


# Agenda Item 5

		<b>THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE</b>	
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 Partnership NHS Foundation Trust

Report to	<b>Health Scrutiny Committee for Lincolnshire</b>
Date:	<b>13 April 2022</b>
Subject:	<b>Lincolnshire Partnership NHS Foundation Trust - Update</b>

## Summary:

Lincolnshire Partnership NHS Foundation Trust (LPFT) is the principal NHS provider of mental health services and also provides some learning disability, autism and social care services in the county. LPFT's last report to the Committee was on 21 July. In addition to the Trust's response to Covid-19 and changes to services as a result of the pandemic, this update report also includes information on increased demand for services, as well as new developments and initiatives.

## Actions Requested:

That the Committee consider the information presented by Lincolnshire Partnership NHS Foundation Trust and decide on the next steps.

### 1. Introduction

The last twelve months has continued to be challenging for the NHS and our local community, with the continued impact of the Covid-19 pandemic, rising demand for mental health services and increasing cost of living. The need for mental health and wellbeing support has never been greater, which is reflected in the increase in referrals to Lincolnshire's mental health services. As a Trust, we continue to work closely with our partners in the local Lincolnshire health and care system, as well as the community, voluntary and social enterprise sector to provide a wide range of support and resources to help people at different stages of their wellbeing.

## 2. Covid-19 Response

As a Trust, we continue to manage the impact of Covid-19, whether this is with continued staff Covid-19 related absences, managing outbreaks on our ward environments or general pressures of increasing demand. At times we have had to implement business continuity arrangements to ensure the continued safe delivery of care, particularly in our ward and 24-hour crisis support services which we have had to prioritise.

Many of these changes have been temporary changes to our ward-based services in response to unprecedented staffing pressures. These included:

- Three-week temporary closure of the Hartsholme Centre, Lincoln (psychiatric intensive care unit) during December 2020. Staff redeployed to support other areas.
- Three-week temporary closure of the Wolds, Lincoln (reablement ward) during December 2021, with staff redeployed to support other areas.
- Manthorpe (dementia) Ward, Grantham was temporarily closed in May 2020 as part of our business continuity response to staffing pressures and also the requirement to make Grantham Hospital a Covid-19 “green site”. The staff were redeployed to other older people’s wards and also supported the pilot of a Dementia Home Treatment Team, that supported those people previously admitted to hospital in more appropriate community settings closer to home.
- Ashley House (open mental health rehabilitation) was temporarily closed in February 2021. Staff were redeployed to support other inpatient areas and to expand the community rehabilitation offer, supporting people with quicker discharge into the community in less high-risk community environments.

Infection prevention and control measures remain in healthcare settings despite a relaxation in the wider community. We await further updated guidance from NHS England and Improvement on future arrangements, including continued use of personal protective equipment and staff and patient testing/isolation.

For the moment, this means we still require our staff, patients and visitors to wear a mask, socially distance and maintain good hand hygiene.

This has meant that bed availability on some wards continues to be reduced, where there are shared bedroom facilities or smaller ward spaces, to allow for social distance arrangements. This equates to a reduction of eight beds across our adult acute and psychiatric intensive care wards. This will be reviewed when new guidance is received.

The Trust had previously reached the target to achieve zero inappropriate out of area placements by April 2021, but as a consequence of bed reductions and on occasion Covid-19 outbreaks on our ward environments the Trust has, on occasion, had to make use of out of area bed placements. We continue to monitor this closely and will only admit to an out of area bed when absolutely necessary.

This is comparable to other mental health trusts nationally who have seen increasing demand for acute inpatient care and increasing complexity of mental health presentation.

### **3. Changes to Services**

We continue to utilise the learning from delivering our services in a different way during the pandemic and this includes:

- Remote/virtual appointments have been introduced at a much greater scale than previously used, as an alternative to face-to-face appointments. Clinical services have now adopted a blended approach to providing care and treatment, using a mixture of telephone, video-conferencing and face to face appointments where required. This is an evolving area of work as more is understood about the use of different digital ways of working, but patient choice and clinical outcomes are the main deciding factor in which mode of delivery is most suitable.
- The Mental Health Liaison Service was expanded to provide 24/7 delivery in Lincoln County Hospital using redeployed staff from other LPFT services (previously 8am-10pm). Following a successful funding bid these extended hours have been made substantive.
- In March 2020, we were able to introduce 24/7 all age freephone crisis helplines with support from Mental Health Matters. The helplines provide round the clock support and access to services and have now been funded recurrently and with ongoing work to link the service to the national NHS 111 service. We have received an average of 300 calls a month to our children and young people Here4You helpline over the past three months and 1,300 a month to the adult's Mental Health Matters line.

