# Local Mental Health Services in Huntingdonshire – Update Prepared for Hunts District Council Overview and Scrutiny Panel (Social Well-Being) 3rd March, 2015

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### **Tonight's Update**

- 1. Brief Overview of Local Services in Huntingdonshire
  - Care Pathways
  - Numbers Accessing Main Pathways

#### 2. Our Current Priorities

- Increased Access to Psychological Therapies (IAPT)
- Our Key Work Streams 2015/16
- Our Other Current Priorities



#### The Local Service Model

#### Advice and Referral Centre (ARC) Primary Care Mental Health Service Gateway Workers and Consultants interface with groups of GP surgeries Locality Team NORTH Locality Team CENTRAL Locality Team SOUTH (Peterborough and Borders) (Huntingdon, March, Wisbech) (Cambridge and Ely) Generic work - Consultant, Senior Generic work - Consultant, Senior Generic work - Consultant, Senior Psychologist, STR, Social Workers Psychologist, STR, Social Workers Psychologist, STR, Social Workers IAPT IAPT IAPT Specialist Specialist Specialist: Psychosis: Psychosis Psychosis Specialist: Assertive Outreach Specialist: Assertive Outreach Specialist: Assertive Outreach Affective Disorders Affective Disorders Affective Disorders CAMEO Early Intervention Psychosis Personality Disorder (Complex Cases) Personality Disorders



### Numbers of Patients from Huntingdonshire Accessing Mental Health Services

Numbers referred from Huntingdonshire practices to the Advice and Referral Centre
April to December 2014 (this data provides an indication of the local demand for mental
health services)

	Hunts Care Partners	Hunts Health	Total
	,		
Total Number Referred	2613	1464	4077
From:-			
GP	2273	1258	3531
Practice Staff	24	30	54
Midwife	32	28	60
Police	231	136	367
Others	53	12	65

- Advice was given in relation to a further 47 potential referrals from these LCGs
- A "Confer" system has also been established to enable GPs to promptly access specialist advice



## Discharges of Patients Referred to the Advice and Referral Centre

- Discharged to:-
  - Crisis Resolution / Home Treatment Team
  - Intake and Treatment
  - Other CPFT Services
  - Returned to GP
  - Returned to Referrer
  - Signposted to Other Services



### Numbers of Patients from Huntingdonshire Accessing Mental Health Services

 Numbers of Patients from Huntingdonshire accessing acute services Apr-Dec 2014:-

	Hunts Care Partners	Hunts Health	Total
Assessment Unit (Cavell Centre):-			
No. of Patients	80	48	128
Avge Length of Stay (days)	6	5	6
Treatment Unit (Cavell Centre	<u>:):-</u>		
No. of Patients	38	25	63
Avge Length of Stay (days)	34	29	32
Recovery Unit (Cavell Centre)	<u>:-</u>		
No. of Patients	5	7	12
Avge Length of Stay (days)	45	83	67
Crisis Home Treatment Team (Huntingdon):-			
Referrals	267	165	432
Avge Length of Contact (days)	5	5	5



### Numbers of Patients from Huntingdonshire Accessing Mental Health Services

 Numbers of Patients from Huntingdonshire accessing community pathways Apr-Dec 2014:-

	Hunts Care	Hunts Health	Total
	Partners		
Assessments	461	268	729
Pathway Contacts :-			
Affective Disorders	1900	1006	2906
Recovery Psychosis	1557	981	2538
Personality Disorder	856	736	1592
Early Intervention	389	341	730



### Our Current Priority - IAPT Access Target for Q4

- All CCGs must deliver 3.75% access rate in Jan/Mar 2015 (i.e. annual rate of 15%)
- For Cambridgeshire and Peterborough CCG the target is 3,522 patients this quarter (vs 1,175 in Oct/Dec 2014)
- The indicative Huntingdonshire share of this total is 754 patients this quarter
- Range of initiatives with existing providers (locally CPFT, MIND Insight) for Jan/March to raise productivity and clear waitinglists
- Risks around insufficient referrals, shortage of qualified therapists and accurate data reporting
- Mitigated by GP promotion, self-referral, direct referral for target groups, online therapy, robust checking of all provider returns to ensure IAPT compliance

### Preparing for 2015/16

- National Planning Guidance includes specific priorities for mental health:-
  - Carer support, prevention, choice, access and waiting-time standards, liaison psychiatry and crisis care
  - Parity of Esteem CCG investment in mental health must match increase in overall CCG allocation (for Cambridgeshire and Peterborough CCG this is a 5.6% increase)
- GP-identified local priorities for mental health crisis team capacity, third sector provision, post-discharge support and Frequent Attenders



### Our Key Work Streams for 2015/16

A more resilient and more equal service model by April 2016:-

- More work done by primary care to close some current "gaps" (East London model)
- More peer support and help for carers (Recovery College)
- Increased locality focus (align ARC with local teams)
- Expanding and equalising voluntary sector provision
- Implementation of the Crisis Care Concordat, in particular expanding the capacity of crisis resolution teams and a new model for S136 referrals
- Direct access to psychological therapies from pathways throughout the local health system
- Robust systems of activity and outcome reporting implemented across all providers
- Enhanced specialist mental health input to the rest of the local health system
   (liaison psychiatry and A+E crisis presence)

#### **Our Other Current Priorities**

- Ongoing Contract Monitoring
  - CPFT
  - Independent and Third Sectors
- Preparation for "Care Pathways and Pricing"
- Learning Disability
  - Improvement Plan 2015
  - New Primary Care Template
  - Winterbourne View (Assuring Transformation)
- Alignment of CCG/CCC/PCC Commissioning Strategies



### **Any Questions?**

If you need to ask any questions about local mental health services:-

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