

## Achieving excellence in mental health crisis – progress report

### Background

Over the last year the acute mental health services have undertaken a review and consultation regarding the future of acute mental health services including the Crisis support provided in the community across Kent and Medway. The review of current services found:

- Reducing hospital bed use over four years, due to successful alternatives established in the community, particularly since 2004
- Too few acute beds in east Kent and too many in west Kent, with people often placed out of the area covered by their community-based Crisis Resolution and Home Treatment (CRHT) team, a situation that prevents seamless care and creates delays
- Long-standing concerns about the quality of the environment in A Block at Medway Maritime Hospital, the inpatient unit for people from Medway and Swale, despite considerable previous effort to identify a local inpatient alternative
- Psychiatric intensive care is supported in west Kent by a very effective acute ward outreach service (PICO), not currently available for east Kent.

The review analysed four years of bed use data, leading to the conclusion that, allowing for the usual variations and the seasonal peak between January and March, 150 beds would be required, plus 12 in one psychiatric intensive care unit (PICU). Beds were allocated proportionately to match actual demand, with each service locality allocated to a specific inpatient ward and an aligned Crisis Resolution Home Treatment team.

The proposals set out to:

- Strengthen the Crisis Resolution Home Treatment teams with 26 Support Time and Recovery workers providing practical help and respite to service users and their families
- Develop three hospital *centres of excellence*, each providing a better patient experience, high quality care, and the opportunity to innovate and demonstrate best practice from a firm research evidence base. Delivered by a stronger staff team able to offer more therapeutic interventions 7 days a week; in a modern facility with a calm, therapeutic environment and individual ensuite bedrooms.
- Consolidate the Psychiatric Intensive Care unit at Dartford – Little Brook hospital. Expanding the psychiatric intensive care outreach service to cover the whole of Kent and Medway, providing support to staff in the Centres of

Excellence so that the need to transfer patients to a psychiatric intensive care unit is reduced.

This means expanding the facilities at St. Martin's in Canterbury, and re-opening an additional ward at Little Brook Hospital for Medway service users in need of acute care, and moving out of the two wards in Medway Hospital A Block.

Following an unsuccessful, 10 year pursuit for a local alternative for A Block it has become increasingly apparent the current ward environments are not clinically sustainable. Clinicians have recommended the alternative solution is to relocate services to Little Brook Hospital. While the outcome of the consultation is awaited steps are being taken to monitor and mitigate any additional pressures that arise out of a prolonged period of change. KMPT Director of Nursing Pippa Barber has committed the organisation to provide additional support to the staff who strive to do the best they can in difficult circumstances.

All Clinical Commissioning Groups, the JHOSC and both Boards supported the need to consult the public on *Achieving Excellent Care in a Mental Health Crisis* in the summer. The 13 week consultation is now completed.

## **Public Consultation**

The formal 13 week consultation ran from 26 July until 26 October. During the consultation a range of methods have been used to promote the consultation process:

The public consultation document and summary was written and tested with various stakeholders including: Non-executive directors, staff, and service users; to ensure it was clear, easy to understand and provided sufficient information without overwhelming the reader with details. It was successfully launched on 26 July 2012 and over 200 individuals, staff, service users and carers responded.

The engagement team sent out 966 invites with a link to the website and the electronic versions of the document to organisations and individuals, with an offer to attend any local meetings or events where people were interested in the review; and provide further information and listen to what people thought of the plans. The commissioning team and KMPT also sent the documents out to key stakeholders and organisations, over 3,000 Foundation Trust members, and staff. Many of the voluntary and community organisations which support service users and carers and are interested in mental health, cascaded the information to their members for instance: 575 individuals registered with MIND for the Locality Planning and Meeting Groups.

The engagement team booked six venues to cover each area, holding the public consultation meetings at a range of times in accessible and well used venues, and wrote to all known service user and carer organisations with the offer of being involved in focus groups. A further two public meetings were added at the request of stakeholders. Over 180 people attended these eight public meetings; with a few dedicated carers attended several meetings.

