Mental Health Crisis Care Concordat: the joint statement: “We commit to work together to improve the system of care and support so people in crisis because of a mental health condition are kept safe and helped to find the support they need – whatever the circumstances in which they first need help – and from whichever service they turn to first. We will work together, and with local organisations, to prevent crises happening whenever possible through prevention and early intervention. We will make sure we meet the needs of vulnerable people in urgent situations. We will strive to make sure that all relevant public services support someone who appears to have a mental health problem to move towards Recovery. Jointly, we hold ourselves accountable for enabling this commitment to be delivered across England.”

In 2014, in partnership with London Borough of Waltham Forest, Waltham Forest Clinical Commissioning Group produced a three year joint mental health strategy for adults of working age in Waltham Forest, “Better Mental Health”. The overarching aim was to working together to provide the best quality of care from the resources available to the public sector. The strategy identified a life course approach to mental health and well-being, taking into account wider socio-economic determinants and focusing on both physical and mental health. Better Mental Health, the Crisis Care Concordat and the other key National Policy and Guidance including Crossing Boundaries 2013, London Mental Health Crisis Commissioning Guide 2014, and Achieving Better Access by 2020, all identify the following key principles for commissioning and providing mental health services:

* The importance of prevention, early intervention and accelerated access to services
* Public education to enable self-referral and early referral
* The delivery of effective upstream interventions
* Ensuring that mental health conditions do not become long term conditions when they need not be
* That families and carers are also supported
* That the crisis care pathway is accessible, appropriate and timely, and that recovery and staying well is the key outcome
* The importance patient-centred services, integrating physical health services, social care, and housing and employment services.

NHS England identify that a Balanced Mental Health system would :

* Provide responsive and compassionate care to individuals at risk of or in crisis
* Provide safe, high quality inpatient care where community alternatives are not appropriate
* Enable discharge from inpatient care through provision of personalised packages of home-based support

The Concordat is warmly welcomed by the partners, and builds on work that is already underway across Waltham Forest through the delivery of Better Mental Health. The plan structure begins with the overarching commissioning and partnership responsibilities, then looks at prevention, access, treatment and recovery. The partnership is represented by Nuzhat Anjum WFCCG, Sue Boon NELFT, Andrew Taylor LBWF, Linzi Roberts-Egan LBWF, Senel Arkut LBWF, Gregory Feldman Met Police, Dr John Samuels WFCCG, Dr Paulette Lawrence WFCCG, Helen Byrne Barts Health and Jaime Walsh HealthWatch. Further actions are supported by Helen Davenport CCG, LAS, PELC, Jon Abrams Redbridge Concern for Mental Health RCMH.

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|  | | **Commissioning to allow earlier intervention, more responsive crisis services and better partnership working** | | | | | | | | |
| **No** | | **Action** | **By when** | | **Led By** | | |  | | **WF Progress** |
| **Matching local need with a suitable range of services** | | | | | | | | | |
| **1a** | | Support the establishment of a mental health specific service user group for the CCG to consult on mental health commissioning, particularly commissioning better crisis care and parity of esteem. This group will evaluate the crisis care pilot projects, and this evaluation will be taken into account when the CCG considers future funding. | February 2015, ongoing | | WFCCG  RCMH | | |  | | The MH Strategic has met twice and this forum will be revised after the service user consultation work commissioned through the EIP/Crisis Care Project. RCMH are leading on the service user evaluation, in partnership with NELFT. This will be incorporated into the business cases to be delivered by the end of May. |
| **1b** | | Multi-agency Sub group (Crisis Care Concordat Sub Group - CCCSG) to be established including as members CCG, NHS Provider organisations, Local Authority, Acute provider, Primary Care, Health Watch, Service users and carers, third sector MH Provider organisations, Police, LAS to oversee the CCC Action Plan. | February 2015  ongoing | | WFCCG | | |  | | The Joint Commissioning Group is an established forum for partnership working. The CCG lead will be responsible for regular updates to the JCB and the Health & Wellbeing Board when needed. There are several Task and Finish Group set to progress the work and report to the MH Commissioning group. |
