

REPORT TO:	Health and Wellbeing Scrutiny Committee 08 March 2022
SUBJECT:	An overview of mental health provision in the borough
LEAD OFFICER:	Annette McPartland Corporate Director of Adult Social Care & Health
CABINET MEMBER:	Cllr Janet Campbell Cabinet Members for Families, Health and Social Care
PERSON LEADING AT SCRUTINY COMMITTEE MEETING:	Simon Robson Director of Operations, Adult Social Care and Health Rachel Flagg Director of Transformation and Commissioning NHS South West London CCG
PUBLIC/EXEMPT:	Public

POLICY CONTEXT/AMBITIOUS FOR CROYDON:

A change in the way we deliver social care in order to reduce spend and live within our available resources is underway. This aligns to the following Croydon Renewal Plan priorities:

- We will live within our means, balance the books and provide value for money for our residents.
- We will focus on providing the best quality core service we can afford. First and foremost, providing social care services that keep our most vulnerable residents safe and healthy.

ORIGIN OF ITEM:	An update on mental health provision in the borough was requested in light of concerns previously raised by the Sub-Committee about the impact of the covid-19 pandemic on mental health and wellbeing.
BRIEF FOR THE COMMITTEE:	The Health and Social Care Sub-Committee is asked to consider this presentation and accompany presentation which provides an overview of Mental Health provision in Croydon borough including:- <ul style="list-style-type: none"> • what is available, • the current level of performance, • the impact of the pandemic • the future vision.

1. EXECUTIVE SUMMARY

- 1.1. The COVID 19 Pandemic delivered a monumental adverse impact to the overall health and social care needs of residents of all ages but with unexpected consequences on increasing stages of mental distress.
- 1.2. While attention is currently and rightly addressed to the immediate mental health impact of the COVID Pandemic, there is every likelihood that the current and after-effects will translate to an increased demand for mental health services for all ages.
- 1.3. This report provides the Committee with an overview on key elements of:
 - the mental health provision within the borough as a road to recovery from the COVID 19 Pandemic
 - the South London & Maudsley NHS Foundation Trust, and South West London CCG budget on mental health
 - the Council's Adult Mental Health service budget and savings in line with the Croydon Medium Term Financial Strategy.
 - key performance and outcome focuses; and
 - Future vision for adult mental health provision in Croydon.

2. OVERVIEW OF BOROUGH SERVICE PROVISION

Overview of commissioned services

- 1.4. Croydon commissions a full range of mental health provision. The mental health services available in Croydon are a mixture of services delivered by our local mental health trust South London and Maudsley (SL&M) as well as the voluntary sector. The core community and crisis offer commissioned from SL&M made up of the following services:

Acute and crisis pathway services

- Psychiatric Liaison (Enhanced CORE24)
- Home Treatment Team
- Adult Acute Inpatient wards
- Adult Psychiatric Intensive Care Unit (PICU)
- Inpatient Rehabilitation Service
- S136 suite/Place of Safety
- Crisis Line

Community offer

- Assessment & Liaison Team (A&L)
- GP advice Line

- Locality Teams (Community)
- Early Intervention Team
- Recovery and Rehabilitation Team
- Primary Care Mental Health Support Team
- Community Forensic Service
- Perinatal MH Community Team
- Community Personality Disorder Service
- Croydon Integrated Psychological Therapy Service (CIPTS)
- Learning Disability Mental Health Team
- ASD Community Team

