Police and Crime Commissioner

for Hertfordshire

NHS Trust

NHS Trust



West Hertfordshire Hospitals

East and North Hertfordshire NHS

NHS East and North Hertfordshire Clinical Commissioning Group

NHS Herts Valleys **Clinical Commissioning Group**

DRAFT Hertfordshire Mental Health Crisis Care Concordat Action Plan

We, as partner organisations, will work together to implement the principles of the national Mental Health Crisis Care Concordat and improve the care and support available to people in crisis because of a mental health condition, so that they are kept safe and receive the most effective interventions swiftly. We will work together to help people find the help they need - whatever the circumstances - from whichever of our services they turn to first and accept our responsibilities to reduce the likelihood of future crisis and to support people's recovery and wellbeing

This action plan has been produced by the signatories of Hertfordshire's Mental Health Crisis Care Concordat with the overall aim of working together to make changes to systems and processes that reduce the numbers of people who experience crisis and to improve the outcomes for people who do use services. We believe that this is most effectively done through partnership working and joint responsibility. At the heart of Hertfordshire's declaration and action plan is the principle that we will all work together to improve individuals' experience (professionals, people who use crisis care services, and carers) and reduce the likelihood of harm to the health and wellbeing of patients, carers and professionals



East of England Ambulance Service











Health and Wellbeing Board Hertfordshire

ITAL HEALTH AND DRUG AND ALCOHOL SERVICES IN HER

GOVERNANCE				
Action	Lead	Review date	Proposed outcome	Commentary
Establish multiagency delivery/oversight group to oversee development and implementation of the action plan	IHCCT and OPCC	February 2015	Ensure good governance and accountability for delivery of actions; first meeting planned for 11 th February 2015	Complete – membership agreed and implementation to be monitored by Health and Wellbeing Board and Community Safety Board
Establish reporting structures between delivery/oversight group to operational groups or existing meetings for escalation and resolution of problems, to be included in Terms of Reference (ToR)	IHCCT/OPCC for ToR	Meeting April 2015	Ensure delivery of the Hertfordshire Concordat is given priority within organisations	 11/2/15 Commitment from each member organisation to ensure Concordat is embedded. Actions outstanding: Terms of Reference to be drafted Agree timescales and prioritisation of action plan at next delivery meeting
Commission external review of current pathways, outcomes and response to mental health crisis; review to be undertaken across agencies, age range and including pathways for people with dementia	IHCCT/OPPC	Review to commence by May 2015	 Partners to the concordat will have a clear, system wide understanding of crisis response, across the partnership system and the associated gaps Oversight group to agree joint data set to monitor impact of the Concordat action plan 	11/2/15 Funding for review agreed; IHCCT to progress service specification and tender process, involving partners
Agree joint data set to capture demand and response to mental health crisis	All	March 2015	Provide an overview of data already captured to inform commissioning of review	11/2/15 All partner organisations to forward details of data currently collected and analysed relating to people at risk of, or experiencing mental health crisis
Clarify and agree pathways and joint working protocols across health organisations, social care and the police for management of people who are intoxicated or under the influence of drugs (including in relation to use of Section 136 powers, or attendance at Emergency Departments)	IHCCT (PH Commissioning)	June 2015	 People who are intoxicated or under the influence of drugs will have an appropriate place to go to; Front line responders will have more options available to support people in crisis, but who do not have a mental health condition Service users can expect the most consistent and appropriate response to their needs Organisations have a clear understanding of their responsibilities with regards assessment and support of people using drugs or alcohol 	11/2/15 Partners are aware of the lack of provision for people who require a place of safety prior to assessment or who require a service other than mental health assessment
Update Joint Strategic Needs Assessment (JSNA) to reflect data on mental health crisis in children, young people and adults	Public Health	July 2015 (following review)		Pending review
Contracts with health and other Concordat organisations will have clear expectations and outcomes for service users experiencing mental health crisis; contracts to include Triangle of Care Standards	Commissioning bodies	April 2016 (in line with NHS contracting round)	 Commissioners have assurance that Provider organisations are improving outcomes for people with mental health problems, or those at risk of crisis Triangle of Care Standards to ensure that role of carers is identified at first contact, or as soon as possible afterwards Commissioners work together with service users and carers in evaluating the effectiveness and outcomes of services 	11/2/15 Agreement to undertake as part of 2016/17 contracting round, whilst establishing baselines in 2015/16 Highlight at a National level, through the Strategic Clincial Network, the need for national contracts to include mandate on this area Carers in Hertfordshire; Hertfordshire Healthwatch and Viewpoint to support service users and carers to be involved
