**NORTH TYNESIDE CRISIS CARE CONCORDAT ACTION PLAN**

**Overview**

In North Tyneside, our JSNA predicts a rise in our local population with the older people population being the most significant rise. We are aware that long term conditions and dementia will be an increasing challenge for us. Smoking and alcohol are major local issues and we are also conscious that poor mental health and wellbeing are linked to socio-economic deprivation and vulnerability.

We have two mental health providers in North Tyneside. Approximately half of our service provision is provided by Northumberland, Tyne & Wear NHS Foundation Trust (NTW), while the other half is provided by the acute Trust, Northumbria Healthcare NHS Foundation Trust (NHCT). NTW mainly provide secondary and specialist services to the adult population in North Tyneside. NHCT provide Talking Therapies services (including IAPT), CAMHS services, Older Peoples Mental Health services (including dementia services) and learning disabilities community services.

**Governance**

One of the areas that we intend to improve is the quality of the response received by individuals experiencing mental health crises in the community. We have established a North Tyneside Crisis Concordat Stakeholder Group which aims to achieve improvement, through partnership working and the sharing of good practice. We will support the development and review of effective service models and help inform the cost-effective commissioning of these service models.

The Stakeholder Group’s work is overseen and governed by the Mental Health Integration Board and this will continue to ensure that the Action Plan will deliver. The Mental Health Integration Board forms part of North Tyneside’s Health and Social Care Integration Programme which is a partnership between NHS North Tyneside Clinical Commissioning Group, Northumbria Healthcare NHS Foundation Trust, North Tyneside Council and their health and wellbeing partners. The Health & Social Care Integration Programme reports to the Health & Wellbeing Board.

**Progress and Challenges**

A major transformation of mental health services provided by Northumberland, Tyne & Wear Foundation Trust is currently taking place. The aim of the Transformation Programme is to avoid admission to hospital for people with mental health problems, unless it is absolutely necessary. People should have the opportunity to receive high quality services and support in their own homes wherever that is possible and safe. This system change will give rise to some challenges. We need to consider the impact of this change programme on services that will be provided in North Tyneside and ensure it will not adversely affect any patient groups, including people experiencing a mental health crisis. One of the major issues we need to consider, are transitions between provider organisations and services. To manage this, we have established a number of Transitions Sub-Groups which report to the Mental Health Integration Board and which are responsible for identifying and resolving any transitions issues.

A multi-agency Suicide Prevention Task & Finish Group is being led by Public Health which, following a process of baseline mapping and gap analysis is developing an action plan aiming to reduce the number of suicides in North Tyneside.

We have recently implemented liaison psychiatry services in North Tyneside, based at A&E and also in older peoples and rehabilitation wards. We will be reviewing and evaluating these services to determine, and commission, the most appropriate future model of liaison psychiatry. We have also identified funding for and are in the process of establishing a Universal Crisis Team and Street Triage in North Tyneside.

We are aware, though, that we need to continue to build on this work. Prior to beginning work on development of the Action Plan, the Stakeholder Group partners undertook a detailed, facilitated service mapping process to identify areas where there were issues with the mental health crisis pathway, duplications, gaps etc. which provided us with the foundations for our Action Plan. The Action Plan therefore built upon this work and has been developed to focus on the issues that the Stakeholder Group has identified as being particularly key to delivery of successful mental health crisis services in North Tyneside and which focus on areas of joint delivery or joint commissioning.

The Stakeholder Group will continue to lead on implementation of the actions identified in the Action Plan. We recognise that the Action Plan is challenging and ambitious particularly in relation to some of the whole system approaches we intend to take and the timescales we have set ourselves. Part of the Plan therefore describes the infrastructure and processes that we will implement which will form the foundations for delivery of some of the more service delivery focussed actions. We will review the Action Plan on a 6 monthly basis to ensure that the Actions remain appropriate or if they need to be revised or updated. We will also continue to report on progress to the Mental Health Integration Board.

Despite the challenges and ambitions we have set ourselves, we are confident that this Action Plan is achievable and, crucially, will considerably improve the response to people in North Tyneside who are experiencing a mental health crisis.

