

HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

17 AUGUST 2021

KENT AND MEDWAY NHS AND SOCIAL CARE PARTNERSHIP TRUST UPDATE

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Summary

Following the presentations to this Committee in June 2021, this paper provides an update on the following areas:

- A general update on KMPT services based in Medway and/or support the Medway population
- An overview of the main care pathways for adults and older adults into KMPT mental health services
- An update on the Medway and Kent eating disorder service
- A recommendation to theme future reports to ensure a system response is provided to the committee outlining key developments

1. Budget and policy framework

- 1.1. Under the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 the Council may review and scrutinise any matter relating to the planning, provision and operation of the health service in Medway. In carrying out health scrutiny a local authority must invite interested parties to comment and take account of any relevant information available to it, and in particular, relevant information provided to it by a local Healthwatch. The Council has delegated responsibility for discharging this function to this Committee and to the Children and Young People Overview and Scrutiny Committee as set out in the Council's Constitution.
- 1.2. The Constitution stipulates that this Committee will be the lead on scrutiny of health insofar as it relates to the transition between childhood and adulthood

or where consultation by relevant NHS bodies or relevant health service providers bridge services for children and adults, with participation by representatives of the Children and Young People Overview and Scrutiny Committee when such matters are discussed.

2. Background

- 2.1. Medway has a number of mental health and learning disability services across both statutory and Third Sector providers covering the full spectrum of mental health needs. People access mental health support at many points depending on their presentation from their general practitioner (GP) and local authority to the specialist care delivered by KMPT for people with serious mental illness (SMI).
- 2.2. This report predominantly reports against the KMPT provision, as requested by the Committee. KMPT is commissioned to provide a range of specialist inpatient, community and specifically tailored services to the younger and older adult population of Medway and Swale. Some of these services are based in Medway; others are based outside of Medway and offer an in-reach provision to the residents of Medway.
- 2.3. There are a number of services KMPT do not provide including Children and Young People and eating disorder services, for children and adults, both of which are provided North East London NHS Foundation Trust (NELFT). Neither does the Trust provide Improving Access to Psychological Therapies (IAPT) services, front line talking therapies, these are provided by a Third Sector organisation.

3. KMPT Service Update

- 3.1. The remainder of this report updates committee on KMPT services which are based in Medway and/or support the Medway population.
- 3.2. **Clinical Care Pathways Programme:** KMPT continues to implement sustainable, evidenced-based, therapeutic care pathways, through the Clinical Care Pathways Programme. Development of the programme includes people with lived experience, staff and other key experts, including Medway carers and local third sector organisations such as MEGAN. Roll out across our community teams has continued despite Covid with some elements able to be provided digitally when face to face has not been possible.
 - 3.2.1. As an example of this pathway work, the Medway Community Mental Health team (CMHT) has fully implemented an Initial Interventions Programme, a first line talking therapies treatment, which most new people accessing care are offered. If they require follow up care, they will move onto next level treatment such as the Change Programme for people with a diagnosis of Complex Emotional Difficulties Pathway (Personality Disorder) diagnosis. Through clearly designed therapeutic pathways treatment is more targeted and focussed.

