

HEALTH AND WELLBEING BOARD

12 MARCH 2015

MENTAL HEALTH CRISIS CARE CONCORDAT

Report from: Barbara Peacock, Director of Children and Adults Services

Author: Dick Frak, Mental Health Social Care Commissioning Manager

Summary

The purpose of this report is to update members on the Mental Health Crisis Care Concordat and its implementation for Medway. The multi-agency work required to deliver upon the commitments made in the Kent and Medway Mental Health Crisis Care Concordat has already identified key areas for action in partnership. Several of these areas will need to be addressed by using existing governance arrangements and working groups. Members are asked to note progress made and support work across agencies to address areas of risk in relation to mental health crisis.

1. Budget and Policy Framework

- 1.1. The work to be undertaken to make progress on the Mental Health Crisis Care Concordat locally is consistent with the Council Plan for 2015/16.
- 1.2. The Joint Health and Wellbeing Strategy for Medway 2012-17 set five strategic themes. Theme 4 is set to improve physical and mental health and wellbeing.
- 1.3. There is no additional or dedicated Mental Health Crisis Care Concordat budget identified in the national Crisis Care Concordat. Implementation of its commitments, the cost of governance arrangements and operational changes are matters for partnership agencies and are expected to be made through existing resources, or in future commissioning decisions.

2. Background

- 2.1. The *Mental Health Crisis Care Concordat - Improving outcomes for people experiencing mental health crisis*, was published by Department of Health on 18 February 2014 and signed by 22 National Organisations, including NHS England, the Association of Chief Police Officers, the Local Government Association, Public Health England, the

Care Quality Commission, the Royal College of General Practitioners, Mind, the Association of Directors of Children's Services (ADCS), and Adult Social Services (ADASS) and the Royal College of Psychiatrists.

- 2.2. The National Concordat Signatories made a commitment "to work together, and with local organisations, to prevent crisis happening whenever possible through prevention and early intervention. We will make sure we meet the needs of vulnerable people in urgent situations. We will strive to make sure that all relevant public services support someone who appears to have a mental health problem to move towards Recovery".
- 2.3. The Concordat also provides important guidance based on service user experience about what is needed as urgent help. It sets out the case for change, the core principles and four domains around which outcomes should be designed and measured:
 - Access to support before Crisis Point;
 - Urgent and emergency access to crisis care;
 - Quality of treatment and care when in crisis;
 - Recovery and staying well/preventing future crisis.
- 2.4. The signatories of the Concordat expect local partnerships between the NHS, Local Authorities and the Criminal Justice System to work to embed the Concordat principals into service planning, commissioning and service delivery.
- 2.5. The Mandate from the government to NHS England for 2014-15 established specific objectives including that "Every community to have plans to ensure no one in Crisis will be turned away, based on the principals set out in this Concordat".
- 2.6. The National Concordat recognised that real change can only be delivered locally and expected every locality across England to work together in local partnership to adopt and implement its principals. This should be evidenced by/or the publication of a local Mental Health Crisis Care Concordat setting out the commitment of local agencies for:
 - The development of a shared action plan to enable delivery;
 - A commitment to reduce the use of police stations as places of safety;
 - Evidence of sound local governance arrangements.
- 2.7. This expectation was reiterated in a joint letter to the Chairs of Health and Wellbeing Boards on 27 August 2014 from the Minister of State for Care and Support and the Minister of State for Policing and Criminal Justice (see Background Papers).

3. Progress to date

- 3.1. Across Medway Council and Kent County Council, before the publication of the National Concordat, a 'Policing and Mental Health Partnership Board' was already in place with representation from NHS, the Local Authorities and the Police. This has provided the basis for Kent and Medway Concordat Steering Group, Co-Chaired by Dave Holman (Mental Health Commissioning Lead, West Kent CCG) and Chief Superintendent Adrian Futers, Strategic Partnerships Command, Kent Police.
- 3.2. Membership of the Kent & Medway Concordat Steering Group includes the Kent and Medway Clinical Commissioning Groups (with West Kent CCG as the lead CCG); South East Coast Ambulance Service (SECamb); Kent & Medway NHS and Social Care Partnership Trust (KMPT); Kent Police; Sussex Partnership NHS Foundation Trust; Medway Council; Kent County Council; South East Commissioning Support Unit; South London and Maudsley NHS Foundation Trust; and Medway NHS Foundation Trust.
- 3.3. Kent and Medway Mental Health Crisis Care Concordat was published in December 2014 (See Background Papers).
- 3.4. The Steering Group has developed a Multi-agency Action plan to enable the Concordat's core principals and outcomes to be delivered locally. The plan is organised to address the four domains set out at 2.3. The Action Plan was last updated in January 2015. Four sub-groups of the Concordat Steering Group have been established to tackle each of these domains. 14 key performance indicators have been developed to measure the progress of delivery.
- 3.5. Governance for the local Mental Health Crisis Care Concordat is now in place, with direct representation from Medway Council and Medway CCG within the work of the sub-groups to take forward delivery in key areas.
- 3.6. KMPT have taken steps to develop a single point of access to a multi-disciplinary mental health team around the clock and this telephone number has been shared with the Police and local GPs.
- 3.7. The Concordat Steering Group have used the Mental Health Action Groups established across Medway and Kent as a means to consult and engage with service user/patient groups and to highlight the commitments made in the local Concordat published in December 2014.
- 3.8. Crisis and Mental Health Awareness Training is delivered to local agencies through Mental Health First Aid training. In Medway this is delivered through the Medway Public Health Directorate.