#### Ashley House, Grantham Temporary Closure

Ashley House is a 15 bedded open mental health rehabilitation ward in Grantham, temporarily closed during the pandemic to enable staff to be redeployed and bolster community support through the new community rehabilitation service.

The Community Rehabilitation teams provide ongoing specialist clinical support for people when they are discharged from hospital into the community. They work with other mental health community teams, supporting people who need a more structured and intensive approach to rehabilitation. Providing a more personalised approach by helping to develop coping skills and widening people's social networks with a view to reducing dependency on services.

The decision was made to temporarily close Ashley House as part of business continuity plans to support staffing pressures, as a consequence of Covid-19 related absences. The redeploying of staff to support community rehabilitation, supports our vision to enable people to live well in their communities and is consistent with best practice to care for patients in the least restrictive environment.

Prior to its temporary closure, the service had been operating below its 100% occupancy since October 2018 and alternative open rehabilitation provision remains available at Maple Lodge in Boston, with other rehabilitation care also available at Discovery House in Lincoln.

During the closure Maple Lodge in Boston has been able to accommodate all patients requiring open rehabilitation inpatient care and maintained below 100% of their full occupancy, with no out of area admissions for this patient group.

Historically patients have been referred to LPFT's open rehabilitation beds from either high dependency wards or acute mental health wards, however due to the location of the two open rehabilitation units in Grantham and Boston, care may not have always been near the service user's own local community or social networks.

For the three-years period prior to the temporary closure, Ashley House had 52 admissions, of which 14 were from Grantham and the surrounding area. Therefore, the closure has not had a direct adverse effect on any one geographic population.

The Community Rehabilitation team was initially funded as a pilot in the west of the county, in Lincoln and Gainsborough, having secured pilot funding through the Mental Health and Wellbeing Transformation Programme. With the temporary closure of Ashley House and some further funding in phase two of the programme, we have been able to expand to the south of the county, particularly around Grantham to support with any impact from the closure. We are not currently able to provide consistent community rehab support on the east coast, Boston and Spalding and Stamford areas with the size of the current team and further funding is being sought.

We have continued to engage both our staff and patient groups around these changes to rehabilitation services and have so far had no adverse feedback or complaints as a consequence of the closure to date.

We are coming to the end of our latest engagement exercise which has specifically explored the Ashley closure and continued rollout of community rehabilitation- asking our service users what they would like to see in the future. We continue to consider our future model for rehabilitation services and this latest engagement exercise will help inform a range of options we will bring back to Health Scrutiny Committee in May 2022 for consideration before further public consultation.

#### Manthorpe Unit, Grantham Temporary Closure

The Manthorpe Unit is an 18 bedded ward in Grantham caring for older adults with dementia whose needs are too complex to be safely managed within the community. Early in the pandemic (March 2020) the decision was made as part of business continuity plans to temporarily close the ward and consolidate staffing at the Lincoln Witham Court site, to ensure high quality, safe care could be maintained with the increasing staffing pressures. It later remained closed when Grantham and District Hospital was designated as a green site.

During this temporary closure, alternative support for those patients usually admitted to the Manthorpe ward was required and a Dementia Home Treatment Team was rapidly set up to mitigate the reduction of 18 dementia beds in the county. The Trust has been able to safely maintain older people with dementia in their home environment and despite the reduced inpatient beds available has not had to place any patients with dementia in out of area inpatient care.

Whilst the Manthorpe Ward is now available for use, following the green site status of Grantham Hospital being rescinded in April 2021, the Trust has chosen to keep the ward closed whilst we continue to manage staff Covid-19 related absences.

The closure has also demonstrated the positive impact of this different way of working and as a Trust we wish to explore alternative models of care over the coming months as a pilot to consider in the future.

We are therefore working on proposals to reopen the Manthorpe Ward on a pilot basis in a new clinical format, utilising the space as an 8 bed short stay step up/down service. This not only enables us to re-open the facility with locally based bed capacity, it also enables us to continue our pilot of Dementia Home Treatment and provide additional care pathways in our older adult/dementia services, parallel to the stepped options available to working age adults.