- 3.2.2. These important developments form part of the wider system response to the NHSE Long-Term Plan for Mental Health, in particular those related to the Community Mental Health Framework, a four year transformational programme being rolled out first in Medway and Swale.
- 3.3. **Community mental health teams (CMHTs);** The Medway CMHT, based at Britton Farm, and Swale CMHT, based in Sittingbourne, provide services to adults over the age of 18 years who do not require older adult related care and who have severe long-term mental health needs. In response to COVID, CMHTs introduced 7 day working during the initial lockdown and have kept an element of extended hours as part of recovery planning aligning to GP operational hours with some weekend and late-night clinics being available.
- 3.4. **CMHT performance (adult and older adult)** – The 4 week wait standard, referral to assessment, continues to improve and the Medway teams have maintained and improved against this standard despite the pandemic.
- 3.4.1. Week beginning the 26th July 2021, the Medway CMHT stood at 93.4% compliance for 4 week wait equating to 128 persons seen in the last week from a total of 137 expected to be seen for their assessment within 4 weeks. Reasons for the 9 people not seen range from people cancelling their appointments, moving their appointments, staff sickness and so on. At an average of 59 referrals a week and 250 referrals a month the Medway CMHT receive the highest number of referrals of any of the CMHTs. The 4 week wait is a positive indicator the team has the right skill mix and levels of staffing to cope with the demand.
- 3.4.2. The older persons community teams have been impacted significantly by Covid especially in terms of the Memory Assessment element of 4 week wait. This service is similar to an outpatient service in general hospitals however, historically, required a number of face to face assessments to finalise a diagnosis of dementia or not. Lockdown proved a challenge with the amount of activity able to be completed significantly reduced. Positively there is resumption of face to face assessment alongside some national new models for digital memory assessment in place. As of last week, the Medway older adults' team 4 week wait was up to 70% against a 95% standard up from a low in May 2020 of 20%.
- 3.4.3. Currently, 18 week wait standard from referral to commencement of treatment stands at 90% for the CMHT and 93% for older adults against a 95% standard.
- 3.4.4. Improved productivity is due in part to skill mixing due to challenges in recruiting nurses and bringing in new roles such as assistant psychology roles as well as embedding new ways of working including digital.
- 3.4.5. Aligned to the improvements in both 4 and 18 week wait has been a significant decrease in complaints for the Medway CMHT; in triangulating there is a hypothesis the reduction in complaints could be connected to more

timely and focused interventions being offered. This is an area of on-going focus

- 3.5. **Brittan House visit by members:** Four committee members visited Brittan House in July 2021 including the Chair. There were a number of points and issues staff discussed with council colleagues and the KMPT Head of Service is working with the Director of Estates to address any concerns raised; this will require some input from the council estates department to support any changes needed especially in relation to car parking which is a particular concern of the staff in the building.
- 3.6. **Psychological treatments:** People receiving psychological treatments and specialist personality disorder services accessed video therapies (either individual or group) within the first few weeks of lockdown. The effectiveness of these treatments has been evaluated in collaboration with researchers at Kent university. With easing restrictions psychological treatments are now offered both in person and/or online as part of the development of KMPT's digital offer.
- 3.7. Covid has allowed for choice however we note agile and digital is not for everyone and people accessing services are offered a choice of face to face, video and/or telephone
- 3.8. **Urgent Care Response:** In April 2020, KMPT were required to implement a system wide, public facing crisis line for mental health. This was in response to the COVID pandemic and the significant pressures on the NHS 111 service. The Trust implemented this additional function into the existing Single Point of Access (SpOA). This service is now offering both the crisis line for advice and guidance to the general public and the management of urgent referrals from professionals, such as GPs, for access to KMPT services. In the first month of offering this service the number of calls increased by 50%.
- 3.9. Members of the public contacting the crisis line are able to seek specialist mental health advice, support and signposting or make a self-referral for triage for specialist care if required. This element of the service replicates the 111 process but is bespoke to mental health. Ultimately the public facing element will likely move to NHS 111; discussions are ongoing regarding the longer-term integration of the crisis line into NHS 111 to enable a universal single point of access.
- 3.10. **The Kent and Medway Recovery and Wellbeing College:** the college moved to a virtual provision in May 2020; this continues and the Recovery and Wellbeing College development strategy includes the development of face to face provision in Medway from January 2022 (COVID dependant). Students from all Medway localities are engaged.
- 3.11. **Specialist Perinatal Mental Health Services:** during 2020/21 the Specialist Perinatal Mental Health Service saw an additional 169 women in Medway taking the total number up to 209 and contacted 1,515 women. Following a slight delay due to COVID, KMPT's Mother and Infant Mental Health Service

(MIMHS) has now been advised by NHS England to implement the ambitions for perinatal mental health as detailed in the NHS Long Term Plan. From September 2021, MIMHS will be renamed 'Perinatal Mental Health Community Service'. The new name is more inclusive and more representative of the services it offers; In particular the future mental health assessment for partners/dads. This follows a period of consultation of women/families with lived experience.

