## Progress Report on the Local Crisis Care Concordat Activity

1. **Purpose of Report**

 To provide GMT with an updated South Tyneside position in response to HM Government Mental Health Crisis Care Concordat: Improving outcomes for people experiencing mental health crisis (2014).

1. **Introduction**

1.1. The Government’s Mental Health Crisis Care Concordat – Improving outcomes for people experiencing mental health crisis, which was launched in February 2014, focuses on how services respond to help people with mental illness at the time of their greatest need. It details how agencies (signatories) can work together to deliver a high quality response when people of all ages, with mental health problems urgently need help.

* 1. . The Concordat is a shared agreed statement, signed by senior representatives from all of the organisations involved. It covers what needs to happen when people in mental health crisis need help – in policy making and spending decisions, in anticipating and preventing mental health crisis wherever possible, and in making sure effective emergency response systems operate in localities when a crisis does occur.
	2. The Concordat is arranged around:
* Access to support before crisis point
* Urgent and emergency access to crisis care
* The right quality of treatment and care when in crisis
* Recovery and staying well, and preventing future crises.
1. **South Tyneside Progress**

 2.1 Following the development of South Tyneside’s Mental Health Crisis Concordat Action Plan in 2014 significant work has been completed to ensure that there is a clear partnership approach to supporting individuals no dependent of age when they are experiencing a mental Health crisis.

 2.2 Examples of progress so far are:

* The role out of a Street Triage Service, which initially became operational in September 2014, as a pilot is now operating across the South Tyneside. The service comprises eight Community Psychiatric Nurses employed by NTW working alongside four police officers from the Northumbria force operating from within a mobile assessment unit on a rota basis, to triage those individuals presenting with possible mental health problems. The aim of the service is to wherever possible aid police officers to make appropriate decisions, based on a clear understanding of the presenting issues. This has led to people receiving appropriate care more quickly, improved mental health outcomes and a reduction in the use of Section 136 of the Mental Health Act (1993). The Street Triage service is located at the Gate Lodge at Hopewood Park hospital and is operational between the hours of 10.00am and 02.00am, Monday to Saturday (03.00 am on Sunday).
* An independent review of the Street Triage Pilot, including a statistical analysis has been completed by an independent university, and we are awaiting the feedback which is expected in December 2015.
* Hopewood Park hospital is now fully operational. This is a brand new multi million pound hospital development by NTW FT that ensures that those individuals who do require an inpatient stay do so in clean, modern facilities that are purpose built to meet their needs.
* Hopewood Park site includes a new fully staffed 136 Suite which is operational 24 hours per day. An alternative 136 suite is located in Tramwell Park in Sunderland.
* South Tyneside LA and CCG commissioners are currently exploring options for the commissioning of an independently provided transportation service for those individuals within the community who following assessment by an Approved Mental Health Practitioner (AMHP) do require transportation to a 136 suite for admission under the Mental Health Act. Due to instances of significant delay by the current NHS provider. For those people who post assessments within the 136 suite do not require hospital admission there is agreement that NTW will be responsible for securing transport to return the individual to their own home.
* South Tyneside Council is currently working in partnership with NTW to ensure that there is a multi-disciplinary, integrated adult mental health team, which includes social workers, clinicians, nursing and therapy staff. It is envisaged that this will be fully operational by the begin of 2016. The development of such a team will ensure a joined-up response from services with strong links between agencies which will improve outcomes for those individuals who need to access mental health services.
* The Initial Response Service represents a significant investment in urgent care services by the Clinical Commissioning Group with Northumberland Tyne and Wear NHS Foundation Trust, and includes a Universal Crisis Team and Immediate Response Team which greatly reduces response times for those people who require those services, with many people being seen within two hours. The service can be delivered within multiple locations including GP practices and within the person’s own home environment. Typical weekly activity is reported by NTW as; 1500 telephone contacts, 400 home based treatment contacts, 50 crisis assessments and 100 rapid responses, 80% of which are responded to within an hour.
* At present there is a six months pilot Acute Liaison Service which ensures that Mental Health specialist staff are on hand within the general hospital setting to provide a link between an individual’s physical and mental health needs and to provide information and guidance to acute hospital staff where there may be concerns around a patients mental health status.
* As part of the Transformation plan submitted in October 2015 for Children and Adolescent Mental Health Services (CAMHS) we have ensure that there is a clear link with the Actions highlighted within our Mental Health Crisis concordat Action Plan to ensure that there is robust partnership working and communication between agencies that support children.
* Provision is also being made to ensure that individuals who have used mental health support services are included within thematic reviews of those services with a focus on quality, safety and responsiveness of the care provided and have the opportunity to contribute to future care provision, however it is recognised that further work needs to be completed in relation to this.
* South Tyneside council are also currently reviewing current arrangements for the provision of Out of Hours services and Approved Mental Health Practitioner (AMHP) provision with a view to increasing the number of AMHPs that are available.
* Commissioners are also working with providers of supported living services to develop revised service specifications with a focus on recovery and rehabilitation for individuals with a mental health condition in light of changes within NHS acute provision. An 18 month pilot to test new ways of working within supported living services began in September 2014. We are expecting the finding in relation to the outcome of the pilot to be available mid-2016.
* As a partnership we also recognised the need for a clear governance and scrutiny process to be in place to ensure that the Mental Health Crisis Concordat Act is embedded into daily practice. Therefore the Mental Health Crisis Concordat task group which meets on a quarterly basis, now produces updates to the Health and Wellbeing Board: Strategic Joint Commissioning Group.

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 **3.Next Steps**

* 1. Consideration will need to be given to the future commissioning intentions to support the Concordat recommendations and to address issues around parity between mental health and physical health services.
	2. In light of the CQC report ‘Right Here Right Now’, the Mental Health Crisis Concordat task group have been additionally been tasked with ensuring that against each of the actions identified within South Tyneside’s Mental Health Crisis Concordat Plan has a clear and measureable outcome aimed at ensuring that we can benchmark our present progress against national standards.
	3. We also aim to further enhance our present engagement events so that we are confident that we are aware of the view of people who use the crisis services within South Tyneside.

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 Date: 28th October 2015