



ENC. L1

<b>Meeting:</b>	ICS Board	
<b>Report Title:</b>	Mental Health Performance Deep Dive	
<b>Date of meeting:</b>	Thursday 13 June 2019	
<b>Agenda Item Number:</b>	15	
<b>Work-stream SRO:</b>	Dr Julie Hankin/Dr Amanda Sullivan	
<b>Report Author:</b>	Maxine Bunn/Lucy Anderson	
<b>Attachments/Appendices:</b>	Enc. L2. Mental Health Performance Report	
<b>Report Summary:</b>		
<p>The Mental Health Deep Dive provides an overview of performance in 2018/19, demonstrating improvements against all National mental health standards, which covers children and young people’s access standards, Early Intervention in Psychosis (EIP), Improving Access to Psychological Therapies (IAPT), Increasing Physical Health checks for people with Severe Mental Illness and Reducing Out of Area Placements, (urgent and emergency mental health pathway including crisis resolution and home treatment teams) and Liaison Psychiatry.</p> <p>A performance report is attached as Enclosure A, which provides comprehensive overview of performance against each indicator during 2018/19. Recovery Action Plans have been developed which outline key actions to improve performance and delivery against the action plans is monitored by the system.</p> <p>The report highlights difficulties the system has addressed during 2018/19 which includes data, transformation plans, availability of training and system working. The report concludes with a summary of next steps and priorities for 2019/20.</p>		
<b>Action:</b>		
<input checked="" type="checkbox"/> To receive <input checked="" type="checkbox"/> To approve the recommendations		
<b>Recommendations:</b>		
1.	Note the contents of the report	
2.	Support discussions taking place with HEE/NHSE to determine if the in-house CBTp training course can be accredited	
3.	Approve the next steps that have been outlined in sections 18-34	
<b>Key implications considered in the report:</b>		
Financial	<input type="checkbox"/>	
Value for Money	<input type="checkbox"/>	
Risk	<input type="checkbox"/>	
Legal	<input type="checkbox"/>	
Workforce	<input type="checkbox"/>	
Citizen engagement	<input type="checkbox"/>	
Clinical engagement	<input type="checkbox"/>	
Equality impact assessment	<input type="checkbox"/>	



Engagement to date:				
Board	Partnership Forum	Finance Directors Group	Planning Group	Workstream Network
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Performance Oversight Group	Clinical Reference Group	Mid Nottinghamshire ICP	Nottingham City ICP	South Nottinghamshire ICP
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contribution to delivering the ICS high level ambitions of:				
Health and Wellbeing				<input checked="" type="checkbox"/>
Care and Quality				<input checked="" type="checkbox"/>
Finance and Efficiency				<input checked="" type="checkbox"/>
Culture				<input checked="" type="checkbox"/>
Is the paper confidential?				
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Note: Upon request for the release of a paper deemed confidential, under Section 36 of the Freedom of Information Act 2000, parts or all of the paper will be considered for release.				



## **Mental Health Performance Deep Dive**

**28 May 2019**

### **Introduction**

1. Prior to the publication of the Five Year Forward View for Mental Health in February 2016 there were limited performance standards for mental health services. The purpose of this briefing is to provide an overview of performance in Nottinghamshire against the national mental health standards and to highlight action being taken across the ICS to improve delivery against the standards. A summary of the main issues that have been addressed across the system and have contributed to improvements in performance will also be provided.

### **Current Position**

2. From July 2018 Recovery Action Plans were developed for children and young people's access standards, Early Intervention in Psychosis (EIP), Improving Access to Psychological Therapies (IAPT), Increasing Physical Health checks for people with Severe Mental Illness and Reducing Out of Area Placements, which incorporates the urgent and emergency mental health pathway including crisis resolution and home treatment teams and Liaison Psychiatry.
3. As demonstrated in the Mental Health Performance Report (Enc. M2) performance has improved from April 2018 and is summarised below in sections 4-9:
4. Children and young peoples' access standards:  
Performance in quarter 1 was 9.6% and the projection for quarter 4 is 25.3% based on local data and 17.3% based on national reporting against a target of 32%.
5. Children and young peoples' eating disorder access standards:  
Performance against the started treatment in 1 week (urgent) standard has increased from 66.7% in quarter 1 to 100% in quarter 4. Performance against the routine standard has increased from 77.8% in quarter 1 to 91.7% in quarter 4 against a target of 95%
6. Early Intervention in Psychosis:  
There are two standards for EIP – starting treatment in 2 weeks and delivering NICE compliant services. The standard for starting treatment was 53% in 2018/19 has been consistently exceeded in Nottinghamshire; performance in March 2019 was 69.9%. in 2018 Greater Nottingham was graded level 2 against NICE compliant standards and Mid Notts was graded level 1, an audit undertaken in April 2019 has graded the ICS as achieving level 2 against the NICE standards, which indicates an improvement in performance.
7. Improving Access to Psychological Therapies:

