Lincolnshire  COUNTY COUNCIL  Working for a better future		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

# Report on behalf of Lincolnshire Partnership NHS Foundation Trust

Report to	Health Scrutiny Committee for Lincolnshire
Date:	19 July 2023
Subject:	Update on Adult Mental Health Services in Lincolnshire

### **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.

The Trust reports regularly to the committee on changes to services but has been asked to provide a general overview of developments in services and action being taken to manage demand and waiting times.

This paper will concentrate on adult mental health services in the county, with a further presentation to the committee on children and young people's and older people's mental health services, dementia and learning disabilities and autism covered at the September meeting.

# **Actions requested:**

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

#### 1. Introduction

Our communities and staff continue to feel the lasting impacts of the covid-19 pandemic and current cost of living, with rising demand for mental health services, and more complex presentation when people reach crisis point.

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.

We know that waiting lists for some of our services are higher than we would like and that patient experience could also be improved, so are working 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 where people don't necessarily need to access specialist secondary mental health services.

Whilst support for people in crisis has expanded substantially over the past few years, we also know we need to review our crisis and home treatment provision. Which is why we've undertaken a robust evaluation and engagement exercise about crisis support in the county. You can read more about this in section six.

We also have ongoing workforce challenges, like all NHS organisations, which are hindering the development and delivery of some services.

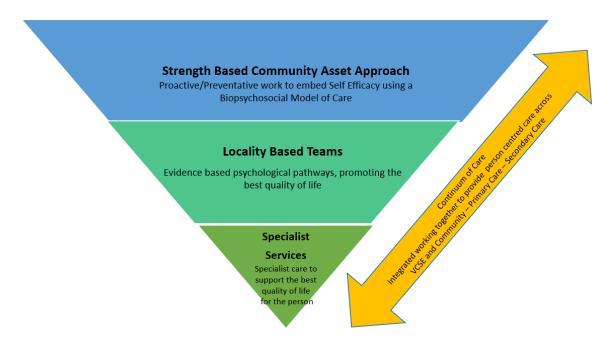
### 2. Community support for adults

A full list of all the community services the Trust provides can be found in appendix one, however as well as the specialist secondary care services the Trust directly provides, we are also working closely with partners across health, local authority, primary care networks and the voluntary, community and social enterprise sector (VCSE) as part of the community mental health transformation programme.

Lincolnshire was one of twelve national early implementers chosen to deliver the transformation programme. As an early implementer site, we worked with partners to develop and mobilise an ambitious plan to ensure that the development and transformation of both new and existing community services was designed, developed and delivered in an integrated way.

The model developed is committed to the delivery of right care, at the right time and in the right place. This has meant that the way we deliver services spans wider than specialist health services and encompasses primary care and VCSE partners to ensure that services are accessible for people within their own local communities.

At the heart of this programme is a commitment to design and deliver services with people with lived experience. Ensuring that services are people led and not just about people. Experts by experience are embedded across every part of the programme and as such Lincolnshire is recognised by NHS England as an exemplar site for the work that it has done to realise and embed this new way of working.



The programme delivers a vast array of initiatives and projects as well as the implementation of new workforce roles such as community connectors, psychological intervention facilitators and mental health and wellbeing practitioners.

All of the work taking place aligns with ambitions and deliverables identified in the national NHS Long Term Plan, commitments made for NHS community mental health transformation programme and more recently is now working towards embedding the NHS Confederation document 'No Wrong Door; A Vision for Mental Health, Learning Disabilities and Autism in 2032.'

