Review for Bedfordshire

As part of our crisis care work, we are undertaking a review to determine the longer term plans and future needs for a new acute inpatient provision for individuals living in Bedfordshire. To ensure those individuals that require inpatient care for their mental health needs have the most suitable, least restrictive, recovery based provision.

This new inpatient facility would provide bed based services with 24 hour treatment and care in a safe and therapeutic place for people experiencing acute mental health episodes which cannot be managed in a less restrictive community setting. It is proposed the unit would provide six wards for males, female, older adults, Learning Disabilities, and a Psychiatric Intensive Care Unit (PICU). Facilities would include consulting rooms, space for community health teams such as Crisis Care, therapy rooms, de-escalation areas, gardens and offices.

The key drivers for this re-provision are:

- A requirement to meet CQC standards that previous facilities in Bedford failed to achieve, leading to the temporary countywide dispersal of units and services to alternative sites.
- To honour commitments made with Bedfordshire CCG, Local Authorities, patients, families and carers to return inpatient provision to Bedfordshire and the subsequent improvements this will make to accessibility, connection to and with local facilities and resources.
- Bringing the dispersed services back together (and other related services) to improve quality by creating a centre of excellence and reducing costs through a greater crucial mass, more efficient medical and nursing rotas, staffing, planning and working arrangements.
- A service model that is future proofed service against projected need and demand within Bedfordshire.

Finding a suitable site to accommodate a new inpatient facility in order to create a centre of excellence has been challenging. Extensive searches have been carried out to examine the potential sites to create a new modern facility that addresses issues such as observation and oversight, general maintenance, and an environment that better promotes and optimises recovery. During 2018 potential sites within the Bedfordshire area were reviewed with a preferred site identified.

Indicative timelines for the initial premises scoping:

Time scales	Descriptor
Summer – Nov 2018	Feasibility, Initial Design, Costing and scoping of potential Bedfordshire Inpatient sites
Nov – Dec 2018	Review of potential sites and Identification of preferred site
Dec – Feb 2019	Process of procurement of preferred site,
<i>Subject to successful procurement of the preferred site - purchase offer and acceptance of same, we would then move to operational mobilisation of the development</i>	
Work Phasing March – Sept 2019 - Design Oct 2019- Oct 2021- Build and Refurbishment Nov 2021 - Jan 2021 - Snagging and safety checks Feb - Mar 2021 Contingency	Appointment of the Design Team who will guide the construction of the new facility including: Experts by Experience <ul style="list-style-type: none"> • Service Users • Carers Clinical Experts <ul style="list-style-type: none"> • Medical • Nursing • Allied Health Professionals

	<p>Technical experts</p> <ul style="list-style-type: none"> • Quantity Surveyor • Building Surveyor • Structural Engineer. <p>Stakeholder Experts</p> <ul style="list-style-type: none"> • Local Authorities • CCG • 3rd and Independent Sector
April 2022 - Completion	New services commence

Nationally, policies to introduce Crisis Houses and Cafes are being introduced, as a means of helping to prevent patients experiencing a mental health crisis. The cafes and houses have been well received nationally and as an STP, we have submitted bids to support their progression in Bedfordshire. However, we have not been successful in our bids due to limited national empirical data and local data flow to demonstrate the impact of mental health provision on the wider system that would support a spend to save model for this area of mental health crisis care. We will continue to explore opportunities for resourcing and will also explore opportunities for alternatives to acute inpatient provision in the areas of mental health houses, safe places, cafes, place of safety, sanctuaries and respite options with the described transformation work.

We will ensure that Overview and Scrutiny Committees and Health and Wellbeing Boards are kept up to date with progress as this work progresses, and ensure that we involve residents in discussions and commissioning decisions as soon as we are able.

Interim changes in inpatient bed provision

While the inpatient beds review is of primary importance, we also need to ensure that we deliver appropriate levels of crisis care in the current provision. Over the past year there has been an increase in the number of men who need to be admitted for psychiatric care in Bedfordshire and Luton, and a reduction in the number of female admissions.