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| 1. **Ensure effective commissioning, provider partnerships and infrastructures are in place to secure delivery** | | | | |  |
| **No.** | **Purpose/Action** | **Timescale** | **Led By** | **Progress/Outcomes as at 25.09.2015** | **RAG Status** |
| **Ensuring Effective Partnerships** | | | | |  |
| 1.1 | Convene a multi-agency Crisis Concordat Stakeholder group including CCG, LA, Police, NHS providers, independent sector, users/carers to oversee and agree partnership approaches to mental health crisis care and ensure the Actions developed in this Action Plan are enacted. | November 2014 | CCG | Group established and regular meetings taking place.  Review the governance arrangements to ensure governance remains appropriate on a local basis and regionally. |  |
| 1.2 | Review the remit, function and attendees at the Senior Police and Partners Group and ensure appropriate representation from key stakeholders from North Tyneside to input into regional initiatives and agree regional partnership approaches to mental health crisis care. | April 2015 | NTW/ Police | A review of the remit and function of the strategic partnership will take place to ensure core groups of key partners are represented across the region, meetings take place regularly and the function provides output to the key areas.  The review has taken place and Terms of Reference and membership have been updated. The newly reformed Group has established and had its first meeting in August 2015. Future meetings have been arranged. |  |
| 1.3 | JSNAs are developed to include a clear understanding of need, patterns across communities and feed into commissioning plans that respond to gaps identified | April 2015 | Local Authority | Review of mental health JSNA undertaken in 2014.  Deep-dives to take place in identified areas including suicide prevention.  Public Health has completed deep dives to identify areas for further collaborative, partnership work, timescales for completing this work and action plans. |  |
| 1.4 | Develop Mental Health Needs Assessment to inform local discussions on service redesign, gap analysis, and capacity planning and to inform commissioning decisions | April 2015 | Local Authority/ CCG | A separate dementia Health Needs assessment has been undertaken and is now being used to inform service strategy. A wider all ages HNA has also been undertaken and, again, is being used to inform service strategy and development. |  |
| 1.5 | Review training needs of all agencies to develop a multi-agency  framework of training to improve understanding of mental health, relevant legislation and the roles and responsibilities of each partner agency. This will include training to Police staff and to ambulance staff regarding mental health.  Develop new codes of practice.  Explore joint training opportunities to include:   * IAPT & CMHTs (joint workshops already taken place and follow-up work underway) * police on MH awareness, * NTW nurses to take on AMPH role (Council agreed to support placements) * A multi-agency training forum to be developed and take place on a regular basis * NEAS plans to deliver mental health training to all NEAS ambulance clinicians   Use information and analysis from sources to include, for example, complaints, direct service user feedback, Points of View, working with service users in IRS to get feedback, to understand people with mental health needs, carers and families perspective.  Ensure that staff who encounter people experiencing mental health crises will develop an evidence based understanding of mental health crisis from the perspective of people with mental health needs, carers and families | April 2016 | All partners | Work on the simulation training on the s136/crisis pathway is progressing very well. The purpose of the event will be to understand the roles of each agency and how they work together. From this, we will be able to review the current pathways and smooth any gaps in the existing pathways. Fulfilling Lives and service users have been involved in developing the simulation training. Scenarios are being developed and it will be piloted in June. It will then be finalised and expanded throughout the area using further, different, scenarios.  The outcome of the Vanguard bid is awaited though it was felt it would be favourably received.  An Introduction to Mental Health training video has been developed for police officers, again involving service users. Questions & Answers and frequent issues scenarios are being developed. The College of Policing is launching mandatory mental health training towards the end of 2016 which will be an intensive 2-3 day course.  Brief mental health awareness training is taking place with NEAS new ICAT emergency recruits and good feedback has been received. NTW is also working with NEAS to consider how the mental health response can be improved, including call handling responses. The possibility of an NTW secondment into the NEAS clinical hub is being considered as part of the Vanguard bid.  A survey has been circulated to gain more detailed information about training needs and to identify training gaps. NHS England is working with HENE to increase the priority and also to identify dedicated resourced to take this work forward. |  |
