

# MENTAL HEALTH AND DEMENTIA STRATEGIC PLAN





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# Summary

The aim of North West Ambulance Service is to be the best ambulance service in the country by delivering the right care, at the right time, in the right place; every time. This is inclusive and imperative for our patients living with mental health problems and/or dementia.

This Mental Health and Dementia Strategic Plan (2019 – 2022) supersedes the NWAS Mental Health Improvement Plan (2017–2022), and includes 17 recommendations and a range of actions for each of these recommendations, which collectively aim to shape and transform mental health and dementia care within the organisation.

The plan is reflective of the relevant mental health and dementia related aspirations detailed within the Five Year Forward Plan for Mental Health (2016), the NHS Long Term Plan (2019) and the Prime Ministers Challenge for Dementia (2015).

The recommendations and associated actions are based on extensive scoping and appraisal of care provision between January 2019 and July 2019 including feedback from our staff, our patients and partners within mental health across the North West region.



# The purpose of our Mental Health and Demetia strategic plan

This Mental Health Strategic Plan sets out the trust's commitment to improving the care and support of patients presenting with mental ill health or dementia.

Lord Carter's Review into Ambulance Services (NHS Improvement, 2018) indicates that the number of calls to the ambulance service has risen steadily over recent years, and the patient profiles have changed considerably with 90% of those ringing requiring urgent primary, social or mental health care needs.

The NHS Long Term Plan (2019) accurately affirms that ambulance services are at the heart of the urgent and emergency care system. Ambulance services have transformed from the traditional transportation service to a service which requires its clinical workforce to make autonomous and often complex clinical decisions. Many of these decisions relate to supporting individuals with multifaceted and unstable presentations associated with mental health and dementia.

Typically, patients presenting with mental ill health or dementia do so via the 111 Service, the Paramedic Emergency Service (PES) and the Emergency Operations Centres (EOC). The trust receives approximately 1.6 million calls to the 111 Service and a further 1.3 million 999 calls.

From both a national and local perspective there is a strong indication that the number of calls relating to mental health is increasing significantly and mental health related calls may present with underlying physical symptoms, so a true picture of the percentage of mental health support provided is difficult to capture accurately.

In addition to this, our Patient Transport service (PTS) and Volunteer Car Drivers (approximately 350 in number) undertake in the region of 1.4 million patient journeys per year, a significant part of this is supporting people living with mental health problems and dementia to attend planned care such as hospital appointments.

The aim of the trust is to be the best ambulance service in the country by delivering the right care, at the right time, in the right place; every time. We believe that we are in the privileged position of touching people's lives when they need us most, and our core purpose is to save lives, prevent harm and offer services which optimise the likelihood of outstanding patient outcomes irrespective of their diagnosis (NWAS Right Care (Quality) Strategy, 2018 – 2023). As an organisation, NWAS has identified a number of high impact priority areas for improvement which includes mental health and dementia.



Our aim is to be the best ambulance service in the country by delivering the right care, at the right time, in the right place; every time.











104

ambulance stations

#### Background

The World Health Organisation (WHO) defines mental health as 'a state of wellbeing in which the individual realises his or her abilities, can cope with the normal stresses of life, work productively and is able to make a contribution to his or her close community.

The Social Care Institute for Excellence defines dementia as an umbrella term, describing the symptoms that occur when the brain is affected by certain diseases or conditions which cause the gradual death of brain cells. This leads to progressive cognitive decline.

From a mental health perspective, The Five Year Forward View for Mental Health (2016)<sup>1</sup> sets out a number of ambitions which support the fundamental principle relating to parity of esteem, in that mental health needs should be treated with equal importance to physical health needs, whatever NHS service the person is receiving care or support from.

Building on the Five Year Forward View, the NHS Long Term Plan (2019) prioritises mental health care in the following areas:

- Children and young peoples mental health services including learning disability and autism.
- Improved access to psychological therapies for those with common mental health problems in primary care.
- New and integrated models of primary and community mental health care will support adults and older adults with severe mental illnesses.
- Mental health crisis care with a 24/7 community based mental health crisis response service for all adults.
- Ensuring a single point of access and timely, universal mental health crisis care for everyone, through the 111 service.
- Collaborative and multi-agency approach to suicide prevention.
- Reducing length of stay and out of area admissions for inpatient mental health care.
- Introducing mental health transport vehicles, introducing mental health nurses in ambulance control rooms and building mental health competency of ambulance staff by ensuring they are trained and equipped to respond effectively to people experiencing a mental health crisis.

