

# Health Scrutiny Challenge Session: Access to Mental Health Services

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# key access issues facing people with a mental health problem in Tower Hamlets and the plans in place to address them.

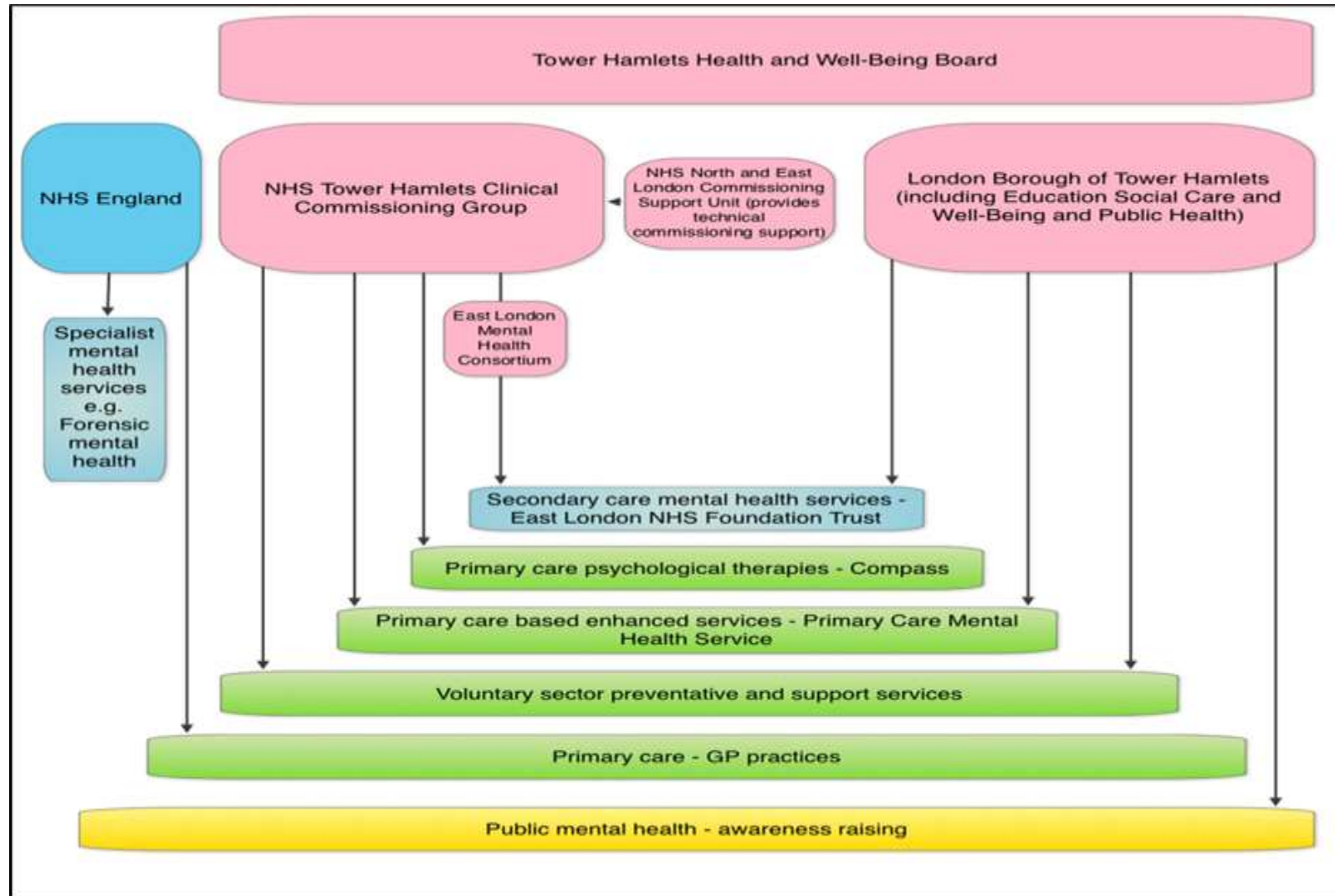
- Health and social care issues for people with mental health problems and barriers to service access
- Personal budgets for those with mental health problems: empowerment and choice
- The Impact of the ELFT community pathways redesign on access
- Mental health community based services: localised, integrated and promoting choice, independence and wellbeing?