Key elements of the programme for 23/24 include:

# Strength based community assets

- Countywide Community Connectors and Hubs We have developed mental health hubs
  across the county, these provide spaces for people to come together, with support on hand
  and activities often arranged. We have employed community connectors in each locality to
  bring together the VCSE organisations and be the link between services and people's
  communities.
- Social prescribing model each area also has access to social prescribers who can work with individuals who may need extra support, identify their interests and goals and help them find local groups, activities and support that could help them reach these.
- Peer Support Workers Across the county there are also people with lived experience now employed by the Trust as peer support workers to help support people with their own experiences access services.
- Nightlight Cafes safe spaces that offer an out-of-hours, non-clinical support service and are staffed by teams of trained volunteers who are available to listen. They can also provide signposting advice and information on other organisations that may be able to help with specific needs

- Mental health and wellbeing community investment fund financial support available to local groups and organisations to bid for to help develop groups and support programmes across the county that can support people with their mental health and wellbeing.
- How Are You Lincolnshire website new website bringing together all of the groups, activities and organisations across the county that can support people with their wellbeing. Broken down by area to show the full breadth of offer in different areas of the county.
- **Lincolnshire Citizen Offer** Ensuring care is planned and organised based on population needs, ensuring our service are accessible to all those living in a locality.
- **System mental health training** specialist training for groups and organisations that are supporting people with mental health problems, to help them best support people and access support when they need it.
- Suicide Bereavement Service

#### Local based mental health teams

- Working closely with GPs in primary care to ensure clear pathways between services, with some staff fully integrated in local surgeries to offer earlier support.
- Realigned our local community mental health teams and integrated place-based teams to work more closely together.
- Ensuring people with serious mental illness are supported to access regular health checks

# Specialist services in LPFT introduced or expanded

- Personality and Complex Trauma Service a new service to support individuals living with complex personality difficulties using psychologically informed interventions and talking therapies. Can also support other teams who may be supporting people with personality difficulties with advice and training.
- **Community Rehabilitation** provides ongoing specialist clinical support for people when they are discharged from hospital and complements other mental health community teams when supporting people who need a more structured and intensive approach.
- Adult Eating Disorder Service Expanding the current team and capacity in the service, as
  well as moving away from the previous referral criteria that looked only at someone's BMI.
  Working with a range of system partners to look at the whole pathway from mild conditions
  through to specialist services for more complex and severe eating disorder and how the VCSE
  sector and primary care can work with specialist services to provide additional support.
- Ensuring services like Early Intervention into Psychosis, Individual Placement and Support
   Employment are fully working alongside other community services to ensure holistic
   approach.
- Increased access to psychological interventions and specialist clinical pharmacy.

As an organisation and network, we are also working together to ensure trauma informed care principles are embedded across all services we provide and that we continue to ensure the voice of people who use our services is at the key of how we develop in the future.

We are looking at the data around our population to ensure that how we develop our services meets these needs and does not negatively impact any group and that people have equal access to the services they need.

That the systems and digital technology we use works alongside other organisations and is integrated to ensure people have access to information they need to best support an individual and that they do not have to retell their story several times.

# 3. Demand and waiting times in adult community services

Demand on mental health services remains high and has continued to grow with recent events such as the pandemic and cost of living. Whilst much work is taking place to change the way we deliver services and expand the workforce we have to deliver specialist support, there are higher than we would like waiting times in some of our services . These are regularly monitored to ensure these are kept as short as possible.

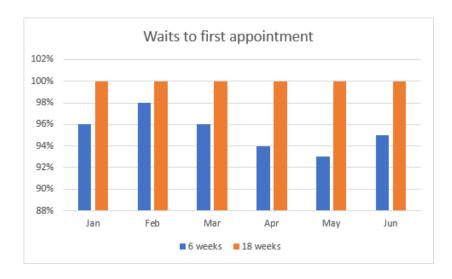
There are however also several specialist services where we do not have waiting lists including early access to psychological therapies, perinatal, recovery college, personality and complex trauma, community rehab, social care and homeless and employment support services.

## Talking therapies for anxiety and depression

Our newly name Talking Therapies for anxiety and depression service (previously known as steps2change) has nationally set targets for waiting times.

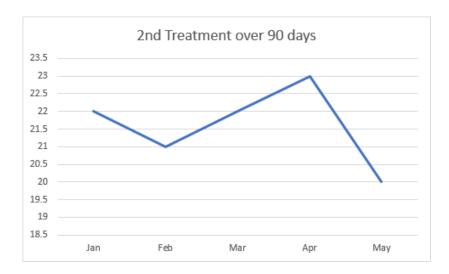
It is expected that 75% of patients commence treatment within 6 weeks and 95% of patients within 18 weeks.

