

Agenda Item 7

		THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE	
Boston Borough Council	East Lindsey District Council	City of Lincoln Council	Lincolnshire County Council
North Kesteven District Council	South Holland District Council	South Kesteven District Council	West Lindsey District Council

Open Report on behalf of Lincolnshire Sustainability and Transformation Partnership

Report to	Health Scrutiny Committee for Lincolnshire
Date:	10 July 2019
Subject:	Mental Health, Learning Disability and Autism Services – Case for Change and Emerging Options

Summary:

This report presents the drivers for change in mental health, learning disability and autism community services and links this to the feedback received from the first round of the Lincolnshire Healthy Conversations 2019 (HC 2019) with the public. It gives feedback received at the events that relates to mental health, learning disability and autism services, care and treatment. The appendices attached give the full feedback and responses.

The feedback was generally positive and people were open about good experiences of services.

The suggestions that were made in feedback from the public and which are receiving further attention/responded to on the website are: -

- Access and responsiveness of services including availability of services for carers, people and families living with autism, Child and Adolescent Mental Health services, Dementia and Crisis Care;
- Professionals sharing information or professionals knowing what services are available for people with mental health problems;
- Transitions from children's services to adult services;
- Access to information and support including information on-line.

Actions Required:

Committee members are asked to note and comment on the report.

1. Background

Drivers for change in mental health, learning disability and autism services

Lincolnshire people who require mental health and learning disability services benefit from having good services in place, but there is more to do. The ambition is to ensure that the vision of “enabling people to live well in their communities” is delivered.

The drivers are to deliver the objectives of the NHS Long Term Plan (2019) and the Mental Health Five Year Forward View (2016) as well as drive forward the collective ambition for improving mental health in social care and primary care in partnership. This is as we move to be an Integrated Care System. There are four main dimensions to LPFT services as follows: -

Dimension	Examples and how we are doing currently
1. Prevention and support in neighbourhoods / communities	<ul style="list-style-type: none"> The activities in the Lincolnshire Managed Care Network – for example social events for people living with dementia and their carers – which help people to stay well and live well with their physical and mental health.
	<ul style="list-style-type: none"> We do some of this, but we need to partner together to scale this up.
2. Early intervention and responding quickly	<ul style="list-style-type: none"> A person with a learning disability who we have supported in the past but who may be experiencing a change that affects their mental health and who needs a prompt response by an expert clinical team. If this is done quickly (and there is a quick response to that person’s needs) it can prevent admission and deterioration.
	<ul style="list-style-type: none"> We have some good examples of where we do this – for example the community learning disability 24/7 team. We are continuing to transform all of our services to provide access in communities and consistency across our geography.
3. Care and treatment for people with serious mental health problems	<ul style="list-style-type: none"> A person who is so poorly with their mental health that they are in crisis, need crisis team support immediately and may need to be admitted to a bed, for example at Peter Hodgkinson Centre, Lincoln or the Department of Psychiatry at Boston Pilgrim Hospital.
	<ul style="list-style-type: none"> We do this well, but the teams are stretched with lots of patients needing care. There needs to be more investment in crisis services (through the crisis care concordat); community mental health services to improve access and wards (some of these are not fit for purpose and need urgent capital investment or change to configuration).

4. Highly specialist services for the most complex mental health problems	<ul style="list-style-type: none"> • A person who is so ill they need admission to or treatment from a highly specialist team or service such as a forensic team or low secure admission (to Ash Villa, Sleaford, the Francis Willis Unit, Lincoln, or the Psychiatric Intensive Care Unit, Lincoln).
	<ul style="list-style-type: none"> • We have some new services but still have Lincolnshire people travelling out of county for their care who we need to bring closer to home. Some of these services may be on a geographical footprint such as East Midlands because of the specialist nature of them, for example beds for young people with complex eating disorders.

Mental health, learning disability and autism services, care and treatment has been presented to the Committee as separate items three times in the last eighteen months. Therefore this paper whilst covering all four dimensions, focuses on the first dimension of the table above – prevention and support in neighbourhoods and communities – exploring some of the drivers and opportunities for change over the next two years. This dimension has not previously been covered in detail.

