



Mental Health: October 2017 Update

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Police & Crime Plan

Priority 1: Caring about the Vulnerable

- Objective 2:
 - Improved response & reduced harm to people at greater risk, including those vulnerable due to mental ill-health

Outcomes:

- Short term An evidence-based approach to co-commissioning of services e.g. mental health triage is embedded & the Mental Health Crisis Care Concordat is flourishing with clear a vision & agreed outcomes
- Medium term Improved strategic & operational planning between partners to respond to mental health issues & crises means those with mental ill-health are supported & engaged by the most appropriate service, in the most appropriate way & only by the police when necessary



Vision & Outcomes



- Vision: Mental Health (MH)
 - Those coming into contact with NYP where MH is a presenting issue are enabled to access appropriate support services to meet their needs
 - Reduced demand re. calls for service where MH is a presenting issue
 - Reduced repeat calls for service where MH is a presenting issue
- Outcome for individuals coming into contact with NYP where MH is a presenting issue:
 - Referral to appropriate support services to meet MH needs
 - Reduced need for NYP calls for service where MH is a presenting issue



Crisis Care Concordat



- Nationally agreed February 2014
- Formally supported by NYP & partners since October 2014
- Key themes:
 - Access to support before crisis
 - Urgent & emergency access to crisis care
 - Quality of treatment & care when in crisis
 - Recovery, staying well & preventing future crises

Objectives: work in partnership to:

- Prevent crises happening whenever possible, through early intervention
- Improve system of care & support so people in mental health crisis are kept safe
- Enable people to find help they need, whichever service they turn to first
- Meet needs of vulnerable people in urgent situations, getting right care, at right time, from right people to ensure best outcomes
- Prevent suicide & support those affected by its consequences





Focus Areas

i4R Model:

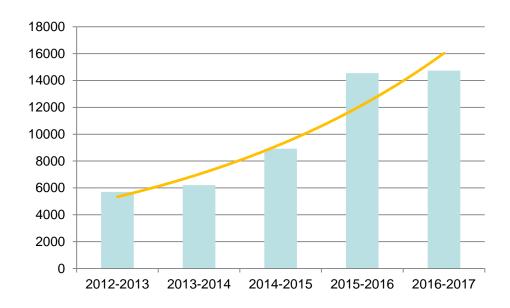
- Identification of vulnerability, through training, raising awareness, enhancing partnerships & developing screening tools
- *Recording* of relevant information in a terminology that is commonly understood between (& accessible by) partners
- **Response** using appropriate internal & external resources in an intelligent way, to ensure the lowest appropriate, least restrictive intervention at the earliest possible opportunity
- Referral to agencies able to provide the correct, longer-term support & management
- Review to ensure residual risks & needs are understood & effectively managed, & that there is identifiable ownership of responsibilities





Recorded incidents

- "Mental Health" qualifier involving a person who has, or appears to be suffering from, a mental disorder or mental impairment including learning difficulties.
- Only 7% of occurrences contain the relevant qualifier







Mental Health: Funded Services

- NYP Force Control Room (FCR) Mental Health (MH) Triage
 Service = FCR Triage
- York MH Street Triage Service = York Street Triage
- Scarborough MH Street Triage Service = Scarborough Street
 Triage
- Together: York Pathways MH Service = York Pathways





MH: Funded Services

The Journey:

Scarborough Street Triage

- 2014-2016: Home Office pilot area evaluating impact of MH Nurses attending calls with Police Officers when individual is in MH crisis
- Evaluation showed NYP, Health partner & Patient positive impact
- April 16: Scarborough service continued funded jointly locally by PCC,
 Clinical Commissioning Group & TEWV (Community MH service provider)

York Street Triage

 Oct 14: rolled out Street Triage service to York, currently provided as part of Community MH service by TEWV

FCR Triage

 Jan 16: rolled out across York & North Yorkshire, Police Officer access to MH Nurse expertise (TEWV) via telephone



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FCR Triage: Overview

- Funding 2017/18: £176,834
- Provider: Tees, Esk & Weir Valley Foundation Trust (TEWV)
- Pilot: Jan 16-July 16; 4 days a week, Thursday-Sunday 10am-10:30pm
- Mainstreamed: July 16; 7 days a week, 10am-10:30pm
- Service: MH Nurses supporting Police Officers to manage incidents where individuals present in MH Crisis via telephone advice & onward referral
- Current review:
 - Is the service available when it is needed?
 - Resourced appropriately re. demand?
 - Delivering appropriate outcomes for individuals?
 - Who are our repeat callers & how can we better support them?
 - How do we better support those not previously known to MH services?
 - How do we improve the pathways between our MH services & partners?





