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Isle of Wight Health and Wellbeing Board

1. The Isle of Wight Mental Health Crisis Care Concordat Bi-Annual Action Plan Report
 - 1.1 General publication
 - 1.2 Date of Board: 28th September 2016
 - 1.3 Author of the Paper

Sue Lightfoot, Head of Commissioning - Children's and Young People, Mental Health, Learning Disabilities and Dementia for Isle of Wight Clinical Commissioning Group.

Support: Sue Jones, Project Support Assistant, Isle of Wight Clinical Commissioning Group.

2. Summary

- 2.1 The Mental Health Crisis Care Concordat is an agreement between services and agencies involved in the care and support of people in a mental health crisis. The Concordat was introduced in February 2014 and is signed by 22 national bodies involved in health, policing, social care, housing, local government and the third sector.

The Concordat focuses on four main areas:

 - Access to support before crisis point
 - Urgent and emergency access to crisis care
 - Quality of treatment and care when in crisis
 - Recovery and staying well
- 2.3 The Isle of Wight Mental Health Crisis Care Concordat Steering Group oversees a local multi-agency Mental Health Crisis Care Concordat Action Plan - See Appendix 1.
- 2.4 The development of the Isle of Wight Mental Health Crisis Care Concordat Action Plan has achieved the following:
 - Mental health training is now available and rolled out across all agencies to ensure effective response for people of all ages experiencing a mental health crisis.
 - Serenity Police and Mental Health Nurses are jointly assessing in the community when someone presents in a mental health crisis.
 - The Community Mental Health Care pathway has been reviewed and redesigned with a 24/7 single point of access for mental health services implemented in April 2016.
 - Isle of Wight Mental Health Alliance (Recovery Partnership) was awarded funding from My Life a Full Life Prospectus to lead mental

health development in the Third Sector.

- The Mental Health Alliance is delivering preventative support to people with mental health needs to reduce risk of crisis.
- Empowering experts by experience to participate in service development.
- Timely access to mental health assessments in the Emergency Department has significantly improved with zero 4hour breaches.
- The IW has triage and referral system has been embedded into Emergency Department so that all people with mental health problems/ substance misuse receive a referral to IRIS (Island Recovery Integrated Service) drug and alcohol service

3. Decisions, recommendations and any options

- 3.1 To note report - The Isle of Wight Health and Wellbeing Board is requested to note the progress made on the Isle of Wight Mental Health Crisis Care Concordat Action Plan.

4. Relevant Information

- 4.1 Legal

N/A

- 4.2 Finance

- 4.2.1 Elements of this provision are, from April 2016, within the Better Care Fund.

- 4.4 Equalities and Diversity

- 4.4.1 The IW Council as a public body is required to meet its statutory obligations under the Equality Act 2010, to have due regard to eliminate unlawful discrimination, promote equal opportunities between people from different groups and to foster good relations between people who share a protected characteristic and people who do not share it. The protected characteristics are: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

http://wightnet.iow.gov.uk/equality_diversity/Default.aspx

http://wightnet2000.iow.gov.uk/staff/personnel_services/images/Diversity%20ages2011-12v2Apr2011.rtf

- 4.5 Partners who may be affected by the report;

- 4.5.1 • Isle of Wight Council
 - Adult social care
 - Children's services

- Public Health (DAAT / IRIS)
- IOW NHS Trust
 - Mental health representative
 - Emergency Department representative
 - Ambulance
 - Local security management specialist
- IOW Clinical Commissioning Group
- Police
- Voluntary Sector Forum

4.6 Key Performance Indicators that will be monitored

4.6.1 Number of s136 detentions

4.6.2 Number of s136 detained in a police cell

4.6.3 Number of 4 hr breaches

4.6.4 Number of referrals to ED Psychiatrist liaison

4.6.5 Number of AMPH referrals in/out of hours

4.6.6 Average length of waiting time

5. Supporting documents and information

5.1 Appendix 1 – The Isle of Wight Mental Health Crisis Care Concordat Action Plan, produced by the Isle of Wight Mental Health Crisis Care Concordat Steering Group.

