

<b><u>MEETING</u></b> <b>HEALTH OVERVIEW AND SCRUTINY COMMITTEE</b>
<b><u>DATE AND TIME</u></b> <b>MONDAY 5TH OCTOBER, 2020</b> <b>AT 6.00 PM</b>
<b><u>VENUE</u></b> <b>VIRTUAL MEETING</b>

Dear Councillors,

Please find enclosed additional papers relating to the following items for the above mentioned meeting which were not available at the time of collation of the agenda.

Item No	Title of Report	Pages
1.	MENTAL HEALTH PROVISION IN BARNET DURING THE PANDEMIC Referred Member's Item in the name of Cllr Moore, 9 July 2020 HOSC	3 - 12

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	<h2 style="margin: 0;">Health Overview and Scrutiny Committee</h2> <p style="margin: 0;">AGENDA ITEM 11</p> <h3 style="margin: 0;">5<sup>th</sup> October 2020</h3>
<b>Title</b>	<b>Mental Health Crisis Care Briefing Update</b>
<b>Report of</b>	Head of Commissioning Mental and Dementia- North Central London Clinical Commissioning Group (NCL CCG); Barnet Directorate and London Borough of Barnet Adults and Health  Barry Day- Managing Director, Barnet Division for Barnet, Enfield and Haringey Mental Health Trust (BEHMHT)
<b>Wards</b>	All
<b>Status</b>	Public
<b>Urgent</b>	No
<b>Key</b>	No
<b>Enclosures</b>	Non
<b>Officer Contact Details</b>	Sarah <a href="mailto:Perrin@barnet.gov.uk">Perrin@barnet.gov.uk</a> / <a href="mailto:sarah.perrin1@nhs.net">sarah.perrin1@nhs.net</a> Head of Commissioning Mental and Dementia

## Summary

This report provides a summary of the mental health crisis care pathway in Barnet and key issues, challenges and opportunities to improve the pathway for residents. This report also outlines work in train to support improving the crisis care pathway to achieve better outcomes.

## Officers Recommendations

1. **Members of the Health Overview and Scrutiny Committee are asked to note the contents of the report and developments occurring to improve the crisis care pathway for Barnet patients.**

## 1. WHY THIS REPORT IS NEEDED

- 1.1 Members of the Health Overview and Scrutiny Committee requested a report on the current crisis care pathway for residents in Barnet and how crisis services in place work with key partners including; the Police, Council, Housing and other stakeholders as appropriate.

### Crisis Care in Barnet

#### Background

Ensuring that people experiencing mental ill health have access to good crisis care integrated into urgent and emergency settings and effective preventative support and multi-agency working aims to achieve:

- improved outcomes for patients (improved crisis care and prevention of crisis)
- parity of esteem between mental and physical health (equal value is placed on both physical and mental health)
- improved management of demand for services
- improved patient flow across the system

The crisis care pathway can be defined into four key stages:

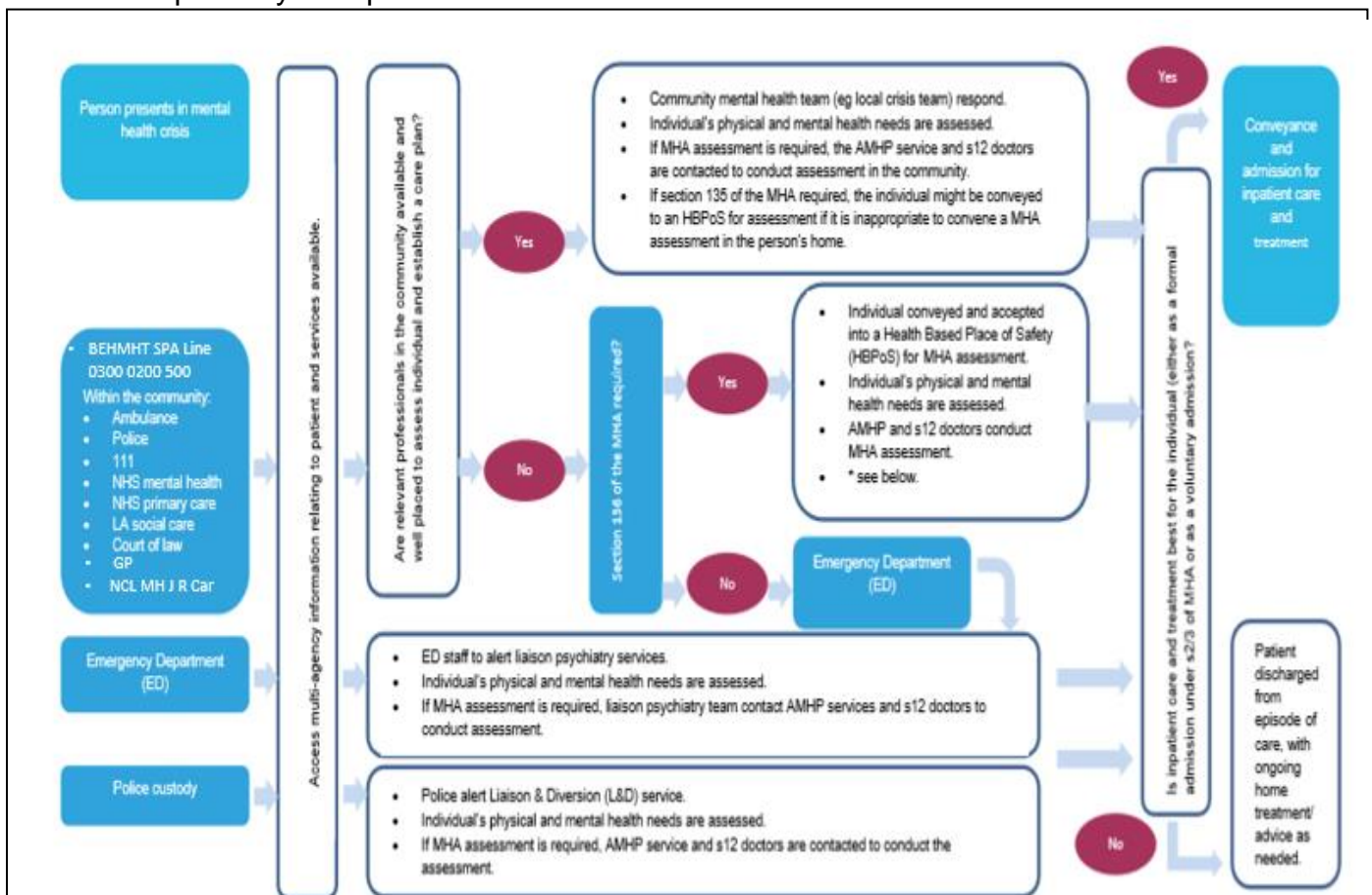
1. Access to support before crisis point; the provision of readily accessible support 24 hours a day 7 day a week- this is for people who are close to crisis and need quick access to support that may help prevent escalation of their problems.
2. Urgent and emergency access to crisis care- when people need emergency help related to their mental health needs when in crisis. The emphasis is on treatment being accessed urgently and with respect in a similar manner to a physical health emergency.
3. Quality of treatment and care when in crisis- the provision of support and treatment for people in mental health crisis. Effective treatment is provided by competent practitioners, who focus on the individual's recovery and is provided in a setting that best suits their needs.
4. Promoting recovery/ preventing future crises- the provision of services that will support the process of recovery for people with mental health illness and help them stay well.

Barnet, Enfield and Haringey Mental Health Trust (BEHMHT) are commissioned to deliver secondary mental health services for Barnet residents by North Central London Clinical Commissioning Group and lead, on delivering key components of the crisis care provision available in the borough. Currently health commissioned mental health support for residents in Barnet includes support from: -

- GP's
- BEHMHT Primary Care Link workers (providing knowledge and support to primary care regarding the mental health needs of patients, referring into mental health services and wider preventative support available in the borough)
- The Barnet Wellbeing Service (providing emotional health checks, social prescriptions and a range of preventative support and activities)