<sup>1.</sup> The Five Year Forward View for Mental Health (2016) See Page 34

From a dementia perspective the Prime Minister's Challenge on Dementia 2020 (Department of Health, 2015)¹ aspires that by 2020, England will be the best country in the world for dementia care and support and for people with dementia, their carers and families to live; and the best place in the world to undertake research into dementia and other neurodegenerative diseases.

In defining the trust's strategic objectives for improving mental and dementia health care, it is worth considering the current national perspective relating to these conditions.

### Adult Mental Health perspective

Mental health problems are common, with one in six adults reporting a common mental health problem such as anxiety. In addition to this, there are close to 551,000 people in England living with Severe Mental Illnesses (SMI) such as Schizophrenia or Bipolar Disorder (Public Health England, 2018).

In recent years, there has also been an increase in suicide, and this rise is most marked amongst middle aged men; suicide is now the leading cause of death for men aged 15–49 (NHS England, 2016).

It is an established fact that physical health and mental health are often inextricably linked. It is estimated that 30% of people living with long term physical health problems will also have co-existing mental health problems (Naylor et al, 2018) and people with severe and prolonged mental illness are at an increased risk of developing long term physical health conditions. This latter patient group are at risk of dying on average 15 to 20 years earlier than other people – this is one of the greatest health inequalities in England (NHS England, 2016).

## From a children and young person's perspective

Mental health problems often develop early. One in every nine children between the ages of 5-15, has a mental disorder, with half of all mental health problems established by the age of 14, and rising to 75% by the age of 24 (NHS England 2016). Yet currently only 25% of these children and young people are receiving mental health care and support.

#### From an older adult perspective

The UK population is ageing rapidly, with the number of people aged 65 and over growing by nearly half in the past 30 years. A person living longer is a cause for celebration, but older people are more vulnerable to mental health problems (Mental Health Foundation, 2019) with 20% older people living in the community and 40% of older people living in care homes affected by depression.

The Alzheimer's Society states that there are currently 850,000 people with dementia in the UK, with numbers set to rise to over 1 million by 2025. This is predicted to soar to 2 million by 2051. 225,000 people will develop dementia each year, which equates to one person every three minutes. One in six people over the age of 80 have dementia, and 70% of people in care homes have dementia or severe memory problems. There are over 40,000 people under 65 with dementia in the UK and more than 25,000 people from Black, Asian and Minority Ethnic groups in the UK are affected.

As a result the trust has identified a number of high impact clinical and patient-centred priority areas for improvement which includes mental health and dementia.

In January 2019, the trust committed to undertake a comprehensive six month review of its mental health and dementia care provision across the entire organisation.

# The aims of the review

To undertake detailed scoping across the whole organisation in order to establish work that is already happening across the trust in relation to mental health and dementia, and consider how effective and good practice can be further developed across the trust.

In conjunction with service leads, review the work and governance supporting the Mental Health Nurses and Practitioners across the organisation.

To undertake a robust review of the existing five year 'Mental Health Action Plan' which was written and commenced in 2017 and develop a revised three year Strategic Mental Health and Dementia Plan based on the six month review findings.

In conjunction with the Chief
Nurse review the current
structure of mental health
leadership and management
within the trust and propose a
new structure to support mental
health leadership in line with the
Quality Directorate restructure.

In conjunction with the Clinical Leadership and Education teams, review the current training provided to staff across the organisation in relation to mental health and dementia and develop a three year plan for the training and ongoing development of clinical staff.

The review has indicated that as a trust our staff are committed to ensuring patients with mental health and dementia related problems receive appropriate care and support particularly when they are in crisis.

However, there are a number of factors both internally and externally that influence this and results in variance across our localities in terms of patient pathways and support available for both patients and staff.