5.2 Appendix 2 – Isle of Wight Mental Health Crisis Care Concordat Steering Group Terms of Reference.

5.3 To view or download the regional Mental Health Crisis Care Concordat:
<http://www.crisiscareconcordat.org.uk/>

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Appendix 1: Isle of Wight Mental Health Crisis Care Concordat Action plan.

| 1.0 Commissioning to allow earlier intervention and responsive crisis services | | | |
|--|---|---|---|
| <i>Ensuring the right numbers of high quality staff with appropriate mental health skills</i> | | | |
| 1.1 | Mental Health training to be rolled out across all agencies to ensure effective response for people of all ages experiencing a mental health crisis. Police custody staff will be trained in mental health awareness and how to reduce risk of suicide in people detained in custody. Multi Agency Mental Health Act (MHA) and Mental Capacity Act (MCA) training available to all agencies. E-learning / face to face Insight App (to go live July 2016) | All multi agency relevant front line staff will understand how to support a person and their carer effectively whilst they might be experiencing a mental health crisis. Police custody staff will be aware of higher risk of suicide following arrest and detention and take steps to reduce risks. Frontline staff will be appropriately trained. | Multi Agency 'Serenity' Police lead Police Mental Health Capacity Act Lead/ Local Security Management Specialist LSMS IOW CCG IOW CCG |
| 1.2 | All agencies to submit training log of any Mental Health Training Completed within their services. IWNHS Trust staff training recorded on Pro 4 | There will be a multi-agency mental health training log that all agencies complete and submit to the IOW CCG annually. | Completed |
| 1.3 | Integration of Mental Health Social Care, Mental Health Social Work Team and Mental Health day services to improve access to Mental Health pathways. Wessex workshop attended by IOW LA, IOW CCG and Mental Health Social Work team. | Improved patient access to multi agency support. Reduces risks for vulnerable people. | Mar-17 |
| 1.4 | Front line staff in ED, Paediatric ward and MHT will be trained in how and when to use clinical restraint. | All front line staff in ED, Paediatric ward and MHT will be confident and competent in clinical restraint techniques. | LSMS Completed |
| <i>Improved partnership working at local level</i> | | | |
| 1.5 | Local IOW Crisis Concordat Steering Group established | The Crisis Concordat will be implemented to meet local need through improved partnership working between statutory and non-statutory agencies. | IOW CCG Completed |
| 1.6 | Police and Mental Health worker will joint assess at the scene in the community when someone with mental health problems come to the attention of the police (presenting in mental health crisis). | No mental health service user will be detained in police custody unless there are exceptional circumstances. | Police/ MHT Completed |
| <i>2.0 Access to support before crisis point</i> | | | |
| <i>Improve access to and experience of mental health services</i> | | | |
| 2.1 | Shared Learning from Hampshire Well Being Centre Programme to support people to manage in times of heightened distress. | Use of wider coping strategies and 'learning from experience' can be shared to benefit others. | via Wellbeing Implementation networks (WINS) Nov-17 |
| 2.2 | Embed a system within Emergency Department to triage and divert people with Mental Health and substance misuse issues to Island Recovery Integrated Service (IRIS). | People with Mental Health problems and substance misuse will be diverted to specialist substance misuse service. | IRIS Completed |
| 2.3 | Emergency Department and Head of MH to agree triage process to reduce waiting time for people of all ages with mental health problems in ED | People presenting in ED with mental health crisis will be seen and assessed by a suitably qualified mental health practitioner in a timely manner. (within 1 hour) | ED Consultants Completed |