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crisis incidents, including suicide and serious incidents, across all services and stakeholders			 and have processes for ensuring lessons are learnt Concordat partners have forum for sharing learning from incidents Hertfordshire reduces the number of incidents related to mental health crisis as a result of sharing learning 	Hertfordshire Public Health Suicide and Self Harm conference held in 2013
Hertfordshire district and borough councils to develop strategy for people with mental health problems or at risk of crisis	B3 Housing (initial scoping work only)	April 2015	 People with mental health problems, or identified as being at risk of mental health crisis, have good access to general needs housing via district/borough councils District/borough councils to ensure appropriate access and support in maintaining good quality accommodation People experiencing additional pressure due to worries about homelessness or accommodation are well supported, reducing pressure and likelihood of crisis 	11/2/15 Engagement with district/borough councils regarding housing strategy for people with mental health problems not yet underway
Include outcomes from Child and Adolescent Mental Health Services (CAMHS) review relevant to managing mental health crisis in children and young people	Public Health and Children's Services	May 2015	 Children and young people can expect to receive mental health services that are outcome focused and meet their needs in a timely way Hertfordshire's model for CAMHS will support early intervention and prevention, with quicker access to services that prevent crisis Hertfordshire's model for CAMHS has support from young people using the service and carers 	11/2/15 Whilst awaiting the outcomes of the CAMHS review, investment has been made into Children's Crisis and Treatment Team to work with children and young people in A&E and offering community treatment
ENSURING A CONSISTENT RESPONSE TO PEOPLE IN	I MENTAL HEALTH	H CRISIS		
Review of pathways (described above) to include existing joint standards, working protocols and policies for response to mental health crisis	IHCCT & OPPC	August 2015	 Develop a single consolidated lists of existing protocols as a starting point. All Concordat partners involved in the identification, support, care and treatment of people experiencing mental health crisis are assured of their role Concordat signatories have confidence that the response from any organisation will lead service users to the right support at the right time 	11/2/15 Whilst awaiting review, commissioners to work with organisations to review current joint working protocols that currently exist
Multiagency workforce development/training group, under the oversight of the local Health Education partnership established in Hertfordshire, to review current mental health training available across partner organisations, including input from people with a lived experience	HPFT to lead	May 2015	 All organisations learning and development teams offer consistent approaches to working with people with mental health problems All service providers or front line responders are competent to triage and assess mental health crisis Service users and carers are confident that training includes their lived experience 	11/2/15 There is a range of training that has been developed and delivered in conjunction with Viewpoint and Carers in Herts, although this has not been continued in some organisations or been embedded within training programmes
Develop local protocol for emergency services and frontline responders to manage mental health crisis and ensure diversion/signposting to most appropriate services	Hertfordshire Constabulary	August 2015	 Consistent approach across Hertfordshire emergency services to people experiencing mental health crisis Consistent response and signposting to those not experiencing mental health crisis, but requiring alternative support Effective triage is in place to ensure the appropriate use of Section 136 of the Mental Health Act (2008) 	11/2/15 Pilot of HPFT Mental Health Nurse in Herts Constabulary Control Room started 30/1/15; 111/HPFT Single Point of Access pilot went live on 10/2/15 – initial outcomes to be reported at next meeting. No consistent approach at current time.
Establish effective methods for engaging with people with lived experience, of all ages and for all elements of mental health crisis	Hertfordshire Healthwatch (TBC)	July 2015	 Concordat partners are able to engage directly with people with lived experience to ensure outcomes are improved as a result of actions Partners have assurance that evaluation and review is robust as a result of working with service users and carers 	
Partner organisations improve engagement and attendance with local Community Safety Partnerships	OPPC	April 2015	Community Safety Partnerships will act as a forum for identifying and supporting people in a cross agency way, with the intention of avoiding crisis	11/2/15 Attendance at Partnership meetings by all partners is mixed across the County. Details to be forwarded to group by OPPC and each organisation to take