| 1.6 | Develop an inter-agency information sharing protocol and IT interface solutions:   * Review processes in other areas of the UK and consider how they may inform development of guidance on all areas of information sharing across agencies. * Look at joint risk planning where services overlap as well as solo plans * Maximise efficiency and effectiveness. | April 2016  Completed  April 2016 | All partners  NTW/ Local Authority  NTW/CCG | The Local Authority already uses a flagging system to identify people who may come to the police’s attention and share info with the police.  NTW also exploring what and how information can be shared with the police. Some inter-agency work has been undertaken.  This remains a high priority but it has been agreed on a regional basis that training work will receive precedence. The deadline for this action has therefore changed from November 2015 to April 2016.  An action has been completed to enable access to NTW RIO IT application by social workers within the adult Community Mental Health Teams (who will be issued with a “mobile kit”) and NTW staff to local authority applications. An Individual Service Agreement has been completed (IG level 2 compliant = trusted source status)  An action to enable IT links between NTW Trust and GP Practices in North Tyneside has been completed |  |
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| **2. Prevention, Early Intervention and Support** | | | | | | | |  |
| **No.** | **Purpose/Action** | | **Timescale** | | **Led By** | **Progress/Outcome** | | **RAG status** |
| 2.1. | Continue work to implement NTW Trust Transformation Programme to improve access to appropriate types and level of care and service appropriate to patients needs, aiming to prevent admission into hospital and to provide care in peoples own homes when safe and appropriate to do so. | | November 2016 | | NTW/ CCG | Stakeholder engagement work has been undertaken and new service model has been developed and agreed by the CCG. Work now progressing the detailed service specific work. Work of Mental Health Integration Board Transition Sub-Groups and Single Point of Access work has fed into this process.  Learning from the first wave of change in South of Tyne area is helping to inform the model and transition process.  It has also been agreed that the Transformation will take effect across the whole of North of Tyne, including Northumberland, Newcastle and Gateshead at the same time.  Staff consultation has completed.  New community pathways for mental health will roll-out in North Tyneside from November 2016. Delay due to recruitment issues which the Trust is attempting to address  The completion date for this action has therefore changed from November 2015 to November 2016. | |  |
| 2.2 | Scope prevention and early intervention support services available to children and young people, including those with behavioural problems. This will include:   * increasing early help seeking behaviour of young people * equipping appropriate staff with the knowledge and skills required to support this. | | March 2017 | | Local Authority | The North Tyneside Young Persons Health & Well-Being Reference Group undertook a review which identified a gap in prevention and early intervention support services available to children & young People. A report was presented to the Children, Young People & Learning Commissioning Executive Board in January 2015 where it was agreed that recommendations will be progressed via an internal working group.  Public Health is leading on a communication process with children & young people and their families, as well as professionals involved in provision of services to children & young people. This will inform the draft Children & Young People Emotional and Mental Wellbeing Strategy for North Tyneside.  We are also using the opportunity presented by production of our CAMHS Transformation Plan to implement services which focuses on prevention and early intervention services.  The deadline for this work has been extended to March 2017 | |  |
| 2.3 | Further evaluate the scope for NHS 111 to respond to mental health needs of people in North Tyneside. | | December  2015  March 2016 | | CCG/ NEAS  NEAS | Work has begun to review the current Directory of Services to ensure it contains all relevant mental health services Secure on-line access to the Directory of Services for healthcare professionals.  Work is also ongoing to review the agreed response time for people who are experiencing a crisis or have an urgent mental health need and for whom primary care intervention is appropriate. This is being developed via the Urgent Care Vanguard & outcome awaited on the bid. | |  |