Prevention and support in neighbourhoods/communities

This is where we need to do more if we are to transform what we do as an integrated care system. Some of it is happening now, for example the Neighbourhood Team work, but there is more to do.

Part of developing integrated care (and communities that have the resources to successfully see, treat and support their own health and well-being) in a rural county with significant health needs and a growing, ageing population will require changes. This includes changes in how we work and more: -

- Co-planning and co-delivery with patients and staff;
- Collaborative working, using the expertise of the voluntary community sector, primary care and social care providers
- Partnerships and alliances between people
- Focus on population need and inequalities in health
- Transfer of resources into primary care networks – populations of 50-70k
- Focus on preventative activity and a philosophy of “no waiting”
- Early Intervention (into schools, for people living with dementia or long term conditions
- Digital technology to support staff and patients to work differently or to self-care

The types of services that LPFT wants to partner with others to develop and deliver are: -

An integrated, place-based mental health workforce: located in neighbourhood teams and Primary Care Networks (PCNs). This will not be a separate service or team, but instead it will be a new part of existing neighbourhood teams which already

includes GPs, social care, emergency services, substance misuse workers and voluntary, community and social enterprise (VCSE) providers.

Building community capacity and resources: creating a better understanding and awareness of mental health in the local community. This could include for example creating or supporting a network of volunteer ‘trained listeners’ to increase community resources to support people to self-manage their own care and expanding education and support for recovery (through the Recovery College). In addition LPFT wants to partner to train people in local communities in Mental Health First Aid and to use our skilled professionals expertise to train experts in mental health in care homes and local communities. We see that there is the need for social schemes such as befriending and supporting people with social isolation, bereavement and advocacy including supporting people with housing, employment and benefits.

Enhance social prescribing opportunities and networks: building on existing opportunities provided by VCSE and scaling up our work to date on the Lincolnshire Managed Care Network, bringing serious investment into this sector to deliver meaningful activities and well-being in support of mental and physical health. We will support people make full use of existing services and community assets such as the recently expanded Individual Placement Service (supporting people to employment), volunteering opportunities, community centres, leisure centres, libraries and recovery colleges.

‘Digital first’ offers using the Vitrucare digital platform which is integrated with GP systems and Lincolnshire STP Clinical Portal. There is a massive offer that we can make in terms of working with partners, patients and families to look at;