The review has therefore established a number of development opportunities/ themes centred on the following areas, which reflect national policy relating to the future of mental health and dementia care within NWAS:

- 1 Consistent information relating to mental health and dementia to support clinical practice and decision making processes.
- 2 Strengthening multi-agency working across our localities to reduce risk and enhance consistency in care across organisations that support people living mental health problems or dementia.
- Further development of robust and timely pathways into appropriate statutory and voluntary services for mental health assessment and treatment.
- Workforce training and development in relation to mental health and dementia.
- 5 Strategic leadership and direction in terms of mental health and dementia.
- 6 Clinically effective and research based practice to underpin care provision and enhance the organisational research portfolio.
- Meaningful patient engagement strategies and learning from patients' experiences.
- 8 Innovative working to meet the diverse needs of mental health and dementia patients.
- 9 Ensuring connectivity to national, regional and local mental health care and dementia developments

# Our patient-centred clinical priorities/recommendations 2019 – 2022

The review has identified 17 Patient-centred clinical priorities. These have been formulated into recommendations which are underpinned by the organisations' Right Care (Quality) Strategy 2018 – 2023.

The Right Care (Quality) Strategy incorporates the essential elements of a 'quality strategy' and describes how NWAS will deliver safe, effective and patient-centred care for every patient and pledges four commitments to patients:

- The first and most important commitment to our patients is to keep them safe.
- The second commitment to patients is to ensure that they receive effective, reliable care, every time and reduce unwarranted variation in treatment and outcomes.
- The third commitment to patients is to listen to their feedback, work with them to redesign care and provide personalised care every time.
- The fourth and final commitment is to ensure that our quality systems and infrastructure continue to strengthen.



# The 17 identified patient-centred recommendations are:

### Recommendation One (Effective and Patient-Centred)

In collaboration with partners, further develop, promote, support and evaluate robust 24/7 pathways into mental health and dementia crisis care and support outside of the emergency department including statutory services and for low acuity outcomes voluntary services.

## Recommendation Two (Safe and Effective)

In conjunction with the Learning and Development Team improve mental health training of staff in line with Health Education England/Skills for Care guidance (Mental Health Core Skills Education and Training Frameworks). Mapping completed indicates that patient facing staff should be compliant with Two Standards and mental health practitioners and frequent caller practitioners should be compliant with Tier Three Standards.

## ► Recommendation Three (Safe and Effective)

In conjunction with the Learning and Development Team improve dementia training of staff in line with Health Education England/Skills for Care guidance (Core Skills Frameworks for Dementia). Mapping completed indicates that patient facing staff should be compliant to Tier Two Standards and mental health practitioners and frequent callers practitioners should be complaint with Tier Three Standards.

## Recommendation Four (Safe, Effective and Patient-Centred)

Commission a six month task and finish/project group to develop a Strategic Management Group or Committee which will provide strategic direction and oversight of the strategic plan and mental health and dementia work programmes across the organisation. This group will report directly into the Safety Management Group.

## Recommendation Five (Safe and Effective)

Develop a robust process for the evaluation of mental health and dementia projects operating within the trust to ensure learning is informed by vigorous scrutiny of impact and effectiveness. This should include collaboration with academic institutions to increase capacity and provide the necessary expertise to build a research portfolio and research and evaluation output relating to mental health and dementia.

## ► Recommendation Six (Safe and Effective)

Development of a trust wide programme of work to support suicide prevention that incorporates local multi-agency working in terms of suicide prevention and reflecting the guidance from national work programmes relating to prevention of suicide.

### Recommendation Seven (Patient-Centred)

Enhance opportunities to engage and involve patients living with mental health related problems and dementia in a meaningful way by building on existing feedback mechanisms for sustained improvements and ensuring that Patient and Public Panel which is being established are representative of those living with mental health and dementia.

## Recommendation Eight (Safe, Effective and Patient-Centred)

Review and agree a consistent approach in relation to the information provided to patients both over the telephone and face to face when they are experiencing a mental health crisis in terms of where they can access further help and support.