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| 2.4 | Incorporation of the principles and practice of Mental Health Crisis Plans for individuals to ensure appropriate care continuity and standards into mental health, based on the Replacement Care Framework. | | Sept 2015 | | NHCT/  Local Authority | Within the Psychiatry of Old Age Services provided by Northumbria Healthcare Trust (NHCT), the “This is me” documentation is in use. Consider roll-out in acute care setting and within other services as appropriate.  This documentation is being rolled out by the liaison psychiatry team and work is ongoing to help uptake of usage in non-POAS wards.  The CCG has also agreed a CQUIN with both NHCT and NTW Trust to develop joint Forward Plan for people who have received a liaison psychiatry service whilst attending hospital which agree safe community alternatives to A&E aiming to improve relapse prevention and crisis care planning for people already known to services and to improve care pathways across provider | |  |
| 2.5 | Develop prevention projects to tackle mental health and suicidal behaviour challenges. To include establishing a link with the British Transport Police to involve them in aiming to prevent people seeking to harm themselves on the railway. | | June 2015 | | Local Authority | North Tyneside Suicide Prevention Group established with links to regional group. Suicide and self-harm audit undertaken and is being regularly updated. A service mapping exercise has been undertaken & is being updated which will identify any specific issues or gaps in existing services.  An Action Plan has been developed by Public Health.  Work is ongoing to develop social marketing strategies and helping agencies/people be able to identify what intervention is available at an early stage. The focus will initially be on vulnerable groups.  A specific audit has been undertaken with the British Transport Police to review some specific cases railway suicide cases to identify what can be done to prevent such suicides.  Noted at May 2016, that deaths from suicide in North Tyneside have reduced. | |  |
| 2.6 | Implement a multi-agency single point of access for mental health services which provides expert advice and support for external agencies, service users and carers and which also has direct access to known patient records and ability to book an initial emergency, urgent or routine assessment. | | November  2016 | | NTW/ Local Authority | IT issues mean that a joint single point of access between NTW Trust and North Tyneside Council cannot be developed as hoped. Instead, alternative options are being explored such as Business Skype, teleconferencing facilities etc to share information.  The timescale for this action has been changed to match with those in action 2.1  Northumbria Healthcare Trust to consider how and if they will be able to join the single point of access. | |  |
| 2.7 | Review how self-help community groups can be developed, promoted and sustained to enable increased opportunity for people to attend and/or develop local self-help groups and community activities | | January 2015 | | Local Authority | The Local Authority’s Adult Social Care Dept. has recently launched a new service – Care & Connect. The service works with any adult aged 18 years and over and provides information and advice, assisted signposting and support in relation to general social care needs. Community navigators work into the four areas of the borough and are responsible for identifying community based resources and activities as well as supporting people to develop their own and for building community capacity. A community asset map has been developed which is updated on a regular basis.  Care & Connect also attends the mental health provider forum and has established good links with a number of groups and organisations which offer support. The Council is considering undertaking a mapping exercise on access to support to include its internal enablement team | |  |
| 2.8 | Develop an integrated model of voluntary sector neighbourhood delivery to facilitate befriending support, community resilience and access to the full range of community support for people and to provide early intervention and prevent crises arising. | | Jan 2016 | | Local Authority/ North Tyneside Launchpad | Link in with, learn and expand on VODA’s “Good Neighbours” project  Integrate with Council’s Community Navigators – Care and Connect.  Explore opportunities to offer organisational peer support and develop peer support programmes.  VODA continues to deliver the support volunteering programme and link into the Good Neighbours project. The coordinator of the Good Neighbours project is planning more localised volunteer/good neighbours networks.  Marcia is exploring how this work will progress in conjunction with the Council and mental health provider forum. It has been suggested that there could be a focus on signposting | |  |