- 3.9. There is some evidence to suggest that the initiative taken by Medway CCG to commission a Crisis Café using through Sunlight Centre with support from KMPT has been effective in Medway in supporting users in crisis and preventing their attendance at Accident & Emergency and avoiding acute psychiatric admission.

4. Advice and Analysis

- 4.1. Good early progress has been made by the Kent & Medway Concordat Steering Group. However, the Multi-agency Action plan indicates the level of work that is required to ensure there is urgent and emergency access to crisis care for a person with a mental health crisis, and that locally this is consistently responsive, proportionate, focuses upon the person's needs and is co-ordinated across partner agencies. Services must also be so arranged so that there can be access to support *before* a crisis (to promote prevention) and *following* crisis, so that the person can make a recovery, stay well and learn from the crisis event and thereby prevent future crisis occasions.
- 4.2. Local work on the Concordat has highlighted particular concerns for partner agencies, including:

Use of Section 136

Section 136 of the 1983 Mental Health Act (as amended 2007) is a power to detain a person that can be used by the Police where there is a concern that the person is suffering from a mental disorder and is in immediate need of care and control. It is used at the Police Officer's discretion. Under this legal power the person can be taken to a Place of Safety. A Place of Safety can be an acute psychiatric in-patient unit, such as at Little Brook Hospital in Dartford. However there are occasions that such a Place of Safety may not be available and the person has to be detained in Police Custody.

Medway has the highest use of Section 136 by Police across the county, but no local hospital place of safety. Persons detained under Section 136 must be taken to Dartford if a place is available.

192 Section 136 detentions were made in Medway during 2014, with the highest activity recorded during July (22) and August (21). These were the highest recorded Section 136 use during 2014 of any Kent locality.

The same data set, using all Section 136 incidents, shows that only 21% section 136 detentions result in hospital admission, with only between 10-12% of all Section 136s being "converted" into formal hospital detention under the Mental Health Act.

Knowledge of mental health crisis services

The need for Police Officers to be able contact Mental Health Crisis services straightforwardly.

Learning from Serious Incidents across Agencies

Improved serious incident processes *across* different agencies so that lessons can be learnt and applied to avoid and prevent future serious incidents.

Improved information sharing

Effective information-sharing arrangements - both about local services that can be accessed in a crisis; *and* arrangements between partner agencies where there are specific causes for concern about particular individuals, including persons who may frequently present to local services in a crisis.

Improved training and learning on mental health crisis

The need for Police Officers to have access to good quality training on mental health crisis. There is evidence that previous training provided by KMPT in collaboration with other agencies to the Police was well received. However, it does not appear to have changed the level of Section 136 use locally.

The need for suicide prevention training to be offered to other professional groups (this was taken forward jointly by the Council and KMPT in 2014 and is shortly to be repeated by KMPT).

Street Triage

In these schemes, mental health professionals (usually psychiatric nurses) provide on-the-spot advice to Police Officers who are dealing with people with possible mental health problems. This advice can include a clinical opinion on the person's condition, or appropriate information sharing about a person's health history.

The aim is, where possible, to help police officers make appropriate decisions, based on a clear understanding of the background to these situations. This should lead to people receiving appropriate care more quickly, leading to better outcomes and a reduction in the use of section 136.

While Street Triage arrangements were trialled in another part of Kent during 2013/2014, this has not been taken forward and does not appear in the current version of the Concordat Multi-agency Action plan.