## Recommendation Nine (Safe, Effective and Patient-Centred)

Progress the development and implementation of a holistic mental health assessment framework that meets the specific needs of the pre-hospital care (PES) and that incorporates and improves the assessment and management of risk.

## Recommendation Ten (Safe, Effective and Patient-Centred)

Play an integral part in the developmental work that is emerging in relation to high intensity mental health service users in conjunction with partners in Mental Health Trusts and the Police.

This will be mainly supported through the Frequent Caller Team thus supporting robust strategies for the management and acceptance of risk for this patient group.

## ► Recommendation Eleven (Effective)

Further development, review and 'future proofing' of the mental health workforce across the trust, ensuring that leadership and effective governance structures are in place to ensure mental health staff are clinically supported and utilised effectively.

## Recommendation Twelve (Safe, Effective and Patient-Centred)

To review and learn from the mental health triage car pilots currently taking place within the Merseyside and Lancashire areas and agree a trust wide plan for the future, which is variable dependant on demand and geographical constraints.

## Recommendation Thirteen (Safe, Effective and Patient-Centred)

In line with national direction, explore alternative methods of conveying mental health patients when an ambulance is deemed inappropriate, unnecessary or counter-productive.

## Recommendation Fourteen (Safe, Effective and Patient-Centred)

Ensure that the trust continues to be involved in the mental health work stream that forms part of the national collaborative #ProjectA.

## Recommendation Fifteen (Safe, Effective and Patient-Centred)

In line with the NHS Long Term Plan begin a programme of work and negotiations with commissioners to work towards ensuring the 111 service is prepared to provide a single point of access and timely, universal mental health crisis care for everyone. Anyone experiencing mental health crisis can call NHS 111 and have 24/7 access to the mental health support they need in the community.

## ► Recommendation Sixteen (Safe, Effective and Patient-Centred)

Due to the high number of frequent callers who experience mental health problems, align the Frequent Caller Team within the mental health management and leadership structure ensuring that the service and the staff within this bespoke team have the knowledge and skills to provide effective mental health care and support.

## Recommendation Seventeen (Safe and Effective)

Supporting the Organisational Development directorate to deliver the wellbeing theme of the Workforce Strategy through expert advice to keep our staff safe through support for trust wide initiatives to tackle violence and aggression, improving resilience, reducing mental health stigma and developing support for good mental health throughout the employee lifecycle.



#### Our shared values

Our values form the foundation of and drive the whole organisation, ensuring we lead by example and create the right culture and conditions for patients to receive safe care every time.



#### **Working Together for Patients**

Patients are at the heart of everything we do. Through positive teamwork, we share our knowledge, experience and expertise, providing a well-mannered, professional service which is inclusive of all communities.



#### Commitment to Quality of Care

We strive for excellence through being committed to quality and professionalism, providing suitable, sustainable and effective care to our patients. We welcome feedback to continually enhance and develop our service.



#### **Respect and Dignity**

We show respect and dignity to every person we have contact with, demonstrated through our honesty, trust and good manners. We take personal responsibility for our behaviour, being accountable for the impact our actions and words may have on others.



#### Compassion

We safeguard our patients, caring for and protecting them and acting on any concerns. We value each other and embrace our differences through listening, being supportive, sharing information and through collaborative working, knowing our diversity makes us stronger.



#### **Everyone Counts**

Compassion, kindness and empathy are essential to the care we provide to our patients.



#### Improving Lives

We acknowledge and learn from our mistakes to provide the best care we can.

# Our Mental Health and Dementia Strategic Plan 2019 – 2022:



**Service** 

**PES 111** 

**Urgent Care** 

**Right Care Strategy domain** 

Effective

Patient-centred

#### Recommendation

In collaboration with partners, further develop, promote, support and evaluate robust 24/7 pathways into mental health and dementia crisis care and support outside of the emergency department including statutory services and for low acuity outcomes voluntary services.

#### Rationale

It is widely accepted that the emergency department is not the most appropriate place/ environment for people in mental health crisis or with dementia, yet in the majority of situations, this is the only option to access assessment and/or treatment. Patients will often refuse to attend the emergency department as they recognise from previous experience that this is not the best or most suitable option for them.