| 2.9 | Improve support and involvement for carers (including young carers) by working with them to better understand their needs and to enable them to be more involved and supported in their caring role | | Sept 2015 | | Local Authority/ CCG | A North Tyneside Commitment to Carers is current out for consultation. The Commitment and action plan has been developed in partnership with the CCG and the North Tyneside Carers Centre, using feedback from a number of consultation events with carers and also from information received as part of the ASC Carers Survey conducted in 2014. The commitment and plan covers adult and young carers and sets out the activity we intend to carry out, to improve support and broadly falls under the following categories:   * early identification of carers * improved communication * improved carer, health, wellbeing and support * support to enable carers to go/continue to work or access education   The North Tyneside Commitment to Carers will be launched on Carers rights Day on 20th November 2015.  This action has now been completed. | |  |
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| **3. Urgent and emergency access to crisis care** | | | | | | | |  |
| **No.** | **Purpose/Action** | | **Timescale** | | **Led By** | **Progress/Outcome** | | **RAG Status** |
| 3.1 | Implementation of street triage in North Tyneside to ensure that people who may be experiencing a mental health crisis can receive appropriate input from a qualified mental health professional as quickly as possible and potentially without invoking a s136 warrant. The model will be informed by the pilot being provided in the South of Tyne area. | | June 2015 | | NTW / Police | Funding was identified by CCG to implement street triage. NTW Trust and Police identified necessary resources and recruited to relevant posts. Training programmes were developed and provided, briefing information for agencies has been provided and contingency plans to manage potential demand have been developed.  The service was implemented by the target date of June 2015. All posts have been recruited to  Initial feedback is that the service is very effective and the number of s136 detentions has decreased significantly.  A further review in February 2016 demonstrated that, force-wide, the use of s136 powers have been more appropriate evidenced by the higher number of people who have subsequently been detained following a s136 arrest.  Data shows:  29 June to 31 Oct 2014 = 19 x s136  29 June to 31 Oct 2016 = 2 x s136  In North Tyneside the number of s136 arrests were as follows:  Jan 2016 – 0  Feb 2016 – 3  March 2016 - 0  Claire is rewriting the NTW s136 policy to take account of the new code and to confirm that people should only be taken to ED when it is reasonably needed. The Trust has also identified temporary back up in places to minimise travel distances to Places of Safety and use of A&E and police custody  Consideration is being given to expansion of street triage to 24/7 but this is dependent on evidenced need for this level of service and resources. | |  |
| 3.2 | Extend the remit of the current Crisis Resolution Team in North Tyneside to expand into a Universal Crisis Resolution Team which is an all age, all needs service. | | June 2015 | | NTW | Funding has been identified by CCG to create a Universal Crisis Resolution Team. NTW Trust has now implemented this within the target timeframe. | |  |
| 3.3 | Review crisis mental health services for children & young people in particular those in transition or considered vulnerable. Ensure sufficient capacity exists at appropriate Places of Safety to avoid children & young people being detained under s136 Mental Health Act in police cells | | January 2015 | | CCG | Review of services undertaken. Data received about use of police cells and confirmed no children & young people detained under s136 MHA in police cells. Report presented to the Adult Social Care, Health & Well-Being Sub Committee in January 2015.  Continue to monitor data and usage.  Force-wide, no person under 18 years has been inappropriately taken to police cells as a place of safety since 2014. 2 young people have been detained in police cells but this was appropriate due to violent conduct. | |  |
| 3.4 | Implementation of liaison psychiatry services at acute hospital sites and in wards, aiming to provide seamless referral into appropriate mental health services where emergency/urgent needs are indicated and to avoid unnecessary hospital admissions | | February 2015 | | CCG | Liaison psychiatry services for older people (provided by Northumbria Healthcare Trust) and for working age adults (provided by Northumberland, Tyne & Wear Trust) commissioned and established at North Tyneside General Hospital.  A&E based services for working age adults is now based at the new hospital, The Northumbria. North Tyneside and Northumberland CCGs are working with NTW Trust and NHCT to establish a joint service. | |  |
| 3.5 | Availability of prompt formal Mental Health Act assessments by s12 doctors and Approved Mental Health Professionals for s136 detentions in line with the RC standard of commencing the assessment in < 3 hours unless there are clinical grounds to delay it | | April 2015 | | NTW/ NHCT/ Local Authority | Responsible clinician working agreements between the Trusts already in operation.  Those working agreements have been reviewed to ensure they remain up to date with relevant standards. | |  |