*“Our vision is to deliver substantially improved outcomes for people with mental health problems in Tower Hamlets through integrated mental health services that are safe and effective, with friendly staff that inspire confidence in the people and families using them, and which help people to take control of their own lives and recovery”*

## A life course approach to mental health and well-being

Building resilience: mental health and wellbeing for all	High Quality Treatment & Support	Living well with a mental health problem
Fewer people will experience stigma and discrimination	People in general settings like schools and hospitals will have access to mental health support	People will feel that mental health services treat them with dignity and respect, and inspire hope and confidence
People will have access to improved information on what services are available	People will have access to high quality mental health support in primary care, including GP practices and primary care psychology	People will have access to support from peers and service user led services
Mental health awareness across our communities, schools and employers and in the health, social care and education workforce will improve	People will receive a diagnosis and appropriate support as early as possible	People will be able to make choices about their care, including through personal budgets
People will have access to a range of preventative and health promotion services	People will have timely access to specialist mental health services	People will feel supported to develop relationships and connections to mainstream community support
Families and carers will feel more supported	People will be able to access timely crisis resolution, close to home	People will have access to support to find employment, training or education
People will experience smooth transitions between services	When they need to access multiple services, people will feel that they are joined up	People will have access to accommodation that meets their needs, in the borough
At risk communities will have access to targeted preventative support	People with a mental health problem will have high quality support with their physical health	
Shared values: a whole person approach		
Mental health is everybody's business		
Focus on quality improvement		
Commissioning with commitment		

# Mental health Services in Tower Hamlets



The Tower Hamlets Mental Health Partnership has a very strong collaborative approach across health and social care, service users, commissioners and statutory and voluntary sector providers in mental health, supported by a joint health and social care commissioning team . The Partnership has delivered a number of highly successful change programmes over the last two years, for example:

- Redesigned dementia care pathways, winning the 2013 LGC Health and Social Care Award
- Crisis pathway for adults with a mental health problem working very effectively, with in-patient bed occupancy c. 75% year to date
- Accommodation Strategy for people with mental health problems, delivering high quality in-borough supported accommodation as an alternative to out of borough residential care
- Primary care mental health service, supporting people with mental health problems to move to recovery