				responsibility for attendance
 SUPPORT BEFORE CRISIS Concordat partners commit to sharing and dissemination of any national, regional or local schemes or initiatives relating to mental health and emotional wellbeing – can be shared through regular delivery group meeting Spot the Signs and Save a Life (suicide prevention) Invisible friend Time 2 Change 	System wide Communications Group	Ongoing	 Hertfordshire has a consistent approach to mental health promotion Raising community awareness of mental health and wellbeing and reducing stigma Hertfordshire citizens are more resilient as a result of mental health promotion and access to support Early identification of people and subsequent avoidance at risk of mental health crisis 	11/2/15 Whilst there are a number of initiatives and projects underway in Hertfordshire, there is no single way of sharing this. Concordat delivery group can include within the ToR sharing of schemes to ensure consistent adoption and support
Implement recommendations of Hertfordshire County Council's Community Wellbeing Team (CWB) review of mental health contracts, looking at early intervention and prevention of crisis	Ruth Harrington (Head of CWB)	April 2016	 Ensure community and voluntary sector response has a positive impact on service users and carers in avoiding crisis or promoting recovery Mental Health Market Position Statement is clear on the services that require development 	11/2/15 Update required; MH MPS has been developed and includes reference to Concordat but may require updating at next draft. CWB review has started, but link to Concordat delivery group not agreed
Review of out of hours demand for crisis support and response to those experiencing crisis	CCGs (via IHCCT)	May 2015	Improved understanding in the system regarding demand for services and commissioning decisions based on this	11/2/15 Will use data from commissioned review, as well as data collated from providers as part of System Resilience funding
Health and Wellbeing Board 'Year of Mental Health' – monthly events during 2015/16 to promote mental health and wellbeing in Hertfordshire's population	Health and Wellbeing Board (HWB)	Ongoing 2015/16	 Improved community awareness and response to early indicators of mental health crisis World Mental Health Day (10th October) to be supported by all Concordat partners, with a focus on mental wellbeing and crisis resolution Signposting to services that promote prevention and early intervention 	11/2/15 Plans for implementation underway within the HWB
Review of capacity and competence of care homes in meeting the needs of people with behavioural and psychological symptoms of dementia; which includes development of the Care Home Premium.	ІНССТ	December 2015	 Ensure that respite provision for people with dementia can competently manage the behavioural and psychological symptoms of dementia (BPSD) to prevent care breakdown/crisis Non-specialist care homes have agreed standards regarding the provision of support and care to people with dementia to support them for longer 	11/2/15 update required, although Care Home Premium has been in place for approximately a year, with the purpose of increasing quality of delivery of care
HCC , both CCG and HPFT have just commenced a piece of market engagement work with care home providers, with a view to increasing the number & range of beds available in the county	HCC, CCGs and HPFT	December 2015	Service users have increased choice regarding support and accommodation	
URGENT AND EMERGENCY ACCESS TO CRISIS SERV	/ICES			
Review of psychiatric liaison function across Hertfordshire and border hospitals for responsiveness and service user outcomes	IHCCT	April 2016 (NHS Contracting round)	 Ensure that commissioned services are responsive and support general hospitals in managing mental health crisis Ensure that Hertfordshire residents can expect the same assessment and treatment, regardless of the hospital they attend 	11/2/15 Cross border protocols and agreements are in existence, although require review and possible revision during coming year
Establish 'crisis protocol' for front line responders and call handlers to ensure effective support to manage a mental health crisis situation (as described above)	Hertfordshire Constabulary	August 2015	 Reduction in number of Section 136 detentions that do not lead to mental health intervention People who are drunk or under the influence of drugs can be assured of the most appropriate response to their needs 	11/2/15 Pilot of HPFT staff member in Herts Constabulary control room to support front line decision making regarding support of people with mental health problems started 30/1/15
Agree use of 'Safety Net' across Concordat partner agencies as initial information sharing approach	OPPC	August 2015	 Facilitate call handling for responding workers Ensure effective response for people who are too intoxicated for assessment 	11/2/15 Safety Net is in place with some partner organisations, with varying levels of success

			 access to advanced decisions made by the individual about their ca prevents escalation of people whose crisis can be managed
Explore integrated information spine for crisis care plans and relevant information to be accessible across agencies			
Establish 24 hour mental health Single Point of Access, including integrated pathways with 111/999 and effective signposting function	IHCCT/HPFT	April 2015	Ensure that people experiencing mental health crisis will have the sam response as those experiencing a physical health emergency
Explore options for care and subsequent assessment (if	ІНССТ (РН	August 2015	Avoid unnecessary use of Section 136 powers
necessary) of people too intoxicated to be interviewed	Commissioning)		 Better outcomes for people not experiencing a mental health crisis, bu trigger concern in police or emergency services
Ambulance Service to use appropriate vehicle for use in mental health emergency (Concordat standard)	East and North Herts CCG (lead commissioner) with East of England Ambulance Service	April 2016	People who require transport to a place of safety can expect to be trans in the most appropriate type of vehicle
Countywide standards for Approved Mental Health Practitioners, to include CPD programme; workforce strategy;	Hertfordshire County Council	April 2015	
Emergency Duty Team and core competencies.	(HCC)		
Prepare multiagency 'standards'/what to expect document for service users and carers who experience mental health crisis	IHCCT/OPPC to co- ordinate	December 2015	 All partners will commit to a set of standards, which service users and will be able to evaluate their experience against Service users and carers are empowered to understand their rights and expected outcomes
QUALITY OF TREATMENT IN CRISIS			
Staff across agencies make use of people's advanced decisions and crisis care plans, or provide clear justification for an alternative	All		• Service users and carers are empowered to manage a crisis and receiver right support, from the right organisation, at the right time
Continued roll out of 'Making Our Services Safer' Strategy in HPFT, ensuring that support and, where required, physical intervention is in line with best practice	HPFT	ongoing	Service users can be assured of receiving care and treatment in a safe and environment
Agencies that use physical intervention to support someone during crisis to review their policies and protocols to ensure they are in line with national best practice (reference Lord Adebowale's report into use of force and restraint, as well as the Crisis Care Concordat)	All providers of service/care	May 2015	 Service users and carers have confidence that service providers will foll best practice guidelines if physical intervention is used during crisis Commissioners are assured that providers and emergency services are best practice and that use of physical intervention is the last option in with people with mental health problems
Hertfordshire advocacy tender, led by HCC Community Wellbeing Team, to include requirements to meet needs of	СШВ	April 2016	 Ensure that people with mental health problems are able to access advessily to help with resolution of contributing factors

