

Lincolnshire Mental Health Crisis Care Concordat

Actions to enable delivery of shared goals

Version Control	
DRAFT V2 - 11/02/15	DRAFT V4.3 26/02/15
DRAFT V3 - 17/02/15	FINAL DRAFT 26/02/15
DRAFT V4 – 18/02/15	
DRAFT 4.1 – 19/02/15	
DRAFT 4.2 – 24/02/15	



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INTRODUCTION

Our Lincolnshire Mental Health Crisis Care Declaration is a local agreement between services and agencies involved in the care and support of people in crisis. It sets out how we will work together better to make sure that the people of Lincolnshire get the help they need when they are having a mental health crisis.

In December 2014, local bodies involved in health, policing, social care, local government and the third sector came together and signed the **declaration**. This action plan is about how we, as signatories, can work together to deliver a high quality response when people of all ages with mental health problems urgently need help. It sets out what we need to do to enable us to collectively deliver on our commitments made in our declaration.

It focuses on four main areas but what do they mean to you?

Access to support before crisis point

Is about making sure you can get help 24 hours a day and that when you ask for help, you are taken seriously.

Urgent and emergency access to crisis care

Is about making sure that if you have a mental health crisis it is treated with the same urgency as a physical health emergency.

Quality of treatment and care when in crisis

Is about making sure that you are treated with dignity and respect, in a therapeutic environment.

Recovery and staying well

Is about preventing future crises by making sure you are referred to appropriate services.

Although our action plan focuses on acute mental health crises, it also includes a section on prevention and intervention. We will work together, as local organisations, to prevent crises happening whenever possible through prevention and early intervention.

This action plan is a high level overarching plan which focuses on areas of joint delivery or commissioning. Beneath it we have more detailed plans from Lincolnshire Police, EMAS, Lincolnshire County Council, the four Clinical Commissioning Groups (CCG's) and our mental health provider Lincolnshire NHS Partnership Foundation Trust. Other organisational plans are also in development.



Lincolnshire already has a large number of Mental Health services and initiatives in place which form our urgent care pathway such as;

- Single Point of Access for Mental Health Services
- Crisis Resolution Home Treatment Service
- Crisis Houses
- Section 136 Suite
- ISA with Lincolnshire Police regarding Diversion and Liaison
- MOU with Police Negotiators
- Street Triage Car
- Older Adults Liaison Service (Acute Hospital Based)
- CAMHS Self Harm and Liaison Service
- Self- referral to talking therapies (IAPT)
- Emergency Duty Social Work Team
- Fast track re-referral process
- Carers Assessment
- Carers Emergency Response Plan
- Carers Short Break Scheme
- Managed Care Network and SHINE Network

This action plan is about improving those services and addressing the gaps by providing an effective pathway to improve crisis care responses.

The partner agencies within the Lincolnshire Concordat would like to express their thanks to service users from the SHINE Network and Making Space for providing valuable input to the actions identified within this plan.



COMMISSIONING TO ALLOW EARLIER INTERVENTION AND RESPONSIVE CRISIS SERVICES

No	Action	Timescale	Led By	Outcomes
1.1	Clear waiting time limits in line with National Standards will be put into commissioned services	Ongoing	Mental Health Commissioning Leads	Prevention of avoidable crisis and equality of access
1.2	We will complete a gap analysis between current provision and the declaration vision to inform actions and focus priority improvements	March 2015	Concordat Steering Group	Focussed commissioning on areas needing improvement
1.3	We will review existing mental health training across all agencies signed up to the declaration to develop and deliver joint training where the need is identified.	June 2015	Concordat Steering Group	A training needs analysis will inform the development of the programme. Longer term all staff will have the right skills and training to respond to mental health crises appropriately
1.4	Commission a full Mental Health Liaison team on acute hospital sites	Sept 2015	Mental Health Commissioning Leads	People know they will receive the appropriate treatment in hospital sites
1.5	Link with Lincolnshire Suicide Prevention Forum to identify Suicide at risk groups to inform commissioning cycle	April 201 5	Public Health with Mental Health Commissioning Leads British Transport Police	Those groups known to be at higher risk of suicide will be identified, such as people in the care of mental health services and criminal justice services.
1.6	Review Cambridgeshire	March 2016	Public Health	Reduced suicides