# Strengths

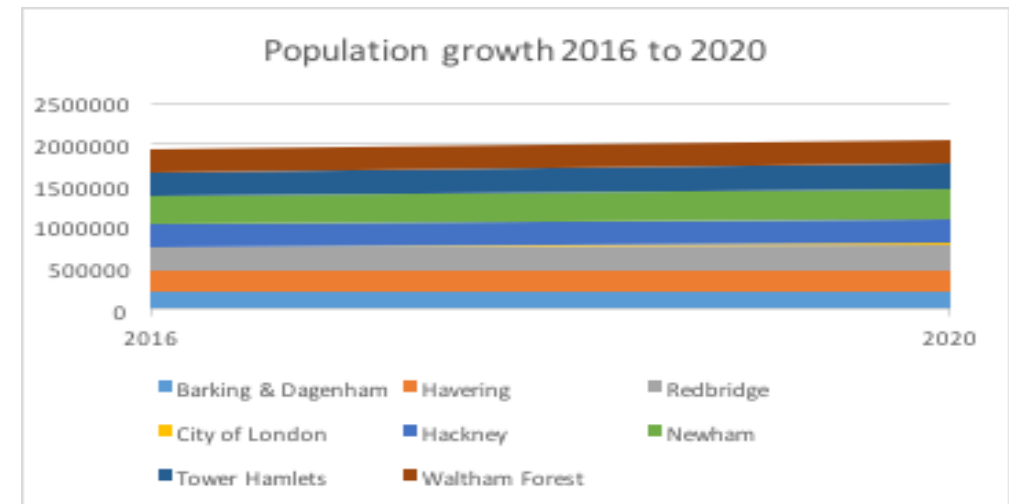
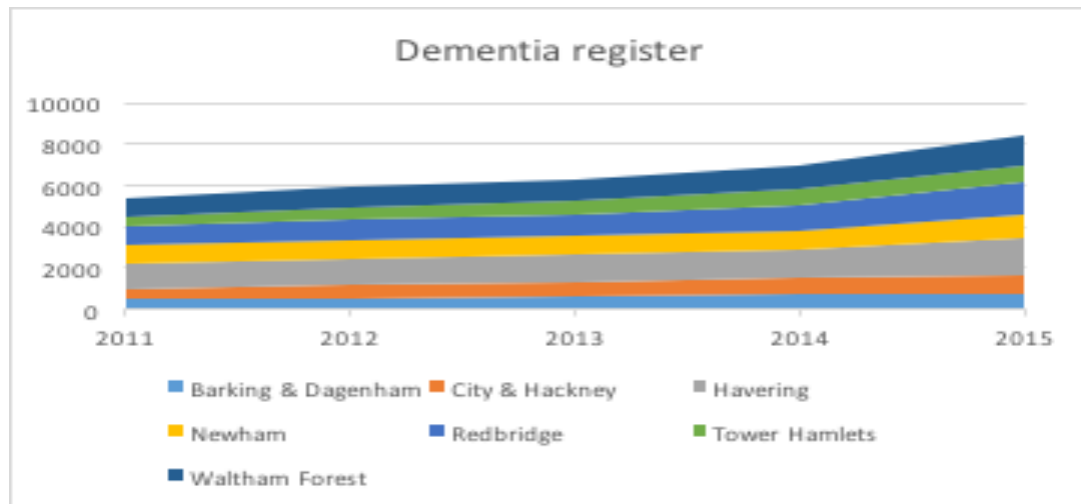
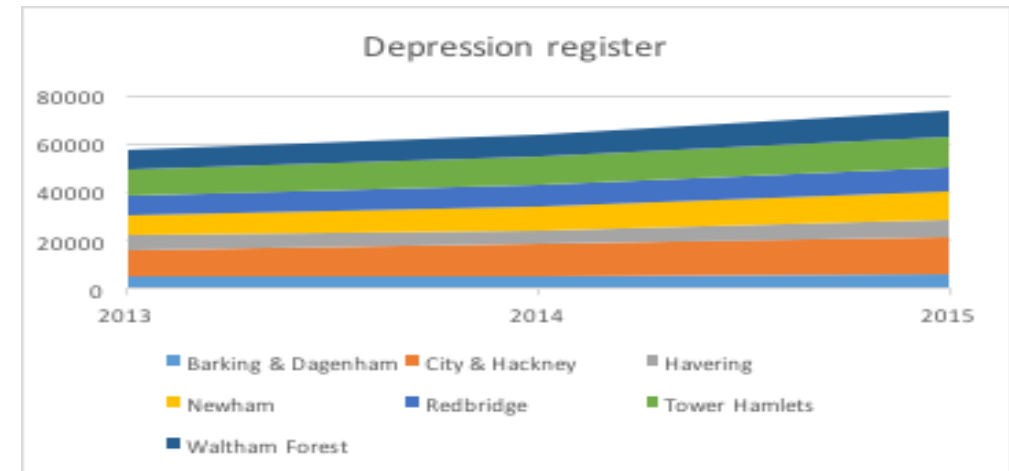
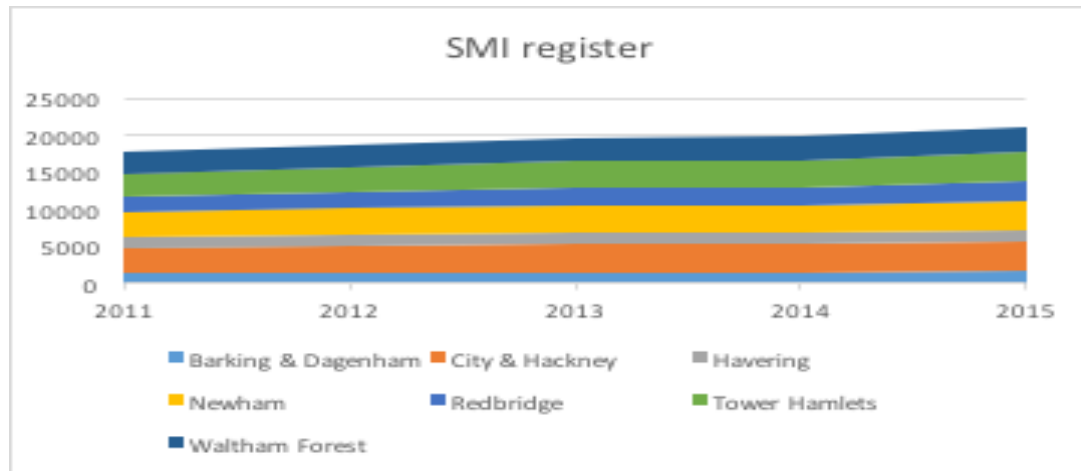
- Crisis pathways including RAID service and local availability of beds
- Primary Care Mental Health Service
- Accommodation Pathways
- Good clinical services – ELFT rated as “Outstanding “ by the CQC
- Diverse and well established third sector
- Outline suicide prevention plan
- Investment in CAMHS to keep on trajectory for 35% of diagnosable population
- CYP transformation plan
- Health Watch MH task group
- Recovery college
- Service user-led grants
- Social investment for more jobs
- Investment (co-commissioned with NHS England) in Youth Justice Mental Health Diversion and Liaison Worker)

