REPORT TO:	**Health and Social Care Scrutiny Sub Committee** **8th November 2016**
AGENDA ITEM:	**8**
SUBJECT:	**Croydon CCG's Update on Mental Health Integrated Strategy 2014-19 Action Plan**
LEAD OFFICER:	**Paula Swann, Chief Officer CCG**
CABINET MEMBER:	**N/A**
PERSON LEADING AT SCRUTINY COMMITTEE MEETING:	**Paula Swann, Chief Officer, Croydon CCG** **Stephen Warren, Director of Commissioning, Croydon CCG**
ORIGIN OF ITEM:	**Update on the Croydon Integrated Mental Health Strategy**
BRIEF FOR THE COMMITTEE:	In 2014 an extensive Integrated Mental Health Strategy was produced by the CCG and Croydon Council to cover the 5yr period 2014-19. An action plan was developed in September 2014 by Croydon CCG and has been shared publically at the MH partnership board, strategy group and at the Health and Wellbeing Board. The action plan has now been updated to contemporise both the actions and updates for 2016, and include a Red, Amber, Green (RAG) rating. This update looks at areas of improvement and achievement and also signifies areas that require ongoing or more focused work between the CCG and Local Authority. Additionally the lead agencies have been updated to better reflect the commissioning responsibilities of both organisations. This action plan should continue to be considered as a live document and include input in both actions and updates from all stakeholders, including primary, secondary and voluntary sectors where relevant. Achievement of the aims and the strategy will require collaboration from all partners.

Update on Croydon CCG's Integrated Mental Health Strategy 2014-19

1. Introduction

This paper outlines the background and progress made since development of the 2014-19 Strategy, considers current priorities, areas of achievement and makes recommendations as to how to continue the progress that has been made whilst ensuring that the plan remains jointly owned by key stakeholders and the Mental Health Partnership Board with actions and aims that are relevant, contemporary and strategically relevant. This has required a refresh of the Action Plan, which follows the four themes of the MH Strategy, ***Improving Access, Strengthening Partnership Working, Starting Early and Improving the Quality of Life for People with MH Problems*****,** the full strategy is available on Croydon CCG's website: http://www.croydonccg.nhs.uk/news-publications/publications/Documents/NHS%20Croydon%20CCG%20Mental%20Health%20Strategy%20Final%202014%20-%202019.pdf

There have been changes to the financial position of both CCG and Local Authority since the last Action Plan update and these changes have been reflected in this refresh. There have also been changes made to the leads for each area which reflects the responsibility of each statutory partner.

2. Background

The previous Action Plan was written in September 2014, at a time of investment in Mental Health services across community, inpatient acute and IAPT services. Over the 2014-2016 period the CCG invested in excess of £9 million to improve access to existing services and develop an Adult Mental Health Model (AMH) to support community care with the aim of reducing the reliance on inpatient services and to work towards beginning to meet national standards. The planned work was responding to the JSNA 2012/13, which showed a clear projection of an increase by 5% of anxiety and depression by 2021, and the number of people with schizophrenia, bipolar disorder and other psychoses was projected to increase by 23% by 2021.

The investment was predicated to reduce the need for inpatient care, and reduce the number of commissioned bed days required by Croydon service users, which was recognised at the time as being significantly higher than comparative boroughs. 2015/16 was a challenging year for Mental Health services across the country with high levels of demand and bed occupancy regularly in the national press. The same was true across the four boroughs that SLAM services, but in Croydon this was particularly challenging and inpatient activity increased by 20% in 2015/16.

The financial position of the CCG changed in 2016/17 which has impacted on a number areas, there has however also been improvements across many areas which now require updates to the actions to ensure that continued progress is made or sustained. This update takes into account current planning guidance and performance targets for Mental Health from NHSE which has been a priority for the Joint Commissioning Team over the past 24months, as well as a refresh of actions

that whilst achieved have, for reasons of increased need, not achieved the original aims of the strategy.

In response to the adverse financial cost pressure, the CCG agreed with SLaM a programme of work that temporarily redirected and reprioritised the delivery of mental services and set out planned mitigation against inpatient admission. To understand the key drivers behind this adverse increase, the CCG and SLaM jointly commissioned a diagnostic audit of all inpatient services. Following completion of the final report an action plan has been developed and discussed at the Mental Health Programme Board in partnership with housing, health and social care, and the progress of this work is included in the updated Action Plan.