	STOP Suicide Campaign.		with	in Lincolnshire
	Use learning to		Mental Health	
	implement in		Commissioning	
	Lincolnshire.		Leads	
			British	
			Transport	
			Police	
1.7	Increase input to JSNA on mental health crisis to show demographic representation specifically with regard to protected	Ongoing	Mental Health Commissioning Leads With	Commissioners have robust data with which to commission services
	equality characteristics		Public Health	
1.8	Publish a full Mental			Commissioners
	Health Needs Assessment		5 11: 11: 11	have robust data
	for Lincolnshire	June 2015	Public Health	with which to commission
				services
1.9	Complete a green light			Mental Health
1.9	review on all crisis		LD & Autism	Crisis services will
	services		Commissioning	make reasonable
	Sel vices	Oct 2015	Lead	adjustments to
		0012015	With	support people
			LPFT	with LD and
				Autism
1.10	Commission Carers Family		Adult Social	Carers receive the
	Support Network Service	Oct 2015	Care	support they need
1.11	Commission an intensive			Children and
	community assessment and treatment service for children and young people (CAMHs Tier 3+)	Dec 2015	LCC Children's Services Commissioning	young people with mental health needs are supported in the community

- People in crisis referred to mental health secondary care services are seen with 4 hours
- > Aspire to 0% Suicides in Lincolnshire
- > 85% of non- mental health staff to have received training by December 2016



ACCESS TO SUPPORT BEFORE CRISIS POINT

No	Action	Timescale	Led By	Outcomes
2.1	Monitor the implementation and effectiveness of the National Criminal Justice and Liaison Service pilot. Use lessons learnt to inform the development of local services.	Bi monthly	Lincolnshire Police	There will be access to liaison and diversion services for people with mental health problems who have been arrested for a criminal offence, and are in police custody or going through court proceedings
2.2	Develop partnerships with voluntary sector providers and service users to understand and respond to inequalities in access to mental health services	Ongoing	ASC With CCG Mental Health Leads	Partnership groups will be established parity of esteem for everyone with a mental health need
2.3	Develop support for carers in line with changes to the Care Act	From March 2015 onwards	ASC with Other providers	People will feel protected when their circumstances make them vulnerable
2.4	Promote early self- referrals to talking therapies (IAPT) to avoid crisis	Ongoing	LPFT	People receive support at an early stage to improve their health and wellbeing
2.5	Establish a baseline of advice and information services available to support good mental health	July 2015	Concordat Steering Group	Directory of services that promote good mental health

- > Increase the number of self-referrals to talking therapies
- Publish a directory of services that promote good mental health and wellbeing by December 2015



URGENT AND EMERGENCY ACCESS TO CRISIS CARE

No	Action	Timescale	Led By	Outcomes
3.1	Review & create clear pathways and protocols for referring to mental health services via SPA and NHS 111	Oct 2015	LPFT with CCG Mental Health Leads	People know who to contact to access Mental Health Services
3.2	Scope the provision of a free 24/7 helpline number for people in mental health crisis	Oct 2015	Mental Health Commissioning Leads	People in crisis can receive help at anytime
3.3	Establish baseline of access to psychological therapies for children and young people and set trajectory for improvement.	Oct 2015	LCC Children's Services	Children and young people have better access to talking therapies to prevent crisis occurring.
3.4	Conduct a full review of S136 Health Based Place of Safety to include Roles of partner agencies Process Provision of beds Minimum Staffing Diversion before Detention Pathways Intoxication Conveyance Training Cultural change CQC Compliance	Sept 2015	Mental Health Commissioning Leads with Acute Services Lincolnshire Police EMAS AMHPS Louth & District Medical Services British Transport Police	The efficiency, response and running of the suite is appropriate to the needs of the partners and people of Lincolnshire
3.5	Develop agreed local protocols between key partners around \$ 135 MHA warrants to facilitate partnership working with a 'no surprises' approach	Sept 2015	Lincolnshire Police With AMHPs EMAS Magistrates Court	People subject to this are dealt with in a professional joined up approach



	 Criteria for attendance Conveyance Use of force 			
3.6	Develop crisis services for under 18's, including 136 facility.	Sept 2015	LCC Children's Commissioning With LPFT	Equality of access for all ages
3.7	Develop training and education about existing policies, powers and procedures to all partners.	Sept 2015	Concordat Steering Group	All staff trained to enable a rapid response to people in crisis
3.8	Establish peak demand times and target triage car intelligently to promote liaison and diversion.	May 2015	MH Commissioning Leads with EMAS LPFT	People in crisis are helped at the right time, in the right place, by the right services
3.9	Review crisis house criteria and policies.	Oct 2015	MH Commissioning Lead	An effective, safe alternative to admission
3.10	Complete a review of crisis and home treatment services	July 2015	MH Commissioning Leads with LPFT	People in crisis receive quality & effective services

- > All Section 136 requests for transport are responded to within 30 minutes
- > A reduction in use of Section 136 police powers
- > A reduction in the use of police cells solely as a place of safety
- Crisis resolution and home treatment teams are accessible 24 hours a day, 7 days a week, regardless of diagnosis
- > Service users and GP's have access to a local 24 hour helpline staffed by mental health and social care professionals
- > Increase in the use of crisis houses as an alternative to admission



QUALITY OF TREATMENT AND CARE WHEN IN CRISIS

No	Action	Timescale	Led By	Outcomes
4.1	Ensure all agencies have a policy or procedure to identify and involve carers at the point of crisis where possible.	Nov 2015	Concordat Steering Group	Improved understanding of an individual's needs. Carers are recognised and valued as experts
4.2	Further develop referral pathways and improved communication strategies to enable all carers to be offered a Carers Assessment	Nov 2015	LCC Adult Social Care with Other Providers	Carers receive the support they need to continue with the caring role. This aligns to the Care Act – April 2015
4.3	Develop Carer & Service User learning, self- management & self- referral programmes	Dec 2015	Carers Partnership Making Space Lincolnshire MH Networks & Other providers	Improved mental well- being in order to enable carers and individuals to self-manage symptoms preventing carer breakdown.
4.4	Enhance & further develop community mentoring support for people with a Mental Illness and their Carers, to support low level need	Dec 2015	Carers Partnership Making Space Lincolnshire MH Networks & Other providers	Emotional support and understanding available when needed to improve wellbeing.
4.5	Develop robust monitoring and evaluation systems across all	Jan 2016	MH Commissioning	Systems are in place for



agencies to monitor and	Leads	review,
improve the quality of care	With	regulation and
given and response received to	LPFT	reporting
people in crisis		within the local
		mental health
		provider
		services

- > At least a 50% increase in the satisfaction rate of people using mental health services
- > 70% of carers report feeling more involved by services





RECOVERY, STAYING WELL and PREVENTING FUTURE CRISES

No	Action	Timescale	Led By	Outcomes
5.1	Promotion and awareness campaign of Lincolnshire's Mental Health Networks: Shine Managed Care Network Dementia Network	Review Feb 2016	SHINE and LPFT	A range of preventative services and support available to people with a mental health illness
5.2	Promote "12 steps to mental health" in line with the Public Health Campaign	Ongoing	Public Health	Increased awareness of methods for self- care
5.3	Promote the 'time to change' anti-stigma campaign across Lincolnshire.	Rolling Programme Annual review	Concordat Steering Group	Improved community acceptance and support
5.4	Scope the development & roll-out a health passport 'all about me' to all those with a mental health illness.	Sept 2015	All About ME Steering group	People have a better understanding of an individual's needs and wishes
5.5	Scope the current market position for the role of the voluntary and community sector in mental health crisis recovery	Dec 2015	Specialist Adult Services Joint Commissioning Team	All sectors are considered in crisis recovery plans
5.7	Complete an evaluation of the Wellbeing Network	May 2016	Public Health	Clear understanding of the impact of the network and what works for people with Mental Health needs

- > Increase in the number of self-help groups supported by the mental health networks
- > At least 5000 health passports distributed by March 2016
- ➤ 30% reduction in the number of people with a mental illness needing a crisis intervention service by March 2018