

HEALTH AND WELLBEING BOARD

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SECTION 136 DEEP DIVE REPORT

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Summary

This report is for information and provides an update on the commitments made in the ¹Crisis Care Concordat across Kent and Medway to undertake a Deep Dive analysis of Section 136. It provides an overview of the Deep Dive report that has been completed and recommendations from the findings.

1. Budget and policy framework

- 1.1 The deep dive project was completed as part of the Sustainability and Transformation Partnership (STP) mental health programme.
- 1.2 The 5 Year Forward View for Mental Health states 'People facing a crisis should have access to mental health care 7 days a week and 24 hours a day in the same way that they are able to get access to urgent physical health care. Getting the right care in the right place at the right time is vital.'

2. Background

- 2.1 One of the key aims of the crisis prevention agenda in Kent and Medway is to reduce the need for Section 136 (S136) admissions under the Mental Health Act and to provide alternative intervention services for people in crisis. Despite initiatives across Kent and Medway there continued to be an increase in the number of s136; this increase in activity is also reflected in the national figures which have increased over the last 5 years.

¹ Strategic Concordat Review Sept 2018:

The outcome of the review resulted in a change to the structures that were previously in place. The Crisis Care Concordat is now separated into three tiers (Tier 1 is the MH Crisis Care Board (previously known as the PCC Oversight Group). This will provide the decision making arm of the concordat. Tier 2 is the MH Crisis Care Pathway Group; this will define the crisis care pathway and submit proposals and recommendations to the above group. Tier 3 is the operational groups that report up to Tier 2)

2.2 Through the Crisis Care Concordat a deep dive approach was agreed to help partner agencies (the Police, mental health Trusts, Approved Mental Health Professionals (AMHPs), Accident and Emergency (AandE) departments and the ambulance trust) visualise how the entire Section 136 pathway works, how partners interact and work collaboratively, and explore how existing process might be refined, altered or created with a view to reduce the rate of Section 136 detentions.

3. Medway specific issues

3.1 The deep dive report highlighted the following issues specific to Medway:

Table 1: No. of S136 April, May, June 2019

NHS CCG area of residence	No. of people detained	Rate per 100,000 population all ages 2019
Ashford	32	23.5
Canterbury and Coastal	32	13.9
Dartford Gravesham and Swanley	63	22.8
Medway	88	28.9
South Kent Coast	27	12.9
Swale	42	36.2
Thanet	52	35.4
West Kent	95	18.9
Outside Kent and Medway	47	n/a
Not recorded	30	n/a
Total	508	

3.2 The table above shows that during the data recorded for the deep dive, Medway had the third highest number of Section 136s per population across Kent and Medway. Of the 88 detentions, 15 people were taken to AandE at Medway Maritime hospital.

3.3 One of the recommendations to address this issue is to have a targeted approach in the top three highest areas (Swale/Thanet and Medway).

3.4 In comparison the table below shows the number of Section 136's during April, May and June 2020, there has been an increase of seventeen Section 136 during this period in 2020, which may have also been impacted by the lockdown period.

Table 2: No. of S136 April, May, June 2020

Month	No. of S136 in Medway	Rate per 100,000 population all ages 2019
April 2020	27	8.8%
May 2020	33	10.81%
June 2020	45	14.77%
Total	105	34.15%

- 3.5 A number of developments are taking place in Medway to address the rise in Section 136. These include:
- NHSEI funding to
 - open a Safe Haven
 - enhance Crisis Resolution Home Treatment Teams
 - CCG investment to enhance Liaison Mental Health Services
 - A Kaizen event to review and improve the crisis mental health pathway for Medway and Swale planned for September 2020

Further details can be found in Appendix D, Briefing Note – Mental Health Activity in Medway August 2020, circulated to members prior to the Health and Wellbeing Board.

4. Advice and analysis

- 4.1 A Section 136 project group was formed with representatives from the partner agencies and a reporting template was devised with the intention of collating information from each organisation on each person detained during April, May and June 2019. A data flow process setting out how the template would be completed was agreed. The information required would capture age, gender, ethnicity, CCG of residence, where detained, if statutory services involved and the decision outcome following the assessment.
- 4.2 A Rapid Evidence Review was undertaken. This was completed by a Public Health Specialist and highlights the challenges for professionals supporting people with dual diagnosis, substance misuse and personality disorder, particularly when there are differences in how people and their needs are viewed. Questionnaires were designed for the Police, the AMHPs, Section 12 Doctors and the health care staff at the hospital-based place of safety (HBPoS). A scoring matrix with space for comment was used to capture their experience in relation to their professional role, joint working, dependencies, safety and quality of care.
- 4.3 Questionnaires were designed for people detained to complete during or post detention about their experience.
- 4.4 Full details of the data analysis can be found in Appendix A Deep Dive report and Appendix B Infographic sheet.