3: Summary of findings from the inpatient diagnostic:

The majority of the patients seen had been in hospital for a significant period of time when benchmarked against patients admitted in other boroughs with a similar Mental Health diagnosis. The audit identified the following key issues:

- The majority of the patients had a psychotic disorder with very few patients with non-psychotic or personality disorder
- One third had physical health problems and problematic substance and alcohol issues
- 48% of patients had their ethnicity recorded as white (50% of total all ages local population) and 35% black (26% of local population)
- Two-thirds of patients had been admitted formally under the Mental Health Act
- Over two-thirds of acute patients had been in hospital for at least 29 days already and one third were still in hospital at 90 days
- Longer than average lengths of stay were associated with patients who were male, having a diagnosis of a schizophrenia or schizoaffective disorder, and patients with physical health problems
- Very few patients had contact with the Home Treatment Team (HTT), although they may have been screened and their admission approved by the HTT
- Over the two weeks before the audit over 41% had contact with a care coordinator but very few with the Home Treatment Team
- Over two-thirds of patients had contact with a discharge coordinator
- A quarter of acute patients had a planned discharge date. Over one third of were considered to be a delayed discharge
- Over 40% were reported as of no fixed abode and housing, including supported accommodation, was seen as a major factor preventing discharge

4: Achievement Areas and Completed Actions

4:1 Adult Mental Health Model (AMH)

The Adult Mental Health Model has been a key focus since 2014 following the CCG Operating Plan which identified a number of key issues for Mental Health services which required attention including:

- Previous significant pressure and over performance in relation to Mental Health inpatient beds resulting in dependency on placing service users out of borough and in private sector beds as 'overspill '
- Barriers to care in primary care
- Systemic/organisational barriers to accessing care
- Frustration with continuing inequality in access to services
- Limited access to psychological therapy services

The 2014-19 Integrated Mental Health Strategy was developed in the early part of 2014 to address these issues with the driving principle to reduce the reliance on secondary care inpatient bed provision for the delivery of Mental Health Services. This responds to the growing population within Croydon with phases 1 and 2 of the 4 phase model now having been implemented and with services enhancements including;

Assessment & Liaison Teams – Four assessment teams replaced the previous two, and have been configured and located to support the six GP network areas in Croydon. These teams undertake all Mental Health assessments, (18-65yrs) and signpost to appropriate teams, which now includes both Voluntary Sector and Reablement services to stabilise and support people in crisis.
Promoting Recovery Teams – have been reconfigured into 4 teams aligned with the GP networks and assessment & liaison teams. Caseloads have been reconfigured to match localities which allows for greater continuity between teams and GP's increasing the coordination of treatment received.
Primary Care Mental Health Support Service – capacity has increased to provide more support to GP's to support the transition of patients stepping down into primary care.
Clozapine Initiation – supporting a proportion of patients to access Clozapine medication within the community.
Home Treatment Team – has been enhanced with more capacity and a wider range of therapeutic interventions to prevent crisis, including the use of Dialectical Behaviour Therapy (DBT) and family therapy.
Personality Disorder Service - has increased care coordination and support through group therapy & family connection group

4:2 Crisis Home Treatment Teams

Building further on the expansion of Home Treatment Teams, (as above), these teams will develop a stronger crisis function with input into the newly formed Acute Referral Centre which will support the place of safety and create a 24hr triage function. This triage function will reduce the need for referral forms and release more time for face to face assessments. The service has also developed its workforce to offer more bespoke interventions to people with personality disorders, whose presentations are often more complex with a higher degree of risk. The team has recently gained Home Treatment Accreditation (HTAS). Previously home treatment

operated 8am-10pm but has been remodelled to include 24hr telephone access since October 1st 2016, which provides support and gatekeeping to inpatient provision and the Home Treatment Team, to ensure the least restrictive treatment option available is offered.

4:3 IAPT

The IAPT service has increased in size and access considerably over the last 2 years. In 2013/14 the access rate was 3.75%, this increased to 6.9% in 2014/15 and reached 10.37% at the end of 2015/16. In addition to the capacity of the service and access rates increasing there have also been service improvements. These include the ability to self-refer, which was supported by a large promotional campaign including newspaper advertisements and billboards throughout Croydon to tackle the stigma associated with using MH services. There have also been online services launched to provide a digital offer, and group workshops which also were available in evenings and weekends to increase the accessibility of the service. A counselling component was also added to the service through a Voluntary Sector organisation to increase the range of support options available. Recovery rates increased throughout 2015/16.