Performance against the access standard has increased from 4.07% in April 2018 to 4.65% in February 2019; the access standard in February 2019 is 4.75%. The 6 week and 18 week waiting time standards have been achieved by the ICS and recovery rates are consistently above the 50% standard.

8. Increasing Physical Health checks for people with Severe Mental Illness: Performance against the standard has increased from 31.1% in quarter 1 2018/19 to 36.2% in quarter 4 2018/19 against a standard of 60%.
9. Reducing Out of Area Placements:  
The number of inappropriate out of area bed days has reduced from 5549 in quarter 1 2018/19 to 3319 in quarter 4 2018/19 which is a significant reduction of 40.2%. The target is to achieve zero inappropriate out of area bed days by quarter 4 2020/21.

## Issues

10. **Data** - There have been a number of data quality and data flow issues which have impacted on performance in 2018/19, predominately these have impacted on children and young people's access standards, EIP and reducing out of area placements, which has impacted on performance reporting and agreeing remedial actions.
11. Nationally performance information is reported via the Mental Health Service Data Set (MHSDS) for the children and young people's access standard. Initially only Nottinghamshire Healthcare NHS Foundation Trust (NHT) was able to flow data and report performance. There are a number of providers in Nottinghamshire who contribute to the access standard and nationally reported performance has not been reflecting local data. Actions have taken place during 2018/19 and it is expected to be rectified in quarter 1 2019/20, with all providers' performance data being reflected in national reporting, which will improve the reported performance for Nottinghamshire.
12. Data quality was identified as an issue for EIP, which was impacting on delivery of the standard across all CCGs. It was also identified that not all cases of EIP had been reported for Newark and Sherwood CCG. The provider has been providing exception reports which highlighted data quality issues and enabled agreed actions to be taken and monitored. Exception reports continue to be provided and monitored through the contracting process. There were also differences in performance data that was reported through the Strategic Data Collection Service (SDCS) and the MHSDS, performance reported via SDCS was better than what had been reported through MHSDS. The national objective is that all information is reported via MHSDS. Focused action was taken to review data quality and there are now minimal differences in performance reported via SDCS and MHSDS in readiness for full migration to reporting through MHSDS.
13. Due to a number of issues with the quality of data provided to monitor out of area placements, an Information Breach Notice was issued in March 2019 from the CCG to the provider through the formal contract process. In response to the



Information Breach Notice a plan has been developed which outlines actions being taken to improve data quality and reporting. All actions are on track and the plan is monitored through the monthly contract review meeting.

14. **Transformation Plans** - Prior to the development of Recovery Action Plans from July 2018, there were limited plans outlining action required to ensure achievement of the standards in Nottinghamshire. National and regional feedback highlighted that systems where performance has improved had developed delivery and transformation plans. Although some plans were available in Nottinghamshire they were not specifically detailed, coordinated or monitored. From July 2018 system wide plans have been developed which articulate and demonstrate the impact of the actions required to improve performance. Steering groups have been established and performance management frameworks to monitor delivery of the agreed system wide actions have been implemented.
15. **Availability of Training** – A risk has been identified which may prevent the system progressing to comply with NICE standards for EIP services. If a service area scores 1 in any domain the system is unable to progress above level 2 compliance. The system is projected to reach at least level 3 in all domains except one. In order to achieve level 3 or 4 compliance CBTp therapy must be available; however there are limited national courses and the training programme is two years. This will impact on the ability of the ICS to achieve level 3 or 4 compliance. The provider has developed an in-house CBTp course and discussions are taking place with HEE/NHSE to determine if this course can be accredited, the Board is asked to note and support progress of this action.
16. **System Working** - Improving performance against the standards and service delivery cannot be addressed by one organisation in isolation. There is evidence of partnership working, for example the development of street triage in Nottinghamshire, however the ICS infrastructure has enabled this to be strengthened. The Nottinghamshire Crisis Care Concordat enabled strong working relationships to be built between system partners working together on the Crisis pathway. The ICS has built upon the partnership working developed to deliver the Crisis Care Concordat and has created a task force made up of system partners which monitors improvements across the urgent care pathway which are taking place at pace. A number of workshops have been held which have been facilitated by the task force.
17. The workshops have focussed on the role of community and voluntary sector partners within the Crisis pathway and issues affecting discharges from inpatient care. The workshops have identified specific actions such as the implementation of a partnership bed management process which have contributed to a reduction in Out of Area placements.