Voluntary Sector offer

- Mind – Provide Social Networking, Counselling, Helpline/Information Service, Advocacy for All, Employment Service, Welfare Benefits Advice, Carers Counselling & Support, Mind Match, Active Minds and Live Well – Smoking cessation
 - Hear Us – Provide a Service User Forum, Involvement and Link-workers
 - BME Forum – Provide Community Development Workers (CDWs)
 - Imagine – Provide Mentoring and Befriending
 - APCMH – Providing drop-in support
 - Off the Record – Provide BME CDW service
 - Off the Record Compass – Provide Counselling
 - Off the Record Youth Counselling – Talking Therapy for CYP
 - Alzheimer’s Society – Provide a Dementia Advisor
 - Status – Provide Employment Support (specialising in self-employment).
- 1.5. During the pandemic the CCG further invested to deliver the key elements of the Mental Health Transformation Plan. This investment enabled the mobilisation of the following services to further bolster the system Crisis and Community offer during and beyond the pandemic.
- 1.6. **Recovery Space** (Hosted by Mind in Croydon) – a 7days/week (6pm-11pm) alternative Safe Space to A&E for people experiencing a MH crisis that do not require a clinical intervention. 715 referrals received Apr 2021-Jan 2022. The pilot is extended for another year with additional crisis support workers embedded in the Health & Wellbeing Space to ensure alternative crisis support from 10am -11pm 7days/wk.
- 1.7. **Mental Health Clinical Assessment Unit (CAU)** – based at Croydon University Hospital and has been operational since September 2021. 98 patients seen from Sep 21 -Jan 22. 4 dedicated MH bays next to A&E to assess those patients presenting with mental health symptoms to sufficiently

ascertain the most appropriate onward service and package of care within a timely manner, thus leading to a smooth and efficient patient flow out of A&E. The service model is a fully integrated model including physical health, mental health and effective links to the voluntary sector. An evaluation of the first 4mths has been completed and options for optimising utilisation are being explored. Initial evaluation figures show the CAU has freed up the equivalent of 1 extra bay in A&E since it opened.

- 1.8. **Croydon Health & Wellbeing Space / ICN+ Localities** – The pilot CHW Space went live on 4th Jan 2022 at the Whitgift Centre, it is the first of 3 to cover 6 ICN+ Localities across North, Central and South Croydon. The Space is a VCS non-clinical offer with in-reach from clinical mental health and social care, hosted by Croydon BME Forum & Mind in Croydon. Operating 7days/week 10am-6pm complimenting the Recovery Space 6pm-11pm. Target Cohort of SMI = 1600 Central area (Total 4953) and 2000+/yr of new GP referrals/self referrals.
- 1.9. **Mental Health Personal Independence Co-ordinators (MH PICs)** – A new Voluntary sector role as an out-reach function of the Health & Wellbeing Space, to provide practical support for people experiencing MH issues across primary/secondary care. Mobilised Mar 2021 and received 203 referrals vs target of 210. (Hosted by Croydon BME Forum & Mind in Croydon).
- 1.10. **Primary Care Network Mental Health Practitioners (PCN MHP)** - New clinical mental health roles in each Primary Care Network provided by SL&M but jointly funded with PCN's. Core offer - Co-ordinate and deliver MH care across PCN GP practices, reducing GP workload & targeting key cohorts. PCN tailored offer – address key MH issues highlighted by the PCN. Supported by MHPICs, MHW Hub (for Central Croydon PCNs) and B4 PCAS funded PCN roles for SMI Physical Health Checks.
- 1.11. **Mental Health Local Voluntary Partnership Initiatives:** (delivery over 2yrs)
 - Turkish Youth & Community Association – MH Community Development Worker (CDW)
 - Asian Resource Centre Croydon – Mental Health Champions
 - Croydon BME Forum – Wellness Advisor in addition to Community Development Workers
 - Croydon Drop-in – Young Adult Transitions – education and apprentices
 - Body & Soul – Legal, Practical Support & Counselling for HIV+ sufferers
 - Disability Croydon – MH Drop-in Centre & Café and access to digital support, tackling loneliness
 - Palace for Life Foundation – Coping through football (SMI Focus)

