

**NHS DORSET CLINICAL COMMISSIONING GROUP
GOVERNING BODY MEETING
MENTAL HEALTH ACUTE CARE PATHWAY REVIEW**

Date of the meeting	19/10/2016
Author	K Florey-Saunders, Head of MH and LD E Hurl, Senior Joint Commissioning Manager
Sponsoring Clinician	P French Clinical Lead for Mental Health
Purpose of Report	The Mental Health (MH) Acute Care Pathway (ACP) Strategic Outline Case describes the ACP review and makes the case for change to the existing pathway including a preferred way forward which will improve mental health crisis care in Dorset.
Recommendation	The Governing Body is asked to:- (a) approve the Strategic Outline Case (Appendix 1) and the preferred option B; (b) approve the proposal to proceed to consultation; (c) approve the delegation of authority to the Chair and Chief Officer to make reasonable amendments to the public consultation proposal to address the external assurance feedback.
Stakeholder Engagement	The Strategic Outline Case has been coproduced with stakeholders including Dorset HealthCare, three Local Authorities, people who use MH services and carers also Dorset Police, SWASFT and Third Sector organisations.
Previous GB / Committee/s, Dates	N/A

Monitoring and Assurance Summary

This report links to the following Strategic Principles	<ul style="list-style-type: none"> • Services designed around people • Preventing ill health and reducing inequalities • Sustainable healthcare services • Care closer to home 		
	Yes [e.g. ✓]	Any action required?	
		Yes Detail in report	No
All three Domains of Quality (Safety, Quality, Patient Experience)	✓	✓	
Board Assurance Framework Risk Register	✓		✓
Budgetary Impact	✓	✓	
Legal/Regulatory	✓	✓	

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People/Staff	✓	✓	
Financial/Value for Money/Sustainability	✓	✓	
Information Management & Technology	✓		✓
Equality Impact Assessment	✓	✓	
Freedom of Information	✓		✓
I confirm that I have considered the implications of this report on each of the matters above, as indicated	✓		

Initials: EH

1. Introduction

1.1 Dorset Clinical Commissioning Group launched the Mental Health (MH) Acute Care Pathway (ACP) Review in 2015. The CCG and partners have been through a rigorous process of needs analysis, view seeking and has coproduced the development of a model of acute mental health care which is presented in the Strategic Outline Case (SOC). The SOC makes the case for change to improve Dorset's response to people experiencing mental health crisis and supports the delivery of:

- The Dorset Sustainability and Transformation Plan
- The Five Year Forward View for Mental Health
- Independent Commission's report on "improving acute inpatient psychiatric care for adults in England"
- NHS Operational Planning Guidance
- The Wessex Strategic clinical Network's Strategy for Mental Health Dementia and Neurology

1.2 The SOC follows the five case model approved by the Treasury and this is also best practice in Local Authorities. It details the strategic context and describes the economic and commercial landscape. The high level financial implications are outlined and the management case illustrates the proposals for implementing the new MH Acute Care Pathway.

2. Report

2.1 The MH Acute Care Pathway review was undertaken to address concerns from people about how mental health crisis service were responding to them when they were experiencing a crisis. Dorset HealthCare was also describing services under pressure because of an increase in the number of referrals and the severity of illness with which people were presenting and these concerns echoed the comments from people using or referring to services.

2.2 The review was fully co-designed from the outset and stages two and three have been fully co-produced with Dorset's NHS Mental Health provider which is Dorset HealthCare, the three Local Authorities, people who use services and their carers plus there was representation from Dorset Police, the Ambulance Service and from organisations in the third sector working in mental health.

2.3 The SOC makes the case for change. The case for change is based on the needs and data analysis, the views of people who use and or work in MH services and finally, based on the work of the coproduction modelling groups.

- 2.4 The SOC proposes additional community-based resources that will enable people to manage their own mental health crisis through a variety of options and it makes recommendations about inpatient services which are a crucial part of the MH acute care pathway.
- 2.5 A key element of the pathway will be safe spaces to visit when things start to go wrong called *Retreats* and *Community Front Rooms* and these will be open at the times people told us that they feel at their most vulnerable, such as evenings and weekends.
- 2.6 The pathway will provide an enhanced crisis line called the *Connection* that will include a range of options for how support is accessed, for example telephone or online support or through other technology such as Skype.
- 2.7 The SOC also outlines the requirement for additional inpatient beds that will prevent the need for out of area placements. The NHS Five Year Forward View for MH services is that no one should be placed out of area from October 2017. As well as enabling Dorset to meet the mandate the increase in bed numbers will help to future proof the mental health acute care pathway and most importantly to improve peoples' care when they are in crisis.

