

REPORT TO THE DURHAM OVERVIEW AND SCRUTINY COMMITTEE

2 OCTOBER 2006

MODERNISATION OF ADULT MENTAL HEALTH SERVICES IN DURHAM

PURPOSE OF REPORT

- 1 To inform members of the progress against the Adult Mental Health Strategy for County Durham and Darlington.
- 2 To highlight further work to ensure full delivery of the Strategy for adult mental health services focussing specifically on issues outstanding in regard to the psychiatric intensive care services.
- 3 To present a 'map' of mental health services across North Durham to inform members of the range and location of services.

BACKGROUND

- 4 **National Policy and Drivers.** The key national policy drivers for adult mental health services are contained within the following documents:
 - Not Just Bricks and Mortar (1997)
 - The National Service Framework (1999)
 - The NHS Plan (2000)
 - Safety, Privacy and Dignity Policy (2000)
 - Mental Health Policy Implementation Guide (2001)
 - Choosing Health (2005)
 - 10 High Impact Changes for Mental Health Services (2006)
- 5 **Local Implementation.** The local implementation of the above policies was through a number of key strategic reviews as follows:
 - Sainsbury Centre Review of Adult Mental Health needs in Darlington and the South of County Durham (1999).
 - A Joint Approach to Mental Health – A Strategy for County Durham and Darlington (1999).
 - Northern Centre for Mental Health Review of Adult Mental Health Services in North Durham (2003).

The key elements of the above joint strategies were to improve mental health services for the local population of County Durham and Darlington and the buildings that they were delivered from.

Therefore, one of the key principles was, wherever possible, to deliver services in the communities where people live whilst ensuring that when people need access to specialist in-patient services outside of their communities, this would be for as short a period as possible in buildings that protected people's safety, privacy and dignity.

- 6 The jointly agreed strategies as outlined above involved users and carers, Strategic Health Authority, Social Services, PCTs and the Trust. The strategies have resulted in a significant amount of investment into services in County Durham and Darlington and the development of new models of care which are based, in the main, on offering increased choice and better access to services for users and their carers, delivered where possible, in the communities where they live.
- 7 The majority of people suffering mental health and mental illness problems are cared for in the community and only those with severe and high-risk concerns are admitted into in-patient care. The majority of these people stay for less than 28 days. This changing profile of the patient group who are admitted mean that all acute units need to be of a high standard and not just in regard to environment from a hotel perspective but also in regard to safety.

Therefore, all new acute units have inbuilt safety features and are structured in such a way to provide separate male and female living accommodation as well as bedrooms, recreation areas along with therapeutic activity areas which are delivered within the ward rather than patients going elsewhere.

INFORMATION

- 8 Following the Sainsbury Centre review of adult mental health services in South Durham and Darlington the following key service developments have occurred amongst others:
- Development of Community Mental Health Teams.
 - Development of respite beds in South Durham and Darlington.
 - Development of community enhanced services.
 - Opening of a new hospital at West Park, Darlington.

- 9 Following the review of adult mental health services in North Durham by the Northern Centre for Mental Health in 2003 a consultation was published in January 2004 on the developments of adult mental health services in North Durham. The review by the Northern Centre for Mental Health and the consultation highlighted key areas for development within North Durham as follows:
- That a 24 hour / 7 day crisis resolution home treatment team be developed that would operate across the Durham, Chester-le-Street and Derwentside localities.
 - That early intervention services should be developed across primary and secondary care services to focus on people with an early or first onset psychosis illness.
 - That a new acute unit would be built in North Durham to provide a purpose built unit that recognised the need to protect privacy and dignity of people with severe mental illness in a safe and therapeutic way. This included the provision of separate male and female accommodation, access to therapeutic space both inside and outside the building and offered safety in all aspects (psychologically and physically).
 - Further develop rehabilitation services, in particular links with voluntary and non-statutory agencies.
 - Work with primary care to develop the services for those people with common mental health problems using evidence based approaches.
- 10 The outcome of the consultation was that there was support for the development of adult mental health services in North Durham as indicated above. However, the consultation also noted the need to develop the community services prior to the new hospital to ensure there was an effective balance between resources available in local communities to ensure that admission to acute in-patient care was only used as intervention in only the most severe cases. The key principles of offering choice and ease of access were at the forefront of the developments.