This proposal would enable the service to test and refine the model delivered over the past 18-months and study the impact this has on patient care and outcomes, prior to further public consultation and decisions on future models of care.

The service continues to closely engage the local community and patient group, including carers and families, and has a regular clinical reference group that meets to discuss all aspects of older adult mental health and dementia care.

During the closure the service has not received any related complaints or adverse feedback and with the implementation of dementia home treatment team the team have been able to avoid around 98% of admissions from the 318 referrals they have received. This equates to circa 316 cases that pre-pandemic would have been escalated for hospital admission.

We hope to be in a position to reopen the Manthorpe Unit as this new pilot later in the summer, subject to some estate adjustments and appropriate staffing being in place.

#### **4. Mental Health and Wellbeing Transformation Programme**

The NHS Long Term Plan and NHS Mental Health Implementation Plan set the ambition to transform the provision of community mental health care and to develop new and integrated models of primary and community mental health care.

Lincolnshire was selected as one of 12 early implementer sites to lead transformation of community mental health services in England in partnership with primary care networks, clinical commissioning groups, local authorities, the voluntary, community and social enterprise (VCSE), service users, families, carers and local communities themselves.

We were successful in securing further funding to rollout countywide and our findings will be used to inform the roll out of new models of integrated primary and community care at a national level. Appendix A shows what we have done so far in this major transformation programme and what will be coming next.

## **5. New Acute Mental Health Wards**

Work continues to progress well at our new Peter Hodgkinson Centre (PHC) development in Lincoln. The external walls are going up, now that the steel frames is in place. This marks almost a year to when we are expecting the wards to officially open to patients.

The two new ward extension, on the existing Peter Hodgkinson centre site, will replace Charlesworth (female) and Conolly (male) adult acute mental health wards which currently reside on the first floor of PHC and have outdated shared dormitory accommodation.

Both wards will provide 19 individual ensuite bedrooms and vastly improve the patient environment with natural light, outside views, access to outdoor space, and modern and relaxing therapeutic spaces.

We also remain committed to eradicating our dormitory ward accommodation in Boston. However, increasing costs of construction mean that we are having to revisit the options available.

Work continues meanwhile to demolish existing buildings on the Norton Lea site.

## **6. Increased Crisis Support**

### **Mental Health Urgent Assessment Centre and Night Light Cafes**

As part of work to reduce demand in local emergency departments as well as improving the mental health crisis care we offer our community, we are pleased to be piloting a new urgent assessment centre in Lincoln and launching new Night Light Crisis Cafés in further parts of the county.

There are currently 10 Night Light Cafes open in Lincoln, where the pilot initially started, with a further six now open across Gainsborough, Grantham, Spalding, Bourne, Long Sutton, and Stamford. Further locations are set to open on the East Coast.

Night Light Cafés are an out-of-hours support service staffed by teams of trained volunteers who are available to listen. They offer safe spaces for anyone struggling with their mental health or at risk of experiencing a crisis - as well as signposting to other organisations that may be able to help with other needs, such as debt advice or emergency food parcels.

The cafes are co-ordinated by the Acts Trust in partnership with local charities who provide the venues and we were pleased to see Stacey Marriot, the Night Light Cafés Coordinator for Acts Trust, recently receive a High Sheriff's Award in recognition for her outstanding work in setting up the Cafés in Lincolnshire.

People can self-refer by calling 0300 011 1200 or via Instagram DM or Facebook Messenger @NightLightCafeLincoln. Agencies and GPs can refer individuals with their consent by completing the appropriate online referral form.

More information is also available at [www.lpft.nhs.uk/Night-Light-Cafes](http://www.lpft.nhs.uk/Night-Light-Cafes)

In addition to the Night Light Cafes, we have also started to pilot a new Mental Health Urgent Assessment Centre on the Lincoln County Hospital site, which enables adults with a mental health related crisis to attend our dedicated centre in Lincoln, rather than going to an emergency department.

Our data shows that around 70% of people attending A&E with a mental health concern, do not have physical healthcare needs and would be better cared for by dedicated mental health professionals. A&E departments do not always provide the calming, therapeutic environment for people in crisis, and Lincolnshire will be one of a small number of systems nationally trialling such a service.

The new assessment centre, which is staffed by experienced mental health practitioners, will provide a safe, lower stimulus environment for patients to receive further assessment of their need and risk. It is co-located with mental health services to enable onward referral and liaison – particularly when looking at alternative community support, or where hospital admission is required.