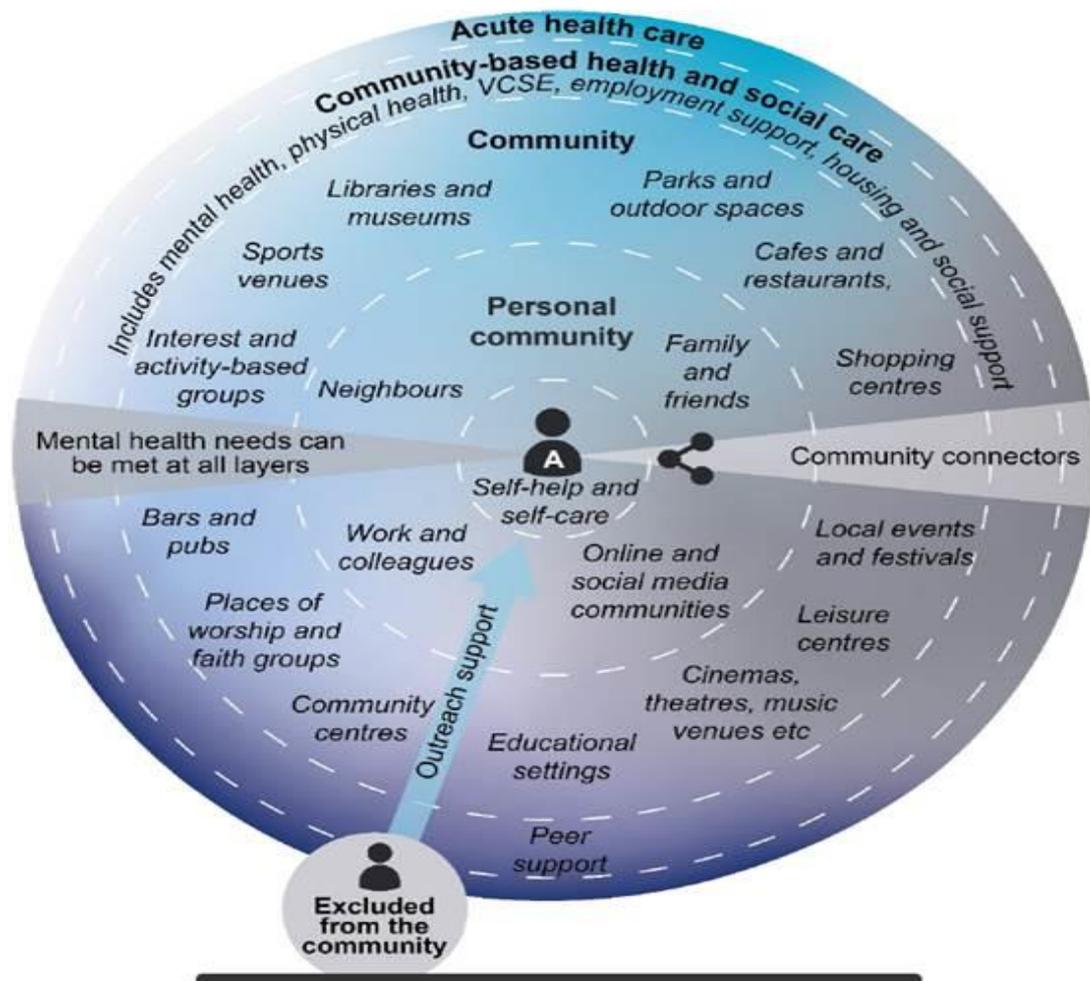
- information that is available on-line or via mobile devices (Apps. etc.) to help to share information, support, advice to people so they are informed about what is happening to their mental health;
- information and guidance about keeping safe and well;
- information to support them whilst they await a specialist appointment or information about support groups that are available in local communities;
- the Support2Connect initiative developed by Lincolnshire County Council.

Work done with the Managed Care Network to date and work on improving and developing the Lincolnshire and the LPFT digital offers will be driven as part of this thinking.

The creation of the Lincolnshire STP Clinical Portal and work that has been done to improve connectivity (for example the Community of Interest Network (COIN)) offer the platforms on which to build the digital offer.

High intensity support element to this model with the aim of step-up and step down care for patients with Personality Disorder (PD) and Autism, which are big gaps in the services currently available to the people of Lincolnshire.

LPFT is committed to working with all partners to increase the capacity in neighbourhood teams to support people to stay safe and well, with services locally based and focused on responding quickly to the needs of the individual person. Our staff currently link with neighbourhood teams and support the work of the teams. In the future this neighbourhood team capacity is vital to making a success of integrated care.



The above diagram is published by NHS England and demonstrates the importance of community capacity building and of community in supporting people to stay well. It puts emphasis on wrapping support around the individual person, with community connectors linking community responses together. Mental health is integral to the community response.

Early intervention and responding quickly

LPFT has presented in the past to the Lincolnshire Health Scrutiny Committee about our ambitions to improve access to services in communities and to respond quickly to people when they need access to mental health professionals. Examples of this are our work on the following: -

- Moving to a community Learning Disability service that offers improved access, reduced waiting times, a community based response and a 24/7 service for people and families who are experiencing difficulties;

- Piloting and evaluating a community facing Home Treatment Team model for older adults (as described to the Committee in the last update from LPFT; and
- Strengthening the pathways for Children and Young People's mental health services including the creation of the Healthy Minds service (which provides emotional well-being into schools in Lincolnshire to support children and young people) and the work to transform the community Child and Adolescent Mental Health Services (CAMHS) including children and young people's IAPT (Improving Access to Psychological Therapies) and crisis services. This has included investment to move to a maximum waiting time of 4 weeks for CAMHS, supported by Lincolnshire County Council.