FCR Triage: Outputs

April 16-Sept 17:

- Occurrences Triaged by MH Nurses = 3,491
- An average of 8.4 Occurrences per Day of Service were Triaged

	Days of Service	Occurrences	Occurrences per Day of Service
16/17	243	2,209	9.1
Q1 & Q2 17/18	171	1,282	7.5
Total	414	3,491	8.4

- **2,038** were Direct Calls for Assistance from Police = **58%**
- **1,012** were Proactive Reviews of Occurrences = **29**%

	Direct Call for Assistance	Proactive Review of Occurrences	Blanks	Total
16/17	1,088	703	418	2,209
Q1 & Q2 17/18	950	309	23	1,282
Total	2,038	1,012	441	3,491





FCR Triage: Outcomes

April 16-Sept 17: Follow-up actions recorded = **3,073**:

- 1,020 Occurrences where MH Nurse resolved issues via IAG = 29%
- 620 where matter was handed back to Police = 20%
- **553** re. Other MH Follow Up = **16%**

Follow Up Action	16/17	17/18	Total	%
Info. Advice, Guidance (IAG)	496		1,020	
Ongoing Police Matter	363	257	-	18%
Other	146	89		7%
Other MH Follow up (GP/Key Wkr)	381	172	553	16%
Referral to Crisis Service	124	46	170	5%
Referral to ED Liaison Service	127	48	175	5%
Referral re. Section 136	50	23	73	2%
Referral to Street Triage	104	100	204	6%
Blanks	418	23	441	13%
Total	2,209	1,282	3,491	

April 16-Sept 17: Known to MH services:

- 74% Known to TEWV
 - 1,505 were Known to TEWV but with
 No Active Care Plan = 43%
 - 955 were Known to TEWV with an Active Care Plan = 29%
 - 67 were Known to TEWV in relation to CAMHS = 2%

13% Not Known by TEWV

- 393 were Not Known to TEWV = 11%
- 54 were Craven or not NY residents =2%



- Funding: £66,667 (additional funding via CCG/TEWV)
- Provider: Tees, Esk & Weir Valley Foundation Trust (TEWV)
- **Service:** 3 days a week

April 17-Sept 17:

- Occurrences Triaged by MH Nurses = 153
- An average of 1.7 Occurrences per Day of Service recorded were dealt with by York MH Street Triage

	Q1 & Q2 17/18 Total
Occurrences	153
Days of Service	88
Occurrences per Day	1.7



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York Street Triage: Outcomes

April 17-Sept 17: Follow-up actions recorded = **153**:

- 57 re. Ongoing MH support = 37%
- **31** GP Referrals = **20%**
- 17 Section 136 Referrals = 11%

	Q1 & 2
Outcome	17/18 Total
GP	31
Ongoing mental health support	57
Referral to Crisis	9
Referral to Well-being / CMHT	
(Community MH)	6
Referral re. Section 136	17
Signpost 3rd Sector	7
Referral to Liaison	7
Other	15
(blank)	4
Total	153

April 17-Sept 17: Of **153** MH Nurse Triage Occurrences:

82% Known to TEWV

- 69 were Known to TEWV butwith No Active Care Plan = 45%
- 49 were Known to TEWV with an Active Care Plan = 32%
- 7 were Known to TEWV in relation to CAMHS = 5%

17% Not Known by TEWV

26 were Not Known to TEWV =17%







Scarborough Street Triage: Overview & Outputs

- Funding: £67,627 (additional funding via CCG/TEWV)
- Provider: Tees, Esk & Weir Valley Foundation Trust (TEWV)
- Service: 7 days a week, 1-11pm
- Staff: 4 FTE, roles made permanent Summer 2016

