

**Nottinghamshire County Council**  
**Oversight and Scrutiny Committee**  
**Nottinghamshire Healthcare Trust Mental Health update**  
**September 2021**

## 1.0 Introduction

This paper gives a brief summary of local Mental Health service provision including key performance measures and the impact of the Covid-19 pandemic and an update on the local Mental Health Transformation plans

## 2.0 Performance

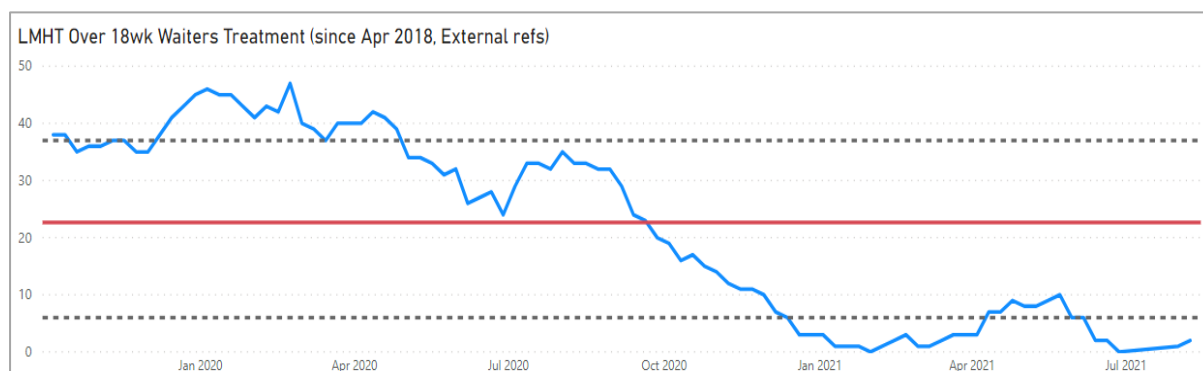
### I. COVID Impact on Activity

Our services have seen a variety of changes in activity over the last 18 months, some services, such as the Children and Young People Eating Disorder Service, Psychology and the Adults Crisis Service have seen levels of referrals increase. However other services, such as Local Mental Health Teams, have seen steady referral levels through the pandemic.

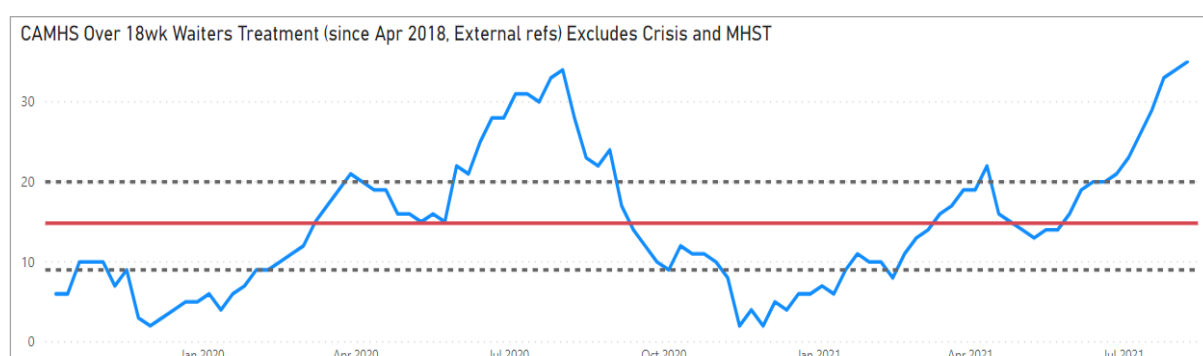
### II. Access to Services & Waiting Times