Kent and Medway NHS and Social Care Partnership Trust had a specific page on their website, with all the consultation information available. This was signposted by

suitable links on the three PCT websites, the Live it Well website and from partners in social care. The website and Intranet contained supporting documents of from the review including:

- Online consultation response form
- Full public consultation document and consultation response form and summary consultation document
- Easy read consultation document and easy read consultation response form
- Large print consultation document and response form

Back-ground papers including:

- The full Board papers
- Summary of Board papers
- Non-financial appraisal
- Risk appraisal
- Risk scores for Appendix B
- Right care, right time, right place
- Equalities Impact Assessment

The communications teams distributed 3,000 public consultation documents and 15,000 summary documents to over 700 organisations in Kent and Medway: GP practices, libraries, voluntary organisations and community centres, KMPT trust community buildings, pharmacies, opticians, hairdressers, Job Centres, fitness centres, citizens' advice and volunteer bureaus. The review and consultation also featured in Your Health and Medway Matters, the NHS magazines with circulations in excess of 50,000. The information was also placed with local councils known to publish residents' papers in Medway and Swale, the LINK and Kent Community Action Network. It was also promoted through social media using twitter and Facebook.

A phone number and email address was offered for any individuals wishing to comment or request more information.

## **Public Meetings**

During the consultation eight public meetings were held at various times. These meetings were advertised as part of the whole consultation as detailed above. Many of the events were chaired by an independent chair from one of the local voluntary and community support organisations to ensure that service users and carers felt comfortable and confident to contribute their views.

At these three-hour public roadshows a panel of clinicians and commissioners presented information on the review, the reasons why it was necessary, the outcome expected of the review, the steps taken during the review, the options arrived at and what would happen following the consultation. There was also a film of a service user's story so that people could hear how the Crisis Response and Home Treatment service worked to treat people at home. A quick question and answer session was followed by an hour of round table discussions to ensure that everyone present was able to give their views. Then finally a further open question and answer session took place and those present were asked to evaluate the events so the engagement

team could ensure they worked. A variety of supplementary information was on display or available in handouts including the detail of previous attempts to find local solutions for A block.

184 people attended the eight meetings: there was a good mix of service users and carers, support organisations, NHS and social care staff and local councillors. We had anticipated that the numbers attending wouldn't necessarily be high due to the specialized nature of the mental health crisis care, or partly due to consultation fatigue. A number of people commented upon the high level of changes happening across the public sector.

### **Focus groups and outreach**

During the consultation we contacted over 50 community and voluntary groups and offered to either attend their meetings to provide information on the consultation and raise people's awareness of the review, or to run a focus group with service users and carers where they were comfortable and felt able to take part in a discussion about the consultation proposals and any issues they wished to raise. A similar offer was made in the emails sent to over 900 stakeholders, and in the public documents and press releases.

13 organisations responded positively to host focus groups: Medway Cyrenians, Monday Hub, Medway Service User Engagement Project, Ashford Rethink carers group, Faces of Kent, Canterbury Rethink carers group, Thanet Rethink carers group, Deal Speakup Forum, DASH (Depression, Anxiety Self Help group), Sittingbourne Rethink support group, Dover Speakup group, Maidstone CVS. These focus groups were recorded and logged and sent onto Greenwich University Centre for Nursing and Healthcare research.

The commissioners and engagement team went to 15 other events (including three roadshows held in Medway shopping centres) to raise awareness and provide information about the consultation and encourage people to respond. Over 290 people were reached in this way. Any questions raised were responded to and any issues raised directly with the team were recorded and fed back to Greenwich.

### **Next steps**

The responses have all been logged during the review: from phone calls and email enquiries for further information, letters, and write ups of public meetings, focus groups and the outreach visits to local groups.

These have all been sent to independent researchers from Greenwich University who have collated and analyzed all the information and sent a report to the commissioners and Trust. They will share this with the eight clinical commissioning groups alongside and discuss the steps which should be taken next when all the evidence is considered and looking at the issues raised by respondents.

This information will also be shared with the JHOSC in February, together with the Commissioners and the Trust medical leads recommendations for taking the proposals forward.

The final report will then go to the Boards of Kent and Medway NHS Partnership Trust and NHS Kent and Medway in February. The Boards will then take the final decision whether to accept their recommendations.