South London & Maudsley Covid 19 Pandemic Response

- 1.12. During the pandemic the Trust was able to maintain delivery across all services despite significant staffing challenges due to Covid 19 related sickness at certain points of the pandemic. The trust focused on:
- Home Treatment and Community Teams delivering a robust Covid-19 response with support from redeployed staff - to support discharge into community settings and following up with patients post discharge.
 - Mobilised 24 additional step down crisis flats in Wave 2 (from 12 to 36) and are planning to open up 2 new Crisis Houses for all SL&M boroughs in 2022/23 (one for adults and one for young people)
 - Opened a Clinical Assessment Unit to support the Croydon University Hospital Mental Health Liaison Service with improving the urgent and emergency care pathway for those in crisis
 - Adapted offer for older adults with activity focussing on supporting staff wellbeing in care homes, offering remote intervention and advice for residents and support with training around other areas such as use of PPE
 - Continued work in partnership with key stakeholders throughout the pandemic
 - Stepping up a trust wide vaccination programme to deliver vaccines for staff and patients
 - Providing staff with rest and recharge hubs and support pathways during Covid-19
 - Made urgent changes at height of Covid-19 to inpatient settings to support local acute trust with bed capacity
 - Despite significant estates challenges kept service users, carers, our staff and system partner staff safe with robust infection prevention and control measures
 - Leading national guidance reviews on medication changes and Mental Health Act Assessments due to impact of Covid-19.
- 1.13. The pandemic changes were assured by the undertaking of rapid evaluations of service changes to monitor impact on quality - e.g., remote assessments, emergency department diversion services and discharge follow-up. Positive joint working between alliance partners has been pivotal in delivering a well-co-ordinated system response.

3. OVERVIEW OF BOROUGH MENTAL HEALTH BUDGET

South London & Maudsley NHS Foundation Trust & South West London CCG budgets

- 3.1. Mental Health Investment Standard (MHIS) aims to make sure CCGs increase investment in mental health services at a higher percentage than their overall rise in allocation from NHS England each year. Croydon CCG has committed a

£2.68m (4.35%) uplift in Mental Health Investment Standard Spend for 2021/22 giving a total budget of £64.29m.

- 3.2. In addition to the MHIS uplift there is Spending Review (SR) and System Development Funding (SDF) funding available bringing the overall total 2021/22 Mental Health Budget to £69.9m. SR funding is non-recurrent and will be a cost pressure on 2022/23 MHIS funding.
- 3.3. In Croydon, investment decisions have been informed by the transformation plan and priorities set, and through system wide engagement. These have been agreed and signed off by the mental health clinical leads.
- 3.4. The Overall Mental Health forecast for 2021/22 is £69.9m from the CCG: The Croydon SL&M contract value is £55.7m, a £0.91m (1.95%) increase on last year's value made up of:
 - £274k growth on core contract and £637k FYE of prior year MHIS with a focus on IAPT (including CYP), CAMHS, START MH Homelessness, HIV services, and non- NHS adult placements.
- 3.5. Other Mental Health Spend is £8.57m, a £1.94m (23.2%) increase on last year's value with a focus on the following and bringing the total to £64.29m (4.35%):
 - Voluntary Sector contracts have seen a doubling in their contract values through MH Local Voluntary Partnership and MH Transformation investment
 - SMI LCS to improve the physical health of those with a serious mental illness
 - MH Transformation Programme – introducing new roles, such as MHPICs, enhancing CYP counselling provision, Cancer Psycho-physiologic Service (CaPS), Personal Health Budget pilot, and Enhanced Shared Lives pilot.
- 3.6. The remaining £5.6m (completing the £69.9m total) is prioritised as follows:
 - Mental Health Assessment Unit at CUH £1.34m
 - Prior Year SDF Funded Initiatives: - Trail Blazer £837k, AMH Community £563k
 - Current Year SDF Funded Initiatives: - CAMHS £710k
 - Spending Review Initiatives: - Adults £1.85m, CAMHS Community £312k

Croydon Council Adult Mental Health Service Budget

- 3.7. Adult Social Care accounts for more expenditure at Croydon than any other service, approximately 31% of net budget. The pressures in this area are felt across the country. However, we know that our cost base is too high and we can learn from other councils.

- 3.8. Working closely with a Local Government Association (LGA) Adults and Finance expert, we have reviewed every aspect of our budget. We have modelled plans to deliver significant savings over three years, based on LGA recommendations.