| **1c** | | JSNAs are developed to include a clear understanding of local needs, and feed into commissioning plans that respond to identified need through the Health and Wellbeing Board. | Jan 2015 | | LBWF | | |  | | Completed- A refreshed Mental Health Chapter has been completed and is currently with the designers. This should be available publicly in Spring 2015. The findings pre-publication have been well-circulated to, and agreed with, stakeholders and are therefore are already feeding into local commissioning plans. |
| **1d** | | Mental Health service developments (through CQUIN 15-16) including the Crisis Care Pathway are in line with Better Mental Health, the joint mental health strategy for adults of working age in Waltham Forest 2013-16. | End Q1 | | WFCCG | | |  | | Completed - Negotiations with the providers include using pilot projects and CQUINs to drive the development of business cases to be submitted in May to support future funding. |
| **1e** | | Specifications for key components of the Crisis Care Pathway reviewed, consulted upon and into CQUIN 15-16 by end qtr 1. | March 2015 | | WFCCG | | |  | | Completed- Pathway reviewed and recurrent funding agreed for crisis care services by CCG. NELFT making arrangements/recruitment to meet the changes agreed. |
| **1f** | | Business case developed for primary care wellbeing service, so that “people get the care they need, when they need it, in ways that are user-friendly, achieve the desired results and provide value for money”. (Crossing Boundaries Sep2013) | April 2015 | | WFCCG | | |  | | Completed- A new Mental Health wellness Service has been commissioned and it will start delivering from January 16. |
| **Improving mental health crisis services** | | | | | | | | | |
| **1g** | | Retain an overview of the crisis care pathway to support timely and appropriate interventions and partnership working for crisis care, identifying gaps and addressing capacity issues. | ongoing | | WFCCG | | |  | | The Crisis care pathway was reviewed and changes made in the services. This overview will retained through the delivery of this action plan. |
| **1h** | | Routine Reporting against national access standards (EIP and IAPT) is conducted to ensure parity of esteem for mental health service users and ensure timely responses to minimise any escalation to crisis. | June 2015 | | WFCCG  NELFT | | |  | | Completed - The psychosis business case has been submitted and successfully negotiated. Additional funding allocated by CCG to NELFT to increase capacity in EIP services. NELFT has commenced recruitment for the new agreed posts. The NELFT EIP and crisis task and finish group has developed systems to ensure we are able to report against this target,  IAPT also have a task and finish group with an action plan to deliver on the new access targets. |
| **1i** | | Ensure commissioning intentions reflect crisis care priorities for 2015/16 contracts, ensuring that services outside secondary care mental health services that support early intervention and recovery, such as primary care, navigator and recovery support services, are in place to support timely and effective movement across the system. | Last quarter 2014/15 | | WFCCG  LBWF | | |  | | Completed- Commissioning intentions reflect this. Primary Integrated Care models being developed which include Navigator support services. |
| **Ensuring high quality staff and improved partnership working in Waltham forest** | | | | | | | | | |
| **1j** | | Provide training for primary care and community colleagues in response to identified gaps in skills and competencies. Agree quality Standards, Audit priorities and framework for completion in line with CQUINs. | ongoing | | NELFT  WFCCG | | |  | | Completed - GP education event for first episode psychosis and new access target was arranged and delivered with great success to GP’s on 16th of July 2015. There are more events planned via the CCG GP education program. |
| **1k** | | Review any shared protocols developed through the pilot within and across the range of statutory, independent and voluntary organisations that support people with mental health problems. | July 2015 | | NELFT | | |  | | This work will be progressed as part of full Crisis care service development. At this stage the working group has set the protocol with the police and will be developing it further in next six months. |
| **1l** | | Ensure primary care providers are aware of mental health crisis services and referral routes. | ongoing | | NELFT  WFCCG | | |  | | Completed- Primary care mental health practitioner has been employed permanently and has a work program to continue to liaise and visit GP surgeries within the borough rising aware of mental health services and referral routes. |