3. The Preferred Way Forward

- 3.1 The Strategic Outline Case presents the case for change, outlines the options and highlights the preferred way forward. The preferred way forward is Option B described in the Economic Case in the SOC and is described briefly below:
 - Two retreats: One to be in the Bournemouth / Poole area and the other to be in the Dorchester area. Indicative opening times are Monday to Thursday 16:00-24:00 and Friday to Sunday 17:00-02:00.
 - Crisis Line continues 24/7 enhanced by additional staff available between 18:00 and 02:00 every night to provide the Connections service.
 - Seven Recovery Beds are commissioned, split across east and west Dorset to enhance access according to prevalence.
 - Three Community Front Rooms with indicative opening hours of Thursday-Sunday 15:00-23:00.
 - Close Linden Unit in Weymouth, re-provide the 15 beds and increase the bed stock by a further 16 beds shared across the east and west of the county with the main increase in the East due to 70% of prevalence being from that area.
- 3.2 The financial case has demonstrated that all the shortlisted options are affordable in the context shown i.e. within the agreed current budget for the community model and it will reduce the current system unbudgeted spend on out of area placements.

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- Delivery of the recommended inpatient beds is dependent on approval of the required recurrent investment of **£1.352m** and this would deliver a complete reduction in out of areas placements, except in extenuating circumstances. This is £648k less than the current non-budgeted spend on out of area placements.
- The capital requirement of **£3.9m** for the inpatients bed increase will be sought from the current system and it is assumed in this business case that this is achievable.

3.3 There will be many benefits of the proposed option described in the SOC. The key benefits are described below.

- People will be able to access the support they need close to home when they need it and as early as possible
- There will be a reduction in mental health act detentions and associated patient experience and costs
- There will be a reduction in presentations at emergency department of people in mental health crisis
- Support will be provided in the least restrictive setting to meet someone's need
- There will be more choice for people because of the increased range of options

4. Conclusion

4.1 The MH Acute Care Pathway Strategic Outline Case makes the case for change to the existing care pathway to deliver high quality acute mental health care. The Governing Body is asked to approved the:

- (a) **approve** the Strategic Outline Case and the preferred option B;
- (b) **approve** the proposal to proceed to consultation;
- (c) **approve** the delegation of authority to the Chair and Chief Officer to make reasonable amendments to the public consultation proposal to address the external assurance feedback.

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Date : 10/10/2016

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APPENDICES	
Appendix 1	Strategic Outline Business Case

The following Annexes and Appendices are available by [following this link](#):-

- Annex 1 Simulation Modelling of MH Services report
- Annex 1a Dorset HealthCare benchmarking
- Annex 2 Summary of Shortlisting
- Annex 3 Critical Success Factors – shortlisting criteria
- Annex 4 Modelling event dates, key discussion points and outcomes
- Annex 5 ACP Public Consultation initial plan
- Annex 6 ACP Equalities Impact Assessment updated September 2016
- Annex 7 Privacy Impact Assessment MH Acute Care Pathway Review
- Annex 8 NICE Guidance and Quality Standards
- Annex 9 Aldershot Safe Haven Evaluation report
- Annex 9a Aldershot Safe Haven report
- Annex 10 Leeds Survivor Led Crisis Service report
- Appendix 1 Bournemouth University ACP Findings report
- Appendix 2 Co-production Groups attendees
- Appendix 3 ACP Needs and Data Analysis
- Appendix 4 Travel time analysis summary
- Appendix 5 Community Asset mapping
- Appendix 6 Workbook and examples of innovative practices
- Appendix 6a Alternatives to acute admission Gene Johnson Resilience inc
- Appendix 6b Peer support value for money 2013
- Appendix 6c Investing in recovery
- Appendix 7 Benchmarking Visit Synopses
- Appendix 8 Problem statements and objectives
- Appendix 9 ACP issues and logs register
- Appendix 10 Glossary of Terms