MENTAL HEALTH SERVICE DELIVERY IN HILLINGDON

Board Member	Graeme Caul, Managing Director, CNWL
Organisation	Central and North West London (CNWL) & Hillingdon Health and Care Partners (HHCP)
Officer Contact(s)	Vanessa Odlin, Director for Hillingdon & Mental Health, CNWL
Papers with report	None
1. HEADLINES	
Summary	This report provides the Board with the latest update on the progress towards aligning Hillingdon adult mental health services, with the NHS Long Term Plan.
Contribution to our strategies	This contributes to the Health & Wellbeing Strategy, Hillingdon Clinical Commissioning Group (CCG) Operating Plan and individual organisational strategies for Hillingdon Health and Care Partners (HHCP).
Financial Cost	Not applicable
Relevant Ward(s)	All

RECOMMENDATION

That the Health and Wellbeing Board notes the report.

INFORMATION

1. Executive Summary

The aim of this paper is to update the Health & Wellbeing Board on the current developments in aligning Hillingdon adult mental health services with the NHS Long Term Plan. The paper highlights key areas of development over the current financial year as well as laying out ambitions for the next twelve months.

CNWL is using Long Term Plan and locality investment to take forward:

- New First Response Service offering 24/7 assessment to our residents, wherever they are in the community
- "The Cove" crisis haven for Hillingdon population, 365 days a year for non-clinical evening offer
- If a bed is required, a new Central Flow Hub will find a suitable bed in a timely way and is supporting the elimination of the use of beds out of area through external providers (Out of area placements – OAPs) via improved flow management
- Inpatient admission is supported by new investment embedding Trauma Informed Approach and the See, Think, Act Framework on wards

- Develop and improve our Home Treatment Team (HTT) model
- Expansion of Primary Care Mental Health Teams
- Development of a Complex Emotional Needs Service (CENS)
- Enhance the older adult mental health services through the community framework
- Develop a 0-25 pathway
- Enhance the High Intensity User (HIU) Service

Working with the Hillingdon Health and Care Partners (HHCP) CNWL is leading on the transformation of a further three key areas:

- Development of the One Stop Shop for easy access to mental health support and wellbeing services for the people of Hillingdon
- Enhancing the care home support offer in Hillingdon
- Developing Complex Rehabilitation to deliver more support out of hospital and in a least restrictive environment
- Emergency & Urgent Access: Introduce new processes across the system, to support adults with a mental health crisis and in turn, avoid admission to an acute inpatient unit
- Patient Flow and Discharges to ensure we are able to treat people in the least restrictive environment

2. Key Matters for the Board

The board is asked to note the strategy and approach for the future of mental health services in Hillingdon, which is outlined in this paper.

3. Background and Overview

Proposal for the future of the Mental Health Services in Hillingdon:

The key drivers for this approach:

- National and Regional Policy: Supporting the delivery of the NHS Long Term Plan & Five Year Forward View for Mental Health which centres on local community provision of services to support people at home as well as aligning with standards for providing care in a therapeutic and fit-for-purpose environment for all patients.
- Local Vision and Clinical Objectives: Aligning our estates strategy/portfolio with existing transformation work and priorities to provide care in the least restrictive environments and move care closer to home in the community.
- Quality of the Estate: Ensuring the best provision for our local patients in a therapeutic environment that is fit-for-purpose.

4. National and Regional Policy

CNWL has major transformation work underway to deliver against national expectations whilst responding to local needs in Hillingdon

The Independent Commission on Acute Adult Psychiatric Care, established and supported by the Royal College of Psychiatrists, reported that the current reliance on acute beds means that it is often difficult for people to access care near home and that this is exacerbated by a lack of community services, particularly Crisis Response and Home Treatment Teams (CRHTTs).

The <u>NHS Long Term Plan</u> also supports the shifting of care from inpatient to community-based settings where clinically possible and appropriate as laid out in several objectives:

 New and integrated models of primary and community mental health care will support adults and older adults with severe mental illnesses [will give them] greater choice and

- control over their care, and support them to live well in their communities.
- The NHS will ensure that a 24/7 community-based mental health crisis response for adults and older adults is available across England by 2020/21. Services will be resourced to offer intensive home treatment as an alternative to an acute inpatient admission.
- We will also increase alternative forms of provision for those in crisis. Sanctuaries, safe havens and crisis cafes provide a more suitable alternative to A&E for many people experiencing mental health crisis

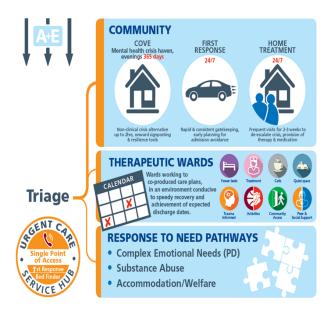
5. Local Vision and Clinical Objectives

Looking forward and in line with these national asks, locally we recognise that care for our local people should be provided in the least restrictive setting and closer to home, by shifting provision to a more community-based offer. This includes expanding existing, and developing new, provision available within the community to ensure care, support and interventions are available and accessible locally.

CNWL is currently investing in and delivering transformation work in the areas below, with the aim to develop further to provide the best possible care for Hillingdon residents. This approach spans mental health services across adults and older adults services.

- Moving care closer to home wherever clinically possible and appropriate
- Working with local VCSE, facilitating a broader offer to our population
- Working to prevent admissions unless no clinical alternative
- If admission is needed, it will be purposeful and in a therapeutic environment with dedicated identified beds within the NWL system for Hillingdon patients
- Building on existing rehabilitation services to offer step-down care from an acute inpatient setting. The model offers service users with ongoing but less complex rehabilitation needs a short-term (8-12 week) admission at a Community Rehabilitation Unit prior to moving to supported or independent living with community services support

Figure 1. Our Care Closer to Home Vision & Model Overview



6. CNWL is using Long Term Plan and locality investment to take forward:

New First Response Service offering 24/7 assessment to our residents, wherever they
are in the community which enables guicker access to support "The Cove" crisis haven for

- Hillingdon population, 365 days a year for non-clinical evening offer (as above)
- If a bed is required, a new Central Flow Hub will find a suitable bed in a timely way and is supporting the elimination of the use of beds out of area through external providers (Out of area placements – OAPs) via improved flow management
- Inpatient admission is supported by new investment embedding Trauma Informed Approach and the See, Think, Act Framework on wards. This will support the clinicians' understanding of the patient's life, emotions and psychology to shape and influence safe individualised co-produced care and treatment within the hospital.
- Develop and improve our **Home Treatment Team** (HTT) model to:
 - Refocus function to ensure fidelity to a recommended model that offers a genuine alternative to admission, 24/7, 365 days a year
 - Make HTT responsible for staying within their local bed allocations and enabling HTT to in-reach to wards to facilitate early discharge
- Expansion of Primary Care: The Primary Care Mental Health Team has been expanded
 to enable alignment to the PCNs. The team is made up of Registered Mental Health
 Nurses (RMNS), senior support workers (SSW) and Occupational Therapists (OTs). The
 team will take over all initial assessments for routine non-complex mental health referrals
 (this means that the patients' needs as such require an assessment within 28 days (20
 working days)
- Complex Emotional Needs Service (CENS): It has been increasingly recognised that
 patients who have a primary diagnosis of Personality Disorder do not always receive the
 right care and treatment from mental health services. As a result, Hillingdon Mental Health
 Services are moving forward with a new model of care. This will include individual and
 group work; psychological therapies tailored to specific needs and are drawn from
 empirical research and an increasing evidence base
- **High Intensity Users:** To build on the High Intensity Users (HIU) service in Hillingdon to support people who are presenting to A&E on multiple occasions
- Older Adults Mental Health: There will be investment in partnership working for the last quarter of 20/21 and further investment in 21/22 for the OA. OAMH services to PCNs, work more collaboratively with the VCSE sector to enhance the offer for older people
- 0-25 pathway: Development of an integrated CYP (0-25) Early Intervention and Multi-Agency care and support model. The team expanded and developed the model to deliver an integrated early intervention response across the whole borough to meet the new needs and potential gaps in provision. This included extending both Kooth and Think Ninja services to support the model, which has now been up and running since May, with funding secured for the model until December 2020

7. CNWL and Hillingdon Health Care Partners

Working with the Hillingdon Health Care Partners (HHCP) CNWL is leading on the transformation of a further three key areas:

- Development of a One Stop Shop with partners in 3rd sector and local authority to create an Open Access service for Hillingdon residents
- Enhancing the care home support offer in Hillingdon through investment from the GP DES (Directed Enhanced Services) funding. CNWL will be working in partnership with the Care Home Support teams, to include both Learning Disability and Mental Health Homes. A key aim of this initiative is to provide appropriate care and management in the care home setting to avoid unnecessary admissions and attendances at A&E.
- Developing Complex Rehabilitation:
 - Transform Open Rehab to be able to offer complex community rehab (not sure it's clear what this means)
 - Work with LA to deliver complex community rehab and reduce ECRs for complex rehab

- Remodel and Re-specify rehab services shift from ward based, to community based rehab services – potentially phasing parallel step-up crisis and step-down recovery provision by the third sector to prevent long length of stay on wards
- Emergency & Urgent Access: Introduce new processes across the system, to support
 adults with a mental health crisis and in turn, avoid admission to an acute inpatient unit
 focusing on
 - Out of hours case management
 - Increasing use of the crisis coves
- Patient Flow and Discharges to ensure we are able to treat people in the least restrictive
 environment. We are planning a focussed piece of mental health pathway work as well as
 daily operational calls with system partners to be responsive and ensure timely discharges.

8. Community Estates Transformation

- On Wednesday 9th October 2019, London Borough of Hillingdon (LB Hillingdon) served CNWL, notice to terminate the Section 75 (S75) Partnership Agreement for Adult Mental Health Services in Hillingdon. This is a formal notice which will took effect on 10th April 2020.
- This presented an opportunity to review where and how the mental health services in the borough are delivered. Since October 2019, there has been a concerted effort to transform community mental health services within the borough. This includes the development of a 'hub and spoke model' to support the integration of physical and mental health.
- Mill House: Initial assessments and high-risk patients will be seen at Mill House. Mill
 House will also have space for group sessions including a kitchen area for occupational
 therapy, an area for music therapy and the new 'Complex Needs' provision within
 psychology. The long-term plan is for Mental Health services to run from a North and
 South hub in the borough.
- Uxbridge Health Centre: Running the Clozapine / Depo clinic from Uxbridge Health Centre
 and clinics for follow up low risk patients at community sites. Building work is required at
 Uxbridge Health Centre and it is anticipated that this will be complete for January 2021.

9. Considerations and Next Steps

CNWL seeks close working and support from membership of the Health and Wellbeing Board as we move forward with the described approach. This will include a continuation of the transformation work outlined above and close working with the GP confederation, Primary Care Networks, London Borough of Hillingdon, The Hillingdon Hospital, Hillingdon Health Care Partners and Hillingdon CCG as we move towards formal public consultation.