| **2** | **Access to support before crisis point** | | | | | | | | | |
| **No** | **Action** | | | **By When** | | **Led By** |  | | **Progress** | |
| **Improve access to support via primary care** | | | | | | | | | | |
| **2a** | Ensure primary care training programme is focused on early identification and relapse prevention and the physical health care needs of people with mental health issues. Ensure the Out of Hours service (PELC) are part of this training (linked to 1K, 1M) | | | Sept 2015 | | NELFT  WFCCG |  | | GP education event for first episode psychosis and new access target was delivered to GP’s on 16th of July 2015. There are more events planned via the CCG GP education program. | |
| **2b** | Develop navigator role and broaden scope across Waltham Forest. To be progressed through the mental health primary care pilot. | | | March 2015 | | WFCCG |  | | Completed- This has been included in the new commissioned MH Wellness Service. | |
| **2c** | Self-referral options made clearly available and accessible (phone, email, online, walk-in), including IAPT.  To be progressed through SDIP | | | Dec 2014 | | NELFT  WFCCG |  | | Completed - “I need help button” to be linked to self-referral page on NELFT website. A publicity programme for self-referral was commissioned by the CCG in 2014-15. An IAPT micro site has been set up, with an online referral form.  **Completed** | |
| **Improve access to and experience of mental health services** | | | | | | | | | | |
| **2d** | Implement and evaluate a Mental Health Triage Pilot (“Street Triage”) in Waltham Forest, with a view to reducing inappropriate S136 and use of A&E as a place of safety. Link to commissioning intentions. | | | July 2015 | | NELFT  Police |  | | Completed - Business case for street triage and MH Direct submitted and additional resources agreed with WF . | |
| **2e** | Update websites (LBWF, NELFT) to provide key information to referrers, self-referrers (inc I need help button), their families and carers. | | | Aug 2015 | | NELFT  LBWF |  | | New NELFT webpage was launched on the 8th of July 2015. Self-referral to mental health services is available from this site.  LBWF to upload | |
| **2f** | Produce service/resource directory and information leaflets for referrers and for families and carers. Provider organisations to be responsible for routinely updating information. | | | June 2015 | | CCG  NELFT |  | | Completed- The resource Directory has been produced and published on CCG website. | |
| **2g** | Update mental health crisis resources – crisis cards, crisis plans, flyers, websites etc to ensure clarity regarding opening hours, referral procedures and eligibility criteria. | | | Sept 2015 | | NELFT |  | | NELFT service directory recently published – yet to be uploaded on to websites. Other resources being reviewed and updated. | |
| **2h** | Ensure organisations supporting access to social networks, education, employment, training, housing, arts etc) are appropriately profiled on websites including NHS111 Directory of Services, NHS Choices and NELFT & LBWF & CCG websites | | | May 2015 | | RCMH  NELFT  LBWF  PELC |  | | NELFT’s new website has been launched with up to date information on NELFT services. | |
| **2i** | Evaluate pilot of increasing direct clinical input into MH Direct (24 hour crisis line). | | | May 2015 | | NELFT  WFCCG |  | | Business case for street triage and MH Direct submitted and being agreed with WF CCG. | |
| **2j** | Review referral care pathway from NHS111 and update the Directory of Services (NELFT services and relevant third sector), ensure it includes MHD | | | Feb 2015 | | NELFT  PELC |  | | Completed- The link from NHS111 to MHD should be clear. | |
| **2k** | Agree protocol to ensure consistent approach to feedback within 48 hours to referrers following assessment or a decision not to assess. | | | July 2015 | | NELFT |  | | WFAABIT team respond to urgent referrals in 24 hours and non-urgent referrals within 14 days. They have a rapid notification tool for GP’s that provides outcome of assessment within 48 hours by email.  Psychiatric Liaison Service to email outcome of all assessments to GP’s  OA mental health services are implementing a similar process through the SDIP. | |
| **2l** | Review and update algorithm used by non-clinical staff responding to MH Direct calls, and evaluate impact. Monitored through CQUIN. | | | June 2105 | | NELFT  WFCCG |  | | This is on-going piece of work | |
| **2m** | Outreach services through CAMHS reviewed and developed to ensure Children and Young People identified as high risk are supported to remain out of A&E. CAMHS review to address. | | | March 2015 | | WFCCG  LBWF |  | | WF CAMHS Transformation Plan includes improvement in Crisis Services and this will be progressed after the allocation of the grant . | |