2021/22 financial period monitoring

- 3.9. As reported in the February 2022 Cabinet monthly finance update, the ASCH directorate are forecasting an underspend of £0.028m, an adverse movement of £2.00m from Month 8.
- 3.10. This movement includes an extra provision of potential historic operational service issues but partially netted off against improvements within placement spend across all cohorts of service users. Whilst this is an adverse movement within forecast the overall Adult Social Care position, after factoring risks, has not worsened as a previously reported risk of £2.5m has now been included within the forecast.
- 3.11. The directorate is forecasting to deliver 100% of budget reductions (£10,978m).

Adult mental health service 2021/22 budget and savings

- 3.12. In terms of the 2021.22 budget (£9.405m) and savings (£-0.684m) delivery, the service is on course to deliver a small underspend £0.062m. This has been achieved through reviews, cost avoidance and managing demand.
- 3.13. Nonetheless, Adult Mental Health services and budget remains at pressure from wider activities. In particular, increased demand for statutory and non-statutory interventions, as well as inflationary increases which are likely to continue for the rest of the 22/23 fiscal year.

Adult mental health service 2022/23 proposed budget and savings

- 3.14. In terms of the 2022/23 draft budget allocations, on advice from the Local Government Association, the Directorate is moving to activity based budgeting. In effect, reflecting growth allocations on forecast year end activity.
- 3.15. This new process and analysis reviewed the 21/22 growth allowance of £0.262m against the in-year 'run rate'. This is the pace at which the budget is spent against the period of the year. At Period 6 (half-way through the financial year), 73% of growth had been used, overall 62% of the budget.
- 3.16. The reflection, for setting the draft 2022/23 allocation, was the anticipated demand growth of £0.262m would likely be insufficient. As a result, the draft growth allocation, based on forecast activity, has been increased by £0.229m, to £0.491m.
- 3.17. The draft budget for 2022/23 is £9.078m, with a savings target of £-0.934m.

Fair cost of care strategy

- 3.18. Over the last 18 months the Council has been developing its Cost of Care strategy to support the care market. This is to ensure that we pay a sustainable rate for care that promotes excellent care to residents and a sustainable workforce.
- 3.19. To support this, the Council has agreed a minimum rate for care for bed-based settings and for home care. On 1 November 2021 we increased the rates that we pay to providers in line with this minimum rate.
- 3.20. We are now working on our Fair Cost of Care Strategy for 22/23, informing providers of the new rates during April 2022.
- 3.21. Of note, the government announced at the end of 2021 a 'Market Sustainability and Fair Cost of Care Fund' to support local authorities to:
- Conduct a cost of care exercise to determine the sustainable rates and identify how close they are to it.
 - Engage with local providers to improve data on operational costs and number of self-funders to better understand the impact of reform on the local market
 - Strengthen capacity to plan for, and execute, greater market oversight and improved market management to ensure markets are well positioned to deliver on government reform ambitions.
- 3.22. The Council understands the rising costs to social care providers around national living wage, energy and other inflationary pressures; and will support the market in setting a Fair Cost of Care.

Budget risks

- 3.23. The budget remains at high risk to the challenges below:
- Inflation and cost of care.
 - Out of borough placements and S117 commitment continues to present significant challenges. Croydon is reported to have one of the most diverse privately owned residential placements in the entire South London.
 - Croydon is a net importer of individuals into the borough given the location of the Home Office; as well as its cost of living affordability index in relation to other local authorities closer to central London.
 - The cost to managing the impact of COVID remains a real challenge as demand for mental health services increases and the complexity of mental health and physical disability presentations worsens within the locality.