#### **Actions Required**

Development and ratification of a generic Memorandum of Understanding for Mental Health.

Scope and review for any current voluntary or third sector services that may be appropriate to work with the organisation to develop safe and effective pathways for mental health and dementia patients.

Strengthen engagement with statutory mental health partners and providers across the trust's geographical footprint and ensure that NWAS are involved in the development of new services or new pathways supporting mental health care delivery.

#### Lead(s)

Mental Health/Dementia Lead

**Urgent Care Transformation Team** 

#### **Date to Complete**

#### Service

All services across NWAS

#### **Right Care Strategy domain**

Safe

Effective

#### Recommendation

In conjunction with the Learning and Development Team improve mental health training of staff in line with Health Education England/Skills for Care guidance (Mental Health Core Skills, Education and Training Frameworks).

Mapping completed indicates that patient facing staff should be compliant to Tier Two Standards and Mental Health Practitioners and Frequent Callers Practitioners should be complaint with Tier Three Standards.

#### **Rationale**

In aspiring to be the best ambulance service in England, the staff are the trust's biggest asset and there is an acknowledgement nationally that there is a requirement to develop the mental health competency of ambulance staff and ensure that they are trained and equipped to respond effectively to people experiencing a mental health crisis.

The Mental Health Core Skills, Education and Training Framework has been commissioned by the Department of Health taking into consideration the Five Year Forward View for Mental Health and supports workforce development specifically to this and other national policy which affirms the commitment of achieving parity of esteem.

#### **Actions Required**

#### Year one

Continue to support 'The Collaboration Project' which is a one year project to develop a regional Paramedic Mental Health Curriculum that is fit for purpose for NWAS and in line with the Mental Health Core Skills, Education and Training Framework.

Identify Mental Health Leads within the Education and Training Teams within the Clinical Practice Trainer, Clinical Practice Educator and EOC Practice Educator roles. These roles will be to work in collaboration with the Mental Health and Dementia Lead in the development of training programmes.

Undertake a robust mapping/gap analysis of current/existing mental health training across the organisation against the Tier One and Tier Two of the Mental Health, Education and Core Skills Framework.

From January 2020, all new staff employed into patient facing roles within NWAS will complete mental health training that is reflective of the relevant standards of the Mental Health Core Skills, Education and Training Framework (Tier One and Tier Two).

Undertake a robust evaluation of training provided to ensure that it is improving the knowledge and practice of ambulance staff.

For the 111 service, to support mental health professional development, and in conjunction with UCLAN, we will develop a bespoke mental health training programme that is reflective of the learning outcomes within the Mental Health Core Skills, Education and Training Framework.

#### Year two and three

The NWAS Mandatory Training Programme is developed in line with the learning outcomes within the Mental Health Core Skills, Education and Competency Framework ensuring that by December 2022, all staff who provide direct support and care to people with mental health problems are compliant with Tier One and Two Standards.

Undertake a robust evaluation of training provided to ensure that it is improving the knowledge and practice of staff.

Lead(s)

**Head of Education** 

Assistant Director Workforce & Organisational Development

Consultant Paramedic in Education and Training

Mental Health and Dementia Lead

Date to Complete
December 2022



#### **Service**

All services across NWAS

#### **Right Care Strategy Domain**

Safe

Effective

#### Recommendation

In conjunction with the Learning and Development Team improve Dementia training of staff in line with Health Education England/ Skills for Care guidance (Training Standards Framework 2018)

#### **Rationale**

The Prime Minister's Challenge on Dementia 2020 highlights key aims for transforming dementia care, and as an organisation we are committed to working towards being dementia friendly.

Since 2018, there has been significant progress to ensure all staff who support people living with dementia across the organisation have undertaken 'Dementia Friends' training which has been aligned to Tier One of the Dementia Core Skills Education and Training Framework. Mapping completed indicates that patient facing staff who have regular contact with people living with dementia or those that support them should be compliant to Tier Two Standards.

#### **Actions Required**

#### Year one

Undertake a robust mapping/gap analysis of current/existing dementia training across the organisation against the Tier One and Tier Two of the Mental Health, