Health Scrutiny and Performance Panel | **Agenda Item No.**

December 2012 | **6.**

Title of the Report – Update on Service Transformation Plans for Dudley and Walsall Mental Health Partnership NHS Trust

Ward(s) All

Portfolios: All

Executive Summary:

This report provides an update to the Panel on the Trust's Service Transformation Plans. The focus of the report is an update on the 3 new services that were implemented in 2011/12, namely Early Access Service (EAS), Community Recovery Service (CRS) and Transfer and Transition Team (TTT) and their early evaluation. An update is also provided on progress to date with plans for 2012/13.

Reason for scrutiny:

The Trust is now in its second year of a wide-ranging and ambitious programme of change within mental health services which will both improve quality and deliver financial efficiencies.

The Service Transformation Programme is one of the most significant strategic priorities for the Trust. At the present time the Trust is in the process of evaluating the year 1 changes (2011/12) and implementing the year 2 changes (2012/13).

Thus far, none of the developments that have been made are considered to be substantial variations in service and therefore the Trust has updated both Walsall and Dudley Scrutiny Panels at regular intervals. It has been agreed with Panel that regular reports will continue as a part of the Scrutiny Work Programme for 2012/13.

Recommendations:

That:

1. This report is received for information.

Background papers:

None

Resource and legal considerations:

Plans have been developed and implemented in partnership with both Walsall and

Dudley Borough Councils where appropriate. However, this was prior to the most recent round of saving requirements identified by Walsall Council. The impact of these savings on the Trust and its services are still being worked through in partnership with the Council.

Citizen impact:

Service Transformation plans have simplified referral pathways for service users and stakeholders such as GPs. Whilst services are delivered by a fewer number of teams and some teams have now relocated to enable teams to be based together, services continue to be delivered flexibly to ensure service users can access services in a variety of locations across the borough including their own homes.

Environmental impact:

Potential for reduced carbon footprint as staff travelling reduced and estates developing more energy efficient accommodation.

Performance management:

No negative impact on Council's performance anticipated as a result of the Trust's plans. However delivering services within new model of recovery oriented services should assist in delivering the personalisation agenda.

Equality Implications:

Has an Equality Impact Assessment been carried out? Yes
If yes, summarise the key findings here.
No negative impact identified.

Consultation:

The Trust has an ongoing engagement programme with its stakeholders in relation to its service transformation programme. Engagement events include staff, service users, carers, GPs, commissioners and the public. Events include roadshows, engagement events, workshops, as well as regular updates at the Mental Health Programme Board (joint commissioner and provider forum with the Trust, Councils, and PCTs). A number of developments are progressed in partnership with the Council and commissioners. Formal consultation has not been required for the service changes implemented at this stage although may be required for plans at a later stage.

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1. Report

The Trust provides both primary and secondary care mental health services. Primary care services are for low to moderate mental health issues with low risk. Secondary care services are for moderate to severe mental health issues.

Prior to service transformation both services had multiple referral pathways into them which service users and referrers found complex and difficult to navigate. A single point of entry into both primary care and secondary care has been developed as a part of the Trust's service transformation programme.

1.1 Primary Care

Previously in Walsall there was the primary care mental health team and also primary care psychology who both took direct referrals. Additional investment by commissioners to develop IAPT (Improving Access to Psychological Therapies) was based on a new service model which brought all 3 aspects together into one team with one referral pathway. This has now been in place for 2 years and is working successfully. However during that time period the service has seen an increase in referrals of around 30% which is currently under discussion with commissioners. A similar model was also introduced in Dudley earlier this year.

1.2 Secondary Care

Adult secondary care services in Walsall were delivered predominantly by 4 Community Mental Health Teams (5 in the Dudley borough), an Assertive Outreach Team, Medical Out Patients and Psychology. As well as multiple referral routes into the service, there were gaps, duplications, and varying standards. The new model of service delivery for adults sought to address this and during 2011/12 transformed the teams into the following new services: -

1.2.1 Early Access Service (EAS)

- The establishment of the EAS means that there is now a single point of entry into secondary care mental health services i.e. if a service user has a moderate to severe mental disorder.
- The team is currently based in Glebe Street, Walsall.
- Takes urgent and routine referrals for mental health assessment.
- Operating hours are Monday to Friday 9-5.
- There has been no change to the out of hours service for urgent/crisis referrals which are still seen by the Crisis Resolution/Home Treatment team.
- Comprehensive assessment is offered by 'paired' professionals which includes psychiatrists, social workers and nurses.
- If treatment within secondary care services is indicated then EAS facilitate entry into the Community Recovery Service or acute services if in-patient admission is indicated.