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| 2.4 | People presenting in ED in a mental health crisis who are assessed as high risk will not leave the ED before being assessed by a mental health practitioner. | ED and Security staff will have robust AWOL Prevention Procedures. | LMS | Nov-17 | Mental Health support in place across all appropriate acute hospital settings. |
| 2.5 | Emergency Departments to record monitor and share mental health related activity across all age ranges. | Mental Health support is available in all appropriate settings. | Emergency Department Consultant, IOW NHS Trust | Completed | |
| 2.6 | Review and redesign the Mental Health care Pathway. Initial consultation completed. Feedback event 29.09.2015. Waiting implementation date from IOW NHS Trust. Reconfiguration of services into a single point of access for mental health services. | The review of this pathway will allow for a one point of access 24 hours a day 7 days a week service. Improved access to specialist services. | IOW CCG and IOW NHS Trust | Completed | - Single Point of Access in place. Work ongoing to put safe 24/7 response in place. Part funding agreed for additional posts - expected that staff will be in place October 2016. |
| 2.7 |  Recovery House Development. Process Flow Diagram V2.pdf | Improved patient access to community support in least restrictive environment at time of crisis | MH Recovery Partnership/ IOW CCG | Remove as change in approach post WISR | WISR agenda leading towards the development of Crisis Café's rather than Recovery House. |
| 2.8 | Isle of Wight Mental Health Alliance / Recovery Partnership to deliver preventative support. | Improved community and preventative work delivered in community. | Isle of Wight Mental Health Alliance / Recovery Partnership | Completed | - Relationships with Third Sector established to support recovery focussed peer support. |
| 3.0 Urgent and emergency access to crisis care | | | | | |
| Improve NHS emergency response to mental health crisis | | | | | |
| 3.1 | Consistent working protocols to be developed supporting the interface between Emergency departments (including Psychiatric Liaison Service) and secondary mental health services for supporting individuals experiencing mental health/ substance misuse crisis. | People in mental health crisis who also have substance misuse will experience continuity of support as they need it between services. | ED/ IOW NHS Trust | Jan-17 | Psychiatric Liaison Service has developed working group with ED to consider revised pathways for people accessing emergency mental health/substance misuse interventions. |
| 3.2 | Improve timely access to Mental Health assessments. (Parity of Esteem) | People with a Mental Health crisis will be seen as quickly as those presenting a physical health crisis target to be seen within 1 hour. | IOW NHS Trust | Completed | To be taken forward through working group monthly meetings between CRHT, Psychiatric Liaison and ED. Update Shelley Weir - For patients who are already known to CMHS and have a named worker have access to either their named worker or a duty worker Monday to Friday 9 - 5pm. |
| 3.3 | Evaluation of 'Serenity' (Street Triage) Service. | To reduce the use of S.136 and reduce inappropriate admissions to hospital. | IOW CCG/ Hampshire and IOW Police/ IW Trust | Mar-17 | Continued reduction in use of S136 and continued increase in conversion rate of S136 to admission in 15/16. Over last 4 years number of S136s has decreased by 66% and the conversion rate has increased from 33% to 66% in the same period. |
| Pilot extended until 31 st March 2017. | | | | | |
| 3.4 | Review Shared Policies and Protocols including Housing/ Social Care and DTOC (Delayed Transfers of Care) | Pathways of care will include Housing and Social Care support for those who need it. | IOW CCG/ IOW NHS Trust/ LA | Nov-17 | DTOC levels under 5% in June - will be monitored to ensure sustainability going forward |
| 3.5 | Improve liaison between MH and ED staff. Workshop held October 2015 with key partners invited. Next meeting 4th December 2015. | People presenting in ED Department with a mental health crisis will be seen by a mental health practitioner within an hour of referral. | IOW CCG/ IOW NHS Trust | Completed | To be taken forward through working group monthly meetings between CRHT, Psychiatric Liaison and ED. |