- 3.12. **Individual Placement with Support (IPS):** Increasing access to IPS enables people with severe mental illness to find and retain employment - NHSE funding was awarded to expand the existing KMPT Vocational Rehabilitation Team and enabled the formation of an IPS collaboration with Shaw Trust and Porchlight; Porchlight as the lead provider. Prior to this expansion Medway did not have a service, now due to the national monies Medway and Swale have their own IPS service operating out of the CMHT, via Porchlight, as part of the provider collaborative. This work is going from strength to strength and positively has seen a recent uptick in referrals.
- 3.13. **Dementia:** The [Dementia Diagnosis Rate \(DDR\)](#) is a national quality improvement metric used to indicate access to care, diagnosis, treatment, and support for people living with dementia and the people who care for them. The national target is that 66.7% of the estimated people living with dementia will be registered on the dementia register. Kent and Medway's DDR in January 2021 was an outlier at 54.16% compared to performance across the South East (58.87%) and England (61.38%). Dementia is a system priority overseen by the Mental Health Learning Disability and Autism Improvement Board (MHLDA IB) which has set an ambitious target to reach the national target of 66.7% by October 2022. KMPT is hosting and contributing to the system change programme; including but not limited to, improving access to and reducing waiting times in memory assessment services, improving access to specialist post diagnostic support, and supporting initiatives to develop primary care diagnostic capacity through education, training, and mentoring.
- 3.14. **Psychological support for the system key workers:** KMPT has been leading on the provision of psychological support for NHS and social care staff throughout the pandemic. In line with national developments a Mental Health Hub for local staff is in place; to date take up in Medway has primarily been from the Medway Maritime Hospital. The offer includes support in the form of psychoeducational material (leaflets and videos for staff and for managers), reflective de-briefing to clinical staff, and a telephone line for managers to offer advice and signposting for staff they are worried about.
- 3.15. The staff Mental Health and Wellbeing Hubs across Kent and Medway supported by NHSE/I also provide health and social care colleagues rapid access to assessment and local evidence-based mental health services and support where needed. The Medway hub offer is confidential and free of charge for all health and social care staff, offering a clinical assessment and referral to local services enabling access to support where needed, such as talking therapy or counselling. It is separate and confidential from a staff member's own organisation. It is open to all health and social care staff, from

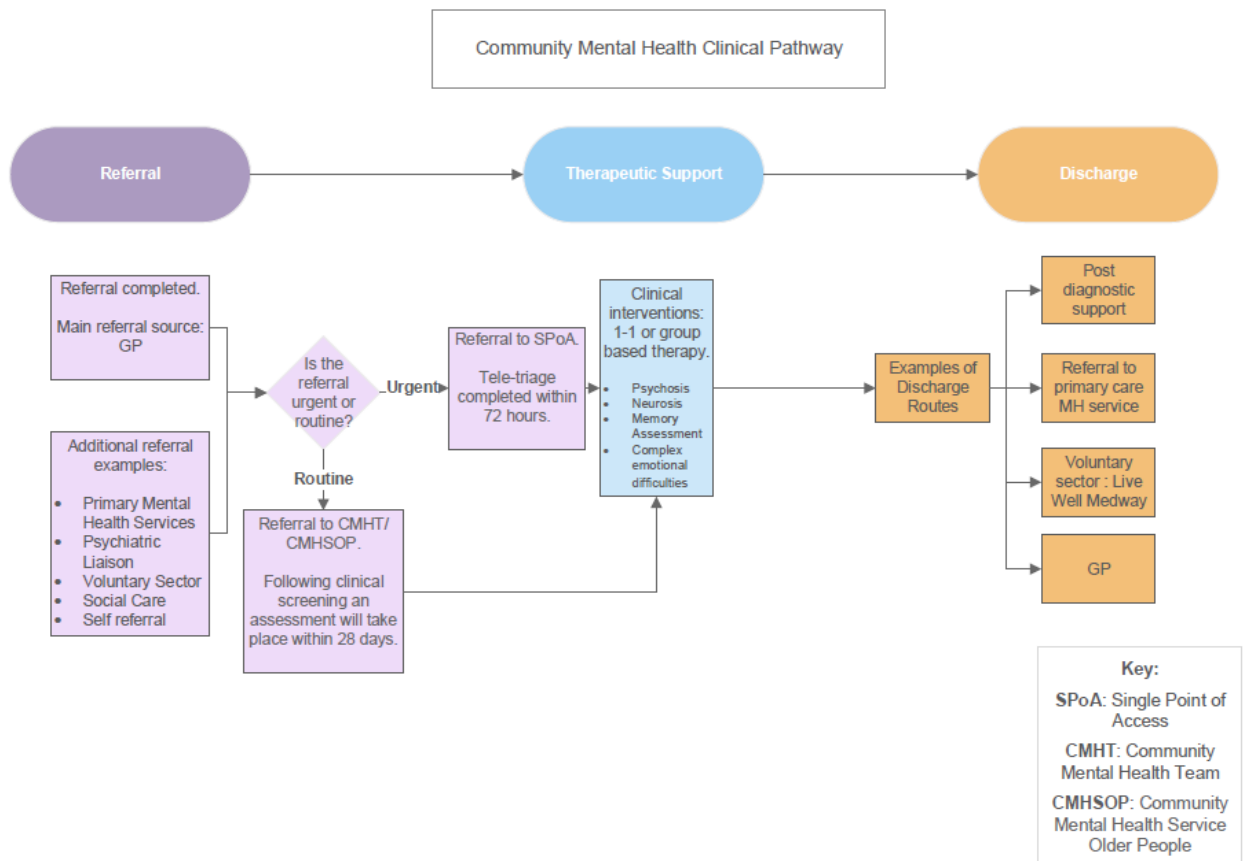
all services and settings regardless of whether staff are dealing directly with COVID-19 patients or not. Staff can self-refer or refer a colleague (with their consent).