# The Local Challenges

- Our **population** is growing fast – **20%** in the next five to ten years
- Both **younger and older** populations are growing
- Parts of our population are **transient** and there are areas of intense **deprivation**
- Wider societal challenges; **welfare reforms, homelessness**
- People want their **whole health and social care needs** considered as one and we too often treat and manage people in parts, in particular not making sure that people's mental as well as physical health are treated equally
- **Capacity** is not necessarily in the right places to meet demand or support new models of care in the community
- Finding and keeping the **workforce** is challenging
- **Access, quality and outcomes are variable** – we have some areas of excellence, but sharing good practice could be better and some services need improvement
- We have significant **financial pressures** that may be de-stabilising to the system
- In recent years the system has become **fragmented**: causing duplication, not always working to the best advantage for the patient or local people and putting artificial barriers between professionals and organisations across health and local government services
- Increasing use of A&E in **crisis**

# Historic and projected growth in need

Tower Hamlets has amongst the highest level of mental health need in the country, particularly the inner London boroughs, where there has been significant growth in need over the last 5 years. The growth in need is set to continue with population growth and demographic change over the next 5 years



# Barriers to access

- **Lack of awareness** – many people do not have knowledge of mental illnesses
- **Stigma** – reluctance to approach particularly in some communities
- Confusion about which service for which need – also fragmentation of services, especially for student population
- Negative symptoms and mistrust of services
- Disproportionate use of section 136
- **Carers** may experience problems accessing services or being a partner
- Poor take-up of personal budgets and IPC
- Transition at age 18
- Schools – some excellent on MH, some not known
- Waiting times to access services variable



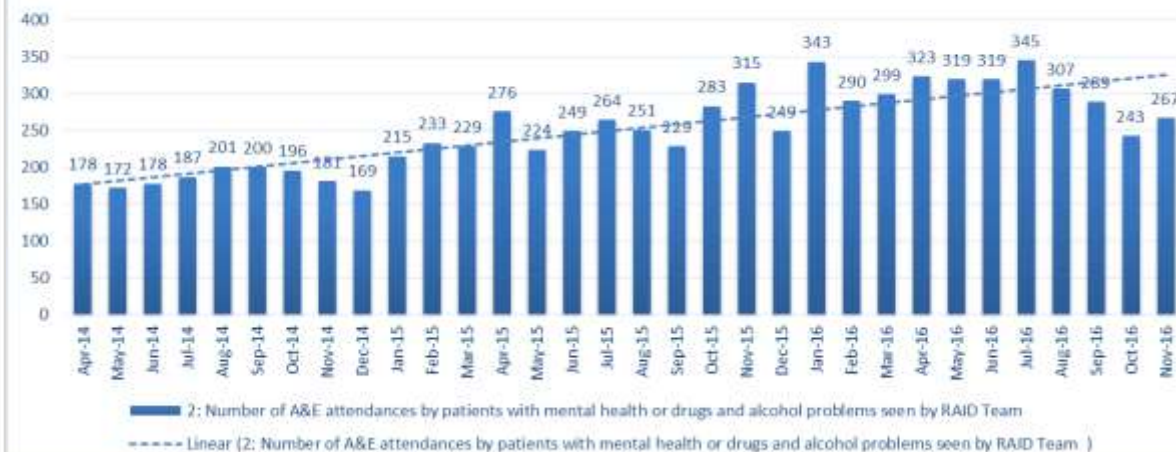


### Referrals to CRHTT



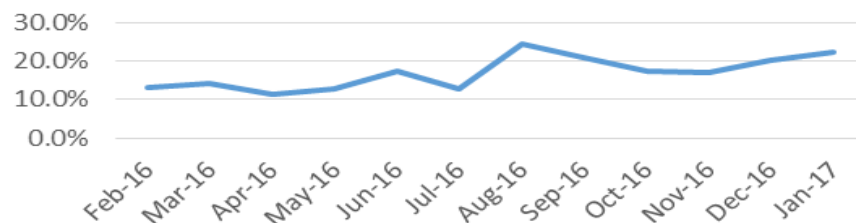
	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17
Referrals to CRHTT	183	173	165	170	189	194	152	150	166	200	122	171

### 2: Number of A&E attendances by patients with mental health or drugs and alcohol problems seen by RAID Team



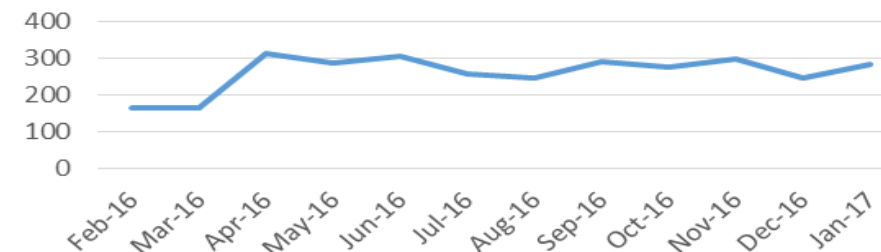
2: Number of A&E attendances by patients with mental health or drugs and alcohol problems seen by RAID Team  
 ----- Linear (2: Number of A&E attendances by patients with mental health or drugs and alcohol problems seen by RAID Team )

### Admissions - patients no prior contact with ELFT services within the past two years



	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17
Admissions - patients no prior contact with ELFT services within the past two years	13.1%	14.3%	11.2%	12.9%	17.3%	12.9%	24.3%	20.7%	17.4%	16.9%	20.3%	22.3%

### Number of referrals made to Community CMH Teams



	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17
Number of referrals made to Community CMH Teams	163	166	311	285	304	258	247	290	274	299	245	282

# Mental Health Services Tower Hamlets

Primary care Mental Health

Voluntary sector recovery & wellbeing services

## URGENT REFERRAL PATHWAY FROM PRIMARY CARE TO SECONDARY CARE MH SERVICES

**EMERGENCY  
IMMEDIATE RISK TO  
SELF  
OR OTHERS:  
CONTACT 999**

**OUT OF HOURS**  
24hr 7 days/week

**URGENT  
VIA SINGLE POINT OF ENTRY  
ADVICE & ASSESSMENT  
WITHIN 48HR / MENTAL  
HEALTH ACT ASSESSMENT  
(MHAA) OR ACCESS TO HOME  
TREATMENT TEAM (TH-HHT)**

**OFFICE HOURS**  
Mon-Fri 9am-5pm

**PSYCHOSOCIAL CRISIS**  
Not Psychotic QUICK  
ACCESS BRIEF  
PSYCHOTHERAPY  
(Phone triage 24hrs)  
CIS  
Tel: 020 8121 5499  
Fax: 020 8121 5487

