Mental Health Service Update

Healthwatch Public Board Meeting Monday 6th February 2023

Presenting

Sarah Dugan – Chief Executive

Matthew Hall – Chief Operating Officer

Jack Lyons-Wainwright - Senior Programme Lead (Mental Health)

In attendance

Sue Harris – Director of Strategy & Partnerships

Winsom Robotham – Associate Director Primary Care & Community Mental Health

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Content of the presentation

- Now We're Talking where to go for early help and resources
- IAPT Healthy Minds update following the presentation to Healthwatch Board in 2022
- Neighbourhood Mental Health Teams overview of the service model and VCSE partnership work
- 24/7 Urgent Mental Health Helpline an update on the service model, performance and activity

Of note – development of the Mental Health Collaborative Working Together for Outstanding Care



Now We're Talking Partnership

Including:















- The Now We're Talking partnership and website has been developed by local organisations in H&W, working together across organisational boundaries to better co-ordinate mental health communications, awareness and engagement
- The website <u>www.nowweretalking.nhs.uk</u> - offers mental health support and information all in one place, helping people navigate to the right support as quickly as possible, including self-help resources, videos, podcasts community services, NHS support and urgent help.
- The site was accessed by over 75,000 people in 2022.



NHS

Promoting the wider offer





Provided by Herefordshire & Worcestershire Health and Care NHS Trust



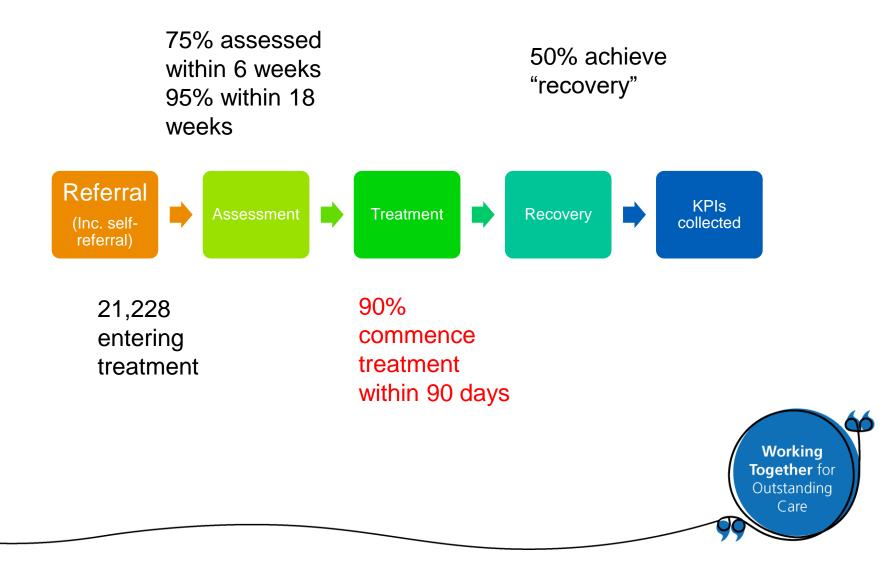


IAPT Healthy Minds Service

Update on performance and transformation programme



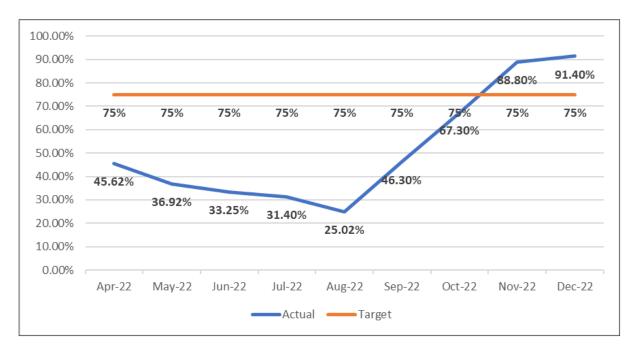
Targets and outcomes



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Some Key Performance Indicators (KPIs)



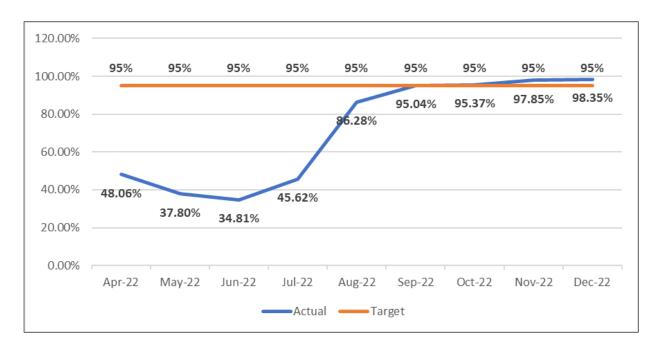
Service access waiting times are from receipt of referral by the service to first appointment / assessment:

- 75% of patients should receive a first assessment/treatment appointment within 6 weeks of referral.
- KPI is reported on upon discharge, however, the service are now meeting this KPI **in-month**, with projected full recovery of the KPI expected in July 2023 as patients moving through the system are discharged.