4. CROYDON MENTAL HEALTH PROVISION IMPROVEMENT PLANS

- 4.1. A stakeholder 'Mental Health Summit' event delivered on the 08 March 2021 with opening speech by Councillor Janet Campbell, set out key demand drivers, barriers and priorities for the Integrated Adult Mental Health Services.
- 4.2. Key drivers were population increases, limited resources, increase in deprivation, increase demand for services, ageing population, lack of technological solutions, rising public expectations, ethnic disparities in service provision and public health concerns eg. COVID etc.
- 4.3. A high level strategic plan was developed to enable:
 - Managing demand through community access to services.
 - Managing demand to and from Acute hospital settings.
 - Effective and efficient short-term crisis and routine community interventions.
 - Effective community offer for individuals with mental health problems and long-term disabilities which addresses ethnic disparities.
 - Effective market shaping commissioning strategy that provides appropriate independent living step down options, which support wellbeing, choice and independence
 - A collaborative governance and management approach to sustain improvements through recovery from COVID 19 Pandemic.
- 4.4. It was envisaged that the plan would provide data sets on customer insight, user engagement, areas of particular emphasis for further investments in prevention and early intervention, and a focus on community cohesion, resilience, values and outcomes to inform the forward strategy and plan.
- 4.5. To date the plan has delivered or is in progress to deliver the following:
 - Adult Mental Health Joint Commissioning Board
 - The commissioning of the Integrated Adult Mental Health Review Team
 - The commissioning review of the Borough's mental health supported accommodation
 - The plans to commission the mental health placements and brokerage
 - The commissioning of the mental health voluntary care sector contracts
 - The commissioning review of the integrated mental health S75 agreements
 - The development of the integrated community placements dashboard providing an overview and detailed summary of placements, needs, costs and specialities.
- 4.6. The Adult Mental Health Joint Commissioning Board has also fed into wider Adult Social Care and Health interventions in the following areas:

- The fair cost of care strategy
- Care Cube implementation (a placements negotiation tool)
- Provider and service user engagement programmes
- Aligning of the Health and Social Care systems through the proposed access to the Local Authority Adult Social Care Systems (LAS) to Adult Mental Health Practitioners.

Croydon Integrated Adult Mental Health Review Team

4.7. An invest to save small specialist team developed in collaboration and partnership with key stakeholders Croydon CCG, Croydon Adult Mental Health Social Care, South London and Maudsley NHS Foundation Trust and South London Partnership. The team sets out to achieve the following outcomes:

- To ensure that all residents in Integrated Adult Mental Health Placements receives timely and robust reviews.
- To ensure residents are supported in the most appropriate setting to increase their independence, choice and wellbeing and maximise their recovery.
- Provide quality assurance of all placements ensuring that a resident's placement offers safety and maximum support.
- Support the delivery of a wide variety of step-down options and capacity within the borough.
- Support the medium-term financial savings plan for the Adult Mental Health Social Care, South West London CCG, South London and Maudsley NHS Foundation Trust and South London Partnership, where indicated, feasible and achievable.

4.8. As of the 22 February 2022, the joint collaborative has achieved or in progress to achieve the following:

- Re-optimisation of the mental health shared lives pathway – increasing access and capacity to individuals with mental health difficulties.
- Introduction of joint working protocol with Croydon Extra Care Sheltered Accommodation to increase access and capacity to individuals with mental health difficulties.
- Supported the review of the Mental Health Supported Accommodation securing increased capacity for 24 hours mental health supported accommodation in the new tender – current capacity operates a waiting list.
- Supporting the development of a bespoke placement pathway for individuals with mental health difficulties and Autistic Spectrum Disorder.
- Supporting ongoing discussions on improved investments from South London Partnership for a Community Mental Health Rehabilitation Scheme in Croydon. Ensuring that individuals in complex inpatient admissions are

appropriately stepped down to a community rehabilitation scheme prior to further community placements. Avoiding a cliff edge step down.

- Supporting the development of a dual diagnosis (mental health/substance misuse) step down facility working with Lancaster Road Project.
- Supporting the development of a bespoke forensic scheme and out of area placements scheme with ongoing work with Social Interest Group (Penrose, Equinox and Pathways to independence).
- Support the development of a provider level engagement with providers and systems partner towards a robust market shaping strategy to meet the needs of residents.

