



<b>Report To:</b>	Department of Health and Mind
<b>Report Title:</b>	Mental Health Crisis Care Concordat Update
<b>Report From:</b>	Harjit Lalli, Programme Manager
<b>Date:</b>	30 <sup>th</sup> October 2015

**Purpose of the Report:**

To provide an update on the Mental Health Crisis Care Concordat (MHCCC) action plan and next steps.

**Key Points:**

The five priorities for the concordat actions plan are:

- Enhancing Places of Safety;
- Implementing street triage;
- Reviewing the Crisis Resolution and Home Treatment service (CRHT);
- Prevention and intervention;
- User experience and engagement.



## Introduction

The Mental Health Crisis Care Concordat is a national agreement between services and agencies involved in the care and support of people in crisis. It sets out how organisations will work together better to make sure that people get the help they need when they are having a mental health crisis. The concordat focuses on four main areas:

- Access to support before crisis point – help 24 hours a day
- Urgent and emergency access to crisis care – treated with the same urgency as physical health emergency
- Quality of treatment and care when in crisis – treated with dignity and respect
- Recovery and staying well – appropriate referrals to prevent future crises

To respond to the concordat a multi-agency Steering Group for Coventry and Warwickshire was established at the beginning of 2015, with membership from the three CCGs, Coventry City Council (CCC), Warwickshire County Council (WCC), Coventry and Warwickshire Partnership Trust (CWPT), South Warwickshire Foundation Trust (SWFT), University Hospital Coventry and Warwickshire (UHCW), George Eliot Hospital (GEH), Police and Public Health. Following a gap analysis of the standards set out in the national framework and current service provision the group agreed the five priorities to deliver the concordat's four areas of focus as:

- Enhancing place of safety
- Implementing the street triage service
- Reviewing the Crisis Resolution and Home Treatment service (CRHT)
- Prevention and intervention
- User experience and engagement

The Steering Group, Chaired by Coventry and Rugby CCG, oversees the progress against the Concordat and Task and Finish Groups where these have been established.

An initial Action Plan was created and uploaded in March 2015, in line with national expectations. This was signed by all constituent members of the Group. The Plan outlines a comprehensive programme of work which forms the basis of collaboration over the coming years with refreshes demonstrating progress published on a regular basis. There is not a specified end as the work is developing in line with emerging need and priorities.

To support the group in managing the overarching programme of work, a Programme Manager, provided by Arden GEM CSU, was assigned to it in October 2015. Much of the work required is being delivered by other groups and programmes so the role of the Programme Manager is to co-ordinate and communicate the activity underway ensuring.

Outcomes for the five local priorities will be monitored through a dashboard report that is being created with CWPT containing data on the usage and outcomes of Place of Safety, street triage, and the CRHT service. The intention being the first draft will be available for November's meeting.

**Place of Safety (POS)**

The Section 136/POS policy has been in place for three years and to ensure it remained fit for purpose and provided a place for children, it was reviewed and revised to ensure:

- Police custody will not be used for children and young people and only for adults in exceptional circumstances where individuals are high risk to other patients and staff.
- Where police custody is used as POS this will be for a maximum of 24 hours with an assessment under the Mental Health Act prioritised
- POSs will accept patients who are intoxicated and children and young people under 18's with specific protocols to safeguard them
- Standard operating procedure created and implemented for the police when using restraint on patients with mental health issues
- Ambulance staff will provide a physical assessment following an incident of restraint by police in community

**Street Triage**

The street triage service was piloted in Coventry and will roll out across West Mercia and Warwickshire with a full service implemented by Jan 2016. The 12 month pilot is being funded by all organisations including West Mercia and Warwickshire Police and all 3 local CCGs. Street triage is a means of helping people experiencing a mental health crisis get the help they need expeditiously. The scheme involves trained mental health professionals working in conjunction with police officers, as a first-line response - either directly on the street or through a dedicated phone line usually located within the Police Control Room.

**Crisis Resolution and Home Treatment Service (CRHT)**

A single point of access to the CRHT service has been in place since April 2015 and is monitored through the contract between CWPT and CRCCG who hold the contract on behalf of the local CCGs. The CRHT service has been reviewed by CWPT due to issues with responsiveness of the CHRT service and time frames for response. The recommendations are pending approval by the CWPT Board before they are disseminated to the CCGs.

The extended Arden Mental Health Acute Team (AMHAT, providing mental health liaison at the acute hospitals) service has been expanded until March 2016 and a proposal has been received to increase the service by 22.5 hours over winter.

Joint protocols between A&E, CWPT, Police and West Midlands Ambulance Service (WMAS) have been created and implemented which are supported through the conveyance, offenders and 135/ 6 policies as well as the operational policy for the AMHAT service. To support this, the multi-agency group will monitor and review difficulties with conveyance and liaise between agencies to resolve through the multi-agency MDT meetings.

The CRHT service specification may need to be written based on the work around crisis pathways but this work has not yet started.

**Children & Young People**

Supporting and treating children and young people in a crisis is a key part of the CAMHS redesign programme and there has been market testing by Warwickshire County Council of a new model of care to agree commissioning intentions for CAMHS. These have fed into the CCG's local transformation plans for CAMHS services which were submitted to NHS England on the 17<sup>th</sup> October 2015 and awaiting feedback on the 26<sup>th</sup> October 2015

To support compliance the programme will invest in school settings and reduce waiting for mental health and autism assessment which has been incorporated into the high level local transformation plan to NHS England for funding approval.

**Prevention and Intervention**

The Joint Mental Health Commissioners Group is reviewing capacity and links for crisis accommodation as an alternative to hospital admission, following the closure of Park House. An outreach service has been put in place to support people return everyday life which will be evaluated in March 2016. Work is also underway to investigate the options regarding the spot purchasing of beds for planned respite.

In addition a small step down service has been commissioned and provided through ReThink to assist patients' returning to normal life after a crisis and the service will be evaluated against the commissioning outcome criteria.

Specifically to suicides, Public Health has created a customised suicide training package for GPs which is currently being rolled out.

**Patient experience and needs assessment**

Making Space has been commissioned to ensure user feedback inform commissioning intentions through the Mental Health Patient Public Involvement sub group. Healthwatch will assist with gaining user feedback for both primary and secondary care.

Within Warwickshire, Mental Health is one of the 11 Priority Themes in the current JSNA Work Programme (2015-2018), as approved by the Health & Wellbeing Board.

**End of Report**