eir care	
	Dependent on outcome of use of Safety Net – Concordat Delivery Group to take a view
e same	11/1/15 Pilot between SPoA and 111 underway. Delivery of action will require investment and changes in commissioning – dependent on outcome of review and evaluation of System Resilience schemes
is, but who	
e transferred	11/2/15 Will place considerable pressure on Ambulance Service if remainder of system response is not addressed i.e. early intervention; prevention of crisis and where mental health crisis response is not required. To be flagged with the Strategic Clinical Network as a national planning requirement 11/2/15 AMPH review completed;
	further detail to follow
and carers ts and	Requires development, with support from Viewpoint, Carers in Hertfordshire and Healthwatch
eceive the	11/2/15 Linked to information sharing protocols
and positive	11/2/15 IHCCT and HPFT confident in delivery of Making Services Safer Strategy – to continue to be monitored as a CQUIN in 2015/16
vill follow is es are using on in working	11/2/15 Acknowledgement that each Concordat signatory that provides services will have different standards, therefore should be able to provide assurance regarding best practice to the next meeting
ss advocacy	11/2/15 HPFT engaged with CWB in discussions regarding

people with mental health problems, especially during detention or treatment			• Commissioners, HPFT, service user and carers are confident in the interface between formal/generic advocacy services and mental health services	countywide advocacy tender
Clinical audit of referrals of service users known to both CRI and HPFT according to cross service protocols	ІНССТ	September 2015	 Ensure that engagement, assessment, treatment and access for people with dual diagnosis is responsive and effective Commissioners, HPFT and Spectrum have confidence that joint governance processes are effective 	11/2/15 Joint Governance Meeting well established and functioning, will extend to meet requirements of the Crisis Care Concordat
RECOVERY				
Maintain audit programme for monitoring routine development and use of crisis care plans	HPFT and Spectrum	September 2015	 Establish baseline for current practice and promote standardised approach to development and sharing of plans Service users and carers able to clearly articulate whether they were offered opportunity to develop a crisis care plan in collaboration with a named professional 	
Undertake options appraisal of telehealth and alternative technology in maintaining wellbeing	ІНССТ	September 2015		11/2/15 Some alternative services currently commissioned in adult mental health services and CAMHS, but no strategic approach to this
HPFT and University of Hertfordshire review and develop psycho-education on preventing and managing mental health crisis for service users and carers	HPFT	Sept 2015	Service user and carer education/support is provided in line with national best practice	
HPFT and commissioners to work with service user and carer representatives to test information sharing guidelines, to ensure that they support good practice and involvement, whilst also protecting service users confidentiality				
Community Wellbeing Team to ensure that needs of people with mental health problems are considered during review of advocacy services	CWB	April 2016	 Ensure that people with mental health problems are able to access advocacy easily to help with resolution of contributing factors Commissioners, HPFT, service user and carers are confident in the interface between formal/generic advocacy services and mental health services 	11/2/15 HPFT engaged with CWB in discussions regarding countywide advocacy tender
Implement follow up of young people who present at Emergency Departments for support with self-harming behaviours	HPFT/WHHT/ENHHT	Ongoing		11/2/15 Awaiting outcomes of CAMHS review and evaluation of System Resilience Schemes that supported this pathway
All partners to monitor repeat attendance at health services/police presentation/contact with criminal justice system for assertive outreach and support	All	Ongoing		11/2/15 Could form part of either Public Health led mental health crisis review group, or Community Safety Partnership meetings (or both)

GLOSSARY:

IHCCT – Integrated Health and Care Commissioning Team

- OPPC Office of the Police and Crime Commissioner
- HPFT Hertfordshire Partnership University NHS Foundation Trust

SCN – Strategic Clinical Network

- CCG Clinical Commissioning Group
- AMHP Approved Mental Health Practitioner

Version 3 February 2015