To ensure that we can continue to provide treatment in Bedfordshire, ELFT has undertaken a review of the number of male and female beds required across Bedfordshire and Luton. No changes have been made to the overall number of inpatient beds available, but ELFT has looked for opportunities to create additional male beds, so that we can care for male inpatients locally.

As a result, a decision has been made to change Willow Ward in Oakley Court, Luton, into an 11 bedded female-only ward. Willow Ward began taking female-only admissions from 4 January 2019. Onyx Ward, where female inpatients were previously treated has been transformed into a 20 bedded male-only ward.

There continues to be male acute beds in Ash Ward, Oakley Court, Legrave, Luton and female acute beds in Townsend Court, Houghton Regis, Bedfordshire.

The changes that have been made will benefit male service users who need to be admitted due to mental health crisis or deterioration. It will enable them to stay in contact with their social networks and reduce delays when they are ready to go home. It will also improve bed management enabling the Trust to make more effective use of resources and to have the right services in place to meet the needs of the local population.

We have communicated these changes extensively to patients and stakeholders, to alert them to the changes.

Mental Health update

In addition to the crisis care and inpatient beds review being undertaken, much work is underway to improve the provision of mental health services in Bedfordshire.

Mental Health Street Triage (MHST)

The MHST is a partnership approach between commissioners; Bedfordshire CCG, Luton CCG and Police and Crime Commissioner with partner providers, Bedfordshire Police, East London Foundation Trust (ELFT) and East of England Ambulance Service NHS Trust (EEAST).

MHST is now business as usual for BCCG and the nursing provision has been added into ELFT’s contract for the remainder of the contract length. The ambulance element has been supported using the NHS mechanism for the Commissioning for Quality and Innovation (CQUINs) payments framework.

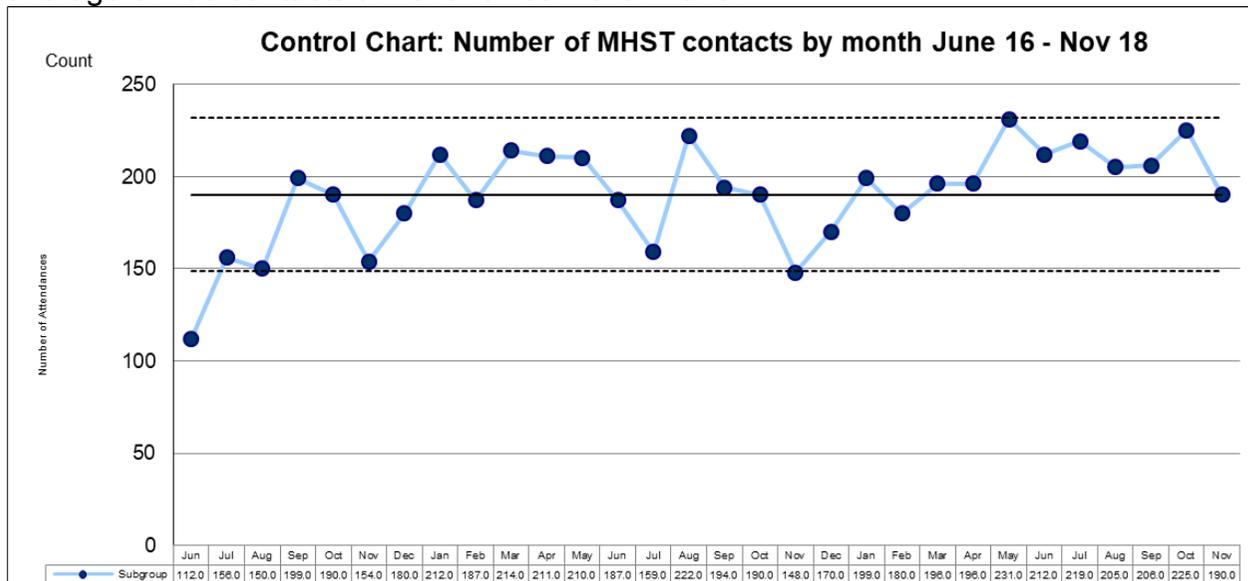
Month	All contacts	MHST S136 avoided	A&E avoided	Ambulance call out avoided	Police call out avoided
Jan	199	14	68	81	63
Feb	180	27	60	83	56
Mar	196	12	55	97	66
Apr	196	9	45	72	64
May	231	23	59	91	82
Jun	212	11	37	71	64
Jul	219	16	62	85	71
Aug	205	20	42	64	48
Sep	206	7	65	85	65
Oct	225	17	92	114	77
Nov	190	9	49	70	68