Whilst we are developing the service model and increasing our staffing support, the assessment centre is initially accepting direct transfers from East Midlands Ambulance Service and United Lincolnshire Hospitals NHS Trust emergency departments, where patients are fit to be transferred and have no physical healthcare needs.

However, in the very near future we hope to extend this to direct transfers from Lincolnshire Police and eventually accepting direct walk-ins from the local community.

## **7. Demand on Services**

Nationally there has been an increase in the number of people needing to access mental health services. Demand across all services has increased over the last two years, but with notable increases in the following:

- Children and young people services, in particular young people experiencing an eating disorder
- Adult Autism diagnostic assessments
- Early intervention in psychosis
- Chronic fatigue

- Talking therapies through the improving access to psychological therapies pathway (known locally as steps2change).

Despite this increased demand the Trust continues to perform well against nationally set waiting time targets for most services, with only our children and young people services currently an outlier compared to national expectations.

We recognise that waiting for any service is not ideal and we are committed to ensuring our service users receive timely assessment and treatment. Where people are waiting for services, we have processes in place to touch base regularly to assess changing needs and risk and signpost to other support available in the interim, such as our mental health helplines and our range of community support networks.

### Children and Young People

Lincolnshire has seen a 16% increase between 2019/20 and 2021/22 for our core children and adolescent mental health services (CAMHS). This has seen average waiting times increase and, as of February, these are around 7.28 weeks.

There are also secondary waits for some recommended treatments following assessment, with some children waiting over 52 weeks.

In the CAMHS eating disorder pathway there has been a 251% increase in referrals between 2019/20 and 2021/22 and demand is currently outstripping the capacity of this small team.

We recognise this is a significant issue for our local population and have been working closely with our local commissioners, Lincolnshire County Council and NHS Lincolnshire Clinical Commissioning Group to agree additional investment.

Recruitment for additional staff is underway but this is likely to be challenging, as is recruitment across mental health services nationally.

In the wider children and young people pathway we have recently implemented a new Here4You access team which began its pilot in January 2022. This team is the access point for all community children and young people services and has recently started to accept online self-referrals. This improves people accessing the right service for their needs, but also provides advice and signposting to young people and their family/carers.

Healthy Minds Lincolnshire is also a core part of the Lincolnshire offer and provides emotional wellbeing support for children and young people up to 19 years old, or up to aged 25 if the young person has special educational needs, disability or are a care leaver. The average wait for assessment in this service is four weeks.

We also have new Mental Health Support Teams being rolled out across Lincolnshire, with four teams now operational in Lincoln, Gainsborough, Boston and Skegness, with additional funding just agreed for further rollout in Grantham, Sleaford and Spalding in 2022/23. These teams work specifically with schools to further enhance the emotional wellbeing offer.



Over the Spring/Summer of 2022 the Trust alongside Lincolnshire County Council will also be undertaking a full review of children and young people services to agree a future transformation programme, similar to that underway in adult services.

### Steps2change Talking Therapies

*(Improving Access to Psychological Therapies - IAPT pathway)*

Waiting times for our steps2change service are currently higher than we would like for some parts of the clinical pathway. Our overall performance against national targets for referral to treatment remain positive. As of February 2022, 97.5% of people were seen in less than six weeks (against a target of 75%) and 100% of people were seen within 18 weeks.

However, there is a delay for some people between completing their first step of their treatment (accessing self-help) and accessing second step of treatment which involves a qualified professional. The target is less than 10% of people should have to wait no more than 90 days. Our current performance is 38%.

We continue to support people through a stepped approach to treatment, providing access to groups, online workshops and self-help support initially, with the opportunity to step-up and access other one-to-one therapy where further help is required.

We have received additional investment and are expanding the service in response. This includes 11 new practitioners who have started or starting in April and a further 13 due to join from September 2022.

### Adult Autism Diagnosis

As a Trust, we are commissioned to provide autism diagnostic assessments for adults aged 18 and over in Lincolnshire. Children and young people assessments are undertaken by paediatric services at United Lincolnshire Hospitals NHS Trust.

The number of people being referred for an autism assessment as an adult in Lincolnshire has increased over time with 630 referrals in 2021 compared to 409 in 2020 and 347 in 2019. We have been working closely with our commissioners to determine what additional resources are now needed to meet the current levels of demand and in the future.