4.5 The Section 136 Standards for Kent and Medway were agreed by all agencies and signed off by the Crisis Care Concordat and AandE Boards in November 2018; these can be found in Appendix C.

5. Risk management

Risk	Description	Action to avoid or mitigate risk	Risk rating
Increase in S136 detentions	Without addressing the recommendations from the deep dive report there will continue to be a lack of understanding and commitment to adhere to the S136 Standards for Kent and Medway. Discrepancies and inconsistencies in data reporting across agencies will remain	Recommendations from the report are formalised as part of a multi-agency project improvement group	C2

6. Consultation

6.1 The overall objective of the deep dive was for the statutory organisations to gain a shared view of the issues and reach consensus on the solutions so to:

- Inform strategic and policy decisions
- Improve outcomes for people detained
- Increase satisfaction between practitioners and professionals involved in the Section 136 process

6.2 Sixty-three professionals responded to the deep dive questionnaires and the report concluded that there is a strong wish amongst partners to resolve the practical issues, whilst influencing the wider system to respond sooner with the least restrictive option. However, the personal views shared by the professionals indicate frustration and lack of trust between the Police, HBPOS and AMHPs as well as concerns about the risks for all involved. The problems encountered during the deep dive when following the data flow process appears to mirror similar issues described by the professionals and therefore behavioural change is needed across all agencies. However, without a lead agency to coordinate, manage and monitor the whole pathway such behaviour change and improvement is unlikely.

- 6.3 The recommendation from the deep dive analysis is for all partner organisations to commit to a multi-agency service development project plan and governance reporting framework with participation of user voice. The project plan should therefore include the following 18 areas of work:
1. An identified lead for the project group to coordinate the improvement plan and reporting
 2. A review of the Section 136 Standards against current practice in order to inform areas of the improvement plan not captured in these recommendations
 3. A review of the dataset in Appendix 10 of the Section 136 Standards to ensure it will capture and monitor performance and impact of the pathway against the key Section 136 Standards on a regular basis
 4. Scope and develop interoperability opportunities between the partner agencies involved in Section 136 detentions and assessment that will enable efficient data collection and support monitoring and reporting of the pathway
 5. Introduce the formal monitoring and reporting of Section 136s that expire and reasons
 6. Introduce the formal monitoring and reporting of Section 136s where people have to wait for more than 4 hours for assessment including children and young people
 7. Update the Kent and Medway Crisis Board each quarter with exception reporting where standards are not met or where there is persistent noncompliance
 8. Ensure all frontline members of staff are aware of the College of Policing definition for mental ill health, and is reflected in joint working and understood by partner agencies
 9. Ensure all police and frontline members of staff have the same understanding for what constitutes a mental health crisis e.g. a situation that the person or anyone else believes requires immediate support, assistance or care from an urgent and emergency mental health service (NICE Guidance Achieving Better Access to 24/7 Urgent and Emergency Mental Health Care, Nov 2016)
 10. Develop operational protocols based on the standards that align for all partner agencies' frontline professionals and practitioners to follow
 11. Audit SECamb response times to Police requests for Section 136 conveyance within 18 minutes and more than 40 minutes as well as instances when HBPoS is used as an alternative to AandE

12. Formalise the communication of the assessment decision by AMPHs and S12 Doctors with the Police for their records and improved working
 13. Identify relevant training needed for each agency involved in the Section 136 pathway, where it should be delivered jointly and monitor training delivery and take up by each to ensure professionals have the relevant skills
 14. Repeat questionnaires for feedback from all involved in Section 136 including those who were detained (during and post detention) and with the assistance of mental health user voice group
 15. Review the longer-term outcomes of people detained
 16. Identify and review individuals who are regularly detained on Section 136, ensuring crisis plans are in place and include all relevant agencies
 17. Consider a targeted approach to activity in Swale, Thanet and Medway with a view to reduce the number of detentions and particularly for young women
 18. Scope and test the increased use of private addresses as alternative places of safety
- 6.4 The deep dive report and recommendations was approved by the Kent and Medway Crisis Board on 16/07/20.

7. Financial implications

- 7.1 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.

8. Legal implications

- 8.1 There are no legal implications to be considered as an outcome of the Deep Dive report.

9. Recommendations

- 9.1 The Health and Wellbeing Board is asked to note progress and support planned work across agencies to address the recommendations of the deep dive report.

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Appendices

Appendix A: Deep Dive Analysis Report

Appendix B: S136 infographic sheet

Appendix C: Kent and Medway S136 standards

Appendix D: Briefing Note - Mental Health Activity in Medway

Background papers

None