The service for 22/23 achieved 97% against the 6-week standard and 100% against the 18 weeks standard.



The service is also measured by a wait to second appointment to ensure that any internal waiting times are monitored after initial contact. Again, there are national set recommendations for this

including, that 90% of patient wait less than 90 days, the service achieved 80% against this for 22/23.



Where people may be waiting for treatment, we ensure that they are provided with a range of resources to help with self-care and any workbooks that may help them to start working through themselves. Every person is also provided with information on what to do should their needs change, what to do in a crisis or if they need help urgently. Including information about the county's 24hr mental health helpline that can be someone to talk to, or who can escalate to the crisis teams where more specialist support is required.

### Community mental health teams

Our community mental health teams are made up of a variety of professionals working in a multidisciplinary way, for example psychiatrists, psychologists, nurses, social workers, occupational therapists, support staff and new roles including peer support workers, mental health and wellbeing practitioners and psychological intervention facilitators.

We aim to ensure a comprehensive assessment is completed and patients are then accessing the most appropriate support for their needs following this.

Nationally the expectation is that patients commence treatment within 18 weeks. Historically services have generally performed well against this expectation, however, waits can vary between disciplines and teams, depending on demand and staffing with generally longer waits to see a psychiatrist.

We have processes in place to regularly check in with patients who are waiting and like in talking therapies provide information on how to access help in an emergency. These teams also have a duty worker system so that any one calling in with issues or concerns can receive a response the same day.

As part of the community mental health transformation there is a national to see waits of no longer than four weeks and we are working towards this as we move to the new ways of working.

#### 4. Transition between services

The services in the adult community mental health division with the exception of Lincolnshire Talking Therapies (LTT) Service are for people aged 18-65. The Talking Therapy service however can be access from the age of 16 upwards with no upper age limit.

There are clear protocols in place for young people when they are due to transition to adult services. From the age of 17 years and 6 months children and young people services highlight patients due to transition and work with adult services to commence a six-month handover of care.

We have recently employed peer support workers to support people to make this transition and are working together to look at these age limits and how we can be less prescriptive. Ensuring our services are flexible and people stay in the service that is best served to meet their needs.

People aged 65 and over who present with new episodes of mental health issues will generally have treatment within our community mental health services for older people.

For those who turn 65 whilst in adult services where we can continue to meet the patients' needs in their current team they would remain. The only exception might be where they are experiencing age related issues that would be better met by the older adult teams, in which case the teams would work closely together to handover care at the appropriate time.

# 5. Crisis and urgent care

Where people's needs are escalating and they are experiencing a crisis or more complex presentation that requires more intensive support, patients will access services in our adult inpatient and urgent care services.

A list of services this includes is in appendix 2.

These services support patients who are acutely unwell, or require a period of hospital care. In some cases, this can be in longer term hospital rehabilitation support, or a low secure setting for those who may have had criminal / offending behaviours or contact with criminal justice system.

### Support in a crisis

In Lincolnshire people now have access to 24hr mental health helpline that could be a first point of contact to talk about difficulties they are experiencing. This service is delivered by Mental Health Matters and may help many people when they just need to talk or be signposted to support in their community that could help.

If, however the team feel that someone needs more immediate specialist support or interventions they can escalate a call to local crisis teams for more in depth support.

The crisis teams provide support from four hubs across the county in Boston, Grantham, Lincoln and Louth. Their response times are to see people with very urgent needs within 4 hours and urgent needs within 24hours.

In addition to this the county also has a liaison service based in the three main acute hospitals at Boston, Grantham at Lincoln, who can see people attending A&E or receiving treatment on any of the wards to support with any mental health presentation or ongoing assessment and referrals.

The team provide a 24/7 service at the Boston and Lincoln hospitals and support Grantham hospital 9am-5pm over seven days.

This team will aim to see emergency referrals in A&E in one hour and against a target of 80%, the team generally meet this target 93% of the time. The only exception to this is Grantham Hospital which has a response time for urgent referrals of four hours.

The team also support urgent referrals from short stay wards in a response target of 90%. (The team currently achieve around 98.1%).

Routine referrals on all other wards, including intensive care or maternity have a 24hour response target, for which the team currently achieve 98.1%.

To further support people in crisis the Trust also has a mental health practitioner working alongside Lincolnshire Police in their police control room and a crisis response vehicle in Lincoln and Boston available to go out urgently to respond to calls to the police and ambulance for mental health support.

As our urgent care pathways expand, we have taken the opportunity to commission a full internal evaluation of the current model of delivery for crisis and home treatment services.

We have undertaken extensive engagement with stakeholders, patients, carers, experts by experience, staff and the wider VCSE sector. We have been gathering data and narratives which are currently being evaluated and look forward to sharing our findings and recommendations once completed.

#### 6. Developments

#### Mental Health Urgent Assessment Centre (MUHAC)

We know historically there have been particular challenges of people suffering a mental health crisis having to attend A&E departments, even where there was no medical need to do so.

This not only contributed to increasing numbers attending A&E but also increased the time for people being seen by a medical professional and ambulance handovers. We also know that busy A&E departments were not always the best environments for people in crisis.

Learning from examples from some other trusts in London who were taking steps to support those in mental health crisis in a different way, the Trust was able to mobilise a new mental health urgent assessment centre on the Lincoln County Hospital site over the winter in 2022.

Offering an alternative place for people to receive a rapid assessment of their mental health needs and provide an additional place of safety in an environment that was more appropriate and calming.

The assessment centre, which is staffed by experienced mental health practitioners, provides 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.

The team are now accepting referrals from A&E departments, East Midlands Ambulance Service, Lincolnshire Police and also now community walk-ins.

The Trust has been initially piloting the service for 12 months with some monies assigned to support winter pressures across the Lincolnshire health and care system and has already seen improvements in decreasing footfall in A&E for those in mental health crisis and improved patient experience.

This has also given Lincolnshire an opportunity to reduce health inequalities, as many people in mental health crisis do not wish to attend a busy A&E department but will attend a calming environment with mental health trained professionals on hand to support them.

Following a robust independent evaluation of the service over the last year we were pleased to have been awarded recurrent funding to continue the great work in the centre and expand to an all-age pathway to include children and young people in the future.

# New adult acute wards

Following on going work to eradicate dormitory accommodation from all of the Trust's hospital wards across the county, we were delighted to open our two new wards in Lincoln at Peter Hodgkinson Centre this June. The new wards called Castle and Ellis replace outdated ward environments on Charlesworth and Conolly wards and now provide 19 individual ensuite bedrooms, much improved ward spaces and lots of safe outdoor areas for people to access freely.

Patients were safely transitioned across to the new wards at the end of June and are settling into to the new environments well.

The design of the wards was achieved through extensive collaboration with staff, patients, carer's, experts by experience and stakeholders and was upheld as national best practice, with the Trust winning Best Service User Engagement Award for a new build at the recent Design in Mental Health Awards.

We were also pleased to recently receive planning permission for our new build designs on the Norton Lea site in Boston, which will replace Ward 12 at Pilgrim Hospital. This will utilise currently unused land owned by the Trust and again provide individual ensuite bedrooms and much

improved environment. The hub will also be home to the Boston crisis team who can support the team as required and ensure they are not a standalone service.

Work continues to finalise plans and prepare the site and we hope to start to build from September 2023 for completion by summer 2025.

### **Carer Champions**

The role of the Carers Champion was developed to offer direct support for carers whilst loved ones were in hospital, to be their consistent contact person in addition to the ward staff, and to ensure regular communication with them and ensure their voices were heard.

The role has provided a valuable resource in helping the Trust identify those in a caring role, who to date may not have been offered a carers assessment and provide them with additional information or answer any questions they may have about an admission to hospital. They also support the carer's voice in essential care planning and discharge discussions and meetings on the ward – encouraging and supporting carers to attend, or where preferred, to listen and be the voice of the carer within these forums.

The Trust is receiving very positive feedback about these new roles and how they are supporting carers at a difficult time.

# 7. Inpatient workforce challenges

As previously reported to the committee the Trust had to take an emergency decision to temporarily close the Psychiatric Intensive Care Unit (PICU) in October 2022 on the grounds of safety. This was in response to critical staffing levels across the adult inpatient and urgent care services.

The PICU was selected for temporary closure as it was identified to have the least distribution to staff and patients, when compared with other wards.

Following the closure, the PICU staff were re-deployed to increase workforce resilience across the remaining adult inpatient wards and the Trust has worked in collaboration with partners to develop a workforce plan for both short, medium, and longer term.

As reported to the committee in May 2023 based on current workforce trajectories the Trust is working towards being able to partially reopen the PICU in November 2023, with a full reopening of the service in March 2024. We are also working with stakeholders, including patients and staff to look at how we could provide a female provision in the county in the future.

There continues to be a comprehensive programme of work to recruit and retain staff in these services including proactive advertising campaign, international recruitment, growing our own workforce with apprenticeships and supported nursing training and looking at new roles and ways of working.

There continues to be a steady and positive increase in recruitment across the division and turnover and staff sickness has also stabilised and we remain committed to the timescales set out for reopening.

#### 8. Summary

Despite increasing demand and rising complexity of people's needs we have been pleased to be able to receive substantial investment in mental health services over the last few years that are helping us expand our current workforce to meet rising demand or change the way we work to offer a collaborative approach with our system partners in health, social care and the voluntary and community sector.

Whilst waiting times remain higher than we would like in some areas, we continue to regularly check in with people to ensure their needs have not changed and provide interim signposting and resources that might help. As well as access to Lincolnshire's 24/7 mental health helpline.

We continue to review how our services are operating with the people who use them or need to use them to ensure we are redesigning services that meet people's needs and we continue to improve what we currently offer.

Workforce remains our biggest challenge as an organisation and we continue to give it our attention and focus to do as much as we can to advertise Lincolnshire and LPFT as a place to work and live, grow our own workforce of the future and support our staff to remain well and stay with us.

# 9. Appendices

These are listed below and attached at the back of the report	
Appendix 1	Services in the adult community mental health division
Appendix 2	Services in the adult inpatient and urgent care division

# 10. Background Documents

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 Chris Higgins Director of Operations at LPFT, who can be contacted via (<a href="mailto:Christopher.Higgins3@nhs.net">Christopher.Higgins3@nhs.net</a> / or 01522 309199)

# Services in the adult community mental health division

Early Intervention in Psychosis	Countywide community based service who provide comprehensive assessment by a multidisciplinary team, and intensive treatment and support for people aged 14-65 who are experiencing a first episode of psychosis (FEP), or who may be presenting to be at risk of developing psychosis.
Perinatal Mental Health Team	The team identify and manage women with pre-existing serious mental illness who are pregnant, or those who develop a serious mental illness during pregnancy or following the birth of a baby. The team offers a service to women who are 13 weeks pregnant, to the end of the first post-natal year. The team also offers pre-conception care for women who have a serious mental illness and want advice regarding medication and treatment when planning a pregnancy.
	Also part of new maternal mental health hubs which bring together maternity services, reproductive health and psychological therapy under one roof. They provide support for women who have experienced birth trauma or loss, as well as expectant mothers who have a fear of labour known as Tokophobia.
Recovery College	Offers free educational courses on mental health and wellbeing to anyone aged 16+. Our teaching team consists of people with lived experience of mental health challenges, qualified teachers and trainers and experienced health professionals.
Individual Placement and Support	Support people with serious mental health difficulties to find paid employment of their choosing. Lincolnshire's IPS service has been confirmed as a Centre of Excellence by the Centre for Mental Health, for the way it uses the internationally renowned approach to help service users find and retain paid employment.
Lincolnshire Talking Therapies	Previously known as steps2change this service provides a range of short term evidence based talking therapies for problems such as depression, anxiety, post-trauma reaction, panic, phobia and obsessive compulsive disorder (OCD).
Personality and Complex Trauma Team	Aim to create pathways of care in the community for people experiencing personality difficulties which impact upon their quality of life. The team can support some individuals but also work with other services to support their care.
Community Rehabilitation	Specialise in working with people aged 18+ with long-term mental health problems and complex recovery needs as a result of severe and enduring mental illness. Provide ongoing specialist clinical support for people when they are