April 16-Sept 17:

- Occurrences Triaged by MH Nurses = 809
- An average of 2.7 Occurrences per Day of Service recorded were dealt with by Scarborough MH Street Triage

	16/17 Total	Q1 & Q2 17/18	Total
Occurrences	501	308	809
Days of Service	201	104	305
Occurrences per Day	2.5	3.0	2.7



Scarborough Street Triage: Outcomes

April 16-Sept 17: Follow-up actions recorded = **809**:

- 396 Community Referrals re. MH =
 49%
- 376 Informal Referrals re. MH = 46%
- **14** = Section 136 Referrals = **2%**

Outcome	16/17	Q1 & Q2 17/18	Total
Referral re. Section 136	8	6	14
BoP	0	4	4
Informal Referral to MH	254	122	376
Community Referral	223	173	396
Blank	16	3	19
Total	501	308	809

April 17-Sept 17: Of **308** MH Nurse Triage Occurrences:

- **279** were **Known** to TEWV = **91%**
- 29 were Not Known to TEWV =9%

Known to	Q1 & Q2
TEWV	17/18 Total
Yes	279
No	29
Total	308



York Pathways: Overview



- Funding 2016/17: £37k NYP; £165k Lankelly Chase
- Provider: Together, from April 15
- Referral Agencies: Health, Third Sector, CJ Agencies, Community Safety Hub
- Service: Identify shared cohort of individuals who place greatest demands on emergency services & assertively engage them to tackle '3 Hardest Things' in individuals lives:
 - Intensive work with up to 30 individuals at a time
- Vision: Increased wellbeing & resilience of individuals in contact with the project by tackling the root cause of problems
 - Reducing inappropriate demand on emergency services

Current Review:

- Sustainability into 2018/19?
- Does the service meet NYP need & demand in York?
- Delivering appropriate outcomes for individuals?
- How do we appropriately prioritise access re. NYP referrals?
- Improve the referral routes into the service for NYP / FCR & York Street Triage?



York Pathways: Outputs & Outcomes

Outputs:

	2015-16	2016-17	Q1 & Q2, 2018-19	Total
Referred	33	17	2	52
Engaged	25	16	2	43

Outcomes: Interim Evaluation April 15-Jan 17

- IOMI Multi-dimensional Change Measurement Tool:
 - Initially Pathways Clients were less hopeful, motivated, resilient, trusting & impulsive than all other groups they were compared with
 - Positive changes identified re. Hope; Agency/Self-efficacy; Impulsivity; Motivation to change: Interpersonal trust; Emotional wellbeing; Managing finance & debt; Maintaining positive relationships; Difficulties concerning drugs & alcohol
- Pathways Clients self-reported:
 - increased Confidence & autonomy; decreased Mental health
 problems/management; decreased Alcohol misuse; improved Outlook & mood;
 increased Motivation; increased Engagement with other services; decreased
 suicidal ideation or intention



Developments



Recent:

- Introduction of Health-Based Places of Safety (HBPoS) for people detained by police under Mental Health Act
- CAMHS Crisis Service
- Connect Mental Health
 Collaboration
- Suicide Prevention (Suicide Safer City)
- Suicide Postvention Service
- Problem Profile
- NYP Mental Health Policy
- HMIC Inspection

Forthcoming:

- FOCUS Pathway
- FCR AMPH Liaison Pilot
- Mental Health training for all public-facing staff
- Amendments to Mental Health Act
- New Hospital being built in York



Section 136: MHA Detentions



Health-Based Place of Safety utilisation 2016/17:

Health Based Place of Safety	Count
York	87
Bradford	5
Scarborough	110
Northallerton	65
Harrogate	84
Total	351

- 87% decrease in use of custody for detention over past 5 years
- Patient assessment & transportation compliance



- Collaboration between University of York, NYP, TEWV & College of Policing 2015 -2017. Police Knowledge Fund.
- Deliverables:
 - Systematic review of evidence re. what works
 - Develop a better understand of interagency working
 - Develop & evaluate training of staff in mental health issues
 - Deliver & evaluate Research Methods training
 - Share learning nationally through College of Policing & other agencies
 - http://connectebp.org/