4.9. In addition, as at the 30th of December 2021, the integrated adult mental health review team has achieved the following:

- Completed reviews of 71% of 100% Local Authority Funded Placements (112 placements in total).
- Completed reviews of 100% of 100% Health Funded placements (14 placements in total)
- Completed reviews of 77% of joint funded placements (84 placements in total) – 13% of placements were less than 6 months and deemed out of scope.
- 47% of reviewed placements were identified for step down into more independent living provisions.

4.10. The strategic and operational plans set out what is achieved, or is in progress to be achieved. It maintains a sustainable and cost effective framework for the Integrated Adult Mental Health Service and our highly vulnerable residents; in providing improved placement access, safety and support as we journey through the recovery from COVID 19 pandemic.

Case study 1

4.11. Two cases are worth mentioning here to describe how the mental health reviews team have impacted on the lives of our residents with complex presentations, risks and history, known to mental health services.

4.12. First, is a young woman known to mental health services since the age of 15 with very complex mental health diagnoses of Mixed Disorder of Conduct and Emotions, Pervasive Development Disorder, Autistic Spectrum Disorder, Attention Deficit Disorder and Oppositional Defiant Disorder.

4.13. She had multiple admissions to hospitals both as a child and as a young adult with significant risk to self, others and properties as well as having been accommodated in various placements, in and out of the borough, which all broke down. The last placement cost was £3500 per week.

4.14. Her case was taken on by the integrated mental health review team in December 2021.

- 4.15. Working with her, her family and the current provider; a bespoke placement of a self-contained flat with a specialist provider, according to her wishes and feelings, close to her family, was sourced with wrap around package of care designed with her and her family.
- 4.16. Both resident and the family were very satisfied with the outcome as she now has her own front door, with all her needs and wishes met and with a total savings for the Local Authority and CCG recorded as over £3000 per week.

Case study 2

- 4.17. Another case is that of a young female with a very complex diagnosis of anorexia nervosa and Emotionally Unstable Personality Disorder/ Personality Disorder (EUPD/PD) since the age of 17.
- 4.18. Her anorexia, which tends to be severe, is characterised by dietary restriction, excessive exercise, weight falsification by excessive water consumption and laxative abuse.
- 4.19. In addition to the above, she has extensive risk history of self-harm and suicidal attempts with multiple admissions to hospitals and access to very complex placements which all broke down leading to her current placement, where she has been since 2019 at the cost of £4500 per week.
- 4.20. The mental health review team took up her case in December 2021, working with her, her family and the current provider. She was transferred to a bespoke placement with a specialist provider with extensive wrap around care in a self-contained flat with 24-hour support.
- 4.21. Early reports and reviews suggest that she is doing very well, and her family are happy with the reported improvement in her independence and the step down represents a saving over £3500 per week to the joint partnership.
- 4.22. There are many more cases like these, ongoing, where specialist bespoke arrangements are being sought according to client and families' wishes and feelings, as a new model of care, both for complex cases and for those individuals who prefer to take control of their own care with extensive wrap around care.

Croydon Approved Mental Health (AMHP) Service

- 4.23. Section 13 of the Mental Health Act (1983) imposes a duty on local authorities to ensure that Approved Mental Health Professionals are available to carry out assessments under the Act on individuals present or living in their area who appears to be suffering from a mental disorder.
- 4.24. The AMHP service provides a seamless 24-hour service.
- 4.25. In comparison to 2019 and 2020 data, the AMHP referrals data as at January 2022 stands at 1147.