## Next Steps

18. 2018/19 has enabled the system to plan for future service delivery and performance has improved across all standards. There will continue to be focus



on all the key areas, underpinned by improved data quality, robust and detailed delivery plans, which incorporate standards, outlined in the NHS plan (2019) and strengthened system working. Specific actions that will be taken include:

19. **Children and Young People's access standards** – a joint review of demand and capacity is being undertaken to agree areas for improvement, which will be monitored during quarter 1.
20. A Communication plan is now live, with the objective of increasing referral rates, events are planned and taking place throughout the county.
21. **EIP-** A referral template for Local Mental Health Teams has been developed to include suspected EIP. This will ensure access to the service is streamlined. The template was uploaded to SystmOne for Greater Nottingham in early May 2019 with GP Communications planned to support this. It will be implemented in Mid Nottinghamshire by the end of May 2019.
22. The Individual Placement Support service implementation steering group has started and recruitment will commence, to ensure the service is available across the ICS.
23. Currently 80% of EIP staff are trained in Behavioural Family Therapy with the remainder to be trained by the end of quarter 1 2019/20.
24. EIP staff are being trained to undertake physical health checks and a support worker in each local mental health team will support with ensuring the physical health checks are undertaken.
25. **IAPT** - Focused work is being undertaken with the CCGs with low referral rates, this will be prioritised in Nottingham North and East initially.
26. Regular review meetings with providers will continue to ensure the interim pathway will resolve waiting times issues within the projected timeline.
27. In Mid Nottinghamshire, the provider continues to recruit to vacant posts, with increased capacity from the national team to support those patients being transferred from exiting providers, plus the development of Step 2 introduction groups to help support clients into service.
28. **Out of Area Placements** - the Crisis Resolution and Home Treatment Team (CRHT) service model has been re-specified, a plan for a revised delivery model was submitted in May 2019 and an implementation plan will be agreed in quarter 1 2019/20. This will ensure CRHTs are developed to deliver a robust service offering an alternative to a hospital admission. To support delivery of the service transformation the provider has commenced recruitment of CRHT staff.

29. Five additional female psychiatric intensive care beds have been subcontracted which are able to be categorised as appropriate out of area following completion and agreement of the continuity of care principles.
30. Sixteen inpatient beds have been subcontracted from the Priory Group and admissions started on 1 May 2019. Continuity of Care has already been agreed by the system for the Priory Group and the beds are located at the same unit.
31. The Framework 'Moving Forward' service has been expanded. The service aims to facilitate timely discharge, in addition to providing in reach to NHT wards, the service will also be provided to patients admitted to Priory wards.
32. **Physical health checks for people with severe mental illness** - Analysis of practice level data is complete and shows the highest and lowest performing practices, the number of patients receiving 0,1,2,3,4,5,6 checks, and the size of the SMI register for each practice. Analysis has also identified by CCG which components are less well delivered (BMI, cholesterol and glucose). Action plans are being developed with locality teams.
33. EIP staff are being trained to undertake physical health checks and a support worker in each local mental health team will support with ensuring the physical health checks are undertaken.
34. Detailed analysis of the additional 5 components will be undertaken now the technical guidance has been finalised. The additional components will be communicated to localities and practices.

## Recommendations

35. The Board is asked to:
- note the contents of the report
  - support discussions taking place with HEE/NHSE to determine if the in-house CBTp training course can be accredited, and
  - approve the next steps that have been outlined in sections 18-34.

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28 May 2019