| 3.6 | Develop a process around assessment of people under the influence of alcohol to ensure that no-one is excluded from a place of safety or assessment due to intoxication.  Ensure that the Mental Health Place of Safety is staffed with appropriately skilled mental health professionals 24/7 as per best practice guidance.  Ensure that staff are skilled and trained to manage “violent patients”. | | June 2016 | | NTW | Following publication of CQC “Safer Place to Be” report about not using breathalysers as part of Place of Safety suites to assess, guidance has been developed for CRHT to ensure that individuals are not denied assessments due to intoxication and are given a screening to assess suitability for assessment.  Consider developing this guidance on a multi-organisational basis.  Draft proposed clinical algorithm for assessment of violent and aggressive mentally disordered patients in police custody for potential implementation  NTW Trust has developed guidance notes on how to manage violent and potentially forensic patients being held in police custody. This includes information on when it is appropriate to admit the person, keep in remand etc. This draft policy has been out to consultation with the guidance, comments received and will be ratified within NTW. Police & CPT sign up will then be sought.  At the previous meeting, an issue about delays in s12 assessments had been occurring. A review has shown that this is not a North Tyneside issue. | |  |
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| **4. Improved quality of response and pathway when people are detained under Section 135 and 136**  **of the Mental Health Act 1983** | | | | | | | |  |
| **No.** | **Purpose/Action** | **Timescale** | | **Led By** | | | **Progress/Outcome** | **RAG Status** |
| 4.1. | Undertake a pathway mapping exercise for urgent and emergency responses to crisis care including s136 Mental Health Act 1983 process | October 2014 | | CCG | | | Mapping undertaken and areas for development identified to be included in this Action Plan |  |
| 4.2. | Review processes for s135 warrants to include:   * Sign up to the Fee Account system by Local Authorities * Warrants are issues as a priority by courts/magistrates * Consider potential to implement digital warrants * Develop close relationships between magistrates, particularly out of hours magistrates and AMPHS to minimise delays in granting a warrant and to ensure smooth and efficient process in times of crisis. | Nov 2016 | | NTW/ Local Authority | | | LA has an agreed process for s135 warrants.  Justice Clerk and NHSE as agreed ot share the out of hours process for gaining s135 warrants, which had been an issue for AMPHs during the out of hours period. The procedure has now been confirmed and court charges also confirmed. NTW policy has therefore been signed off. |  |
| 4.3 | Agree the datasets to capture information relating to Section 136 of the Mental Health Act and street triage. | Sept 2015 | | Police/ NTW/ CCG | | | Data Sets should be set locally and achieve, as a minimum, the national minimum standards data set for Street triage.  All agencies data collection must improve as per the CQC Safer Place To Be standards.  Datasets agreed in June 2015. Action completed |  |
| 4.4. | Implement a regular multi-agency monitoring and review process, using data on s135 police involvement and s136 detentions. Identify repeat detentions and other information to ensure individuals needs are being appropriately managed. | April 2015 | | Police/ NTW/ Local Authority | | | North Tyneside & Northumberland Police & Partners Local Liaison Group established, with the two local localities recently joining together. Clinical practice issues are reviewed and s135/136 issues are included as a standard agenda item.  Group considers areas of concern and good practice. Group reports to Police and Partners Strategic Group.  Group will consider complex cases whereby the person is repeatedly being detained, as flagged by Police/CRHT/LA. Meetings discuss cases and develop plans to prevent repeated detention. Street Triage also expected to identify repeat detentions and develop plans to minimise. |  |
| 4.5 | Commission appropriate transportation for police to be able to transport patients to place of safety when they have invoked s136 powers. This includes access to transport for British Transport Police when needed. | April 2015 | | NEAS/Police | | | Transport provider commissioned to respond to s136 transport requests by Police with agreed response timescales.  Monitor response times and usage. |  |
| 4.6 | Commission appropriate transport for service users (and their carers where appropriate) to be transported in an emergency in a safe, appropriate and timely way and minimising any delays for transport while waiting for ambulance attendance. Ensure that patients are accompanied at all times when being transported to the place of safety to minimise safety issues for the patient and transport driver. Ensure that any changes to transport places for individuals are communicated to transport provider. Includes access to transport for British Transport Police when needed | April 2015 | | CCG  Transport providers/ Local Authority/ Police  Transport providers/ CCG  CCG | | | A provider was commissioned to respond to mental health crisis transport requests. A contract has been entered into with KPIs and outcome measures.  Protocol and checklist to be developed to describe how scene safety information will be passed between organisations.  Continued involvement in development of a single national protocol for the transportation of s136 patients, including agreed response times and a standard specification.  Review process to determine future commissioning arrangements for transport is underway. As at April 2016, the contract with an independent sector provider has been extended for a 1 year period. |  |