	discharged from hospital and complements other mental health community teams when supporting people who
	need a more structured and intensive approach.
Adult Mental Health Social Care	The Trust delivers mental health social care services for people aged 18 to 64 on behalf of Lincolnshire County
, and the mean treatment of the care	Council through partnership arrangements under section 75 of the National Health Service Act 2006.
Best Interest Assessor	Undertake best interest assessments in relation to the Mental Capacity Act 2005 and the Deprivation of Liberty
	Safeguards (DoLS). The Local Authority commissions each assessments for individuals who are being deprived of
	liberty for the purpose of receiving care and treatment.
Holistic Healthcare for the	Provide physical and mental health care to the rough sleeping and vulnerably accommodated community. The
Homeless	service is individually tailored to the person's needs and supports people access support for their mental health
Tiomeless.	and physical healthcare needs.
Mental health practitioners in	Mental health professions aligned to local primary care networks, working out of GP practices, providing first line
primary care	assessment, intervention and onwards referral, ensuring mental health expertise in primary care and to support
p	primary staff manage mental health conditions.
Community Mental Health	Provides help for adults of working age (18-64) with a severe and enduring mental illness, or a long-term mental
Teams	disorder. The service works with people to reduce distress, maintain independence and integrity of care networks,
	shorten illness, prevent relapse, promote recovery and social inclusion, and minimise the impact of disabilities.
Integrated Placed Based Teams	Place based teams aim to improve the care for people experiencing severe mental illness (SMI) by enabling
	patients to access mental health care where and when they need it, helping people access on going support even
	after discharge from specialist services.
Night Light Cafes	Safe, community spaces that offer an out-of-hours, non-clinical support service and are staffed by teams of trained
	volunteers who are available to listen.
	They can also provide signposting advice and information on other organisations that may be able to help with
	specific needs, such as debt advice or emergency food parcels.
	People can self-refer by calling 0300 011 1200 or via Instagram direct message or Facebook Messenger
	@NightLightCafeLincoln.
	Agencies and GPs can refer individuals with their consent by completing the appropriate online referral form.
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# Services in adult inpatient and urgent care division

Mental Health Matters Helpline	24/7 free help and advice line for adults over the age of 18. Run by third sector organisation Mental Health Matters, with support from locally based crisis teams as required.
	Provide a listening ear for people who are struggling and need someone to speak to, signposting to local community support or escalation to crisis teams for professional support. People can call without a referral on 0800 001 4331.
Single Point of Access Contact	All referrals into the Trust from GPs and other relevant professionals are sent to the Trust's central single point of
Centre	access contact centre for triage and onward processing. The team can also help people currently accessing services to contact the relevant team.
Health Based Place of Safety	The suite provides a safe place for adults and young people found by Lincolnshire Police in a public place suffering
(also known as section 136 suite)	from mental health problem, to be assessed in an appropriate environment, rather than a police cell.
Mental Health Urgent	Located on the Lincoln County Hospital site at the Peter Hodgkinson Centre, the centre takes referrals from
Assessment Centre	ambulance services, A&E, Police and walk-ins from those that are medically fit but require an assessment of their current urgent mental health needs.
	Staffed by experienced mental health practitioners, it provides 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.
Mental Health Hospital Liaison	The team work in local acute hospitals, alongside colleagues in A&E and wards to provide patients presenting at A&E with mental health concerns, with access to an initial assessment and onward signposting or referral to additional mental health support.
Crisis and Home Treatment Teams	These teams are based in the community and provide quick access to assess individuals who are experiencing a mental health crisis. Following the assessment, the team will stay involved until the care the individual needs has been arranged.