- 4.26. Adding average referrals for the month of February and March 2019/2020 of 171 will increase the total AMHP referrals for 2021 fiscal year to 1318. The highest total for the past 3 years.
- 4.27. Most AMHP referrals originate from hospital, place of safety, male wards and police custody suite.
- 4.28. Our data suggests that in the past 11 months, AMHP referrals successfully diverted to least restrictive community interventions to prevent hospital admission and away from custody and psychiatric hospital, recorded as no further action, has increased by around 20%.
- 4.29. Nonetheless, as a service, we remain concerned about the number of individuals with mental disorder placed under some form of restrictions under the mental health act.
- 4.30. The data also suggests a modest increase in average referrals received for Spring/summer quarters when compared to autumn/winter quarters which was particularly difficult to manage this year given the staffing recruitment and retention difficulties throughout the AMHP Service for 21/22.
- 4.31. Therefore, the focus of AMHP improvement plans will be targeted on the following as led by data:
- Increased timely/robust Interventions at Police Custody Suite, Place of Safety, Croydon University Hospital wards and Croydon Accident and Emergency Services.
 - Majority of the interventions at locations in (a) above are conducted by out of hours AMHP Service and we have seen the increase in daily numbers of referrals and assessments conducted out of hours daily.
 - Approach to reviewing and implementing various borough system partners winter plans to include the Croydon AMHP Service in their schedule as the service caters for all ages and crosses all departments and services.
 - Strengthening the management and leadership of the out of hours AMHP Service to deal with the increased demand for services and the complexity of the interventions.
 - Exploring the provision of legal support and advice as cases become more complex.
 - Improve interagency working with system partners developing escalation protocols.

5. PERFORMANCE AND OUTCOMES

- 5.1. All National Standards are being met apart from the Improving Access to Psychological Therapies (IAPT) access target which remains below the national target.

PERFORMANCE

Current performance (M10)	Target	M10 Performance
IAPT Access	926	838
IAPT Recovery	50%	61%
IAPT 6 weeks to 1 st Appt	75%	99.5%
Dementia Diagnosis rate	67%	71.4%
Early Intervention Psychosis 2 weeks referral to treatment	60%	64%
A&E Mental Health Liaison 1 hour access target	70%	86%

- 5.2. These challenges are similar to the national picture and engagement work with primary care and new wellbeing hub continues to identify opportunities to increase referrals.
- 5.3. Whilst the A&E access target is being met there are still challenges with length of stay in A&E for mental health patients. This is due to waiting for a bed for local and external trusts as well as social care delays. More complex presentations are being reported post lockdowns. The Clinical Assessment Unit (CAU) is supporting A&E pressure with a 4 month evaluation suggesting that the CAU has freed up the equivalent of 1 extra bay in A&E since it opened. Service user feedback of the CAU is very positive.

Changes in demand during the Pandemic

	Mar-Jan 19/20	Mar-Jan 20/21	Mar-Jan 21/22
IAPT Referrals	10,984	9,769	12,774
A&L Referrals	3,054	2,771	2,820
CMHT Caseloads	834	949	858
A&E Presentations	3,140	3,102	3,106
Occupied Bed Days	36,954	25,881	28,654

- 5.4. IAPT referrals significantly dropped in the first year of the pandemic due to lockdown and a reduction in access to primary care. Activity is increasing and work is underway with local stakeholders to increase access.
- 5.5. Referrals to Assessment & Liaison reduced in the first year of lockdown slightly and similarly to IAPT this was due to the reduced access to primary care and national lockdowns. Activity is returning to pre-pandemic levels.
- 5.6. Community Mental Health Team caseloads increased during the first year of lockdown and this was mainly because of the drive to support patients in the community and reduce capacity in acute beds to limit the spread of the virus. Activity and complexity remain higher than pre-pandemic levels.
- 5.7. A&E presentations have remained similar to pre-pandemic levels however there have been peaks and troughs in presentations mainly around lockdowns where activity would significantly drop during a lockdown and then peak soon

after restrictions were lifted with a significantly more complex cohort of patients presenting after lockdown.

- 5.8. Occupied Bed days significantly reduced during Covid due to the drive to support patients in the community and reduce capacity in acute beds to limit the spread of the virus as well as partnership working with local physical health trusts in South East London to increase capacity for COVID acute beds.

Improving Outcomes for Ethnic Minority Communities

- 5.9. Between the CCG and SL&M there are two main vehicles for improving outcomes for ethnic minority communities, the Ethnicity Mental Health Improvement Programme (EMHIP) and the Patient and Carer Race Equality Framework (PCREF).