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| 3.6 | People needing transfer from ED Department to Psychiatric inpatient care will be transferred in a timely and safe way. | There will be a multi-agency handover care process / protocol. | MHT | Completed | To be taken forward through working group monthly meetings between CRHT, Psychiatric Liaison and ED. |
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| Social services contribution to mental health crisis services | | | | | |
| 3.7 | Integration of Mental Health Social Work teams and Mental Health Services – Social Care Hub system developed with single contact number to improve access to Social Care Assessment in timely manner. | People will receive appropriate assessment and support from social services regardless of the time of the day. | IW LA Adult MH Group Manager Lead | Nov-17 | |
| 3.8 | IOW LA / CCG undertaking service review to ensure AMHP capacity. | All Mental Health Act assessments will be within 3 hours of referral (regardless of the time of day). | IOW CCG Lead/ LA | Mar-17 | Hants CCC data set will provide relevant evidence with regard to this |
| Improved quality of response when people are detained under s135 and 136 of the mental health act 1983 | | | | | |
| 3.9. | Monitor use of S.136 activity under the age of 18. | To ensure young people have a safe pathway of care and support if presenting in a mental health crisis to the Police. | IOW NHS Trust/ MH data team | Completed | Ongoing monitoring in place through Serenity and MH Act Lead |
| 3.9.1 | All Police staff to be aware of the 15 options to consider before using S136 powers. | To remain a sustained reduction of S136s from the 2012 baseline figures. | Police/ IOW NHS Trust MHT | Completed | Continued reduction in use of S136 and continued increase in conversion rate of S136 to admission in 15/16. Over last 4 years number of S136s has decreased by 66% and the conversion rate has increased from 33% to 66% in the same period. |
| 4.0 Quality of treatment and care when in crisis | | | | | |
| Patient Safety and Safeguarding | | | | | |
| 4.1 | Safeguarding systems will be monitored and reviewed in areas to ensure that effective support is available for persons who are frequently referred whilst experiencing a crisis as a result of their mental health/ substance misuse involving two or more agencies. | People who frequently come to the attention of services as a result of a crisis in their lives will receive a timely and 'joined up response' from all the services involved. | IOW NHS Trust | Completed | - Serenity Integrated Mentoring in place for frequent service users |
| 4.2 | IW has triage and referral system embedded into ED all people with Mental Health problems/ substance misuse receive a referral to IRIS (Island Recovery Integrated Service) Drug and Alcohol Service offer assessment and recovery focused treatment for people who misuse drugs and alcohol. | People will receive improved access to service in a timely manner. | ED / IRIS | Completed | Referrals to IRIS made via Psychiatric Liaison service as appropriate. |
| 4.3 | Local development of crisis management care plans / working partnership between Statutory Services and Third Sector to ensure people with mental health problems have an individual personalised / co-produced crisis plan. | People with mental health problems will know what to do and who to contact for support if they need crisis support. | Third Sector / Head of MH | Nov-16 | |
| 4.4 | Use of the police van cage will be monitored and only used in exceptional circumstances. | Reduced use of Police van cage. | Police | Completed | |
| Development of learning frameworks in relation to the experience of people in crisis | | | | | |
| 4.5 | Serenity workshops rolled out across multi- disciplinary teams and partner agencies including Statutory Services. | Frontline staff have a better understanding of mental health. | Police / IOW NHS Trust | Completed | |
| 4.6 | Shared Governance arrangements and development of ISA between services actively engaged with service users with MH problems. | Integrated IG protocol to be developed. | IOW NHS Trust MHT | Completed | Service specific ISAs for Reablement and Serenity are in place. Local Authority using Pairs since April 2016. |
| | MH Pathways reviewed and designed to ensure best use of all agencies including Third Sector. | | | | |

| Shared measurement of key service aspects in crisis care | | | | | |
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| | | S.I.M (Serenity Integrated Mentoring) | Completed | Serenity Integrated Mentoring in place for identified frequent service users | |
| 5.0 Recovery and staying well/ preventing future crises | | | | | |
| | | Joint Planning for prevention of crisis | | | |
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| 4.7 | Review of existing multiagency data sets collected frequent flyers identified and monitored. | Frequent users will be monitored and offered individual support to develop crisis care plans. | S.I.M (Serenity Integrated Mentoring) | Completed | Serenity Integrated Mentoring in place for identified frequent service users |
| 5.0 Recovery and staying well/ preventing future crises | | | | | |
| | | Joint Planning for prevention of crisis | | | |
| 5.1 | Recovery House Develop alternative crisis care options with Third sector (IOW MH Alliance/ recovery Partnership). | Safe accommodation will be available in community settings to offer people an alternative to hospital admission when in times of mental distress. | IOW CCG/ Third sector (IOW MH Alliance/ recovery Partnership) | Completed | WISER agenda leading towards the development of Crisis Café's rather than Recovery House. |
| 5.2 | Improve access to vocational/ employment services. Two employment workshops have been held with relevant partners, action plan created. Workshops to continue bi monthly. | There will be an increase in people known to Secondary mental health services in paid employment. | IOW LA/ IOW Trust/ DWP/ Third Sector | Nov-17 | Link across to OSEL needed |
| 5.3 | Ensure Recovery and Wellbeing are central to all services. Link in directly with the CMHS care pathway review, Crisis Recovery House review and will be key in the development of all Service Specifications. | People with mental health problems will have improved health and wellbeing and will be able to access recovery focussed services suitable for level of need. | IOW CCG/ IOW Trust | Mar-17 | A range of physical health monitoring clinics are in place across in-patient, CRHT and CMHS services. |
| 5.4 | SIM-Serenity Integrated Mentoring project provides training and support for frontline multi agency staff to manage the high intensity patterns of behaviour demonstrated by a small number if the islands population. | Reduction of S.136s from repeat callers. Reduction of risk. Reduction of admissions, hospital, ED and ambulance. Bi annual report. Quarterly monitoring. | SIM/ Hampshire Constabulary/ IOW CCG/ IW Trust | Completed | Continued reduction in use of S136 and continued increase in conversion rate of S136 to admission in 15/16. Over last 4 years number of S136s has decreased by 66% and the conversion rate has increased from 33% to 66% in the same period. Update David Sellers - Serenity Integrated Mentoring in place for identified frequent service users |