LPFT will continue the programme of work to transform our services and respond to patient feedback and commissioner requirements. This includes liaison with primary care colleagues who refer children and young people with mental health problems and work we do to support people who are homeless or rough sleeping (working with our colleagues and partners in other agencies).

Of concern to LPFT (and recognised in the Healthy Conversation feedback) is to continue to be responsive in terms of waiting times for all services and there is a specific concern that we are addressing for gaps in services for people with autism and the waiting time for assessments. LPFT does not currently provide ongoing care and treatment for people with autism but does provide assessment and diagnostic service for these clients.

Care and treatment for people with serious mental health problems

Crisis care

The NHS Plan has a 10 year commitment to "increase alternative forms of provision for those people in (mental health) crisis". This is a call for change and improvement. There is excellent work going on in Lincolnshire via the Crisis Care Concordat, which is a multi-agency initiative. Community services like crisis cafes provide a more suitable option to accident and emergency departments for many people who are experiencing a mental health crisis. For those people who need accident and emergency care, for example someone who has taken an overdose, then accident and emergency departments are the right place for this type of emergency. Specialist mental health liaison staff teams working alongside colleagues in accident and emergency departments in Lincolnshire support people who attend with these types of emergencies.

For a person who may be experiencing intense suicidal thoughts, who are in crisis, and need immediate support to ensure they are safe, crisis cafes and similar services offer that support. Lincolnshire is committed to expand this type of option and to improve signposting so that people get the right care when they need it. The future model is that anyone in crisis can call a helpline and be directed to immediate mental health support that meets their needs, round the clock. This may be a place of safety or a community hub with the right support, be that emotional support for bereavement or relationship break-up or practical help with issues such as housing.

Additional capacity is needed to enable the Lincolnshire system generally and the crisis teams, community mental health teams specifically to respond to increasing demand of Lincolnshire people. There is a need for a community service for people with personality disorder and currently no service in place.

Drug and alcohol services

Substance misuse and mental health disorders such as depression and anxiety are closely linked, and while some substance misuse can cause prolonged psychotic reactions, one does not directly cause the other. However for some people: -

Alcohol and drugs are often used to self-medicate the symptoms of mental health problems. People often abuse alcohol or drugs to ease the symptoms of an undiagnosed mental illness, to cope with difficult emotions, or to temporarily change their mood. Unfortunately, abusing substances causes side effects and in the long run often worsens the symptoms they initially helped to relieve.

Alcohol and drug abuse can increase the underlying risk for mental illness. If you are at risk of mental illness, abusing alcohol or illegal or prescription drugs may exacerbate the illness. There is some evidence, for example, that some people using marijuana have an increased risk of psychosis while those who misuse opioid painkillers are at greater risk of depression.

Alcohol and drug abuse can make symptoms of a mental health problem worse. Substance abuse may sharply increase symptoms of mental illness or even trigger new symptoms. Abuse of alcohol or drugs can also interact with medications such as antidepressants, anti-anxiety pills, and mood stabilizers, making them less effective at managing symptoms.

Suicide prevention strategy

Every suicide is both an individual tragedy and terrible loss to society. Suicides are not inevitable and central to any prevention work is the maintenance of hope for potentially vulnerable individuals.

Lincolnshire Partnership NHS Foundation Trust responded to the Five Year Forward View for Mental Health (2016) and launched a Suicide Prevention Strategy in 2016, which covers the period to 2019. The Trust is mindful of the need for collaborative working with other statutory bodies; the voluntary, community and social enterprise sector; service users/patients and friends and families to ensure that the LPFT Suicide Prevention Strategy aligns with the wider Lincolnshire Strategy.

The six action areas that were the focus of the LPFT strategy (2016 to 2019) were: -

1. Reducing the risk of suicide in key high-risk groups
2. Tailoring approaches to improve mental health in specific groups
3. Reducing access to the means of suicide
4. Providing better information and support to those bereaved or affected by suicide
5. Supporting the media in delivering sensitive approaches to suicide and suicidal behavior
6. Supporting research, data collection and monitoring.