| **2n** | Parity of esteem access standards for EIP. Service pathways and resources identified to support meeting the standard waiting time for EIP (also addressed in no 1h) and progressed through CQUIN. | | | March 2016 | | NELFT  WFCCG |  | | Completed- Resources identified for Primary Care Training and awareness raising sessions, resources packs, support for carers and families. Pilot to deliver family and carer interventions underway. | |
| **3** | **Urgent and Emergency access to care** | | | | | | | | | |
| **No** | **Action** | | | **By When** | | **Led By** |  | | **Progress** | |
| **Improve NHS emergency response to mental health crisis** | | | | | | | | | | |
| **3a** | Whipps Cross Emergency Department to identify a dedicated area facilitating a calm environment where people can be observed – review to see if better space available. | | | March 2015 | | BartsH  NELFT |  | | There is a dedicated room in WX ED for assessment, but it is not ideal. Space is an issue, but this location is being reviewed, but seems unlikely to be resolved however regularly discussed at the Barts: NELFT operational meeting. This is still an ongoing discussion. | |
| **3b** | Mental health awareness and crisis management training for Emergency Staff, ensuring front line staff are trained in the assessment and management of mental health crisis. | | | March 2016 | | BartsH  NELFT |  | | Training program to be developed between PLS and A&E | |
| **3c** | Revise and where necessary improve the pathways between services so they are safe and effective, including addressing any delays in transport away from ED once assessed. | | | Ongoing via monthly mtgs | | BartsH  NELFT  LAS |  | | Monthly operational pathway meetings in place between BARTS and NELFT, with oversight of an agreed pathway. Currently reviewing the pathway for young people in crisis. This will be discussed in the next monthly meeting.  Transport protocol was being developed however this has been delayed | |
| **3d** | Crisis care planning for those with mental health issues (and may also have substance misuse issues) who regularly present at A&E. Frequent attender reports and multi-agency plans reviewed and updated, and made accessible to ED staff. | | | August 2015 | | NELFT |  | | Frequent attenders regularly reviewed by Psychiatric Liaison and multi-agency meetings coordinated to develop robust crisis plans for those who have attended more than 3 times in a quarter. These plans are shared with A&E staff. This is an ongoing piece of work. | |
| **3e** | Ensure that Mental Health assessments in A&E are undertaken within the 4 hours of presentation, to ensure parity of esteem. | | | Monthly monitoring | | NELFT |  | | Completed- All breaches reviewed and analysed by PLS and escalated to operational group if significant care pathway issues identified. NELFT routinely achieves over 95% of completion of interventions within 4 hours from time of referral. | |
| **3f** | Working closely with police to ensure “urgent” assessments are identified appropriately, and assessments are done within 4 hours. | | | ongoing | | NELFT  Police |  | | Pressures on the police continue to make this very difficult to achieve and a recent incident during an urgent mental health act assessment highlighted this again. These issues are being raised at the police liaison group and NELFT will be doing an investigation of the recent incident and look at lessons learnt. | |
| **3g** | Encourage a staff to be trained as AMHPs. | | | ongoing | | LBWF, NELFT |  | | Completed- There are many Social work and CPN staff trained as AMP in WF .In addition this year there is an additional mental health social worker from WF has been accepted onto the AMHP training this year. | |
| **3h** | Advanced Directives and Crisis Care Planning to be encouraged and better embedded. Ensure copies of discharge care plans are given to both clients and GPs. | | | ongoing | | NELFT |  | | Further work is required around advanced directives within mental health services.  Active review of crisis planning is commenced but further work is required.  It is already practice for discharge care plans to be supplied to GP’s and service users. However there has to date been little engagement from GP’s in discharged processes. | |

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| **4** | **Improved quality of response when in Crisis** | | | | | |
| **No** | **Action** | **By When** | | **Led By** |  | **Progress** |
| **Parity of esteem** | | | | | | |