- BEHMHT 24/7 All Age Crisis Line – 0300 0200 500 (a single point of access for professionals and patients in crisis)
- BEHMHT Community Mental Health Teams (supporting people with complex mental health needs in our communities)
- BEHMHT Crisis Resolution Home Treatment Teams (providing crisis intervention and support in community settings to individuals to prevent admission)
- Other mental health provision e.g. Improving Access to Psychological Therapies (IAPT), psychology support, psychiatry, Early Intervention in Psychosis Service (a range of support is available from mental health services and individuals are referred into the right support to effectively meet their needs)
- Mental Health Liaison Teams (based at acute hospitals e.g. Barnet Hospital, Royal Free Hampstead to act as a point of knowledge for staff within hospitals and complete assessments on individuals presenting in crisis in acute settings)
- NCL MH Joint Response Car Pilot (a pilot currently being delivered in NCL where a mental health nurse and paramedic are dispatched as a first response to a patient identified as being in a mental health crisis and requiring a face to face assessment. The cars are operational 7 days a week between the hours of 11am to 11pm with the exclusion criteria of overdose and sectioned patients).
- S136 Suites- Health Based Places of Safety (for people detained by Police under S136 of the Mental Health Act who need to be provided with a safe space to stay in whilst a full Mental Health Act Assessment is undertaken due to the high risk of harm they present to themselves or others)

Individuals in crisis can present in community, acute or criminal justice settings and the current crisis care pathway is depicted below: -



\* In cases where s136 is applied, the individual could still go to ED if there were emergency physical health needs.

## Context

The Five Year Forward View for Mental Health set out a commitment that there should be improved access to high quality mental health care and proper funding for mental health crisis care; setting out the expectation that mental health support and services should be fully integrated within NHS urgent and emergency care to deliver parity of esteem between mental and physical health and improve outcomes for patients. The Five Year Forward View for Mental Health stipulated that by 2020/21.-

- All areas will provide crisis resolution and home treatment teams (CRHTTs) that are resourced to operate in line with recognised best practice – delivering a 24/7 community-based crisis response and intensive home treatment as an alternative to acute in-patient admissions. Out of area placements will therefore essentially be eliminated for acute mental health care for adults.
- All acute hospitals will have all age mental health liaison teams in place and at least 50% of these will meet the core 24 service standard as a minimum

The NHS Long Term Plan (2019) builds upon the priorities set out in the Five Year Forward View for mental health specifically identifying a need to improve support for people with mental ill health within primary care and, crisis and emergency provision to deliver better outcomes.

Mental Health has also been prioritised locally as reflected through:

- Work delivered via the Reimagining Mental Health Programme
- The Crisis Care Concordat 2014
- The Barnet Health and Wellbeing Strategy 2015-20
- The Barnet Corporate Plan
- The NCL MH Long Term Plan submission

## Joint Working

Barnet, Enfield and Haringey Mental Health Trust work with stakeholders across the system to prevent crises from occurring and ensure, that where a crisis cannot be prevented patients are provided with high quality treatment and support. Within Barnet examples of joint working includes: -

- Risk panels
- A MH Admissions Pathway Monitoring Group
- Attending joint case review discussions held with the Barnet Wellbeing Service and Barnet's Adult Social Care Enablement Network
- Attendance at a range of other multi agency forums
- Ensuring that individuals with complex mental health needs having allocated care coordinators who can be contacted if needed by organisations
- Having in place streamlined pathways for organisations to access depending on the presenting needs of individuals (e.g. clear escalation contact points within BEHMHT for different organisations to contact should they need advice and support)

A brief description of the different pathways available for residents and/ or organisations to access support from mental wellbeing services is set out below: -

1. If an individual would like to access support to maintain and or improve their mental wellbeing they can self-refer to the Barnet Wellbeing Service or to Barnet IAPT and a range of other preventative support available in the borough (partners across the local system can with an individual's consent also refer to these services)
2. If an individual is not known to secondary mental health services and are concerned about their mental wellbeing the individual should contact the GP who will then refer the individual to appropriate services as needed.
3. If an individual is known to secondary mental health services and appears to be presenting with risk or concern to an organisation the organisation should contact the individuals allocated care coordinator within BEHMHT or allocated social care practitioner.
4. If an individual presents in crisis the BEHMHT crisis line should be contacted.
5. If an individual presents in crisis and is displaying a high level of risk to themselves and or others the organisation should contact 999
6. If an individual has self-harmed the individual or organisation alerted should contact 999.
7. If an organisation has safeguarding concerns about an individual they should contact LBB Adults and Health Multi Agency Safeguarding Hub

### **Key challenges**

Urgent and emergency care, mental health services and social care are all facing significant challenges and whilst progress has been made to improve the crisis care pathway in Barnet and improve outcomes there are clear opportunities for further improvement.