LPFT has a zero suicide ambition which carries a fundamental belief that deaths of individuals within mental health services are preventable. It presents a bold goal and aspirational challenge and the strategy is one of the ways of focusing attention to achieve this challenge.

Highly specialist services for the most complex mental health problems

For these services, for example CAMHS inpatient bed based care for young adults with complex eating disorders, there is work commencing at regional East Midlands level to look at the optimum configuration of services. LPFT is engaging with this work and will provide an update at a future date.

Feedback from the Healthy Conversation 2019

Comments on services were either posted on line (Appendix A below summarises this feedback) or via direct/questionnaire feedback at the events (Appendix B summarises this feedback).

Responses to any questions have been (and continue to be) posted online. These are included in Appendix A below.

The themed feedback is grouped as follows with the most frequent feedback being about how people get access to services and how long they wait for appointments or referrals: -

Theme	
Access to services and the responsiveness of services/ gaps in services	12 comments
Professionals sharing information or professionals knowing what services are available for people with mental health problems;	3 comments
Access to information and support including information on-line .	3 comments
Transitions from children's services to adult services;	2 comments

We are using this feedback in our planning as we develop plans and will be engaging with people, patients, staff, partners on an on-going basis to listen to feedback and act on it.

The feedback received has informed the priorities that LPFT will be paying attention to additional developments in community capacity building; waiting times for service and responsiveness; the lack of services for people with autism and personality disorder and generally capacity in crisis and community mental health services.

The length of time that people wait for assessment and treatment at LPFT is an area that we are constantly working hard to address.

We have seen improvements in overall waiting times and we are working hard to make sure that support and information is available whilst people are waiting.

For people living with autism (autistic disorders and ADHD), following assessment at LPFT, there is no ongoing service provided by the LPFT and this is a gap in services currently in the community for which there is a Lincolnshire wide strategy.

2. Conclusion

Important feedback has been received as part of the Healthy Conversation 2019 and LPFT has benefitted from being part of this engagement exercise. We will continue to participate in future events and look forward to receiving additional feedback. This is an important part of the debate about services including those for people with mental health, learning disability and autism needs in our county.

3. Consultation

There are no issues for consultation arising from this report.

4. Appendices

These are listed below and attached at the back of the report	
Appendix A	You Said We Did responses on mental health posted on the website
Appendix B	Healthy Conversation 2019 feedback

5. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Jane Marshall, Director of Strategy, Lincolnshire Partnership NHS Foundation Trust, who can be contacted via Jane.Marshall@lpft.nhs.uk

You said, we did – Mental Health feedback and response on website

You said...

- Really good care and support
- Impossible to get appointment with CAMHS
- Support for community based services, enabling patients to stay at home with family
- Fantastic work with autism

Suggestions included:

- More information required for parents about what services are available, especially online
- Improve links from children to adult services
- Improve flexibility of CBT appointments for those who work

We did...

- We are working on a mental health hub in Lincolnshire which will provide more information, including online, for parents about the services available and will also improve links from child to adult services. This hub is a partnership project with charities, voluntary sector and other relevant parties collectively developing it.
- We have asked for improved flexibility of CBT appointments and will keep the public updated as this progresses.

FAQ developed after feedback at event:

Concern about Manthorpe centre and use of ambulances going to A+E - will patients be accepted between trusts?

If people are waiting for crisis service will they still be seen in relation to the changes to A+E services. How will it all link and work together?

Mental health crisis services will not be affected by changes to urgent care services in the county. Lincolnshire Partnership NHS Foundation Trust will continue to provide county wide mental health crisis support and is working with local commissioners and NHS England to look at new ways of further improving crisis care in Lincolnshire.

The mental health services at the Manthorpe Centre in Grantham will also remain unaffected by wider system changes and will continue to be supported by East Midland Ambulance Service when patients need emergency physical health care.

The NHS organisations in Lincolnshire will continue to work closely together to make sure their plans take each other's services into account and complement each other wherever possible.

How is the NHS supporting adults and children with learning disabilities in Lincolnshire?

Lincolnshire Partnership NHS Foundation Trust offers specialist health support to people with learning disabilities who require assessment and/or treatment for their physical or mental health, including support with behaviours of concern.