Appendix 2

TERMS OF REFERENCE The Isle of Wight Crisis Concordat Steering Group

Purpose

The Isle of Wight Crisis Concordat Steering Group is a multi-agency group working together to ensure agencies on the Isle of Wight effectively plan services and work in partnership to meet the objectives and outcomes of the National Crisis Concordat.

The Steering Group will take actions within their own organisations to ensure that people with mental health problems have access to timely assessments and care from the right person at the right time and in the right place.

The Steering Group will work together to reduce the need for multiple assessments and or duplication that causes delay for someone presenting in crisis, to access support where possible in their own locality and with a mental health professional with the skills and expertise to offer assessment, advice guidance and support in the least restrictive environment.

The Steering Group will work to ensure people with mental health problems are treated with respect and dignity, that a mental health crisis is treated with the same level of urgency as people presenting with a physical health crisis in accordance with the national Parity of Esteem agenda.

Hampshire and the Isle of Wight Crisis Concordat Steering Group will oversee the delivery of the Crisis Concordat declaration in Hampshire and the Isle of Wight, and will provide a forum to promote multiagency working.

Objectives

The objective is to bring together people who use the services, local commissioners, mental health and acute provider organisations, police, local authorities, ambulance service and other organisations involved in the care of people in mental health crisis to:

- Develop and monitor the implementation of the Isle of Wight Crisis Concordat Action plan in accordance with the Hampshire and Isle of Wight overarching action plan.
- The Isle of Wight Steering Group will use the action plan to inform local commissioning strategy, articulating benefits of implementing the Crisis Concordat to whole system.
- Support the development of effective multiagency pathways of care for people in mental health crisis.



- Support the development of a safe, effective and timely pathway of care that meets the needs, and improves the experience of people at risk of detention under section 136 of the Mental Health Act.
- Overcome barriers to information sharing between agencies involved in mental health crisis.
- Promote multi-agency learning and embedding into practice.
- Act as a forum for the purpose of information sharing on key issues between the various agencies that might affect inter-agency working.
- To share learning from investigations and complaints where two or more agencies have been involved.
- Provide local oversight of the development and implementation of the Isle of Wight court liaison and diversion programme.