Key challenges include:

- the impact of Covid 19 on mental health service delivery and provision (whilst mental health services have continued to be delivered throughout the pandemic the majority of support available for residents has had to be delivered via the telephone or other digital interfaces and it is anticipated that additional demand will present as a result of the pandemic)
- ensuring appropriate alternative provision is in place to prevent unnecessary admission into acute settings (currently Barnet has limited alternative provisions for people to access in crisis; for example, Barnet does not have a crisis café)
- fragmentation in the system (there are opportunities to improve joint working to prevent crisis and improve patient outcomes)

### **Key opportunities**

There are numerous opportunities to make improvements to the crisis care pathway and NCL CCG and BEHMHT are committed to proactively working with partners to deliver improvements to crisis care for residents. Opportunities include:

- Establishing a multi-agency complex care forum composed of partners from housing, the Police, Adult Social Care, BEHMHT and the CCG
- Developing more community and peer support resources

- Widely promoting and diversifying the local Improving Access to Psychological Therapies (IAPT) offer
- Developing a new community framework for mental health to support transformation of community mental health services and ensuring, that mental health support is aligned and fully integrated into Primary Care Networks and the wider system including adult social care and the voluntary and community sector.
- Enhancing capacity within the Crisis Resolution Home Treatment Teams with a stronger focus on holistic home treatment and support
- Exploring alternative provisions to prevent unnecessary attendance and admission and developing provisions where there are gaps e.g. developing a local crisis café in Barnet
- Enhancing support for friends and family who care for someone with mental ill health; for example, improved communications, training, peer support, information and advice

### **Current work underway to improve the crisis care pathway**

To support improvements to the pathway and better outcomes for resident's work is already underway. This includes:

- A Mental Health Compact for London (a compact between London' mental health and acute Trusts, Local Authorities, Clinical Commissioning Groups, NHS England, NHS Improvement, London Ambulance Service and Police Services) was implemented in 2019
- Expansion to IAPT provision occurred in 2019 including, a new offer from Mind in Barnet to support further diversifying the current service offer
- A Mental Health Joint Response Car Pilot is being trialled in NCL
- Expansion of the crisis resolution and home treatment team is underway
- Plans to develop a local crisis café for residents are being re-mobilised (Q4 20/21 to Q3 21/22; this offer may initially be a virtual offer dependent on the impact of the Covid 19 pandemic on plans)
- Public Health have commissioned a Support After Suicide Service which will be going live in October 2020
- A Multi Agency MH Forum for Barnet will be established in Q3 2020 made up of partners from across the system to improve communication and joint working
- A SIM Team is being established in the borough
- The North Central London MH Programme includes a dedicated work stream for crisis care and support to further deliver improvements across the system

## **2. REASONS FOR RECOMMENDATIONS**

- 2.1 This report recognises that currently improved joint working is needed to improve crisis care and support for residents and, that there are opportunities to improve the pathway for people presenting in mental health crisis.
- 2.2 Members of the Health Overview and Scrutiny Committee are asked to note the contents of this report and developments occurring to improve the crisis care pathway for Barnet patients.



### **3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED**

3.1 None

### **4. POST DECISION IMPLEMENTATION**

4.1 Activity occurring to enhance and improve the current crisis care provision in place in Barnet and across North Central London will continue informed by members and partners suggestions.

### **5. IMPLICATIONS OF DECISION**

#### **5.1 Corporate Priorities and Performance**

5.1.1 In 2014 the Clinical Commissioning Group and Council signed up to the national Crisis Care Concordat, which emphasises the importance of achieving parity of esteem between physical and mental health.