3.16. The Trust is also fully engaged with the Long Covid work in place overseen by the Maidstone and Tunbridge Wells NHS Trust. This is going to be a very important element of work in the next 12 months as the uncertainty about the numbers of people with long term symptoms of Covid are very much unknown. Both the physical and mental health impacts need careful oversight and KMPT are very much engaged in this area of development

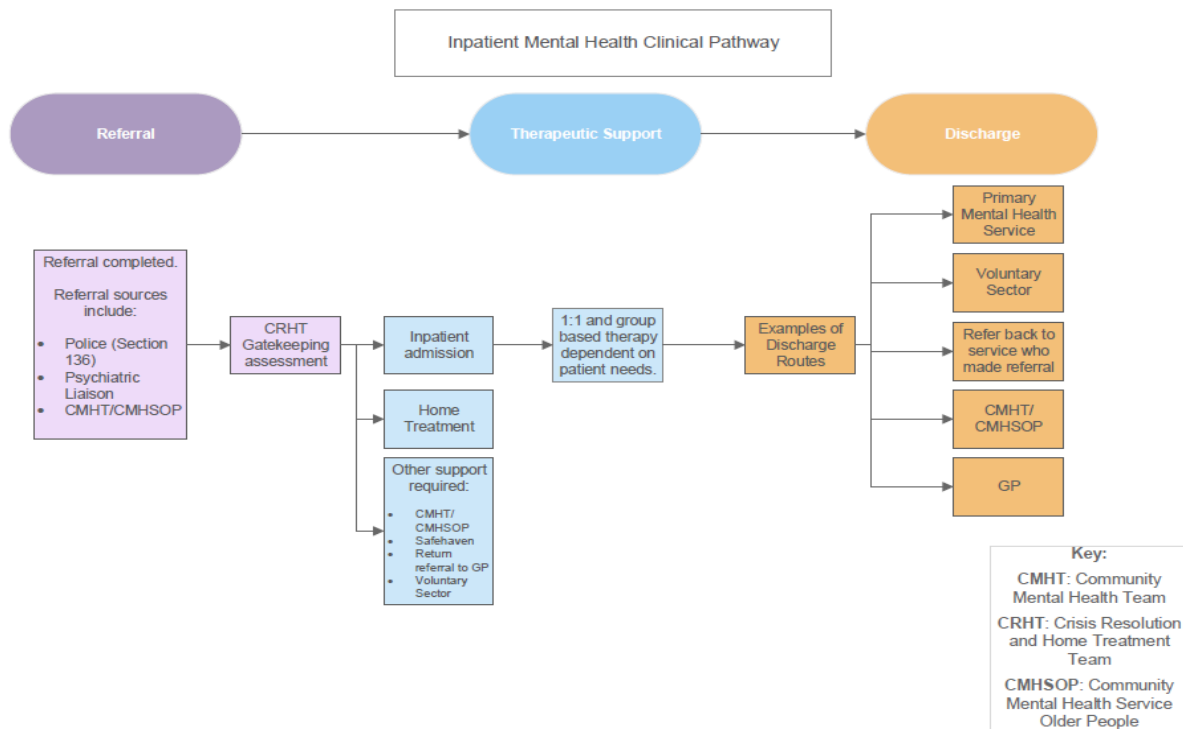
4. An overview of the main care pathways for adults and older adults

