Mental Health

1. Commissioning to allow earlier intervention and responsive crisis services				
No.	Action	Timescale	Led By	Outcomes
	• •	Matching l	ocal need with a suit	table range of services
1.	Doncaster Mental Health Review	Aug 2013 – Feb 2014	Doncaster CCG - Andrea Butcher	Mental Health Service improvement identified 3 key workstreams – Crisis/Urgent & In-patient Care, Secondary Care & Community Teams and Primary Care Mental Health.
2.	Joint Mental Health Review Implementation Plan	Feb 2014/April 2015	Doncaster CCG - Andrea Butcher	Direct 3 workstreams to focus on improving access, improving and sustaining recovery and improving outcomes (inc delivering Parity of Esteem).
3.	Mental Health Inpatient Bed Review	2015/16	Doncaster CCG/RDASH	Following testing of the new Crisis Pathway Model will lead to a joint CCG and RDASH bed review. The review will consider demand, clinical need, effectiveness and operational and financial efficiency. It will determine benchmarks for expected and safe occupancy levels and minimum staffing levels.
	1	Imp	roving mental health	
1.	Multi-agency and service user Task & Finish Group	May 2014 – June 2015	Doncaster CCG – Andrea Butcher	Establish a Multi-agency and service user Task & Finish Group to redesign the crisis care pathway for Doncaster Crisis pathway/service review and redesign from Doncaster wide engagement across health and social care system and service users.
				Joint development of key features document and translation of that to a service specification for crisis service including, Street Triage, Triage Hub, Older People Mental Health and CAMHS.
2.	Review current care pathway	May 2014 – September 2015	Doncaster CCG – Andrea Butcher	Mapping of both emergency response services and treatment and discharge components to crisis pathway. Will lead to understanding of capacity and demand of service and relationship of service with community services. Will see the implementation of the new Crisis Pathway Model.
3.	Doncaster sign up to the Crisis Care Concordat	November 2014	Doncaster CCG – Andrea Butcher	Doncaster wide sign up to the delivery of the Crisis Care Concordat Shared Goals. Doncaster Health & Wellbeing Board are signatories and the accountable partnership group to monitor actions of the Local Plan.

Mental Health

Ensuring the right numbers of high quality staff						
1.	Caseload and staff levels, skill mix Review	2015/16	RDASH	Specification of new Crisis Pathway Model will include need for appropriate staffing levels within Crisis Services and where appropriate state specific levels expected. Specification will also highlight that the ability to flex up and down staffing levels and rapid access to extra staff when required is essential. This review will inform skill mix required to map across CAMHS/Adult MH/CAMHS		
2.	Training for Police	2015/16	S/Yorks Police	RDASH to work with S/York Police to provide mental health awareness training so that they can provide appropriate and sensitive response to the public/people who are experiencing a mental health crisis episode		
		Improved	partnership working	in Doncaster locality		
1.	MH Programme Governance Structure	From 2014 onwards	Doncaster CCG – Andrea Butcher	Establishment of governance structure incorporating clinical and managerial representatives from local authority, local MH trust, local Acute FT, CCG, SY Police, Ambulance Service and GPs.		
2.	Involvement of service user groups	From 2014 onwards	Doncaster CCG – Andrea Butcher	Assurance of service user voice on Task and Finish Group, frequent CCG attendance at Service User Group to Consultant on each step of the care pathway.		
3.	Crisis Care Concordat Declaration Sign Up	November 2014	Doncaster CCG - Andrea	Doncaster Crisis Care Declaration uploaded onto Crisis Care Concordat National website. Stakeholders of the Doncaster Health and Wellbeing Board have committed to jointly implement the Crisis Care Concordat Shared Goals <b>Completed</b>		
	2. Access to support before crisis point					
No.	Action	Timescale	Led By	Outcomes		
		Impro	ve access to suppor	t via primary care		
1.	Triage Hub/IAPT Mechanisms	2015/16	Doncaster CCG/RDASH	<ul> <li>Development and implementation of triage hub with call management and call co-ordination function/skilled staff in place to manage call.</li> <li>Design locality based Advice and Support Information Hubs to direct non-mental health crisis calls to i.e. Debt Management, Housing related support etc</li> </ul>		
2.	Review of Primary Care Mental Health Pathway and redesign of service	2014/15	Doncaster CCG/RDASH	<ul> <li>Development of a primary care pathway that will support people with mental health problems, better in the community</li> <li>Integrated support for people with anxiety and depression through</li> </ul>		

Mental Health

3.	MH Programme Communication and Engagement	From 2014 onwards	Doncaster CCG/RDASH	<ul> <li>the review of access to Improving Access to Psychological Therapies (IAPT)</li> <li>Through the development integrated support between primary and secondary care, people with enduring mental health problems to prevent escalation into crisis</li> <li>Physical health checks for people with mental health problems provided in primary care to ensure Parity of Esteem</li> <li>The new Crisis Pathway Model will be publicised by both Commissioner and Provider organisations. Commissioner will engage with the public and stakeholders providing updates on the progress of the Programme. The Provider will be expected to draw media attention to the implementation of the new Crisis Pathway Model and to highlight new contact numbers, access points for service users and potential referrers.</li> </ul>	
		Improve acce	ss to and experience	of mental health services	
1.	Re-commissioning of crisis accommodation	2015/16	Doncaster CCG	New configuration of crisis accommodation will see it staffed by people with lived experience of mental health services and support from the Home Treatment Service.	
2.	Re-specifying of Police Triage and Place of Safety Service (136)	2015/16	Doncaster CCG/SY Police	Police Triage and POS to be incorporated into the Police Emergency Response Service and defined timescales for assessments. Police will be given access to an on-call Consultant Psychiatrist/Mental Health assessment.	
3.	MH Programme Communication and Engagement	From 2014 onwards	Doncaster CCG/RDASH	See point 3 of Improve access to support via primary care.	
4.	Development and Implementation of Crisis Hub	2015/16	Doncaster CCG/RDASH	This will see access to crisis services via a 24/7 365 day a year single point of access. The Hub will bring together the DRI A&E OOH Triage Service, DMBC MH OOH Service and the Access Service including Crisis Resolution already being provided.	
3. Urgent and emergency access to crisis care					
No.	Action	Timescale	Led By	Outcomes	
			S emergency respons	se to mental health crisis	
1.	Street Triage Pilot presently being evaluated	November 2014 – February 2015	RDASH/S.Yorks Police	Evaluation to demonstrate effectiveness of Street Triage e.g. reduction in section 136 detentions, reduction in A&E attendances, increased access to appropriate mental health support.	

Mental Health

2.	Development of a model of liaison and diversion	December 2014 – March 2015	RDASH	<ul> <li>S.Yorks has been chosen as a pilot site for the next wave of Court Liaison &amp; Diversion Scheme for vulnerable people.</li> <li>L&amp;D Team to be operational in police custody suites by April 2015 ensuring all vulnerable people are identified and assessed within the criminal justice system.</li> </ul>	
3.	Telephone crisis line to be operational in the Doncaster 'Hub'	December 2014 – April 2015	RDASH/CCG	People will be able to access advice quickly when in a mental health crisis. Direct access for Police and YAS ensuring immediate response to emergency services Call management and care co-ordination for service users contacting the Hub that is mores responsive	
4.	Review of Crisis Pathway and redesign of service	2014/15	Doncaster CCG/RDASH	The redesign of the crisis pathway on Doncaster will see the implementation of a Crisis Hub which provides access to all crisis services via a 24/7 365 day a year single point of access. The redesign will also see the implementation of a Police Street Triage, benefits of this are listed in section 3 point 1.	
	·	Social service	es' contribution to me	ental health crisis services	
1.	Step-down beds & Integrated Care	2015/16	Doncaster CCG	To review community based provision of crisis beds in community Proposal/recommendations from the review in terms of redesign to be presented to commissioners in the first quarter of 2015/16 Plan to re-commission/re-provide community based support during 2015/15	
2.	Advice and Support function to be provided via the Crisis Hub	2015/16	RDASH/DMBC	The Crisis Hub will provide this service which has been specified to include access to social care support, peer led support groups, patient advocates, guided self-management, housing/accommodation and floating support and debt management advice and advocacy.	
3.	Crisis Assessment Service	2015/16	CCG/RDASH/DMBC	The Crisis Assessment Service will have a local operation policy between the CCG and DMBC and integrate with DMBC systems to deliver unified day to day management, joint staffing and joint operating protocols.	
	4. Improved quality of response when people are detained under Section 135 and 136 of the Mental Health Act 1983				
No.	Action	Timescale	Led By	Outcomes	
1.	Implementation of Street Triage Service		RDASH/SY Police	Following evaluation of the Street Triage Service, if found effective the Service will be rolled out Doncaster wide to aid reduction in section 136	

Mental Health

				detentions, reduction in A&E attendances and increased access to		
				appropriate mental health support.		
	Improved informat	ion and advice	available to front line	e staff to enable better response to individuals		
	136 Policy Assistance and					
1.	Conveyance Policy, MH					
	Legislative Committee					
2.	Inclusion of GP MH Champions					
3.	Improved access to Consultant Psychiatrist		RDASH	The new Crisis Pathway Model will allow for all services within it to have access to an on call Consultant Psychiatrist 24/7 who will provide telephone advice, triage and support.		
		Improve	d training and guidar	nce for police officers		
1.	Improved dual diagnosis					
		rvices for those	with co-existing me	ntal health and substance misuse issues		
1.	Working with Public Health and	2015/16	Health & Wellbeing	Doncaster Health & Wellbeing Board to act as the accountable partnership		
1.	Health and Wellbeing Board	2015/10	Board	who will monitor the Doncaster Crisis Care Concordat Action Plan.		
		5. Quali	ty of treatment and	care when in crisis		
No.	Action	Timescale	Led By	Outcomes		
	Review police use of places of safety under the Mental Health Act 1983 and results of local monitoring					
1.	Evaluation of Street Triage	January 2015	SY Police	See section 3 point 1.		
				Identification and review of people detained on a section 136 MHA taken		
2.	Review of recommendations from CQC 'A Safer Place to Be' Report	September 2015	RDASH/SY Police	into police custody. This will be part of the Street Triage Evaluation for Doncaster. Data analysis will be used to understand the patient flow between the		

Mental Health

				Triage Care and 136 Suite and/or diversion to other appropriate services	
				for management.	
		Servio	ce User/Patient safety	and safeguarding	
1.	To review local agreements ensuring that no-one with a mental disorder to be in police custody for longer than 24 hours	September 2014 – January 2015	RDASH	To review any incidents that occur where a person known to MH services is detained in police custody unnecessarily or for prolonged periods of time due to violent behaviour. Part of evaluation structure	
2.	To review use of police restraint for patients known to have mental health disorder with a view to joint training initiatives	January 2015	RDASH	Joint training developed and safe restraint practices used only when absolutely necessary.	
3.	Audit of the minutes from the MH Collaborative	Ongoing	RDASH	To ensure that service users and carers are aware of, and can contribute to crisis services and their development. Assurance provided that crisis services are responding to feedback from service users and carers and that developing services are known about.	
			Staff safet		
1.	Review of standard operating procedure for Police Triage	January - March 2015	RDASH/CCG/S.Yorks Police	To ensure staff safety is maintained through effective standard operating procedures.	
2.	MH Inpatient bed review	2015/16	Doncaster CCG/RDASH	See section 1 point 3	
3.	Doncaster Crisis Pathway Review	2014 – 2016	Doncaster CCG/RDASH/DMBC	In review of the whole crisis pathway the CCG will specify the services it incorporates which will involve consideration of capacity and demand of the services and staffing levels.	
	Primary care response				
1.	Active engagement with GP's		Doncaster CCG/RDASH/GP Community	Establish Primary Care Mental Health Workstream Task & Finish Group – Completed GP Clinical Lead for MH established and leading on Primary Care Mental Health Redesign Work Communication Plan established to: • Consult with GPs in localities regarding the pathway redesign	

Mental Health

2.	Review of Primary Care Mental Health Pathway and redesign of services including discharge	2015 – 2016	Doncaster CCG/RDASH	<ul> <li>Active engagement with the LMC to understand opportunities and impacts of any redesign on GP workload</li> <li>Monthly Newsletter/bulletin developed to keep GP community informed</li> <li>Review capacity and demand across IAPT Pathway to include service model in line with IAPT plus,</li> <li>Work with primary care and IAPT to ensure service is in line with locally agreed waiting times for access to treatment and nationally agreed targets for recovery</li> <li>In partnership with RDASH we will develop capacity around Primary care to support complex care management of patients who are currently in receipt of secondary care services to prevent people from going into crisis</li> <li>Develop model of support for practices and community to support people who are on SMI registers in primary care who are well and fit to discharge back into community and maintain recovery</li> <li>Work with social care to develop crisis prevention services/health and wellbeing hubs for access to advice and support re:         <ul> <li>debt management,</li> <li>housing related support, support</li> </ul> </li> </ul>		
				<ul> <li>Integrated family support</li> <li>Access to training/education and employment</li> </ul>		
	6. Recovery and staying well / preventing future crisis					
No.	Action	Timescale	Led By	Outcomes		
	Joint planning for prevention of crises					
1.	Addition of access to peer support for the Crisis Pathway	April 2015	RDASH	Integrate Peer Support along the crisis pathway – including being part of the wellness and recovery care plan process.		
2.	Addition of WRAP to the liaison and diversion services	April 2015	RDASH	Wellness, recovery action planning (WRAP) will be a tool used for people in mental health crisis to support their recovery and independence.		
3.	All patients to be given a crisis	September	RDASH	All patients in contact with the L&D service will have a crisis plan with key		

Mental Health

Appendix B: Doncaster Health & Wellbeing Board Action plan to enable delivery of shared goals of The Mental Health Crisis Care Concordat

contingency plan by the liaison 2015 care co-ordinator contact details and actions to take in a crisis situation. and diversion service. The CCG have taken a joint approach in collaboration with DMBC, RDASH, SY Police and Service Users to review and redesign the crisis pathway in Doncaster. Mental Health Development Further development of community based support to ensure that people 2014 – 2016 Doncaster CCG 4. remain well - lifestyle support (benefits advice, housing support, debt Programme management) including Job coaching and access to support services for education/training and employment.