- A single point of access (SPA) for all referrals
- Four community hubs - a multi-disciplinary team which provides the whole range of specialist learning disability professions
- Autism diagnosis and liaison - providing a liaison service which supports access to mainstream health services and ensures reasonable adjustments are made
- County-wide community home assessment and treatment team

Healthy Conversation 2019 event feedback

Event location	Number of attendees	<u>TOTAL</u> Number of feedback forms received
Boston	67	28
Louth	17	6
Skegness	20	16
Grantham	129	100
Online		54
Sleaford	25	8
Gainsborough	13	10
Lincoln	30	15

Feedback from Boston event 13th March 2019

Theme	Feedback and suggestions
Mental Health	Have always had really good support including Crisis Team. Confident in asking for support should I require the services again.
	Crisis Team in local area RE. Old Leake needs to be assessed
	CAMHS - impossible to get appointments

Feedback from Louth event 14th March 2019**Feedback from Skegness event 19th March 2019**

Theme	Feedback and suggestions
Mental Health	Pleased to hear you are working with LCC and going into schools to work with staff. Suggestion: Need more information going to parents about what services are available especially online services.
	Have used LPFT services over many years, and now well as a result. I know where you are if I need you - thank you.
	Son is a veteran and uses a USA based counsellor for his PTSD. Would prefer him to use a UK counsellor but son prefers to keep with the person he knows. Pleased to hear that Lincolnshire has a veteran service.
	Really support the greater support for Mental health, needs same level of investment as physical health. Mental health issues can be behind many physical health conditions and takes people long to recover.
	Service user of LPFT mental health services both community and inpatient. Staff really helped me in my recovery. Support community based services as enabled me to stay at home in my familiar surroundings and with my family. Two weeks in Pilgrim, but preferred home services.

Feedback from Grantham event 20th March 2019

Theme	Feedback and suggestions
UTC/ Mental Health	Grantham needs 24/7 walk in access. As a parent with an anxiety disorder I know how a simple child's minor illness can trigger a mental health crisis. Suggestion: Due to the lack of this, we need resuscitation and stabilisation facilities to ensure no needless deaths occur during transport. We need mental health care for those in crisis.
Mental Health	Carry on fantastic work with autism. Suggestion: Better links from children to adults.
	Suggestion: Improve waiting times in CBT. Improve flexibility around appointments for those who work. Improve response from LPFT when messages are left.
	Since we have been allocated a family support worker the support has been good.
	Will patients be accepted between trusts?
	Suggestion: There needs to be an easier way to access community Paediatrics before childrens' academics are affected.
Community Care/ ASR/ Mental Health	Would like information on the systems dementia strategy - including information for families in support.
	Support for my family member following a suicide attempt was good but unfortunately could not access the same people when they became unwell again.

Feedback from the general feedback form on HC2019 website

Theme	Feedback and suggestions
Mental Health	They need improving vastly in Mablethorpe and the local vicinity

Feedback from the Gainsborough event 21st May 2019

Themes	Feedback and suggestions
Mental Health- Brant ward	Patients report great things about the home treatment service, hope this continues once the improvements to the Brant ward are complete.
Mental Health - Learning disabilities and Steps2Change	Steps2change attended our focus group recently and it was really useful.
Mental Health - LPFT	Suggestion: It would be ideal if health services could share updates on mental health patients, so when arrested or/come into contact with said patients they can have an understanding of how to deal with individuals.

Feedback from the Lincoln event 22nd May 2019

Themes	Feedback and suggestions
Mental Health - CAMHS	Local ADHD support lacking following diagnosis.
Mental Health - Dementia Services	Would like more information on how to deal with dementia and the care plans put in place by social care services.
Lack of joined up care/ Mental Health	Interface between GPs and other services need improving - patients need to tell their stories multiple times. LPFT in a hard place because some services may not be commissioned at all. Ongoing support for autism - nothing available - gap in commissioning.
Mental Health - Crisis Care	Ops director and other EMAS staff would like more information on what support is available in times of mental health crisis More support needed when ambulances pick up patients who have mental health problems but are intoxicated.