This situation has been further hindered by the Covid-19 pandemic, which has brought with it a range of challenges. For example, face masks affect our clinicians' ability to effectively assess social communication, which is a key component of the diagnosis process. Regrettably this has contributed further to the waiting list for our diagnostic assessment, which in some cases is now up to two years.

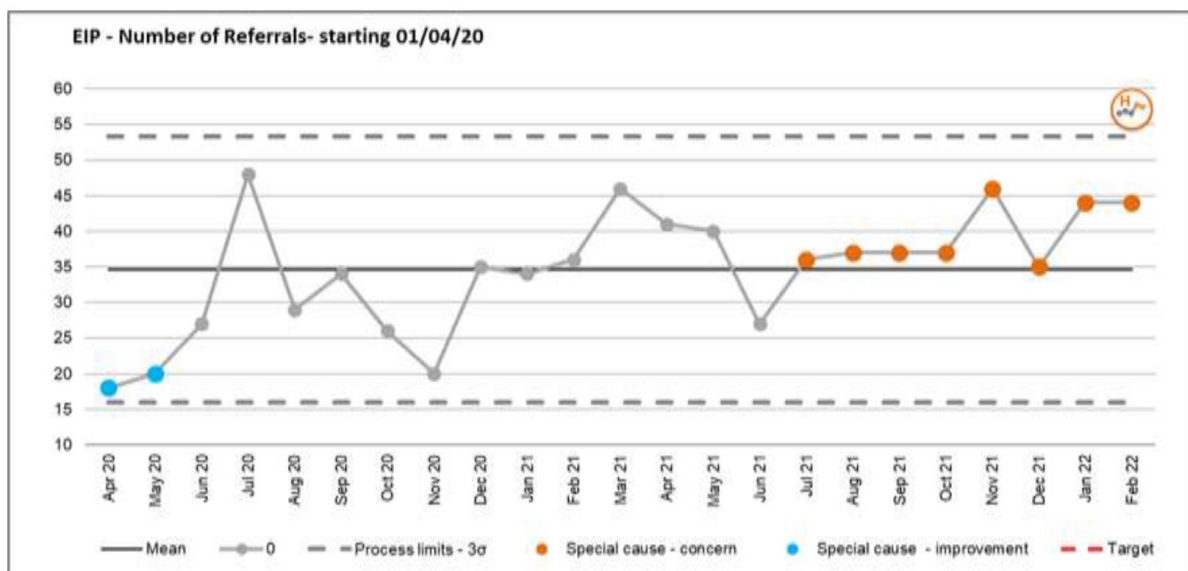
As an initial step to reduce the length of time people are waiting and ensure people receive the support they need in as timely a manner as possible, we are working with a private provider who is now supporting with assessments, particularly for those who have been waiting some time.

We regularly review our waiting lists and offer additional support where we can whilst people are waiting.

### Early Intervention in Psychosis

As a result of lockdown and the pandemic a rise in referrals for mild mental health conditions was expected. However there has also been an increase in presentation of more serious mental illness, especially those experiencing their first episode of psychosis. The Early Intervention in Psychosis team works with 14 to 65 year-olds experiencing a first episode of psychosis, or are suspected to be at risk of developing a first episode of psychosis.

The team have seen an above average demand for a sustained period of time (July 21-Feb 22), receiving between 35 and 45 new referrals a month since July 2021. Waiting times have been compounded further by staff sickness and vacancies within the service. This means the service is currently not achieving their two week wait assessment target.



We are closely monitoring the impact of demand and working hard to recruit to vacancies within this specialist team. We expect to see improvements in waiting times over the next three months, as we work through the backlog and see the impact of vacancies being filled.

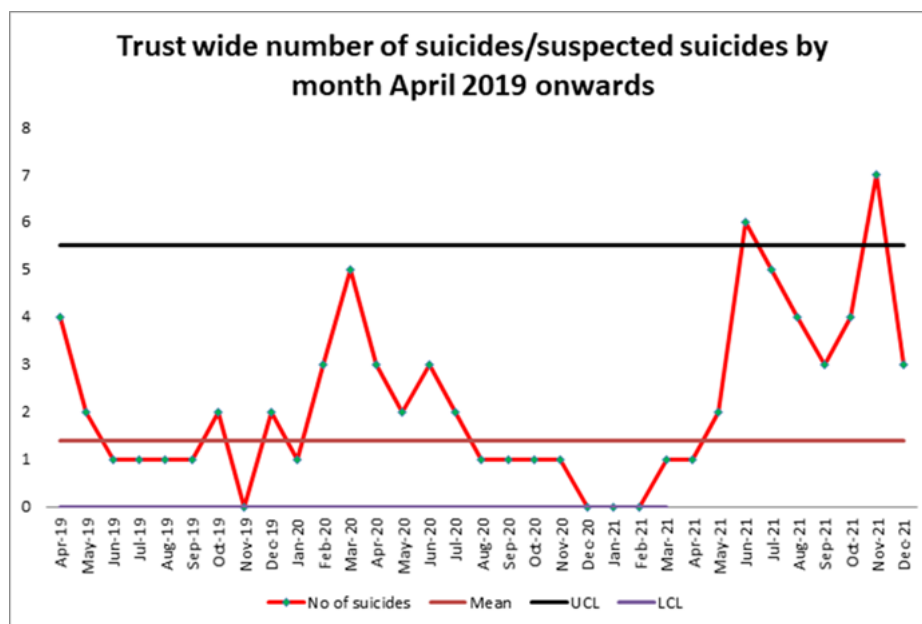
### Chronic Fatigue Services

As a result of the long-term impacts of people who have had Covid-19, there appears to be an increasing number of people left with chronic fatigue symptoms. The Trust's specialist Chronic Fatigue Syndrome service has been working closely as part of the system's Long Covid clinics - however demand is currently greater than current capacity and waiting lists are increasing as a result. We are in discussion with local commissioners for additional investment to expand the team to meet this current demand.

## 8. Suicides

National data suggests that although general suicide rates have not seen a significant change during the pandemic, there has been a notable increase of risk in older adults and young people in both significant self-injury and those having thoughts of suicide.

Exact suicide data can have a lag, due to awaiting the outcome of coroner investigations. So national benchmark data can be several years behind and does not yet cover the pandemic period between 2020-2022. As a Trust, we monitor the number of suicides, or suspected suicides of people known to our services and you can see these trends generally mirrored locally with a slight increase at points in the later part of 2021.



As a Trust, we have a local suicide prevention strategy which strives to achieve zero suicides for those people known to services. We also work closely with public health colleagues at Lincolnshire County Council and other local partners such as Lincolnshire Police and district councils on a countywide strategy for suicide prevention. On average only 20 per cent of suicide deaths in the county are for those known to mental health services, so a partnership approach to tackling suicides is essential.

In October 2021, we appointed a new Suicide Prevention and Self-injury Lead who has been reviewing where our local strategy can be strengthened. They are leading the following key areas of work within the Trust:

- Working with the Quality and Safety Team to undertake a thematic review of suicides – looking at key themes from suicides, suspected suicides, and unexpected unnatural deaths of service users in receipt of mental health services provided by LPFT and those who died within 6 months of discharge from services. The review is focused on those deaths reported between April 2019 – March 2020 and aims to identify any themes or trends, to compare against any national data and draw recommendations to support a proactive suicide prevention strategy refresh.

- Strengthening support for families/carers who are bereaved by suicide and support for staff involved in a person's care.
- Ensuring current training is fit for purpose, working with services to look at protocols and policies regarding self-harm.
- Preventing suicide is complex and no one organisation can tackle the issues in isolation, with this in mind the Suicide Prevention and Self-Injury Lead is involved in several projects and workstreams locally, regionally and nationally. External to the Trust we contribute and deliver parts of the Lincolnshire wide strategy and are currently working with Public Health in the development of a Lincolnshire multi-agency suicide cluster pathway and further developing Real Time Surveillance (RTS) data with Lincolnshire Police.

## 9. Recruitment and Retention

As demand on services increases, we have received substantial additional investment to expand our teams, to meet increasing demand and transform the way we work for our local community. Recruitment remains one of the Trust's main risks. Nationally, recruitment to the NHS, in particular qualified mental health specialisms, is challenging and there is limited supply in certain professions, particularly psychiatrists, nursing and allied health professionals.

We currently employ 2,480 staff as of the end of February, but currently have around 333 vacancies (13.69%). This is largely in two professional areas of nursing and additional professional, scientific, and technical which includes roles such as psychology and social workers. Our forecasts suggest that over the next year we will be able to improve our staff in post figures by approximately 100 whole time equivalents (WTE), but this will not all translate to a reduction in vacancies due to further investment to increase our workforce.