Ethnicity Mental Health Improvement Programme (EMHIP)

- 5.10. The EMHIP is a clinically-led partnership with a specific objective to reduce ethnic inequalities in access, experience and outcome of mental health care and will link with SL&M's PCREF delivery. The aims of the EMHIP are to:
- Achieve a more detailed and granular understanding of the extent and nature of ethnic disparities in mental health care in Croydon.
 - Develop a bespoke whole-system intervention programme to reduce ethnic disparities in access, experience and outcome in mental health care in Croydon.
 - Implement this intervention within the local mental health systems.
 - Monitor and evaluate the process and outcomes.
- 5.11. Currently the EMHIP is in Phase 1 with key deliverables being:
- To establish a BME Expert Oversight Group & Approve Project proposal
 - To establish a project team
 - Project development:
 - mobilisation and alignment of local resources / assets including key partner agencies.
 - Mapping and analysis of BME mental health / points of inequality in care pathway – Croydon.
 - Identify and mobilise BME community assets / networks.
 - Ethnicity audit process finalised.
 - Key stakeholder engagement events – iteration / adaptation / “what good looks like”.
 - Co-develop and agree key interventions delivering a business case for implementation of Phase 2.

Patient and Carer Race Equality Framework (PCREF)

- 5.12. PCREF is the Trust's strategic approach to deliver equity of access, experience and outcomes in all our services and is delivered through a tripartite partnership between staff, service users and carers, and communities. The first iteration of the PCREF programme focuses on Black Caribbean and Black African communities, service users and carers.
- 5.13. The Trust is a NHSE pilot site and there will be a statutory requirement for all Trusts to have a PCREF in place from 2023.
- 5.14. The key principles of the PCREF programme are:
- Partnership between the Trust and Host Organisations inc. Croydon BME Forum.
 - Tripartite leadership.
 - Built on existing partnership structures for joint working.
 - Mainstreaming PCREF into the Trust's strategic, operational and performance management systems.
 - Transparency with local communities at all stages.
- 5.15. PCREF is currently in phase 2 which is due to be completed in May 2022. The programme is made up of 3 phases:
- Phase 1:** Needs assessment and data – completed March 2021. Baseline needs assessment for our Black Caribbean and Black African service users.
- Phase 2:** Organisational competencies – due to be completed May 2022. Partnership work to develop the following:
- a set of borough based PCREF change ideas to deliver the prioritised national organisational competencies and affect the agreed PCREF metrics
 - an agreed approach for ensuring the Trust meets its statutory and regulatory obligations
 - a proposed definition for antiracism and what leading antiracism in mental health looks like, and how best to build trust and confidence with our Black communities from the Anti-Racism Task and Finish Group
 - plans for a tripartite developmental evaluation approach for the programme
- Phase 3:** Implementation of the change programme developed in phase 2 in June 2022, once approved by Board in May.
- 5.16. Success will be measured against 6 metrics that focus on equity in (1) service use, (2) diagnosis of psychotic spectrum disorders, (3) the use of medication for people with a diagnosis of psychotic spectrum disorders, (4) the use of detention, (5) the use of seclusion and restraint; and (6) culturally appropriate and accessible measures of recovery.

6. FUTURE VISION FOR CROYDON'S ADULT MENTAL HEALTH PROVISION

6.1. As the system moves into post pandemic service delivery the vision for the future is underpinned by the following key areas:

- Using shared learning from service changes in the pandemic to inform future transformation.
- Completing SL&M community transformation with an emphasis on:
 - Closer links with community and more alternatives to prevent crisis and emergency presentations.
 - Addressing Health inequalities via EMHIP and PCREF.
- Strengthening the system crisis offer and embedding principles of care closer to home with an emphasis on:
 - Reducing emergency duty presentations
 - Reducing out of area placements
 - Reducing length of stay in acute beds
- Continue work on improving services using the dementia strategy for older adults to make sure that care for older adults remains high quality as well as contemporary-this specifically includes improving access for 'hard to reach' groups inclusive of those who are digitally excluded.

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