	The team try to avoid individuals being admitted into hospital by providing intensive home support for
	approximately six weeks. This supports any care that the individual may already be receiving from community
	mental health teams out of hours. Treatment involves an assessment, plan of care and any other interventions
	which may be able to prevent the individual needing to go into hospital. The teams also work with individuals
	admitted to adult acute inpatient units to support discharge or support during agreed leave. Home treatment
	support is usually provided for up to six weeks, dependent on need.
<b>Psychiatric Clinical Decisions Unit</b>	Available for people in severe mental health crisis who would benefit from a period of extra support in a unit
	staffed 24 hours a day by mental health professionals. The service is based on the Lincoln County Hospital site at
	the Peter Hodgkinson Centre and provides a safe space for patients to have a thorough assessment of their needs.
	Patients work with professionals to help decide the best treatment and support for them, whether this is returning
	home with intensive support from professionals, or being admitted to a specialist mental health ward.
Crisis Houses	Situated in Boston and Lincoln, the crisis houses offer up to a 7 day stay for those at risk of admission to hospital to
	help stabilise their mental health. Similar to supported housing they have staff on site to talk to and provide
	support as necessary and are managed by third sector provider, Richmond Fellowship.
Adult Acute Inpatient Wards	The service provides assessment and treatment for people who are experiencing a severe, short term episode of
	mental illness who can't be safely supported by a community based service. Patients can be admitted to the ward
	on a voluntary basis or detained under the Mental Health Act. Length of stay is usually an average of 28 days.
	There are wards in Boston, Lincoln and Sleaford
Psychiatric Intensive Care Unit	Based in the Hartsholme Centre in Lincoln, this 10 bed male only unit provides care for men with severe mental
	health difficulties who have complex needs and require short-term intensive support to overcome a crisis in their
	mental wellbeing - similar to the level of support patients with a physical health need would receive in a hospital's
	intensive care unit. The level of support people need usually requires a closer focus from staff who can monitor
	and support individuals to a much greater extent than the Trust's acute mental health wards. Someone would
	usually only be in the unit for a short period of time whilst their risk reduces and would return to an acute ward as
	soon as appropriate for their ongoing treatment.
Francis Willis Unit	Based in Lincoln on the Lincoln County Hospital site, this ward provides 15 beds for males with a severe and
	enduring mental illness, who exhibit challenging or high risk behaviours. This is seen as a low secure service, which
	means it is locked and there are restrictions on people being able to leave without permission. Patients have often
	had contact with the criminal justice system as part of their admission. The unit provides assessment and
	treatment to stabilise people's condition and helps move them towards recovery or further rehabilitation.

	Reducing the risks posed and ultimately enabling the person to leave the secure environment for one less restrictive.
Reablement	The Wolds at Discovery House in Lincoln provides a 16 bed mixed gender ward supporting people that do not require an extended period of treatment in hospital to build skills and confidence to live independently. Average length of stay on the ward is two months. It focuses on what people can do, rather than what they can't do and aims to reduce or minimise the need for ongoing support after reablement. It addresses the needs of the whole person, including physical, social and emotional needs.
High Dependency Rehabilitation (also known as locked rehab)	Based at Discovery House in Lincoln the Trust manages two high dependency rehabilitation wards, one for males and one for females.
	High dependency rehabilitation offers specialist rehabilitation for people with severe and enduring mental illness, who have previously had difficulty moving on due to their very complex needs. These services enable adults, who previously may have been considered too high a risk to live in community settings, an opportunity to step through with robust care planning and risk management. Initially they are on a locked ward, as they may have restrictions through the criminal justice system, or just require additional supervision.
Low Dependency Rehabilitation (also known as open rehab)	Provided at Maple Lodge in Boston, the units care for patients with severe and lasting mental illness, who have likely had significant periods in hospital to help manage their symptoms.  The teams provide support in people's recovery just before they move back into their community to live. Support includes encouraging and supporting people to become as independent as possible, by building life skills such as cooking, budgeting, self-care, managing medication and finding activities and hobbies that can help them stay well. The unit is not locked, and people can come and go as they please. Staff are on hand to monitor how people are getting on and are available to offer support with accessing their local community and working with other teams and partners to make sure everything is in place for discharge such as accommodation, benefits, and other support.