

Transforming adult and older people's mental health services in Hambleton and Richmondshire

Update to North Yorkshire County Council Scrutiny of Health Committee

Introduction

This report provides an update to the North Yorkshire Scrutiny of Health committee on the progress made in Hambleton and Richmondshire to implement the new enhanced community mental health care model for adults and older people.

Background

Following the outcome of public consultation (Summer 2017) about adult and older people's Mental health services in Hambleton and Richmondshire, the Governing Body of NHS Hambleton, Richmondshire and Whitby Clinical Commissioning Group (the CCG) approved the recommendation to close inpatient mental health beds at the Friarage Hospital. Tees, Esk and Wear Valleys NHS Foundation Trust (the Trust) would provide enhanced community and crisis services and inpatient care would be accessed when necessary in identified alternative in patient wards.

The key benefit in making this change would be for more people to receive mental health care and treatment closer to home, reducing the number of inappropriate admissions and to facilitate and support early discharge, reducing the length of time people stay in hospital.

Analysis of the activity data for Q1 2019/20 shows a positive impact in reducing hospital admissions and the length of stay whilst increasing community capacity and improving outcomes.

Progress to date (Older People's Mental Health Services)

From 1 March 2019 the older people's mental health enhanced community model became operational. This has allowed the service to provide treatment closer to home and prevent unnecessary hospital admissions by delivering a 7 day week 8am – 8pm service.

The Trust has increased the skills within the community team by training staff in non-governed psychological therapies, and incorporating physiotherapy, pharmacy and dietetics into the community model. The physical health monitoring of patients in the service has also been improved with roles dedicated to this.

The Trust has also embraced the use of technology using Skype to support with remote working enabling teams to share key information that supports intensive home care out of hours. It has also enabled them to trial the use of Skype for patient consultations.

The next phase of the work will include widening the range of non-governed psychological therapies which can be provided in the community. This will support recovery and well-being offering effective intervention to patients when they need it and further reducing the need for inpatient care and preventing patients going into crisis.

Progress to date (Adult's Mental Health Services)

In preparation for the change in services and before the inpatient service closed the Trust worked closely with the crisis teams to develop a new model of patient engagement. This model is named "Recovery@home". This was developed so that the Trust could test and modify this way of working whilst engaging service users in the Friarage before moving to working with partners at Roseberry Park Hospital and West Park Hospital.

This model involves the crisis team engaging service users, where appropriate, in making a plan for their discharge from the day of their admission. Not only does this approach empower the service user to make choices about their care but also helps eliminate waste in the admission process. Examples of this could be resolving financial or housing issues early so as not to delay discharge unnecessarily.

The extra capacity provided to the crisis team from the inpatient services closure has allowed the team to provide the "Recovery@home" model across the 2 hospital sites as well as providing more resource to be able to support patients in facilitated early discharge.

Conclusion

Progress to date has been very positive with data evidencing that the work underway by the community teams to promote early safe discharge with assured intensive home support has resulted in more care closer to home. This has been achieved by working closely with the home wards to support timely (and clinically appropriate) discharge and by the local services now being able to deliver treatment over extended days/hours.

Work continues to improve the service and next phase includes widening the range of non-governed psychological therapies which can be provided in the community. This will support recovery and well-being offering effective intervention to patients when they need it and further reducing the need for inpatient care and preventing patients going into crisis.

Report Author: Lisa Pope, Deputy Chief Operating Officer, Hambleton, Richmondshire and Whitby Clinical Commissioning Group, September 2nd 2019.