**EMERGENCY MENTAL HEALTH  
ADVICE AND LIAISON SERVICE  
(DEPARTMENT OF  
PSYCHOLOGICAL MEDICINE)  
Royal London Hospital A&E  
Department  
TEL: 020 3594 3179  
FAX: 020 3594 3178**

## SINGLE POINT OF ENTRY

**BETHNAL GREEN CMHT  
(Network 1&2)**  
Tel: 020 3487 1400  
Fax: 020 3487 1401

**BOW & POPLAR CMHT  
(Network 5&6)**  
Tel: 020 3487 1350  
Fax: 020 3487 1351

**STEPNEY & WAPPING CMHT  
(Networks 3&4)**  
Tel: 020 7791 5200  
Fax: 020 7791 5201

**ISLE OF DOGS CMHT  
(Network 7&8)**  
Tel: 020 7791 8299  
Fax: 020 7790 1829

**THEIS**  
First Episode of  
Psychosis  
Tel: 020 3487 1310  
Fax: 020 3487 1311

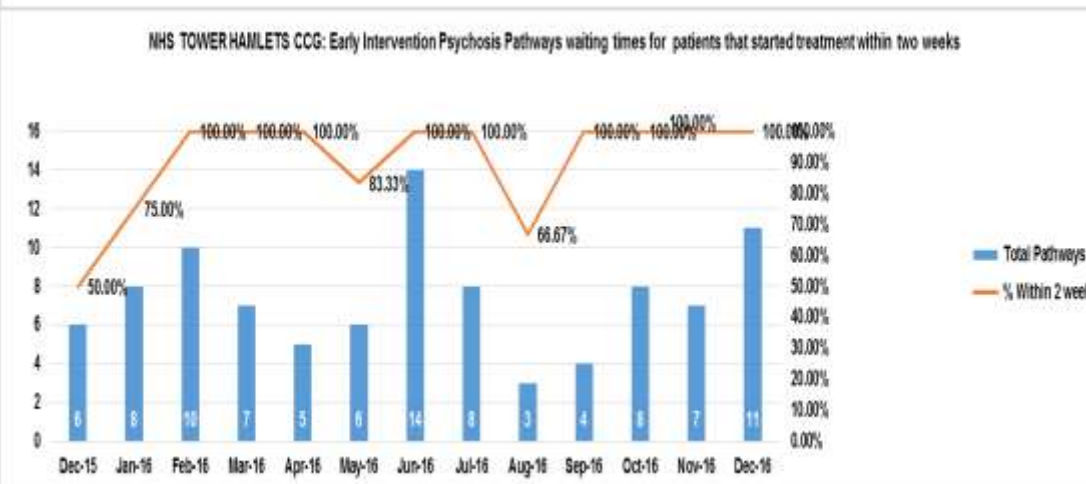
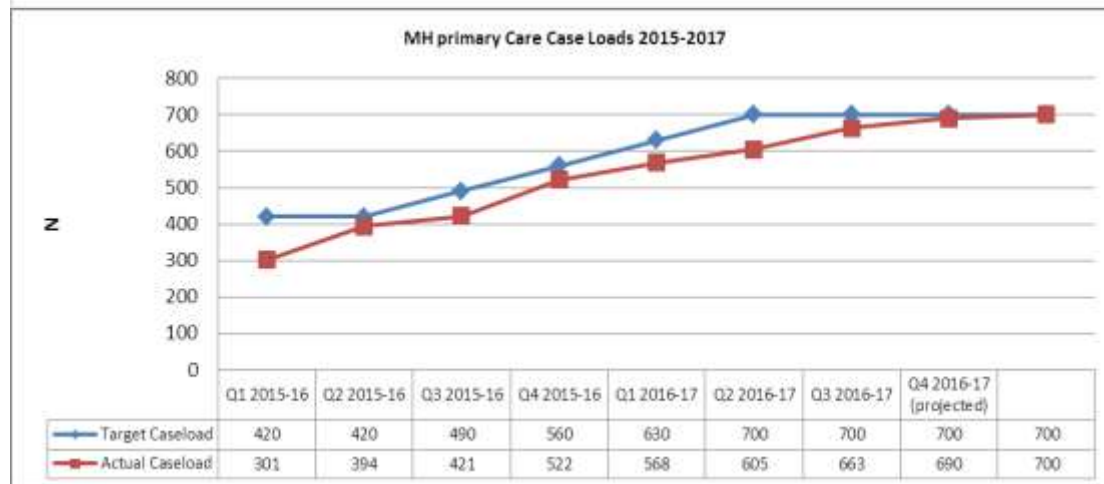
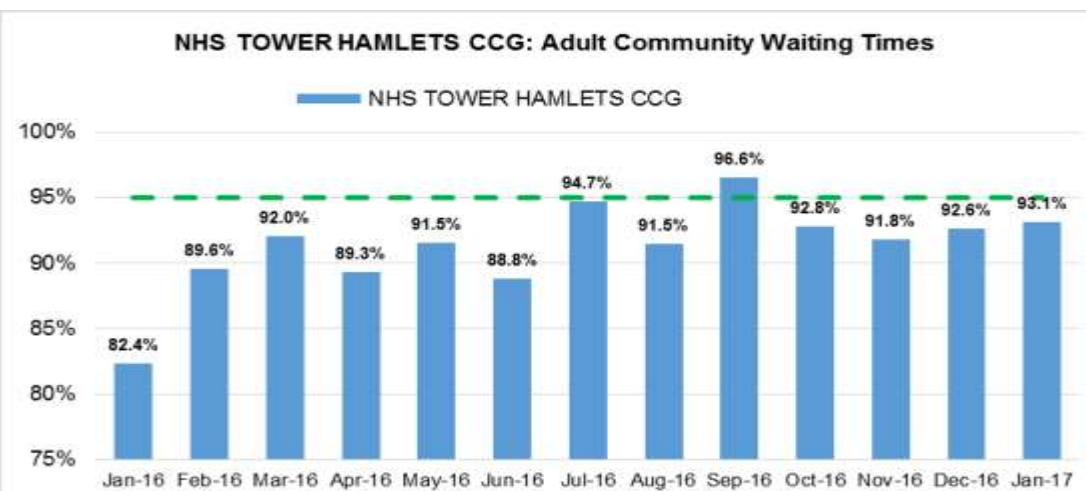
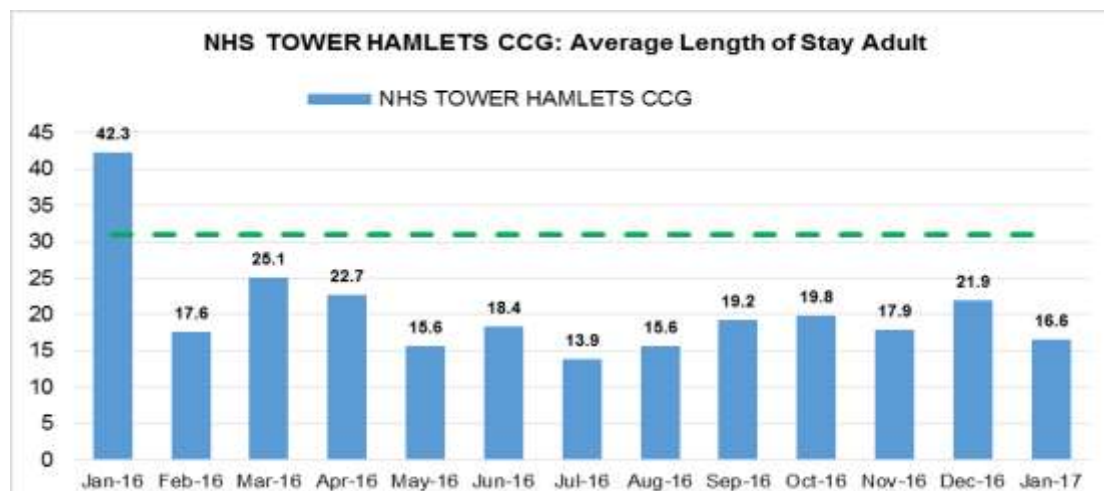
**OLDER PEOPLE MH  
AND DEMENTIA  
TEAM  
(All Networks)**  
Tel: 020 8121 5650  
Fax: 020 8121 5670