4.1. The following diagrams provide a high-level overview of how people access KMPT services, a brief summation of therapeutic and clinical pathways and describes the flow back out to primary care and the wider community service provision.

4.1.2. Community Mental Health Clinical Pathway (CMHT).



4.1.3. Inpatient Mental Health Clinical Pathway



5. New access standards for Mental Health

5.1. In the last month NHS England has outlined proposals to introduce five new waiting time standards for community and liaison mental health services. The new standards are on top of existing mental health standards measuring access to IAPT, early intervention in psychosis, and children and young people's eating disorder services.

5.2. The proposed new standards are:

- Patients of all ages to be seen **within 24 hours from referral for an 'urgent' referral** to a community based mental health crisis service.
- Patients of all ages to be seen **within 4 hours for a 'very urgent' referral** to a community based mental health crisis service.
- Patients to be seen face to face **within one hour of referral from accident and emergency** by a mental health liaison or children and young people's equivalent service.
- **Children, young people and their families/carers to start to receive care** from community-based mental health services **within four weeks from referral**. 'Care' may involve: immediate advice, support or a brief intervention; help to access another more appropriate service; the start of a longer-term intervention or agreement about a patient care plan; or the start of a specialist assessment that may take longer.
- **Adults and older adults should start to receive care** from community-based mental health services **within four weeks from referral**. This may

involve the start of a therapeutic intervention or a social intervention, or agreement about a patient care plan.

- 5.3. NHS England is now seeking views from stakeholders on the proposals as well as the refinement of the measures. Responses need to be submitted by 1 September 2021.
- 5.4. KMPT will be responsible for delivery of standards 1,2,3 and 4 with NELFT responsible for delivery of standard 4

6. Covid Response

- 6.1. As set out the previous report KMPT services worked tirelessly throughout the COVID pandemic to maintain effective care and we are working hard to embed the changes to maintain safe and effective delivery of care.
- 6.2. The key workstream going forward for our staff is the agile working offer. Staff have been able to work from home and have had the right equipment to maintain clinical work especially one to one clinical sessions. The safety and quality of services continues to be the main priority and in line with many other NHS organisations KMPT is using digital and telephony alongside face to face.
- 6.3. The digital offer compliments face to face therapeutic interventions and is not a catch all. MIND released a very helpful document in 2021 highlighting the need for a clinically led blended model and ensuring patient choice remains in place. However, it is clear the offer of digital and telephony suits many and has increased team productivity. Patient satisfaction will remain a key area of overview in the next 6 months to ensure the balance is right.
- 6.4. **Suicide Prevention:**
 - 6.4.1. While it is too early to speculate about the longer-term impact of Covid-19 on suicide rates there is as yet no evidence to suggest an overall increase in national suicide numbers during lock downs⁽¹⁾ [Suicide in England in the Covid-19 Pandemic – University of Manchester](#)). We remain vigilant across Kent and Medway particularly for the longer-term effect that the pandemic may have on mental health.
 - 6.4.2. With the introduction of Real Time Surveillance across the County together with the formation of a Suicide Prevention Surveillance Oversight Group we continue to monitor for clusters and contagion related to suicide specifically for additional emerging risk factors consequent to the pandemic.
 - 6.4.3. With our partners we continue to monitor higher risk groups and those that may be vulnerable for any emerging or changing risk factors to suicide. This could include people impacted by domestic abuse or substance misuse or those who are part of particular ethnic minority communities or facing economic difficulty. We have continued to identify positive practice for suicide

prevention for children and young people in contact with mental health services, and specifically those in contact with social care.