- Our waiting times for **Improving Access to Psychological Therapies (IAPT)**, remain consistently above national targets, with 100% of our patients now being seen within 18 weeks, and over 95% seen within 6 weeks. The IAPT Recovery target has now been achieved for 18 successive months of reporting.
- Over 8 out of 10 of our mental health patients are followed up within **72 hours of discharge**.
- Our **Early Intervention in Psychosis (EIP)** Teams continue to deliver treatment to over 85% of patients within two weeks, significantly ahead of the national target of 60%.
- The length of time our older patients have waited for **Memory Assessment Services** continues to fall, at 10 weeks currently, having been 15 weeks in March.
- We are struggling to deliver the goal of 95% for **routine and urgent treatment of young people with eating disorders**, with 86% of patients treated within 4 weeks (routine) and 63% of patients treated in one week (urgent), at the end of Quarter 1 21/22.
- The overall level of **Physical Health checks** continues to increase, driven by much improved levels within our EIP Service, (now running at double the rate of last year).
- Our **Mental Health Support Teams in schools** service was the first to go live nationally and is now held up a national exemplar, supporting 112 schools across Nottinghamshire.

- **Local Mental Health Teams'** average treatment time is currently around 7 to 8 weeks, an improvement on waiting times for the same period last year. The number of patients waiting over 18 weeks has significantly decreased over the past year.



- Our **Step 4 Psychotherapy and Psychological Therapies** have been particularly disrupted by COVID, as certain therapies cannot be delivered virtually; this has unfortunately led to patients commonly waiting more than 6 months for treatment.
- We are experiencing waiting times pressures across some local services including Step 4 Psychological Therapies, CAMHS Community Services, Adult and Children and Young People Eating Disorder Services and our Trauma Service.



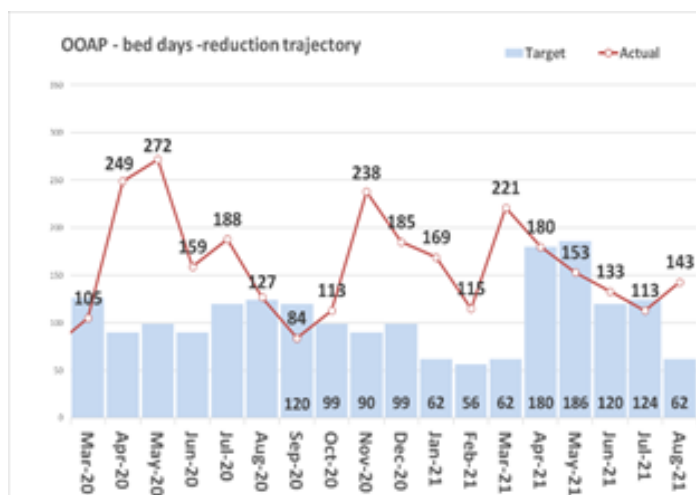
- Where we do have waiting time challenges, the services are actively managing the waiting list according to clinical priority and following the Trust Waiting Well Policy to support patients and minimise risk.

### III. Out of Area Placements

**Inappropriate Out of Area mental health placements** halved from an average of 464 bed days per month in 2019/2020 to 177 for 2020/2021. The Trust achieved the Quarter 1 21/22 target, recording 466 against a target of 486 bed days.

Our ambitious Adult Mental Health transformation program is helping to reshape our Crisis service provision to better meet the needs of our community, and, through effective collaboration with other local healthcare providers, we continue to reduce the bed usage outside Nottinghamshire.

However, ward closures due to COVID and the closure of some of our sub-contracted provision has made the reduction of out of area placements very challenging over the past 15 months. Currently, we have six patients in such placements, **but our ambition is to end all out of area placements by March 2022.**



### 3.0 Transformation plans

#### I. National Guidance

The Mental Health Long Term Plan (MHLTP) sets out the standards and ambitions for Mental Health Services until 2023/24, building on the Five-Year Forward View released in 2016.

Supported by an investment commitment of around £40 million across the ICS area the national transformation plans for mental health are wide ranging and comprehensive and when delivered locally will transform care and delivery models, improving patient experience and reducing health inequalities. The transformation plans will develop across the ICS over the next three years in partnership with key local stakeholders such as social care, VCSE, Primary care etc. The Nottinghamshire ICS Mental Health and Social Care Strategy local data on service demand has also been used to inform plans.

