

**NHS DORSET CLINICAL COMMISSIONING GROUP**  
**GOVERNING BODY**  
**MENTAL HEALTH DELIVERY PLAN PROGRESS UPDATE**

<b>Date of the meeting</b>	19/09/2018
<b>Author</b>	M Harris - Head of Service (Mental Health)
<b>Sponsoring Clinician</b>	Dr P French, Clinical Lead for Mental Health and Learning Disabilities
<b>Purpose of Report</b>	To provide a progress update regarding the Mental Health Delivery Plan.
<b>Recommendation</b>	The Governing Body is asked to <b>note</b> the report.
<b>Stakeholder Engagement</b>	N/A
<b>Previous GB / Committee/s, Dates</b>	21 March 2018

**Monitoring and Assurance Summary**

<b>This report links to the following Strategic Objectives</b>	<ul style="list-style-type: none"> <li>• Prevention at Scale</li> <li>• Integrated Community and Primary Care Services</li> <li>• One Acute Network</li> <li>• Digitally Enabled Dorset</li> <li>• Leading and Working Differently</li> </ul>		
	<b>Yes</b> [e.g. ✓]	<b>Any action required?</b>	
		<b>Yes</b> Detail in report	<b>No</b>
All three Domains of Quality (Safety, Quality, Patient Experience)	✓		✓
Board Assurance Framework Risk Register	✓		✓
Budgetary Impact	✓		✓
Legal/Regulatory	✓		✓
People/Staff	✓		✓
Financial/Value for Money/Sustainability	✓		✓
Information Management & Technology	✓		✓
Equality Impact Assessment	✓		✓
Freedom of Information	✓		✓
<b>I confirm that I have considered the implications of this report on each of the matters above, as indicated</b>	✓		

Initials : MH

## 1. Introduction

- 1.1 Mental Health (MH) has had a much stronger focus in the NHS since the launch of the 5 year forward view for mental health and the subsequent implementation guidance:

<https://www.england.nhs.uk/publication/implementing-the-fyfv-for-mental-health/>

- 1.2 As per NHS England requirement, a comprehensive MH Delivery Plan for Dorset was presented and approved at the CCG Governing Body meeting in March 2018.
- 1.3 This report provides an update on progress in the delivery of the agreed local MH Delivery Plan.

## 2. Report

- 2.1 An Integrated MH Programmed Board has been convened to provide governance and assurance oversight of the delivery of the plan. The Board has met three times and continues to develop and strengthen its role. The Board is co-chaired by the CCG and Dorset Healthcare (DHC) and membership includes a wide range of stakeholders from partner organisations.
- 2.2 The delivery plan encompasses a significant amount of transformation work across multiple areas within the mental health field. Key areas are outlined below.
- 2.3 Children and Young People: The required access threshold has increased to 32% in 2018/19. The service remains on track to achieve this mandate with year to date compliance above plan.
- 2.4 Additional psychological wellbeing practitioners (PWP) are now in post and supporting improved access to psychological support for an additional 1,000 young people per year.
- 2.5 Children and Adolescent Mental Health Service (CAMHS) - The Dorset service is performing within the top quartile of providers as outlined in the national benchmarking report. Focus of efforts at present is to create more clinical time to focus on reducing variation in waiting times to treatment. This is being aided by the recruitment of the PWPs referred to in 2.4.
- 2.6 Children & Young People Eating Disorders – the service continues to provide an all age service which is well recognised nationally. Of note is that the increase in referrals late last year has been sustained over recent months - >51.85% increase since October 2017. This is now impacting upon waiting times with the service dropping below the national Mental Health Five Year Forward 20/21 access standards. An investment proposal is currently being prepared for the Operational Finance Reference Group (OFRG) service to

support additional practitioner time to enable the service to recover in lieu of the additional demand.