6.4.4. As previously reported the most recent suicide data from the Office of National Statistics (published September 2020) reports that the national three-year (2017-19) rolling suicide rate per 100,000 is 10.1. In Medway the rolling suicide rate per 100,000 is 8.3 and in Kent it is 10.3. However, when confidence intervals are applied the rates are all seen to be statistically similar. Middle-aged men continue to be at higher risk of dying by suicide; other high risk groups include students, domestic abuse victims and people known to secondary mental health services.

6.4.5. A number of initiatives continue and include as follows:

- The KMPT Clinical Risk transformation programme focusing on the assessment and management of clinical risk.
- Implementing the Zero Suicide Inpatients plan with actions
- Delivery of suicide prevention training to KMPT practitioners and the delivery of a number of wider collaborative trainings across Kent and Medway to partnerships and other agencies.
- Supporting the Mental Health Task Force
- Developing a Liaison Psychiatry Self-Harm follow up initiative,
- Implementing a Therapeutic programme as a development from our inpatients leave project,
- Development of a 5 year forward the suicide prevention strategy.
- A pilot project between KMPT and Citizens Advice Bureau as a referral pathway to a Money and Mental Health Advice Debt Service for those in contact with Mental Health services.
- Introduction of The Debt Respite Scheme (Breathing Space Moratorium and Mental Health Crisis Moratorium) (England and Wales) Regulations 2020 to enable eligible individuals who are experiencing mental distress to have a breathing space.
- Embedding a Real Time surveillance protocol and reporting process.

7. Eating Disorder services

7.1. At the agenda planning meeting there was a discussion on eating disorders and how there had been a rise in this nationally. KMPT do not provide eating disorder services for children or adults; these services are provided by the North East London NHS Foundation Trust (NELFT). The rise in eating disorders is a national issue alongside the rise in need for Children and Adolescence Mental Health (CAMHS) Care. NHSE/I have both eating disorders and CAMHS at the forefront of their work plans and at a system level, in Kent and Medway, NELFT have a number of workstreams in place supported by the national programme.

8. Mental Health Learning Disability and Autism Board

8.1. The Integrated Care System (ICS) Mental Health, Learning Disability and Autism Improvement Board (MHLDA IB) has been in situ since October 2020. Established as a sub group of the Integrated Care System (ICS) Partnership Board it oversees strategic mental health, learning disability and autism developments at a system wide level. The Board has multi-agency, very senior representation, from all key organisations in place and works to provide at scale a system overview of key developments of delivery of the Long Term Plan. Reporting is taken to the Integrated Care Partnership (ICP) governance meetings on a routine basis.

8.2. Themed Priorities overseen by the Improvement Board:

- Community mental health transformation for adults and older people with serious mental illness
- Improving access to psychological therapies
- Urgent and Emergency Care for Mental Health
- Dementia
- Children and Young Peoples Mental Health – transitions

8.3. Working in partnership across organisational boundaries is imperative to ensure delivery of effective mental health, learning disability and autism care. KMPT continues to work proactively with Medway Council, GPs and other key providers in the locality through attendance and reporting at local Integrated Care Provider (ICP) meetings including Clinical and Professional Advisory Group and the Population Health Management and the Partnership Board.

8.4. It is a recommendation to this committee for future scrutiny reviews for mental health to align to the themes of the priorities of the Improvement Board; this will ensure the breadth of mental health provision in Medway and Swale is focussed on for comment and scrutiny rather than the narrower focus on KMPT services only as set out in this document.

8.5. The Improvement Board would welcome a discussion to coordinate a number of themed reports to the committee over the next twelve months along with the visits to local services outside of session could that help move us forward to further improve service delivery at a local level.

