

## Report to Scrutiny Board Adults, Health and Active Lifestyles

Date: 6 November 2018

### Subject: Leeds & York Partnership NHS Foundation Trust: Community Mental Health Redesign Position Update

#### 1. Purpose of this report

- 1.1. The purpose of this report is to provide an overview of the engagement activities Leeds and York Partnership NHS Foundation (LYPFT) have undertaken to inform the working age and older peoples' Leeds community mental health service models.
- 1.2. Our report follows on from the briefing provided to the Health Scrutiny Working Group on 6 April 2018 and sets out the conclusion of LYPFT's engagement period and the key changes we have made to our proposed service model as a direct result of the feedback received.
- 1.3. LYPFT would like to thank everyone who contributed to our proposals either through attending one of our briefings or completing a questionnaire.

#### 2. Background

- 2.1. In October we started to review different options for the way we provide community services for older people. A series of consultation events with service users, carers and staff provided feedback that our 'ageless service' did not reach the standards of care that we aspire to with our older service users. This included concerns that older people's needs were not sufficiently recognised and that there was decreasing expertise in older people's care. It became clear that we needed to re-establish specialist older people's mental health services in the community in a way that would lead to improved outcomes and higher quality care.
- 2.2. As this work progressed it became clear that the plan to move some staff into a dedicated older people's service would have an impact on the services for adults of working age. It was also clear that the existing community mental health services for working age adults were experiencing significant challenges within the current model.
- 2.3. Referrals into our community mental health services have more than doubled since the current ageless model was implemented in 2012. Our teams have attempted to absorb this additional workload but this has led to staff holding very high caseloads, which have reduced our ability to deliver responsive, high quality and person-centre care. We there decided in December 2017 to review both working age and older people's community mental health services together.

#### 3. Our proposed plans

- 3.1. Our proposed model for community services as described as part of our April briefing was the basis for our engagement and included:
  - The development and delivery of a dedicated service and pathway for older people.
  - The establishment of two Crisis Resolution Intensive Support Services (for working age and older people) providing 24 hour intensive support to people seven days a week, gatekeeping all acute admissions to hospital and providing crisis assessment and intensive support to people at home (home treatment).
  - Separation of the Single Point of Access (SPA) function from the Crisis team.
  - The working age adult community mental health teams providing a clear and consistent assessment and formulation period for all, and prioritising those with greatest need for on-going interventions.

- Changes to the Memory Service pathway, with an increased focus on early diagnostic activity.
- Integration of the stand-alone Care Homes team into other community services for older people.
- Realigning our geographical boundaries across the city.
- Develop in partnership with our Social Care colleagues, an offer of structure therapeutic interventions to be provided from Stocks Hill, Vale Circles and Lovell Park.

#### **4. Engagement with LYPFT staff, service users, carers, public and partners**

4.1. Our programme of engagement began on 1 May 2018 building upon the engagement activities and views already captured as part of the development of the older people's community model which began in October 2015.

4.2. The engagement programme featured a number of activities and mechanisms which have allowed service users, carers, staff, partners and members of the public to hear the proposed plans for our community mental health services and allowed us to understand people's views, opinions and experiences in relation to this. We identified the following people and groups as being the most important to the success of our engagement programme:

- Staff working in the affected services
- Staff across the Trust
- Community mental health service users
- Carers
- Our Leeds-based foundation trust membership
- Forum Central – collective voice for the third sector in Leeds
- Third sector partners
- Voluntary sector organisations
- Groups representing service users and carers e.g. Healthwatch Leeds, Age UK, Leeds MIND etc.
- Representatives from relevant local authority departments e.g. adult social care
- GPs and primary care health professionals
- Local NHS commissioners
- Local NHS partners e.g. Leeds Community Health NHS Trust
- Leeds City Council Scrutiny Board for Adults, Health & Active Lifestyles

4.3. The core elements of our public engagement included:

- A suite of communications materials, including three public facing leaflets specific to our proposed plans for working age adults, older people and a general overview.
- A survey designed to be as short and accessible as possible to facilitate maximum return. This was produced in paper copy and hosted online via the Survey Monkey website.
- A dedicated page on our website hosting all the relevant information, a link to the survey, details of our engagement events and how to contact us about the engagement and proposed service changes. See [www.leedsandyorkpft.nhs.uk/get-involved/community-mental-health](http://www.leedsandyorkpft.nhs.uk/get-involved/community-mental-health)
- A series of face to face public events and meetings with the key groups and individuals referenced above.
- Two mass mailings: one to current service users and one to our Leeds-based membership database.
- Partnership working to deliver our engagement programme with Forum Central - a collective voice for the health and care third sector in Leeds representing a membership of around 300 organisations.

4.4. In total we engaged with 17,850 service users, carers, staff, partners and the general public about our proposed plans. We had an overwhelming response to our engagement campaign, with 74% of our public respondents feeling our proposals would improve services. Our full engagement report can be found at: <https://www.leedsandYorkpft.nhs.uk/get-involved/wp-content/uploads/sites/11/2018/10/CMHS-Engagement-Summary-Report.pdf>

## **5. Key changes as a result of our engagement**

5.1. All the responses we received were reviewed and grouped into key themes from LYPFT staff and from members of the public external to the Trust. As a result of the feedback we have made a number of changes to the model that we consulted on. The key changes that we have made as a direct result of the feedback received include:

- The Care Homes Team will be retained as a stand-alone service working across the city, providing a service over seven days.
- The memory service pathway has been reviewed, to incorporate capacity for an additional number of home visits where these are clinically indicated.
- A city wide model has been developed for the delivery of physical healthcare monitoring, building on the most effective model that we have currently and representing a significant increased investment in this area.
- An interim, joint criteria has been agreed between working age and older peoples mental health services for the first year of operation, which is age led but also focusses on individual presentation and clinical need when required.
- LYPFT is to undertake a specific piece of work to better understand the needs and access issues of the deaf and blind communities. Also in partnership with other agencies across the city we will continue our work in relation to black and minority ethnic (BAME) access and outcomes across our community services.

## **6. Next steps**

6.1. A formal evaluation process is being developed with LYPFT service users and partners which will provide both a regular and ongoing engagement to identify any implementation issues and learning as early as possible, and a longer term evaluation of the models' impact and effectiveness.

6.2. Through our engagement process third sector partners across the city have strongly proposed the development of an operationally focused 'partnership forum' with the Trust. This would provide a regular forum for information exchange and joint developments.

6.3. The implementation of our model is underway and it is intended that it will be fully in place at the end of March 2019.

## **7. Recommendations**

7.1. Scrutiny board is invited to note and comment on the progress made with Leeds and York Partnership NHS Foundation Trust's redesign of community mental health services.

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