- 2.7 Perinatal Services: Work continues through the family and maternity programme to ensure perinatal mental health is integrated into the development and roll out of Better Births including enhancement of the specialist perinatal skills of the perinatal multi-disciplinary team.
- 2.8 IAPT Expansion: Dorset exceeded the 17/18 access standard of 16.8% instead achieving 18%. This has resulted in increased waiting times within the service which continue to be closely monitored. As of June, the service was compliant with relevant national standards – waiting times and recovery rates.
- 2.9 Preliminary evaluation of year 1 of rollout of the Long Term Health Conditions service suggests clinical improvements in patients that have been seen and a decrease in primary care health utilisation. Further data is required to assess the impact upon secondary care health utilisation.
- 2.10 Plans for the continued roll out into Chronic Pain are progressing, staff are working with people in GP surgeries and Community hospitals.
- 2.11 The service is currently working with Bournemouth hospital in mini pilot around COPD with good results working alongside the DAIR's nurses this will expand out during 2018/19 to cover patients with COPD in primary care , working with community matrons and GP's, Respiratory and Thoracic conditions alongside Medically Unexplained Symptoms and Frequent attenders at ED following a very successful research project carried out by a DHC health psychologist over the last few years.
- 2.12 One challenge highlighted by the service is the continued pressure obtaining rooms/premises for the facilitation of interventions and the high cost associated with these.
- 2.13 Early Intervention in Psychosis: The Dorset service has performed between 61% and 100% of people being treated within 2 weeks throughout 2017, against the national target of 50%. (70.59% in May 2018).
- 2.14 There are significant recruitment issues and this is being worked on between Dorset CCG and Dorset HealthCare as average caseloads are higher than best practice, as highlighted in the self-assessment 2017. A case for additional funding in line with the national allocation is expected in 2018/19.
- 2.15 The last self-assessment report for the service was completed in 2017 with results published in April 2018. The assessment covered measurement against the NICE Quality Statements for Psychosis and Schizophrenia in Adults , and recommendations drawn from Implementing the Early Intervention in Psychosis Access and Waiting Time Standard: Guidance published by NICE, NHS England and the National Collaborating Centre for Mental Health (NCCMH). An action plan has subsequently been developed to tackle areas for improvement and is linked to linked to the EIS NHSE Action Tracker.

## 9.3

- 2.16 Psychiatric liaison: The review of the current service is now in progress with a view to considering the best means for achieving the 20/21 standard for an all age service. The review is currently nearing the end of Stage One – Needs analysis and view seeking with a recommendation to proceed to Stage Two – Modelling anticipated to be presented to forthcoming MH Programme Board for approval.
- 2.17 MH Acute Care Pathway (ACP) and Out of Area Placements: Local services continue to experience high demand for in-patient beds with numbers placed out of area continuing to fluctuate on a daily basis.
- 2.18 Work continues on the estates plan to facilitate the expansion of acute beds as per decision in the MH ACP. Development of estates is contingent on the progress and outcomes of a number of other reviews within the MH programme, most notably the Rehabilitation Review.
- 2.19 The Mental Health Retreat is now operational within the east of the county with early results suggesting it has been well received by service users and stakeholders such as the police and ambulance service. An evaluation has commenced but is limited by the duration by which the service has been operational. Of note is that more people have been accessing the service that what was previously anticipated.
- 2.20 Physical Health Checks SMI: In lieu of the decision to not proceed with investment, a task and finish group is being set up by Public Health Dorset to look at how best to deliver health check consistently across Dorset and minimise duplication, whilst supporting access for people with serious mental illness.
- 2.21 Individual Placement Support (IPS): Development of this service continues to progress with the current plan aiming to implement a pan Dorset service from October 2018. The services will be pan Dorset and ensure that people who have serious mental illness and want to work are able to access support to do so.
- 2.22 Dementia: The Dementia Services Review is nearing the completion of Stage Two – Modelling with the Strategic Outline Case being finalised. Of note is that it has proved challenging to abide by the original objectives of undertaking the review within current resources. Each of the emergent pathway models will require new investment associated with increasing demand and best practice standards. NHS England have also indicated the probability of a new access standard being agreed in the coming months.
- 2.23 The shortlist of options and preferred way forward is being finalised with members of the co-production group in preparation for Stage One NHS England Assurance (Sense Check) which is scheduled for 17<sup>th</sup> September.
- 2.24 A separate investment case will be prepared for the OFRG to consider before taking the Strategic Outline Case (SOC) for sign off through the agreed governance route. The SOC is currently scheduled to be presented to the Governing Body in November for approval to proceed to consultation with this being dependent on the outcome of OFRG meeting.

- 2.25 Suicide Prevention: work has been progressed under the guise of the Crisis Care Concordat group. An overarching plan has been agreed which will form the basis for each signatory to develop respective organisational suicide prevention plans by Quarter 3 2018. The CCG mental health team are working on developing the plan within the required timeframe.

### 3. Conclusion

- 3.1 The CCG continues to work closely with partners through the MH Integrated Programme Board to develop and deliver the Dorset MH Delivery Plan.
- 3.2 NHS England continue to monitor progress and provide assurance. Dialogue has commenced with NHS England colleagues with a view to developing a robust self-assurance process for the MH programme as part of the Integrated Care System.
- 3.3 The Governing Body is asked to **note** this report and current progress against the approved MH Delivery Plan.

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**Date : 5<sup>th</sup> September 2018**

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