9. Financial implications

9.1. There are no financial implications to Medway Council arising directly from this report.

10. Legal implications

10.1 There are no legal implications to Medway Council arising directly from this report.

11. Recommendations

11.1 Members are asked to:

- a) Note the progress update in this report.
- b) Agree for themed integrated reports about mental health to be brought for information and discussion to this Committee over the next 12 months along with visits to local services outside of the Committee.
- c) Agree that eating disorders for adults, children and young people mental health and transition will be the next themed scrutiny report brought to this committee via the Mental Health Learning Disability and Autism Improvement Board

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Appendices

Appendix A – services based in Medway
Appendix B – services based outside Medway that offer an in-reach provision to the residents of Medway

Background papers

None

APPENDIX A: SERVICES BASED IN MEDWAY

Type of service	Description of service
Acute (younger adult) services	
Crisis resolution and home treatment (CRHT)	Medway and Swale CRHT provide mental health assessment and treatment to individuals with severe mental illness in an acute phase of their illness, as an alternative to inpatient treatment. It is currently based at the Disablement Services Centre at Medway Hospital (Gillingham) and is due to relocate to the Medway Hub (Britton Farm) in November 2020 however this has been delayed due to covid and new date has yet to be confirmed.
Liaison mental health	Based at Medway Maritime Hospital, the Medway Liaison Mental Health Service operates 24 hours a day 7 days a week and provides mental health assessment and advice / support regarding mental health treatment and ongoing care to people admitted to Medway Maritime Hospital. The service works very closely with staff at Medway Maritime Hospital to allow a patient's mental health to be treated effectively alongside any physical health problems. The service is available to anyone over the age of 18, regardless of address, who attends the Accident and Emergency Department or is an inpatient at Medway Maritime Hospital and needs advice, assistance or a mental health assessment.
Community recovery services	
Community mental health team (CMHT)	Based at Britton Farm the Medway and Swale CMHT provide services to adults of working age (18 to 65 years) with severe long-term mental health needs.
Early intervention in psychosis (EIP)	Based at Britton Farm, the Medway and West Kent EIP service works with people aged between 14 and 35 years old who are experiencing their first episode of psychosis, and who have been experiencing symptoms for less than three years.
Inpatient rehabilitation	Based at Newhaven Lodge, Medway Maritime Hospital, the 8 bedded Newhaven Lodge Rehabilitation Unit is a mixed gender inpatient adult mental health rehabilitation unit. The Rehabilitation Team work with men and women who have experienced a relapse in their mental health, to promote recovery and support them to develop or regain skills for everyday living.
Older adult services	
Inpatient older adult	Based at A Block, Medway Maritime Hospital, the 14 bedded Ruby Ward is a female only inpatient older adult unit for people suffering acute mental health challenges and experiencing dementia, depression, anxiety and psychotic conditions. This remains the last dormitory style ward in the Trust
Community mental health service for older people (CMHSOP)	Following a move from Elizabeth House (Rainham) in July 2020, the Medway CMHSOP is based at Britton Farm in Gillingham and provides a service for people age over 65 years with both organic and functional presentations.
Forensic and specialist services	
Criminal justice liaison and diversion service (CJLD)	Based in the Medway Custody Suite, the Medway CJLD service provides screening and assessment of individuals, of all age groups and vulnerabilities within the criminal justice system. The Medway CJLD team is one of seven operating pan-county; in addition to the team operating out of the Medway Custody Suite, teams operate from six other suites outside Medway. The CJLDS team also has a presence in the Medway Magistrate courts, enabling them to advise the judge on cases they have seen in custody.
Chronic fatigue syndrome (CFS) / myalgic encephalopathy (ME) (pain clinic)	Based at Medway Maritime Hospital the pan-county service offers multi-disciplinary assessment and treatment programmes for adults from 18 years with a diagnosis of CFS / ME.
Specialist Equipment Services (prosthetics and orthotics) and environmental control services	Based at the Disablement Services Centre the pan-county. The Specialist Equipment Services and Environmental Control teams provides Prosthetic limbs (upper and lower, traumatic or congenital) to adults and children with limb loss and services to people with a permanent medical condition or severe physical disability by providing suitable equipment that can help with everyday life. This includes providing electronic assistive technology equipment, on loan, to severely disabled people to enable them to live more independently in their homes.
Community brain injury	Based at Medway Maritime Hospital the Medway and Swale Community Brain Injury team supports people with non-progressive brain injuries between the ages of 18 and 65 years.
Mental health of learning disability (MHLDD)	The Medway team is based in Britton House and provides mental health support for adults with a learning disability