Reporting and Accountability Requirements

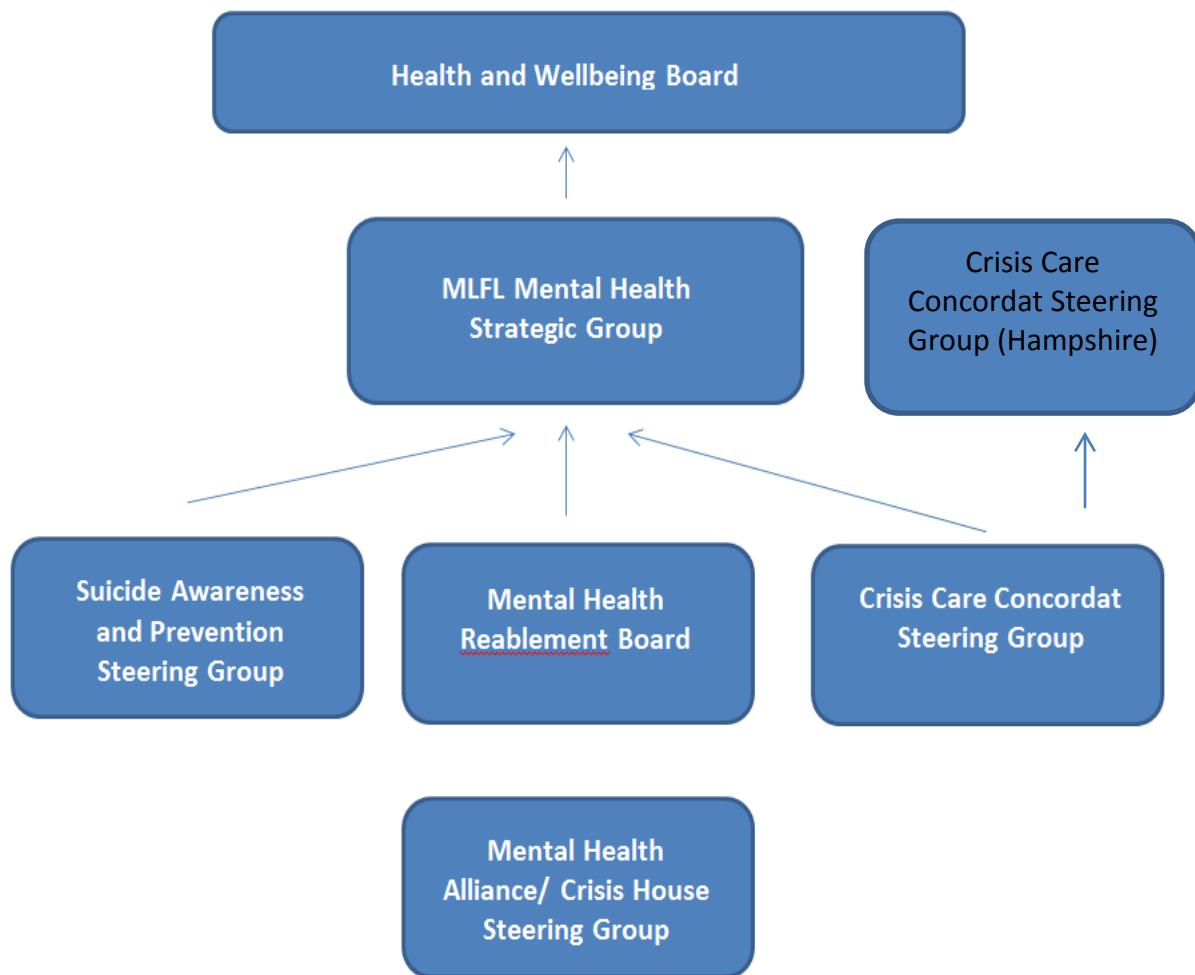
Each member is accountable to his/her own respective organisation and decisions of substance cannot be made without the appropriate endorsement from each organisation affected.

The steering group will report at least 6 monthly to the regional Hampshire and Isle of Wight Crisis Concordat which reports at least annually to the four Health and Wellbeing Boards in Hampshire and the Isle of Wight.

Frequency of meetings

The Isle of Wight Crisis Concordat Steering Group will meet on quarterly basis.

Governance





Quorum

The quorum shall be at least one member representing each of the following interests:

- Isle of Wight Council
 - Adult social care
 - Children's services
 - Public Health (DAAT/IRIS)
- IOW NHS Trust
 - Executive representative
 - Mental health representative
 - ED representative
 - Ambulance
 - Local security management specialist
- IOW Clinical Commissioning Group
- Police
- Voluntary Sector Forum

Membership

Chaired by: Sue Lightfoot Head of Commissioning for MH, LD, Children's and Dementia, IOW CCG

Core members

| Organisation | Position |
|------------------------------|--|
| IOW CCG | Head of Commissioning YCP, MH, LD and Dementia |
| IOW Trust | Head of MH/ LD |
| IOW Trust | Chief Operating Officer |
| IOW Trust | A&E Consultant |
| IOW Trust | Local Security Management Specialist |
| IOW Trust | Assistant Head of Ambulance |
| IOW Trust | Modern Matron |
| IOW Trust | MHA/ MCA Lead |
| Hampshire & IOW Constabulary | Inspector |
| IOW LA | Director of Children's Services |
| My Time Recovery Partnership | Chief Executive |
| Public Health | Acting Health Improvement Manager |

Deputies

Deputies must be sent to the meeting, empowered to be able to challenge, prepare and develop proposals to be presented as highlights and matters for decision. This is crucial to the ongoing effectiveness of the meeting.

Review of Terms of Reference

These Terms of Reference will be reviewed annually from the date of adoption.