*All data presented in all slides covers both Herefordshire & Worcestershire

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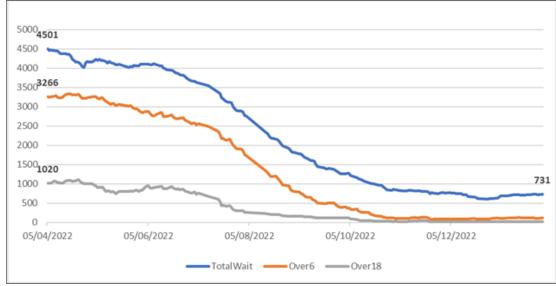
Some Key Performance Indicators (KPIs)



- Service access waiting times are from receipt of referral by the service to first appointment / assessment:
- 95% of patients should receive a first assessment/treatment appointment within 18 weeks of referral
- KPI is reported on upon discharge, however, the service are now meeting this KPI in-month, with projected full recovery of the KPI expected in April 2023 as patients moving through the system are discharged.

*All data presented in all slides covers both Herefordshire & Worcestershire

Key Performance Indicators (KPIs)



A huge amount of work has gone into improving performance in relation to first assessment/treatment appointments:

- Number of patients awaiting a first appointment has reduced by **81.95%** since April 2022.
- Number of patients waiting over 6 weeks for a first appointment has reduced by 96.35% since April 2022
- Number of patients waiting over 18 weeks for a first appointment has reduced by 98.23% since April 2022
- The current figure of 731 awaiting a first appointment are likely to have one booked. This figure is comparable to the number of patients who access the service each month and is representative of a service who's 'front door' is now, operationally, in a steady state.



PCN schemes supporting reduction of IAPT waiting times

- Money allocated to each PCN to enhance local provision Examples include:
 - Expanding the provision of talking therapies (counselling, Cognitive Behavioural Therapy, Dialectical Behaviour Therapy, counselling specifically for children and young people)
 - 121 Wellbeing Coaching Sessions
 - Mood Master courses
 - $\circ~$ Peer to Peer groups and drop ins
 - Steps to Success development course
- Outcome/impacts are being captured and evaluated

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National Rebrand

All NHS IAPT Services will shortly be re- branded:

"NHS Talking Therapies for Anxiety and Depression"

This will replace the "Improving Access to Psychological Therapies" nomenclature and local branded services.



Community Mental Health Services

Overview of the service model and the VCSE partnership work



Key Principles



- No Threshold, No Wrong Door, No Discharge
- Spectrum from common problems to SMI
- Locally designed for local needs
- Multi-disciplinary
- Enhanced role for VCSE working within teams
- Evolve to close gap between Primary and Secondary Care (including developing ARRS workers)





Neighbourhood Mental Health Team



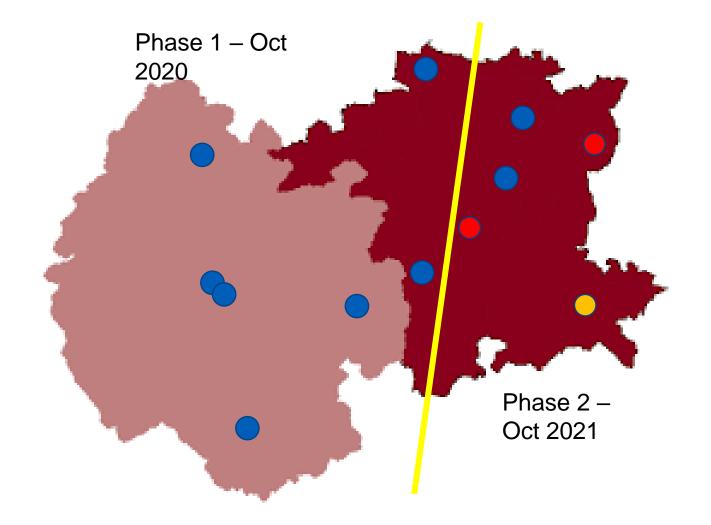


VCSE Partnership

- Onside Advocacy, Herefordshire MIND, SW&W MIND
 integrated offer addressing social factors, wellbeing
 - and wider determinants of health. Psychologically informed approaches group and one to one offer.
- Worcestershire Association of Carers carer support
- Community First evaluation
- Plan- to increase VCSE capacity (initially in Worcs)



Team Locations





Challenges



Recruitment





Impact on caseload allocation/allocation of workload



Impact on some of the functions and how we deliver them.