| 4.7 | Agree a standardised process for all to follow to ensure that essential accurate and timely information is shared between providers, including patient safety issues, and necessary documentation is fully completed and available for handover between organisations. Ensure compliance to CQC regulations and for each organisation to be aware of the role and expectations of each provider, | December 2015 | | NTW/ Local Authority | | | Our aim was to establish sub-group to review hand-offs between organisations and develop protocols for improved management. Protocols would include management of people who are intoxicated as well as police presence when the patient is not violent.  Hand-offs are now considered not be an issue anymore which is expected to be a beneficial outcome of liaison psychiatry and street triage services reducing the number of s136 arrests. |  |
| 4.8 | Ensure that all the CQC Safer Place to Be standards are met by:   * Ensuring designated places of safety, including those used for children and young people, are fit for purpose when housing a mental health patients are able to meet local needs/demands, including during the out of hours period * Eliminate the use of police custody cells for those detained under s136 unless there is no other option to manage the person has been clearly identified as high risk, and only to be authorised by an inspector * The NTW suites should be staffed so that police are only required to stay in high risk situations and should be available to leave at the earliest opportunity following handover. * Ensure that relevant paperwork is available when the patient arrives at the place of safety * There should be no exclusion criteria for the NTW suites. | April 2016 | | NTW/ NHCT/ CCG/  Police/  BTP | | | CQC suited have been audited, including A&E suite, at the end of 2015. Suites are being updated.  **We can confirm that no child or young person detained using s136 powers has been taken to police cells as a Place of Safety since 2014, except for 2 young people which was appropriate due to violence. Appropriate Places of Safety are commissioned and used for children & young people.** |  |
| **5. Availability and quality of treatment and care when in crisis** | | | | | | | |  |
| **No.** | **Action** | **Timescale** | | **Led By** | | | **Progress** | **RAG Status** |
| 5.1 | Strengthen pathway between NTW Crisis team and NTW Consortium for Drug & Alcohol provision to ensure joint crisis planning |  | | Local Authority **/** NTW | | | The local authority has recently commissioned a new drug & alcohol service which has a recovery focus.  NTW Trust is the provider for the mental health crisis team and is the lead provider in a consortium for the drug & alcohol services. The Two teams will develop closer working relationships to ensure that people in crisis can be referred to the drug & alcohol services in a timely manner.  Where a person is in treatment, they have access to named peer support, a social network, and recovery community, all of which are evidenced based successful methods of managing peoples addictions. |  |
| 5.2 | Promote the Carers Emergency Card to carers of people with mental ill health to provide reassurance that the person they care for will have their needs met in case of an emergency situation where the carer is unavailable in an emergency | March 2016 | | Local Authority | | | The carer’s emergency break service has been established for older people. The Carers Emergency Card can be accesses by carers of people with mental ill health. Additional work is being undertaken to promote this service which is expected to be completed by March 2016 .  The completion date for this action has changed to March 2016. |  |
| 5.3 | Review Talking Therapy services to ensure that people in North Tyneside can access appropriate services when they need it and to prevent escalation of their mental health need. Include development of self-referral option for people in North Tyneside. | February 2015 | | CCG/ NHCT | | | The service has been reviewed and service re-modelling has been undertaken during 2014. A new model of service has been implemented based on the outcomes of an engagement exercise including a self-referral option. |  |