APPENDIX B: SERVICES BASED OUTSIDE MEDWAY THAT OFFER AN IN-REACH PROVISION TO THE RESIDENTS OF MEDWAY

Type of service	Description of service
Acute (younger adult) services	
Section 136 health-based place of safety	Assessment areas at St Martins Hospital (2 spaces), Priority House (2 spaces) and Littlebrook Hospital (1 space) for those individuals detained on a Section 136 awaiting assessment.
Inpatient acute	Based at Little Brook Hospital, the two 17 bedded (Amberwood and Cherrywood) and one 16 bedded (Pinewood) acute younger adult admission wards provide inpatient care with intensive support for patients in periods of acute psychiatric illness.
Psychiatric intensive care unit (PICU)	Based at Little Brook Hospital, the pan-county 12 bedded (Willow suite) PICU provides male facilities designed for short-stay treatment of patients with mental health problems requiring intensive treatment, care and observation. Female PICU provision is provided through Cygnet Healthcare Group, Godden Green, as part of a Service Level Agreement.
Support and signposting service	Based at Priority House for purposes of centrality to the county, the Support and Signposting Service is a pan-county service that provides mental health support, advice and signposting for individuals who have been assessed by the Liaison Mental Health Service or are in the Section 136 Health-based Place of Safety, who do not require inpatient admission but do require a period of intensive support in a safe and therapeutic environment prior to returning home from the Section 136 Health-based Place of Safety or Accident and Emergency Department. Individuals can stay for up to 24 hours and transport is provided home.
Older adult services	
Inpatient older adult	Based at Darent Valley Hospital, the 16 bedded Jasmine Ward is a mixed gender older adult unit for people suffering acute mental health challenges and experiencing dementia, depression, anxiety and psychotic conditions.
Forensic and specialist services	
Inpatient forensic (medium secure)	Based at the Trevor Gibbens Unit (Maidstone) the pan-county service provides medium secure care for men and women.
Inpatient forensic (low secure)	Based at the Greenacres site (Dartford) the 20 bedded pan-county Tarentfort Centre consists of two wards for male patients with a learning disability whose offending behaviour and mental health needs require that they are detained under the Mental Health Act in secure conditions. In addition, the 20 bedded pan-county Allington Centre offers holistic person-centered care packages for male patients between the age of 18- 64 years detained under the Mental Health Act, whose mental health and offending / criminal behaviors puts them and / or others at significant risk.
Inpatient forensic (rehabilitation)	Based at the Greenacres site the 10 bedded pan-county Brookfield Centre provides a rehabilitation and recovery inpatient service for forensic male patients with a learning disability. The service helps to reintegrate this patient group into the community, and acts primarily as a step-down service for patients from the Tarentfort Centre.
Inpatient addiction	Based at Fant Oast (Maidstone) the pan-county 9 bedded Bridge House Service provides inpatient detoxification treatment in a high quality environment.
Neuropsychiatry	Based at Darent House (Sevenoaks) the West Kent and Medway tertiary neuropsychiatry service offers outpatient assessment and treatment to individuals with a psychological / psychiatric disorder that manifest as neurological / organic conditions.
Mother and infant mental health services (MIMHS)	Based in Canterbury, Maidstone and Dartford the pan-county MIMHS is for women with perinatal mental health difficulties who are considering pregnancy, are currently pregnant, or have given birth and the baby is under a year old. The team also provides in- reach services at Britton Farm.
Rosewood mother and baby unit (MBU)	Based in Dartford, this unit is an 8 bedded inpatient facility for women who require admission due to severe perinatal mental health difficulties. Women are admitted for specialist care and treatment with their baby.
Talking therapies - survivors of sexual assault	Based in Maidstone, this collaborative (Mountain Health Care, KMPT, Family Matters and East Kent Rape Line) community sexual assault referral centre (SARC) offers a stepped approached model of psychological care to survivors of sexual assault in Medway and Kent.