Total	2259	165	634	913	724
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Data inclusive of 31st November 2018

The MHST which operates from 1pm -11pm, 7 days a week seven days a week is a critical element of Bedfordshire MH Crisis response. Over an 11 month period, 165 Section 136 uses have been avoided (taking a person to a place of safety), 634 A&E attendances avoided, 913 ambulance call outs avoided and 724 Police call out avoided.

As you can see from the control chart below, demand for the Mental Health Street Triage Service remains high and has been at or above the mean average of 190 contacts a month since March 2018.



Psychiatric Liaison in Acute General Hospitals

There is a 'Core 24' standard of urgent and emergency liaison Mental Health Services at Bedford Hospital NHS Trust. The purpose was to expand the provision of liaison mental health services in providing specialist, compassionate assessment, detection and treatment of mental ill health in general acute hospitals.

Bedford hospital became core 24 in July 2018, this now means that there is mental health support in both A&E and on the wards 24 hours a day, 7 days a week. So far, since becoming Core 24, the team have supported 1043 patients at Bedford Hospital.

The table below shows the % of people who were seen within the target times in A&E, Acute Assessment Unit and other inpatient wards by the Psychiatric Liaison Team in Bedford Hospital in Quarter three.

	A&E	AAU	Inpatient ward
October	96.7	100.0	89.5
November	97.6	81.0	91.2
December	97.0	93.3	91.7

Primary Care Liaison

We now have 9 primary care 'link' workers who are now able to support patients in every GP practice across Bedfordshire (with the exception of one due to space availability). The link workers provide appointments in the practice and provide clinical support to GP's as and when required.

The table below shows the number of people seen for a first assessment and the total number of contacts by month.

	Assessments	Total Seen
April	512	813
May	478	778
June	411	668
July	381	502
August	237	412
September	377	646
October	360	589

During the first two quarters of 18/19, 2400 patients were supported by the primary care link workers across Bedfordshire.

Crisis Resolution Team

The Crisis Resolution Team provides support to service users to help them to remain well at home and to support their discharge from an inpatient unit.

One aspect of the team's role is to assess all service users before they are admitted to an inpatient unit to see if admission can be avoided and the service user supported at home. So far in 2018-19 100% of all people admitted to inpatient units were reviewed by the crisis team prior to admission.

Month	% reviewed prior to admission
April	100%
May	100%
June	100%
July	100%
August	100%
September	100%

October	100%
November	100%

ELFT Mental Health Crisis provision review

ELFT has developed a new model of care that has brought crisis services under one operational umbrella and strengthen links between teams and partner organisations.

The new-look crisis service aligns Crisis Resolution and Home Treatment (CRHT) teams, Bedfordshire and Luton Mental Health Street Triage, Bedford AMHP Service, Court Liaison and Diversion Service and Bedford Psychiatric Liaison Service to work more closely together.

This redesign continues to progress and will include:

- Creating a single point of access (SPOA) for healthcare professionals and patients
- Improved access to dedicated telephone support
- Providing clearer alternatives to A&E and relieving pressure on hospital services and police
- Closer working with secondary care colleagues and faster access to care and support for service users

ELFT has also been requested to develop a business case for the expansion of CRHTs to cover 24 hours a day 7 days a week. The extended service will provide greater support to the current capacity and resource, and enable further support to individuals in mental health crisis, increasing the capacity for home visits or at patients place or residence.

To ensure a more robust crisis care provision over the winter period, BCCG have commissioned ELFT to provide additional resource in the NHS 111 call centre to assist with the increasing demand of mental health calls to the service.

The mental health nurse provides:

- Additional mental health support to call handlers and clinicians in the service
- Answer and call back patients in crisis requiring assessment or advice
- Signpost patients into appropriate services for further assessment of help
- Provide peer learning regarding mental health issues to colleagues acting as a subject matter expert

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