The service has been impacted by the significant funding challenge faced by the CCG. This will result in overall performance expected to be delivered at the same level as in 2015/16, with planned expansion to 15% temporarily postponed. Changes to staffing have had an impact on recovery rates but these are now improving as the staffing stabilises.

4:4 Dementia

The Croydon Dementia Strategy will not be refreshed as the Council consolidates its portfolio of strategies and the key strategic aims for Mental Health Older Adults are currently being overseen by the Mental Health Older Adult Steering group with representation from the Local Authority, CCG, Voluntary Sector, SLaM and CHS. The key improvements for Dementia include;

Improvements to Croydon's Dementia Diagnosis rate. The rate has increase from 46.5% in April 2014, to 66.4% September 2016 and now sits just below the national ambition of 66.7%, which the CCG is committed to exceeding by March 2017.

Post diagnostic support is now available for people living in the community with a diagnosis of Dementia, through the Dementia Advisors service delivered by the Alzheimer's Society which has been in place since October 2015, and supports around 200 people per quarter.

A Care Home Intervention Team has been operational since 2015 and supports Care Homes to manage complex health changes in their residents effectively, to avoid placement breakdown and support people to remain in their place of residence as long as is appropriate.

The provider SLaM established a Home Treatment Team in October 2015 offering support and treatment to Older Adults in their own homes at times of crisis. The service provides comprehensive assessment and is accessible to people in the acute phase of mental illness which, without support, would result in their admission to hospital.

Currently the CCG is working with Croydon GP's and SLaM to deliver a project aimed at increasing the rate of severe dementia diagnosis in care and nursing homes, through GP's making diagnosis directly. The intended outcomes are an improved dementia diagnosis rate, care homes better informed to support their residents, and improved co-ordination of care particularly at times of hospital admission to support appropriate access to services including forget me not schemes and dementia friendly wards.

4:5 Integrated Mental Health Croydon Achievements 2014-2016

- The Street Triage pilot has been commissioned on an ongoing basis and has developed into the 24hr Mental Health Support Telephone Line
- Investment has been made into a 4 borough pilot, to remodel liaison psychiatry in line with national Core 24 standards.
- Reinstatement of the Mental Health Partnership Board with range of stakeholders as members
- Developed an Early Detection Service (Oasis) for people at risk of developing psychosis in Croydon
- Invested and expanded the Early Intervention in Psychosis service in order it can meet national standards
- Trained over 250 people from the local community in No Health Without Mental Health
- Transformation of CAMHs services as detailed in the CAMHs strategy

5: Next Steps and Areas for Focus

The following areas are identified as needing an additional focus to jointly progress.

- Ensure the Mental Health Community are included within Croydon's Improved Whole Population Health Promotion
- Ensure carers services are appropriate and fit for purpose
- Medication adherence
- Increase the choice and control of people using Mental Health services, through increased personalisation and using personal care and support planning to put people in control.
- Review employment support services
- Review of day care services
- Develop stronger links with physical health services: e.g. MDT's, Out of Hospital, Drug and Alcohol and Community Teams
- Review of primary care support
- Improve discharge planning and processes to reduce length of inpatient stay
- Develop a housing and housing related support action plan

6: Recommendations

The Action Plan has been and should remain a live document with all stakeholders invited to contribute actions from their respective organisations to contribute to its achievement, this will ensure the plan reflects the wider work undertaken by providers and is not limited to the activities of the CCG and Local Authority.

The Action Plan has previously been shared with all members of the Mental Health Partnership Board and this refresh should be included on the next agenda of the next partnership meeting.

The Mental Health Strategy Steering Group (a sub group of the MH Partnership Group) is currently being revamped and updated with wider membership to advance the Action Plan and ensure that this it is truly integrated.

7: Equality Impact Assessment

A full Equality Impact Assessment was undertaken on the Mental Health Strategy by Croydon Council as part of its development. In 2014/15 The Mental Health Strategy was graded by external stakeholders as 'developing' or 'amber' from assessment for EDS2, Equality and Diversity Performance. To work towards obtaining a green score for each identified area, throughout 2015/16 Equality and Diversity was a standing agenda item at each Mental Health Planning Meeting, Team Meeting, & Partnership Board Meeting.

In 2015/16 the COAST service was selected for evaluation and is referenced as a case study in the CCG Public Sector Equality Duty Annual Report 2015-16.

Throughout 2015-16 Equality Impact Assessments are being completed where services are subject to review or redesign.

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21ST October 2016