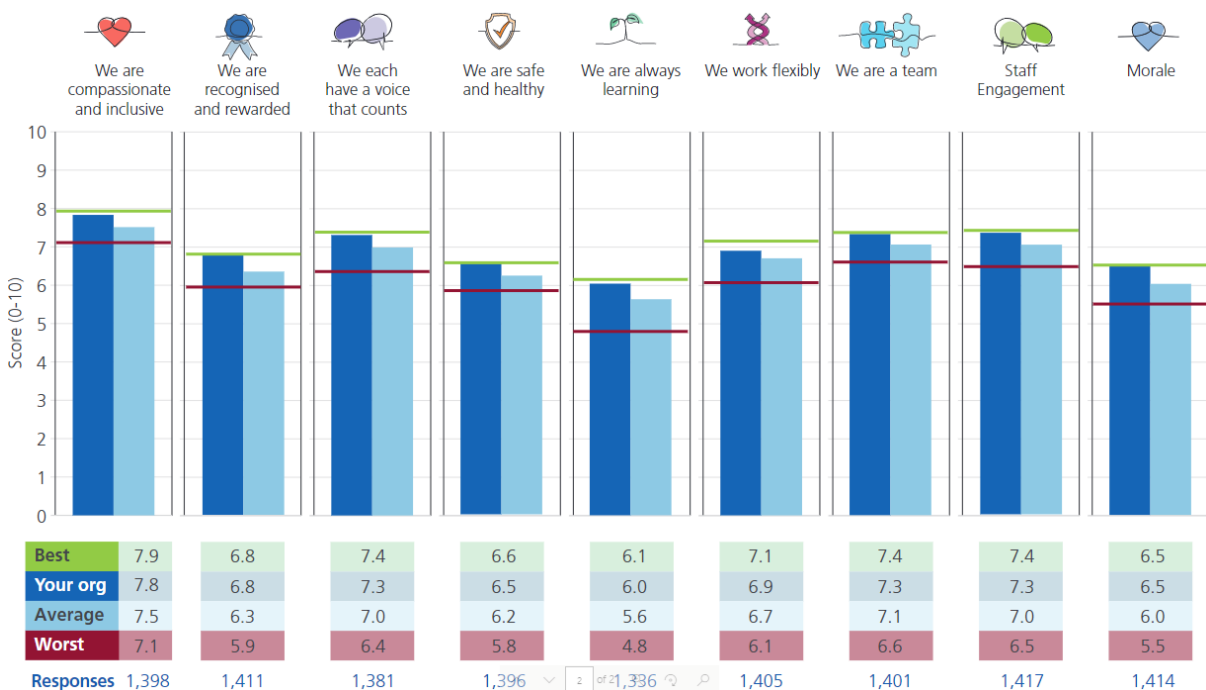
The following summarises the main workforce projects and initiatives for 2022/23 to help us meet these challenges:

- Developing an Attraction Strategy - using our workforce model to carry out further deep dives, ensuring that we implement methods to best maximise the supply of our domestic pipeline.
- Recruitment systems – we plan to introduce better systems for recruitment enabling us to conduct rolling cohort recruitment on a broader scale.
- Staff retention – We are building our insight into why our staff were attracted to work for us, stay with us, consider leaving etc. This “Walking in Your Shoes” engagement programme will inform our Retention Strategy.
- International recruitment – So far in 2021/22 we have successfully recruited ten international nurses and three psychiatrists to come to practice in the UK and we have more work planned to further extend this recruitment. Lincolnshire is seen as a leading trust in mental health international recruitment and we have been asked to share our learning across the region and beyond.

- New roles and ways of working – As stated we experience staff supply issues in certain staff groups, and therefore our strategy is to explore the introduction of new roles with the required skills and different ways of working, to complement existing professions and meet the needs of our service users.
- We continue to work with our Lincolnshire system colleagues on recruitment challenges – as well as other mental health trusts across the East Midlands and wider Midlands region. The aim is to find innovative ways to grow our workforce - rather than just “circulating” staff between organisations.

### National NHS Staff Survey 2021

The results of the annual national NHS Staff Survey were published on 30 March 2022 and we were pleased to have received feedback from 64% (1,430 staff) of the LPFT workforce. The survey is always incredibly important to us and we use it to guide our improvement plans, understand how we compare to other trusts and to shape our future strategies. As a Trust we continue to benchmark as one of the best mental health and learning disability trusts nationally and we are above average in all key themes.



We were delighted that 72 % of staff would recommend us as a place to work, and 83% said that the care of patients/service users was our top priority. We are also the top trust nationally for staff morale, which we know can have a positive impact on the care that patients receive.

