



Ashford Clinical Commissioning Group

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Report to Ashford Mental Health Action Group March 2016

KMPT Operational Update

1. National Access Targets

KMPT are currently meeting national access targets for younger adults in the Ashford area with 100% assessed within 4 weeks and 100% treated within 18 weeks.

2. Vacancy Rates

KMPT have not been able to successfully recruit a Band 5 nurse and will need to consider offering additional hours to a part-time post and perhaps look at recruiting to an STR post.

The team have successfully recruited a 3 days per week clinical lead occupational therapist who will commence on 15/8/16 on her return from maternity leave. She will complement the Band 6 OT that has recently started. A previous Band 6 nurse was successfully recruited to the clinical lead nurse post, thus freeing up a Band 6 post which is now vacant.

Currently achieving the 28 days to assessment target and will be interested to see how the new single point of access (SPOA) service affects referral rate.

KMPT are currently meeting the wait for treatment targets with 94% of referrals seen within 18 weeks and reflects medical staffing and waiting to discuss cases with medics before being able to allocate etc.

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

Current figures show limited out of area bed use due to capacity issues for Ashford patients.

However, there remains to be national pressure on private beds as well as local pressures and Delayed Transfer of Care (DToC) pressures due to national pressure on both NHS and specialist placements. This results in delays of patients being assessed, delays in placement waiting lists and delays in move from rehabilitation.

For week commencing 15th February 2016:-

Younger adults - 2 YA patients remains in an external bed and 1 DToC awaiting confirmation of funding after agreement by Out of Area Team (OATs) panel for National Psychosis Unit.

PICU - there are currently no patients requiring private or external beds

Older Adults - there are currently no older adult placements in external or private beds but 2 patients with a delayed transfer of care (DToC) 1 awaiting a social care placement and 1 awaiting a decision from the OATs panel as it is felt his needs are currently predominately health related.

KMPT have now re-instigated weekly calls to discuss local issues that lead 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.

CCGs continue to work closely with secondary care colleagues to reduce and sustain the use of OOA beds and to support the provider where there are wider health economy issues and ability to repatriate patients.

4. Discharge process from secondary care to primary care - Mental Health Specialists

There is currently a status quo to improve access to the service and the CCG are working with Invicta Health CIC around recruitment to posts the PCMHWSW post for Ashford.

5. 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 4th 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.

National Agenda

Dementia Diagnosis Rates

Ashford CCG has put in place a detailed Action Plan to achieve the 67% target that has been set for CCG and we continue to work with GP member practices, KMPT and voluntary sector to provide support for dementia diagnosis.

To address the Practices that fall below the dementia diagnosis rate as set by NHSE of 67%, the CCG have started a project which involves looking at Care Home residents that do not appear on the Practice register as having Dementia, however are considered by the Home and the Dementia Community Nurse Specialist to be living with undiagnosed dementia. The Practice will then be contacted and with the patients and/or their family/carer’s permission the Care Home resident will be added to the Practice dementia register (if appropriate).

There are also some Ashford Practices that are going to be Dementia Friendly Practices – which will also raise awareness and hopefully increase their diagnosis rate.

The CCGs diagnosis rate has risen from 60.51% (January) to 62.7% (February).

IAPT Access & Recovery Targets

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

Sussex Partnership Trust Operational Update

The wait time for ASD 8-11 year old assessments. The backlog has been cleared and we now have a 6 month wait which is an improvement on where the CCG were previously.

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.

Local Engagement

The CCG are now meeting bimonthly with the MHAG Chair, will include Porchlight until 31st March 2016, The Shaw Trust (from 1st April 2016), IAPT providers, KMPT and patient representatives to respond to local needs. 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.

Update on Well Being Café

The Café continues to be well received. The voluntary sector and the CCG will be sharing post implementation review at the Ashford Health and Wellbeing Board meeting in March 2016.