5.1.2 The Barnet Health and Wellbeing Strategy 2015-20 reflected the priority of mental health and the Health and Wellbeing Board priorities for 2019-24 include - encouraging residents to lead active and healthy lifestyles and maintain their mental wellbeing, and supporting residents across the life course to maintain and improve their mental health and wellbeing by raising awareness, tackling stigma and discrimination and making mental health everyone's business.

5.1.3 The Barnet Corporate Plan includes a commitment to integrating health and social care and providing support for those with mental health problems and complex needs and encouraging residents to lead active and health lifestyles and maintain their mental wellbeing – Outcome Our residents live happy, health, independent lives with the most vulnerable protected

5.1.4 The Joint Strategic Needs Assessment identifies rates of mental illness, dementia and suicide in Barnet and compares these with national rates. Prevalence of mental illness and rates of suicide are below the national average but rates of diagnosed dementia are higher. Common mental health prevalence for Barnet (42,184) is higher than our NCL partners prevalence rates.

5.1.5 The North Central London Long Term Plan submission for Mental Health set out three priorities for focus on to improve mental health support for residents in North Central London: -

- Stabilisation, expansion and development of core community services for people with complex needs due to serious mental illness (psychosis, personality disorder and severe mood and anxiety disorders), in partnership with expanded primary care mental health and VCS services;

- Achieve the ambition of 100% coverage of 24/7 children and young people crisis services; and

- Delivery of Early Intervention in Psychosis (EIP) services in line with national standards.

#### **5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)**

5.2.1 Activity occurring to improve crisis care support in North Central London is being undertaken by existing staffing and financial resource. Any additional financial resourcing required to further develop crisis care support will be via full business cases to the NCL Executive Management Team.

### 5.3 **Social Value**

5.3.1 Not applicable

### 5.4 **Legal and Constitutional References**

5.4.1 Section 244 of the National Health Service Act 2006 and Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013/218; Part 4 Health Scrutiny by Local Authorities provides for the establishment of Health Overview and Scrutiny Committees by Local Authorities.

5.4.2 The Council's Constitution (Responsibility for Functions) sets out the terms of reference of the Health Overview and Scrutiny Committee as having the following responsibilities:

"To perform the overview and scrutiny role in relation to health issues which impact upon the residents of the London Borough of Barnet and the functions services and activities of the National Health Services (NHS) and NHS bodies located within the London borough of Barnet and in other areas."

### 5.5 **Risk Management**

5.5.1 The effectiveness of work occurring to improve the crisis care pathway is dependent on several factors including local work occurring across the Clinical Commissioning Group, BEHMHT, the Council and with commissioned providers.

### 5.6 **Equalities and Diversity**

5.6.1 Equality and Diversity issues are a mandatory consideration in decision making in the Council pursuant to the Equality Act 2010. This means the Council and all other organisations acting on its behalf must fulfil its equality duty when exercising a public function. The broad purpose of this duty is to integrate considerations of equality and good relations into day to day business, requiring equality considerations to be reflected into the design of Policies and the delivery of services.

5.6.2 The specific duty set out in s149 of the Equality Act is to have due regard to need to: Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act; Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

5.6.3 The relevant protected characteristics are – age; disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex; sexual orientation. Health partners as relevant public bodies must similarly discharge their duties under the Equality Act 2010 and consideration of equalities issues should therefore form part of their reports.

5.6.2 Rates of mental illness vary across different groups including those as defined by protected characteristics.

### 5.7 **Corporate Parenting**

5.7.1 None

### 5.8 **Consultation and Engagement**

5.8.1 Engagement will be carried out to inform the local crisis care pathway development and

to support work being undertaken.

## 5.9 **Insight**

5.9.1 Mental health priorities are informed by local data, particularly the Joint Strategic Needs Assessment.

## 6. **BACKGROUND PAPERS**

6.1 [Barnet Joint Health and Wellbeing Strategy 2015-20](#)

6.2 Barnet Adults and Communities priorities for 2018/19 are set out in the Barnet Corporate Plan 2018/19 Addendum which is available online at <https://www.barnet.gov.uk/citizen-home/council-and-democracy/policy-and-performance/corporate-plan-and-performance>.

6.3 [Barnet Crisis Care Concordat](#)

6.4 [Barnet Joint Strategic Needs Assessment](#)

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