We recognise there are always areas for further improvement and we are talking to the teams who scored particularly highly to see if there are ways we can share best practice across the Trust. As well further staff engagement on which areas need further focus. Key areas for focus to date include recruitment and retention, reducing the abuse staff receive from patients, particularly in our black, Asian and minority ethnic workforce, and variation in leadership.

## 10. Awards and Accreditations

Despite the challenges and pressures of the pandemic we have been pleased with the quality improvements we have continued to make across our services. This has also included recognition in a number of national awards and formal accreditation of our services by national professional bodies.

- For the second consecutive year, LPFT was shortlisted for Mental Health Trust of the Year at the 2021 Health Service Journal (HSJ) Awards. This national recognition commends the ongoing work of our Trust to transform mental health and learning disability services for vulnerable communities across Lincolnshire, enabling them to access excellent care as close to home as possible, in the least restrictive environment.
- The Children and Young People's Support Team were shortlisted in the peer support category at the Positive Practice Mental Health Awards 2021. Recognising the valuable role peer support workers play in supporting young people and parent/carers accessing mental health services.
- Lincolnshire's Children and Young People Complex Needs Service (formerly known as the Future4Me Health Team) won the 'Mental Health and Wellbeing' award at the Children and Young People Now Awards 2021. The service works as an integrated partnership between LPFT, Lincolnshire County Council and other partner agencies such as education and the criminal justice system, providing holistic support to young people who are at risk of homelessness, criminalisation, or exploitation.
- The Trust's Research Team was a finalist for 'Outstanding Achievement by a Team' at the CRN East Midlands Research Awards 2021. Recognising the outstanding achievements of research teams in the East Midlands, and awards teams that have gone above and beyond what would normally be expected to achieve outstanding results.
- Lincoln's Electroconvulsive therapy (ECT) team achieved Electroconvulsive Therapy Accreditation (ECTAS) which included a Commendation in Monitoring and Follow-up.
- Several teams across the Trust achieved re-accreditation by Lincolnshire Carers Quality Award, recognising our commitment to carers. This included all age inpatient ward, crisis and home treatment services and the veteran's mental health team.
- Grantham Crisis Resolution and Home Treatment Team (CRHT) received their HTAS (Home Treatment Accreditation Scheme).
- Lincoln Mental Health Liaison service received their accreditation from the Royal College of Psychiatrists, under membership of the Psychiatric Liaison Accreditation Network
- Ward 12 in Boston also achieved the standards in the Quality Network for Inpatient Working Age Mental Health Services (QNWA) through a comprehensive process of self and peer review.
- A number of the Trust's community teams undertook their reaccreditation for ACOMHS the Royal College of Psychiatrists standards for community mental health services and maintained their accreditation.
- The Individual Placement and Support Employment Service maintained their "Good Fidelity" status as a result of their external Fidelity review.

## **11. Future Ambition for Mental Health, Learning Disabilities and Autism Services**

We continue to work closely with partners across the system to set the ambitions and priorities for mental health, learning disabilities and autism support across the county. Our partnership currently has representatives from many system partners such as the Clinical Commissioning Group, Public Health, Lincolnshire County Council and primary care to name a few. The partnership is chaired by Sarah Connery, our Chief Executive, and all partners are working together to achieve the very best outcomes for our service users and their carers. The partnership continues to build close links to the criminal justice system, police, local councils and our community and voluntary sector who all play a vital role.

This is an evolving partnership and we have recently been discussing our system priorities and ambitions for Lincolnshire, focused on collaboration, and improving access, experience, and outcomes for all. LPFT cannot deliver the ambitions in isolation and it will take a system wide approach, particularly on prevention and early intervention and promoting independence for people to live well. Our partnership continues to develop and we'll be sharing more on our priorities and ambitions for your feedback in the coming months.

## **12. Consultation**

This is not a direct consultation item. However, reference is made in the report to an engagement exercise on our future model for rehabilitation services, which will be considered by the Committee on 18 May 2022.

## **13. Conclusion**

The Committee is requested to consider the report.

## **14. Appendices – These are listed below and attached to the report**

Appendix A	Mental Health and Wellbeing Transformation Programme – The Story So Far
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## **15. 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 Jo Walker, Head of Communications, Lincolnshire Partnership NHS Foundation Trust, who may be contacted via [Joanna.Walker2@nhs.net](mailto:Joanna.Walker2@nhs.net)

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