| **4a** | ‘Parity of esteem’ in the commissioning and delivery (quality, impact, cost effectiveness and availability) of  specialist mental health services for those in a mental health crisis, their carers and their GP, including home treatment services; PLS; acute in-patient and NHS places of safety. | March 2015, ongoing | | NELFT  WFCCG |  | Completed- In 2015/16 contract following was funded:  Psychiatric Liaison 24/7 was funded business as usual  Extended hours access service was funded business as usual  New investment in IAPT to achieve new access targets was funded  New investment in Memory Service to deliver dementia targets |
| **Improved liaison and partnership working with police officers** | | | | | | |
| **4b** | Develop business case following Street Triage (mental health triage) pilot project in Waltham Forest, incorporating feedback and recommendations from Met Police. | June 2015 | | NELFT  Police |  | Completed- Business case was presented to WF CCG and additional funding agreed . |
| **4c** | Review any police use of places of safety under the Mental Health Act 1983 and results of local monitoring through Police Liaison group. | ongoing | | NELFT  Police |  | This takes place at the police liaison group meeting. To be routinely tabled. |
| **Ensure quality crisis care across the lifespan** | | | | | | |
| **4d** | Establish clear agreements with Children’s & Young People’s Commissioners and Providers to secure appropriate services for children’s and young people’s community and in-patient crisis treatment. | tbc | | WFCCG  LBWF |  | The CAMHS transformation plan includes this as apriority and the CAMHS group will progress this . |
| **4e** | NICE compliant psychosis services to cover whole life span. | Dec 2015 | | NELFT  WFCCG |  | Completed- Recruitment for new posts has started with most posts offered.  NELFT are finalising reports to be able to extract data. Psychosis pathway agreed and NICE complaint package of care agreed.  Training has been rolled out to staff and borough based workshops to be commenced monthly. |
| **Improved services for those with co-existing mental health and substance misuse issues** | | | | | | |
| **4f** | Monitor and if necessary review the care pathway for Barts, SMS and PLS to address delays in MH assessments in A&E when person is intoxicated | ongoing | | NELFT  BartsH  LBWF |  | NELFT: Barts operational meeting occurs monthly  Psychiatric Liaison to have full time manager and this has occurred from 12/10/15. |
| **Service User/Patient safety and safeguarding/Physical Health Care** | | | | | | |
| **4g** | Physical health needs assessed (including addressing obesity) for inpatients and to be progressed through SDIP | tbc | NELFT | |  | NELFT embedding new process on wards to help facilitate this as part of National CQUIN |
| **4h** | Smoking cessation – addressed with inpatients as routine, and as part of a physical health care assessment | March2016 | NELFT | |  | NELFT embedding new process on wards to help facilitate this as part of National CQUIN  Smoking cessation clinics commenced in the CRT in September 2015 |
| **4i** | Operational policies (HTT and CRT) including eligibility criteria reviewed and re-issued. | Dec2014 | NELFT | |  | Completed : These policies have now been reviewed and re-issued. |
| **4j** | Deliver the action plan from the CORE Crisis Resolution Team Fidelity Scale | March2016 | NELFT | |  | Currently no update |
| **5** | **Recovery and Staying Well /Preventing Future Crises** | | | | | |
| **No** | **Action** | **By When** | **Led By** | |  | **Progress** |
| **Joint planning for prevention of crises** | | | | | | |
| **5a** | Provide more evidence based care (family interventions) for families and carers in EIP and HTT, progressed through SDIP | Dec2015 | NELFT  WFCCG | |  | Completed : The psychosis recruitment has commenced which will allow increased delivery for family interventions. |
| **5b** | Review discharge processes for NELFT service users that fit the criteria for support from Evolve, supporting this pathway whilst the primary care wellbeing service is being considered and developed. | April 2015 | NELFT  Crest | |  | Completed: All clients discharged appropriately to the new MH wellness service. |
| **5c** | Increase the awareness of personalisation and use of personal budgets for those with long term mental health needs | Aug 2015 | LBWF NELFT | |  | On-going work within Mental health service for this and utilisation of this process continues to grow. |
| **5d** | Increase the involvement of GPs in the discharge planning of secondary care mental health service users. GPs encouraged to be part of discharge planning meetings in community recovery services. | ongoing | NELFT  WFCCG | |  | Discharge meetings are being set up in the community recovery services however minimal engagement from primary care.  The primary care link worker role is being developed in the Access service. |
| **5e** | Develop a Psychosis Family and Carers support and information package. | May 2015 | NELFT  RCMH | |  | This has been produced and is being used in EIP |