11 **Community enhanced services**

The term 'community enhanced services' reflects that prior to North Durham Adult Mental Health Strategy the majority of services were available Monday to Friday from 9 am to 5 pm with the only 24 hours / 7 days services being provided by the acute in-patient areas. Therefore, this limited both access and choice. Below are the developments of the community enhanced services since 2004:

PROGRESS ON IMPLEMENTING THE NORTH DURHAM MENTAL HEALTH STRATEGY SINCE 2004

12 Service developments

Below are the new services and their locations that have been delivered since the launch of the Mental Health Strategy for County Durham:

- **Crisis resolution services** – The crisis resolution services are available seven days a week across a 24 hour time period. Since the setting up of the crisis resolution services they have seen the following number of people:
 - Derwentside and Durham and Chester-le-Street – 348 in 2004/5, 768 in 2005/6 and 308 from April to August 2006.
 - South Durham and Darlington – 423 in 2004/5, 1284 in 2005/6 and 374 from April to August 2006.

Once the crisis resolution service becomes involved they will intensively support somebody at home through a period of crisis.

These services are located in Durham City however they deliver services across Durham, Chester-le-Street and Derwentside.

- **Home treatment services** – These services support the crisis resolution services by offering intensive home treatment to people in crisis.

These services are located in Durham City, Chester-le-Street, and Derwentside which covers Stanley and Consett.

- **Early Intervention Services.** – These services have been developed following a significant amount of research that states that intervening early in people who develop psychotic illnesses e.g. schizophrenia that enables the quality of life for such individuals to be far enhanced. It also results in less disruption to family (often these individuals are in the early stages of adulthood) and means they can be supported in accessing education and training opportunities as well as work opportunities which may have been denied them in the past.

These services are located in the newly refurbished Health Centre at Chester-le-Street. However, they work across Durham, Chester-le-Street and Derwentside.

- **Assertive Outreach Services.** – These services are aimed at those people with severe mental illness and find it difficult to engage with services and routine e.g. attending for out-patient appointments at specific times and days. The term accurately reflects that these services actually outreach to those people wherever they may be to support them in many different ways, including managing accommodation and finance issues. These interventions ultimately reduce pressures on other parts of community services.

These services are located in Chester-le-Street (covering the Durham area) and Shotley Bridge (covering Derwentside).

- **A & E Liaison.** – There is a growing awareness that many people attend A & E not just with physical health problems but also with mental health and substance misuse problems. A recent national survey highlighted the number of attendances at A & E with alcohol problems was significant. The A & E liaison service allows people to be assessed and directed to appropriate services, therefore, not only providing intervention in their problems but also reducing the demands on A & E staff and acute services beds.

These services are located in the University Hospital of North Durham.

- **Suicide Prevention.** – There is a national strategy on suicide prevention that has an objective of reducing suicides by 20% by 2010. In that local suicide prevention strategy and workers work closely across many agencies and the Coroner's office in providing suicide prevention training and support as well as monitoring local suicide trends.

These services are located in Durham and cover the North Durham area.

- **Community Home Treatment Teams (formerly Community Mental Health Teams).** – Community Home Treatment Teams are joint Durham Social Care and Trust staff that work together under an integrated management arrangement to deliver long term services to those people with severe mental illness and home treatment services that support the crisis resolution services when appropriate. These remain the bedrock of community mental health care in secondary care services.

These services are located in the Health Centre at Chester-le-Street, two teams in North End House in Durham City and two teams at the Derwent Clinic, Shotley Bridge.

