



Canterbury and Coastal  
Clinical Commissioning Group

<b>Report to:</b>	Canterbury MHAG
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**Mental Health work stream, Canterbury and Coastal CCG**

The mental health work stream continues to be clinically led and the next MH Local Operational meeting will be held on Friday 11<sup>th</sup> March 2016. The CCG is ensuring that feedback received at the MHAG is fed in to these meetings to ensure that there is a true local flavour.

**KMPT Operational Update - National Access Targets**

KMPT are currently meeting national access targets for younger adults in the Canterbury area with 95% - 98% of referrals being assessed within 28 days. We are managing to see routine referrals within 21 days for most service users. For older adults the 95% target is consistently being met.

**Vacancy Rates**

The Trust are interviewing for a Band 5, for a part time KR9 (social worker) a 1.5 KR7 (social work assistants) and a Band 6. If they are successful they will then be fully staffed. SPoA is starting in April and this will have some impact on the team as staff will rotate into this new service.

KPIs – the Trust are now meeting the 4 week wait and 18 week pathway and crisis plans and just under target in other areas. Staff are working very hard on reducing caseloads and as this happens and the vacant posts are filled we will then be in a position to meet all targets.

**Use of out of area beds due to local inpatient bed capacity issues**

Current figures show little out of area bed use due to capacity issues for Canterbury patients. East Kent weekly Sitreps for week ending 16<sup>th</sup> February 2016 are as follows:-

**PICU.** There are currently 3 OOA patients who continue to require PICU beds and these patients will be repatriated as soon as possible.

**Young People.** There was 1 patient in an external bed with no Out of Area (OOA) bed usage.

**Older people.** There was no use of private or external beds and 2 delayed transfers of care awaiting residential placement.

KMPT have now resumed weekly teleconference calls to discuss issues that have led to delays with patients being repatriated or found suitable accommodation to meet their needs. The CCGs are joining calls to see what they can do to support and influence the wider system.

**Primary Care Mental Health Specialists Pilot**

The pilot continues to successfully manage secondary care clients with significant mental health conditions with their GP's in the community.

There is currently a status quo to improve access to the service and the CCG are in negotiations with Invicta Health CIC around recruitment to posts. Through the Vanguard (Encompass) and the Value Proposition Year 2 proposal Invicta Health CIC hope to add PC Mental Health workers to the service across Canterbury and Coastal CCG.

**Community Mental Health and Wellbeing Service**

The new service will go live on 1<sup>st</sup> April 2016 and will be in place for 5 years with an option to extend for a further two years. The service will form a key part of an integrated pathway across the voluntary sector, primary care, mental health and social care to ensure there is good quality outcome focused support for people with mental health concerns in the community.

The service will challenge around stigma surrounding mental health problems and it will be based on recovery and social inclusion principles and is designed to be accessible to anyone needing health and wellbeing support in Primary Care, including those discharged from secondary care.

This service will be delivered by a Strategic Partner model with a network of providers (delivery network) who will deliver a range of outcomes including community link workers, housing related support, employment support and non-traditional providers including sectors such as art and culture, sports and leisure.

The service will be delivered across Ashford and Canterbury and Coastal CCG areas by the Strategic Partner Shaw Trust. Kent County Council and the CCG's are fully committed to the success of this new service and working to improve wellbeing across Kent.

**Psychiatric Liaison Service**

The provision for assessment of young people under 18 years who present at A&E with an element of emotional/mental distress is currently provided through either Sussex Partnership Foundation Trust Tier 3 "duty" cover or through the Children's Home Treatment Team (HTT). However, it is widely recognised amongst the Kent health economy that the demand is higher than previously anticipated.

The Kent & Medway CCG's (East, West and North Kent) have decided to augment the current provision and the service commenced on 4<sup>th</sup> January 2016.

The staff will be based alongside the existing AMHS Liaison Psychiatry colleagues with additional cover from 5pm-10pm. The continuation of the support is detailed in the CCG transformation plan for children for the forthcoming year.

**Out of Area Treatments agreed following Panel process**

Locally it is recognised that the current system for reviewing specialist cases, that cannot be offered treatment locally within the KMPT contract, is not as timely as it could be. As stated earlier

this is having a negative impact on flow within other areas of the system. Commissioners are working closely with our colleagues in the South Kent Coast Mental Health Commissioning Team to rectify this.

## **National Agenda**

### **Dementia Diagnosis Rates**

Canterbury and Coastal CCG has put in place a detailed Action Plan to achieve the 67% target that has been set for the CCG, and we will be working with GP Member Practices., KMPT and voluntary sector to provide support for dementia diagnosis. However, there continues to be difficulties around engagement with some practices and rates remain varied between practices.

The CCGs diagnosis rate has risen from 66.69% (December) to 66.82% (January). Further quarterly figures are due at the end of January 2016 and will be reported at this time.

### **IAPT Access and Recovery**

All Canterbury providers are meeting current national access and recovery targets. The CCG has been meeting with all providers over the last month to ensure they will continue to meet the new national targets of 75% patients receiving treatment within 6 weeks and 95% within 18 weeks.

Access to support for depression is a priority for CCG and at a joint clinical event recently it was agreed to explore further the need for community based support pre IAPT, with particular need identified with 15-18 year age range.

### **Mental Health Street Triage**

The objective of the Mental Health Street Triage service is to provide an improved response to persons in mental health crisis and reduce the time spent dealing with incidents. The service is for all ages. For young people who present under the age of 18 there will be close liaison with the CAMHS service for support, advice and possible assessment. Following any assessment the mental health triage practitioners will discuss with the individual the need to communicate outcomes with their carers/family.

### **Sussex Partnership Trust (SPFT) Operational update**

**The wait time for ASD 8-11 year old assessments.** The backlog has almost been cleared with a 6-7 month wait, which is an improvement on where the CCG were previously. Pscion will continue to pick up referrals for these assessments until the end of March 2016. The new service specification will reduce the current age to 17 year olds which was previously only for 18 year olds.

The CCG are currently looking to align elements of the service within the new neurodevelopment and CAMHS Service Specification. The Sussex Partnership Trust (SPFT) current service has been extended to the end of March 2017 and a review and revision of the service specification for Children's services will be undertaken for procurement purposes.

### **IAPT Specification Review**

The new contracts for IAPT services commenced on 1<sup>st</sup> January 2016. All providers have now signed the contracts and mobilisation plans are now in place. Monthly performance meetings are

being undertaken with all providers and commissioners across the for Canterbury and Coastal locality on a monthly basis for an initial six months, with a review thereafter.

**Local Engagement**

The CCG continue to meet regularly with the local MHAG Co Chairs, who are also invited to attend the monthly local performance meetings with KMPT. Moving forward it is planned to replicate this approach with CAMHS service provider, Sussex Partnership Foundation Trust. It is hoped that this will give the transparency and confidence that the CCG is working with the providers to improve the current mental health service provision.