4.3. There are several other standing groups across Medway and Kent that have within their Terms of Reference outcomes that contribute to achieving the principles of the local Crisis Care Concordat, including:

- The Kent & Medway Suicide Prevention Strategic Steering Group
- Medway Drug & Alcohol Action Team (DAAT) Board
- Medway Mental Health Joint Operations Group
- Medway and Swale Acute Services and Policy 136 Monitoring and Liaison Meeting
- Medway Safeguarding Children's Board
- Kent and Medway CQUIN Working Group on Safe and Effective Transitions of Adolescents from Children and Young People Mental Health Services to Adult Mental Health Service
- Kent and Medway Adults Safeguarding Board
- Community Safety Partnership
- Kent and Medway Domestic Abuse Strategy Group.

Going forward, it will be important for the Kent & Medway Crisis Concordat Steering Group to forge strong links to each of these groups, so that there is a clear and understood division of labour to achieve the principles in the local Concordat and ensure delivery.

5. Risk Management

5.1 Four key risks have been identified that must be mitigated to bring about the local development of the Mental Healthy Crisis Care Concordat while ensuring that the key changes required are sustained over the longer term.

Risk	Description	Action to Avoid or Mitigate Risk	Risk Rating
Inadequate Representation on Concordat group	<p>The Crisis Concordat Steering Group is not adequate to the task of delivering on principles because membership is incomplete and/or not sustainable.</p> <p>Local agency representatives do not have sufficient seniority to take decisions on behalf of their organisations or to be the champion change.</p>	Members representing agencies are sufficiently senior to take decisions and can bring about change on the ground.	High
Focus on service issues	Steering group focuses on service problems and	The local user experience of	High

to the detriment of outcomes	<p>inter-agency conflicts.</p> <p>These matters distract from the purpose of the Concordat to help meet the needs of vulnerable people in urgent situations.</p>	<p>crisis is drawn into steering group kept under regular review.</p> <p>The health needs of the person in crisis are paramount.</p>	
Failure to reach diverse community members and meet Equality Act 2010 requirements	Concordat steering group does not form necessary relationship with minority communities and those with special characteristics under the Equalities Act, whose members may be at greater risk of coming into contact with agencies during crisis.	The Steering Group makes direct connections to local BME and other protected groups, to ensure their particular experience and expertise about what works in a crisis is taken into account in the Multi-agency Action plan.	High
Duplication of effort	The Steering Group duplicates work being undertaken by other standing groups and local efforts are at risk of being incoherent/uncoordinated.	Strong links are made across local standing groups.	High

6. Consultation

- 6.1. The Multi-agency Action plan to enable delivery of the local Concordat's core principles and outcomes includes actions to consult and engage with mental health service user and patient groups, including those representing Black and other minority ethnic groups to take account of ethnic, cultural and other diverse needs. This is identified as a key risk for the success or failure of the local Concordat actions and is highlighted in section 5 above.

7. Financial Implications

- 7.1. There are no identified financial implications arising for the Medway Health and Wellbeing Board arising from this report. Implementation of the Concordat commitments, the cost of governance arrangements and operational changes are matters for partnership agencies and are

expected to be made through existing resources and future commissioning intentions.

8. Legal implications

- 8.1 The Health and Wellbeing Board has a statutory obligation under section 195 Health and Social Care Act 2012 to encourage persons who arrange for the provision of any health or social care services in the area to work in an integrated manner for the purpose of advancing the health and wellbeing of the people in Medway. Supporting the development of the Kent & Medway Mental Health Crisis Care Concordat is therefore within the remit of the Health and Wellbeing Board.
- 8.2 Section 136 Mental Health Act 1983 provides that if a police constable finds a person who appears to him or her to be suffering from mental disorder and to be in immediate need of care or control in a place to which the public have access, the constable may, if s/he thinks it necessary to do so in the interests of that person or for the protection of other people, remove that person to a place of safety. A person removed to a place of safety may be detained there for a period not exceeding 72 hours for the purpose of enabling him or her to be examined by a registered medical practitioner and to be interviewed by an approved mental health professional and of making any necessary arrangements for his or her treatment or care.

9. Recommendations

- 9.1 The Board is asked to support the Kent & Medway Mental Health Crisis Care Concordat.

Lead officer contact:

Kim Carey, Interim Deputy Director of Children and Adults Services
(01634) 331212, Email: kim.carey@medway.gov.uk

Background papers

Mental Health Crisis Care Concordat -
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/281242/36353_Mental_Health_Crisis_accessible.pdf

Kent and Medway Mental Health Crisis Care Concordat -
http://www.kent.police.uk/about_us/attachments/Kent_and_Medway_Mental_Health_Concordat.pdf

Letter from Norman Lamb and Mike Penning: Mental Health Crisis Care Concordat: Making Change Happen in your Area