- **Quick Access Service.** – As members will note from above the array of new services that have been developed can be confusing for people both in other agencies be they health or social care or for users and carers themselves. Therefore the Trust has introduced a quick access service that gives a single point of contact for people if they are unsure of which service they should be referring people to or accessing themselves. The quick access service acts as the gateway to a number of secondary care services. This service is subject to an independent evaluation including obtaining the views of users and carers.

The draft evaluation report has now been received by the Trust and comments very favourably on the service.

This service is located in Chester-le-Street but also covers Durham and Derwentside.

- **Services and Buildings** – All of the above developments have seen significant investment in both the services themselves and the buildings from which they operate. These buildings are located in the communities and offer a non stigmatising service to people with mental health problems.
- **Lanchester Road Hospital** – The Lanchester Road Hospital is continuing in regard to its development. The Trust has now identified three potential companies to build the new hospital and is going through a tendering process to evaluate which of the final bids meets the requirements of both best value as well as meeting users needs.

12 Monitoring and Evaluation of Services

The Trust is required to undertake monitoring and evaluation of services on an ongoing basis which informed the assessment of the Trust by the Healthcare Commission. Below are some key evaluation outcomes that members may find of interest:

- **National User Survey** - The Trust has now been subject to the third national service user survey. The survey consists of 800 users who are taken from our local database of people who are receiving services through care co-ordination. Year on year the Trust has scored in the highest quartile of satisfaction in a number of areas from the user survey in particular the satisfaction with community teams involving social services staff and health staff.
- **Healthcare Commission Review** – The Trust is monitored annually on its performance against key targets for performance indicators. Members will be aware that the former County Durham and Darlington Priority Services NHS Trust received three stars last year in regard to those areas that were assessed by the Healthcare Commission.

- **Healthcare Commission Review of Integrated Community Services.** – The Healthcare Commission recently undertook a review of the working arrangements for community integrated services between social services and the Trust. The ratings range from very weak to excellent. Initial indications suggest that the community integrated services for Durham should receive an excellence rating. This reflects the hard work of both social services and the Trust in developing the integrated services to the benefit of users and carers.
- **National Staff Survey** – The National Staff Survey conducted through confidential questionnaires to staff have consistently put the Trust in the top 20% of all Mental Health Trusts.

13 **Psychiatric Intensive Care Services**

As members will be aware in 2004 the former County Durham and Darlington Priority Services Trust launched a public consultation on the temporary relocation of psychiatric intensive care services from Durham to West Park Hospital in Darlington. The Trust has recently undertaken a review of the intensive care services as part of their agreement to monitor the temporary relocation. The main findings from the review were as follows:

- 33 patients from Durham and Chester-le-Street and 16 patients from Derwentside have been admitted to West Park psychiatric intensive care unit over a 14 months period.
- At no time since the transfer of services has there been a need to transfer any patient outside of County Durham and Darlington who needed intensive care.
- As part of the consultation the Trust agreed to monitor complaints or problems experienced by users or their carers from North Durham. There have been no such complaints or concerns voiced since the relocation of the service.

The Trust has had discussions internally with the clinical staff (consultant psychiatrists) and the commissioners of the services on the outcome of the review. The Trust intends to engage user and carer groups, the Patient and Public Involvement Forum, staff side representatives, staff themselves, the PCT and other key stakeholders about this service.

The advice from Durham County Council's Health Overview and Scrutiny Chair, Vice Chairs and Head of Service on how we may take forward the findings from the report (considering the initial consultation was only for a temporary relocation of the Tony White Unit) is that any change to service provision is defined as a 'substantial variation' to the existing service and therefore requires the Trust to consult on this change.

CONCLUSION / RECOMMENDATIONS

- 14 Members will note the considerable progress and achievements since the agreement by all stakeholders on the Strategy for North Durham Adult Mental Health Services. These achievements have been recognised nationally and locally as outlined above.
- 15 The Trust will now consult further on the future of the psychiatric intensive care facilities in County Durham and Darlington following the review of these services.
16. The Trust to provide updates, as appropriate, to the Health Scrutiny Committee in order to keep members informed on progress with regard to the modernisation agenda.

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