**LEARNING  
DISABILITIES TEAM**  
Tel: 020 8121 4444  
Fax: 020 8121 4445

**CAMHS  
(All Networks)**  
**New Referrals**  
Tel: 0207 426 2375  
Fax: 0207 426 2494  
**Known Patients**  
Tel: 020 7515 6633  
Fax: 020 7537 3770

**RESET  
Substance Misuse**  
Tel: 020 8121 5301  
Fax: 020 8121 5302

# Local Access



**Tower Hamlets has the second highest number of people open to secondary care mental health services in London.**

# The Mental health Primary Care Service

- **Treating the whole person** integrating physical and mental health to address the higher prevalence of physical health problems in people with long term mental health issues.
- **A normalized environment** reducing stigma and supporting recovery
- **Continuity of care.** People and their families often form important long term relationships with their GP practice.
- **Early intervention.** GP Practices, see problems early and have the opportunity to intervene early if supported with mental health expertise.
- **Peer support and care navigation.** Critical to the development of a recovery orientated service.  
Engagement in support networks and community resources



# Immediate Opportunities

- **Prevention** - a population-based approach to mental health : tackling the wider determinants –
  - ✓ Recovery and well being model – Inspire and Recovery
  - ✓ Development of Local Suicide Prevention Strategy
  - ✓ Time to Change programme to combat stigma and discrimination
  - ✓ CYP Transformation plan and strengthening of early intervention services
  - ✓ Awareness raising events
- **Personal health budgets** - a new way of offering individuals with disabilities and long term conditions greater choice and control in how the NHS supports them in improving their health and well being.
- **Integration and whole system approach**
  - ✓ Services for people with a mental health and substance misuse problems joined up
  - ✓ Integrated Commissioning
  - ✓ Tower Hamlets Together
  - ✓ Mental health primary care services
  - ✓ Community health services
- **5 Year Forward View Mental health**
  - ✓ Investment Standard
  - ✓ Strengthening community services, recovery and crisis response.



# Integrated Personal Commissioning

## Individual level experience of IPC



## THE ESSENTIAL PARTS OF A PERSONAL HEALTH BUDGET

The person with the personal health budget (or their representative) will:

- be able to choose the health and wellbeing outcomes they want to achieve, in agreement with a healthcare professional
- know how much money they have for their health care and support
- be enabled to create their own care plan, with support if they want it
- be able to choose how their budget is held and managed, including the right to ask for a direct payment
- be able to spend the money in ways and at times that make sense to them, as agreed in their plan.

# Implementation plan for the Mental Health Five Year Forward View for all ages : “Must Do’s”



- **Psychological therapies** – at least 19% of people with anxiety and depression access treatment, with the majority of the increase integrated with primary care
- More high-quality mental health **services for children and young people**- at least 32% of children with a diagnosable condition are able to access evidence-based services by April 2019, CYP IAPT)
- 53% of people experiencing a **1st episode of psychosis** begin treatment with a NICE-recommended package of care within 2 weeks of referral;
- Increase individual **employment placement support** for people in secondary care services by 25% by April 2019 against 2017/18 baseline;
- **Community eating disorder Services** - 95% of children and young people receive treatment within four weeks of referral for routine cases; and one week for urgent cases;
- **Reduce suicide rates** by 10% against the 2016/17 baseline.
- Ensure delivery of the **mental health access and quality standards** including 24/7 access to community crisis resolution teams and home treatment teams and mental health liaison services in acute hospitals.
- Increase baseline spend on mental health to deliver the **Mental Health Investment Standard**.
- Maintain a **dementia diagnosis** rate of at least two thirds of estimated local prevalence, and have due regard to the forthcoming NHS implementation guidance on dementia focusing on post-diagnostic care and support.
- **Eliminate out of area placements** for non-specialist acute care by 2020/21.

# STP Mental Health: Five key themes to address the health and wellbeing, quality and sustainability challenges