| 5.4 | Review of local authority commissioned mental health services across North Tyneside to determine if the right care and support is being commissioned and that it is being used appropriately within a recovery focussed model. Also considering value for money of commissioned service provision. The review includes accommodation and community based provision. | March 2016 | | Local Authority/  CCG | | | Work has started to map current commissioned provision and activity, throughput, gaps etc. Information about services has been collected and is being analysed. CCG engaged as part of the review work. Some service reconfiguration has now taken place and plans are being jointly developed further for other service areas. This work will continue into 2016/17.  A North Tyneside Recovery College has been established. A prospectus has been published. |  |
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| **6. Recovery and staying well / preventing future crisis** | | | | |  |
| **No.** | **Action** | **Timescale** | **Led By** | **Progress/Outcome** | **RAG Status** |
| 6.1 | Ensure availability of tier 0 and Tier 1 (self-help/guided self-help/peer support) to promote recovery, avert crises and increase the protective factor of social integration. | Achieved  Jan 2015  March 2016  March 2017  October 2015 – March 2016 | Local Authority  Local Authority  Local Authority/ NHCT  Local Authority  CCG/ Local Authority/  NHCT/  Schools | Social prescribing is jointly commissioned between the CCG and Local Authority which provides support for people with mental health problems through offering a range of activities.  Active North Tyneside has recently been established to encourage physical activity across the borough. One of the aims of this is to promote mental wellbeing and prevent escalation/promote recovery.  Development of a training and information initiative provided by CAMHS services and school nursing services to schools to prevent and identify self-harm.  The Council is leading on development of an Emotional Health & Wellbeing Strategy for children & young people. This is currently in draft format and will link to the Transformation Plan  Development of the CAMHS Transformation Plan for North Tyneside has provided opportunity to consider further prevention work . |  |
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| 6.2 | Development of online mental health services guidance to include sections on guidance, processes, algorithms and procedures for use by supporting agencies to:   * Enhance awareness across a wide range of organisations supporting mental health of each agency’s roles, processes and responsibilities * Enable quick identification of the most appropriate support services and signpost service users/patients * Enhance cross agency working relationships   Guidance will include an escalation process to resolve any areas of dispute or where clinical discussion is required to determine the most appropriate route for particularly complex service users/patients. | June 2016 | All partner organisations | Practical guidance is in the process of being developed by NTW Trust and Northumbria Police for consideration by all partner organisations.  NTW and Northumbria Police, and with input from the voluntary sector, have been working on this particular action. The guidance has been drafted, been out for consultation and will be updated prior to sign-off, which is expected by end June 2016. |  |
| 6.3. | Implementation of New Models of Care in North Tyneside to provide multi-disciplinary specialist support for a specific sector of the North Tyneside population to improve management of their care and prevent inappropriate admissions to hospital. This includes provision of mental health services and will aim to prevent mental health crises arising. | December 2015 | CCG | The CCG has now established the New Models of Care System, which is aimed at managing those patients with the most complex needs in a multi-disciplinary way. The service called Care Plus, is currently operating in the Whitley Bay locality of North Tyneside and plans have been prepared to roll the model out to the rest of North Tyneside. |  |
| 6.4 | Development and delivery of a Mental Health Education Programme for GPs and delivered through focused CCG Education Sessions | ongoing | CCG | CCG Education sessions have been timetabled for 2015/16. Suggested education sessions would include CAMHS, suicide prevention, Serious Mental Illness, LD/Challenging Behaviour &Prescribing. |  |

Agreed Signatories:

**North Tyneside Clinical Commissioning Group North Tyneside Council**

Maurya Cushlow – Chief Officer Jacqui Old, Director of Adult Social Care

**Northumberland Tyne & Wear NHS Foundation Trust Northumbria Police**

John Lawlor – Chief Executive Sue Sim – Chief Constable

**British Transport Police Police & Crime Commissioners Office**

Superintendent Edward Wylie - Sub Divisional lead for the Region Vera Baird – Police & Crime Commissioner

**North East Ambulance Service Lifeline Medical Transport Service Ltd**

Dr Kyee Han - Medical Director Michael Hedley - Contracts Manager

**Northumbria Healthcare NHS Foundation Trust NHS England (Cumbria, Northumberland, Tyne and Wear**

Jim Mackie - Chief Executive Dr Mike Prentice - Director of Commissioning Operations/Medical Director

**Tyneside Mind Mental Health Concern**

Stuart Dexter – Chief Executive Brendan Hill - Chief Executive

**Changing Lives Launchpad**

Ollie Batchelor - Executive Director of Client Services Alisdair Cameron – Team Leader