The LTP for Mental Health encompasses the following transformation programmes to be delivered by 2023/24:

- Specialist Community Perinatal Mental Health
- Children and Young People's (CYP) Mental Health
- Adult Common Mental Illnesses (IAPT)
- Adult Severe Mental Illnesses (SMI) Community Care
- Mental Health Crisis Care and Liaison
- Therapeutic Acute Mental Health Inpatient Care
- Suicide Reduction and Bereavement Support

In addition, in 2021/22 the following programmes have been added:

- Discharge Funding
- Rough Sleeping
- Workforce Support

## **II. Local Ambitions and Targets**

The Community Mental Health Framework for Adults and Older Adults sets out key requirements for transformation plans recognising the workforce, skills and challenges that we are currently experiencing. The recommendations focus heavily on partnership working and developing capacity in the Voluntary and Community sector and Primary Care. The framework also sets out specific requirements to increase the access to Psychological Interventions and develop specific service offers for patients with Personality Disorders and Long-Term Community Rehabilitation needs. Plans are in place to develop local Mental Health Partnerships involving all key stakeholders to design and deliver the transformation plans.

Local targets to be achieved by 2024 of:

- 6,303 people with a Severe Mental illness will receive a full annual physical health check, an increase from 4500 in 2019
- 60% of people experiencing a first episode of psychosis will have access to a NICE-approved care package within two weeks of referral,
- 60% of services will achieve Level 3 NICE concordance by 2020/21 and by 23/24 the 60% Early Intervention in Psychosis access standard will be maintained and 95% of services will achieve Level 3 NICE concordance,
- New Integrated Community Models for Adults with SMI spanning both core community provision and dedicated services will ensure at least 8200 adults and older adults have greater choice and control over their care, and are supported to live well in their communities,
- 1210 people a year will have access to Individual Placement and Support (IPS) services an increase from 500 in 2020. Focused on supporting patients with severe mental illness to access employment and training.
- 8000 children and young people will access Mental Health an increase from 7000 in 2019
- 1300 women will access local perinatal services an increase from 600 in 2019
- Crisis services will be all age and provide 24/7 access and support

The Community Mental Health Framework for Adults and Older Adults sets out an ambition for close alignment with the 15 Nottinghamshire County Primary Care Networks (PCNs) and services are expected to work within these service footprints. PCN Mental Health Practitioners are being currently being recruited to support patients in primary care and act as the bridge between primary and secondary care. These roles will grow over the next three years from 1 practitioner per PCN to 3 per PCN by 23/24.

## **III. Addressing Health Inequalities**

An important focus for all programme areas is the impact they will have on addressing the underlying determinants of health inequalities. Mental Health Partnership groups are being developed across the Integrated Care Partnerships (ICP) to develop processes coproduce plans using the principles below;

- Co-commission and co-design accessible, culturally tailored and culturally appropriate services with communities to meet the needs of people whom services struggle to engage or whom experience unequal outcomes;
- Review performance of KPIs by protected characteristics, including people living in deprived areas and ethnic minority groups.
- Strengthen relationships with grassroots VSCE organisations and user-led groups which work with and can meet the needs of communities facing specific inequalities.
- Use transformation funding to commission VCSE-led organisations to address inequalities amongst underserved SMI populations.

#### **IV. Risks and challenges**

The Mental Health investment plan is an excellent commitment to the long-term delivery of services, however the scale of recruitment around 220 new posts over a 4-year period and service change required in a relatively short period time and against the back -drop of an ongoing pandemic has been a challenge. Main areas of challenge are the recruitment of suitably skilled staff and partner organisations ability to expand at pace. We are working closely with ICS and national workforce and training leads to develop training and development programmes and working with the local Voluntary Community Sector to support growth and invest in the required infrastructure