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24/7 Urgent Mental Health Helpline

An update on the partnership between South Warwickshire & Worcestershire MIND (SWAW) and Herefordshire & Worcestershire Health & Care NHS Trust





Service Design

- Ageless service that covers the Counties of both Worcestershire & Herefordshire (c. 748k combined population) – commenced in February 2020
- Calls answered by trained staff employed directly by SWAW Mind (honorary contacts)
- Co-located with HWHCT Crisis Resolution Team (CRT) in the Elgar Unit, Newtown Hospital
- Operate a two-shift system over 24hrs 3 x staff during the day & 2 x staff during the night
- The service will provide a 24/7 first point of contact for people experiencing mental health difficulties, as well as other professionals, carers and family
- The aim of the service is to support individuals to reach the right support first time, with a 'no wrong door' approach

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Service Model

SWAW Mind staff provide the front line triage using the validated UK Mental Health Triage Scale, following which a specific pathway will be recommended;

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Care Pathway

- SWAW staff will attempt to de-escalate the individual over the phone and formulate a safety plan for that individual
- Dependent on the risks and needs identified, callers will be given support and guidance over the phone, and/or referred on to appropriate services
- SWAW staff undertaking triage are co-located and integrated with the CRT
- Where indicated, SWAW staff will escalate to qualified staff in the CRT (predominantly due to severity/immediacy of risk or complexity)
- Following stakeholder feedback a professionals option was added to the line, diverting calls directly to a CRT clinician and bypassing the SWAW staff
- All calls will now be recorded for quality purposes primarily, for when we receive a concern/complaint arising from a caller or patient. We will also be able to use the recordings for training purposes (new staff) and assurance audits

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Quality & Performance

A review of the service specification and reporting requirements has recently been undertaken jointly between the ICB, HWHCT and SWAW Mind to ensure the 24/7 MH Helpline conforms to the NHS LTP and the Royal College of Psychiatry guidelines;

Performance Standard	Threshold	Report Due
Shifts to be covered	95%	Monthly
Number of Calls Abandoned	Less than 10% of total calls	Monthly
All callers waiting over 20 minutes need an	100%	Monthly
exception report		
Maintaining training levels at above	95%	Monthly
Monthly reports and data to be received by 15 th	100%	Monthly
of month		
10 sample calls to be reviewed and audited by	100%	Monthly
senior member of team.		
Calls into the line are answered in under 1	95%	Monthly
minute.		
Attending Operational/ Performance meetings	100%	Monthly
with presentation of data and reports (staff		
training, vacancy, sickness, risk register)		
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Activity Snapshot

Indicators for Patient and Professional Calls									
	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Total
Number of Calls Accepted - Patient line	1703	1387	1219	1236	1131	1347	1115	1117	11958
Number of Calls Accepted - Professional line	777	971	1123	1343	1118	999	1093	857	8970
Median time to answer call - Minutes Patient line	0.50	0.51	0.45	0.51	0.51	0.41	0.51	0.51	0.48
Median time to answer call - Minutes Professional line	0.55	0.40	0.40	0.41	0.36	0.35	0.33	0.30	0.38
Median conversation time – Patient line	5.18	6.9	6.1	5.46	6.33	5.91	7.15	8.56	6.18
Median conversation time – Professional line	2.71	2.7	2.41	2.61	2.84	3.01	3.16	2.86	2.76

To conclude -

- The concerns and queries raised by Healthwatch are acknowledged.
- Plans are in place I hope this presentation has given further information about core workstreams and progress.
- We welcome ongoing involvement from Healthwatch in conversations about priority areas, sharing people's experience and the development of creative solutions and opportunities as we go forward for example involvement in our peer review processes.
- The plans, progress and delivery of outcomes are now overseen by the Herefordshire and Worcestershire Mental Health Collaborative which includes a wide range of stakeholders including statutory organisations, primary care and the VCS





Any questions?