1.2.2 Community Recovery Service

- Two teams established, one based at Mossley in Bloxwich and one team currently based at Anchor Meadow in Aldridge.
- Take referrals for adults from Early Access Service, Crisis Resolution/Home Treatment Team and in-patients at Dorothy Pattison Hospital.
- Provide evidence based treatment and interventions for a range of mental health disorders usually considered to be severe and enduring.

- Works in a recovery model.

1.2.3 Transfer and Transition Team

- Time limited service established to provide step down for patients who have been in the service for some time and require a more enhanced discharge back to primary care.
- Work closely with service users, carers, GPs, mental health team, to help facilitate service users' discharge back to primary care. These are service users who have finished their treatment and are mentally stable. There may be issues around benefits, building up social networks and primary care issues that need to be addressed as part of pre-discharge preparation.
- The team is currently based at Ida Road, Walsall.

2.0 Six month review of quality outcomes

The Trust has undertaken a 'Hear and Now Quality Review' (HNQR) of both the Early Access Service and the Community Recovery Service. A HNQR will also be scheduled for the Transfer and Transition Team. These reviews provide a rich source of feedback and, coupled with service user experience feedback, will become standard sources of ensuring new services are embedded in the future.

The HNQRs that have taken place have been conducted by a multi disciplinary clinically led team and included: -

- Case Note Audit
- Clinical/Operational Management Process Audit
- Core Quality Standards Audit
- Interface Audit

The standards measured include: -

- Operational Policy statements
- Care Quality Commission standards
- Professional record keeping standards.

The reviews have revealed a number of areas of good practice but as you would expect during a period of change, a number of challenges have also been identified that the services are facing. A detailed action plan has been developed and implemented and provides a cohesive set of areas for potential quality improvement.

In addition to the HNQR the Trust has also reviewed several other sources of data to explore any potential negative impact as a result of the first year of the Trust's Service Transformation programme.

- ***Incidents***
  It was noted that the number of reported incidents remains fairly constant although some are related to service transformation and relate to issues such as process, pathways and communication which have all been addressed within the HNQR action plan.
- ***Formal complaints and informal issues***
  A small number of complaints and issues were raised which relate to service transformation, some of which weren't upheld and all of which

were resolved. Some issues related to anxieties about the changes while some related to process issues and communication which have been addressed.

- ***Patient satisfaction survey – Transfer & Transition Team (TTT)***
  A survey was undertaken in July/August 2012 of service users who were coming up to discharge from the Trust via the TTT. The purpose was to gain feedback on service user experience. Overall the results gave a good picture of what is working well within the team and some areas where the team can focus on for improvements. Service users responded positively to being treated with dignity and respect. Other positive areas included receiving support from TTT with caring responsibilities. Areas for improvement include carer involvement and receiving support in getting help with financial advice/benefits.
- ***Patient experience – Community Recovery Service (CRS)***
  A piece of work has been undertaken with service users in CRS in an attempt to capture the impact of ST changes. Of the responses received only 1 outlined dissatisfaction that could be related to service transformation.
- ***Key Performance Indicators (KPI)***
  The Trust has developed a new set of indicators for the 3 new teams as follows: -
  - EAS effective and appropriate professional referrals
  - EAS effective initial assessment
  - EAS timely initial assessment – routine
  - EAS timely initial assessment – urgent
  - EAS effective assessment
  - EAS improving productivity through a single point of entry into secondary mental health services.
  - CRS timely transition to treatment after initial assessment
  - CRS recovery focused care planning
  - CRS effective and timely reviews
  - CRS effective and sustained recovery
  - TT recovery focused care planning.

  The development of these KPIs is still at an early stage and work continues to develop these so that the information can be captured electronically, baseline data can be agreed and then thresholds can be set.

Throughout service transformation safety has been, and remains, a top priority for the Trust and the Trust is assured that safety has been maintained throughout. In relation to quality the evidence is inconclusive at this stage as services are not embedded yet so the improvement of quality, which includes service user experience, remains a key priority as services are embedded.

3.0 Service Transformation for 2012/13

Service Transformation for this current year has been on a much smaller scale than the first year with three main areas of change: -

1) Substance Misuse Service – this relates to changes in the Dudley borough and has no impact on Walsall services.

2) Criminal Justice Service – currently provided in both boroughs by 2 separate small teams, this year will see the development of a pan trust team with a single management structure which will ensure consistency of standards and approach throughout.
3) Day Services – the title of day services is an historic one as these services actually provide therapeutic interventions to service users. To date they have operated separately to other secondary care provision. The Trust is now considering how best to integrate these services into the new Community Recovery Service. This will ensure consistency of approach and standards as well as equality of access across the borough to therapies.

4.0 Summary

- Year 1 service transformation delivered but services need to embed. KPIs will be developed and implemented. Quality will be closely monitored.
- Year 2 changes minimal but progressing well.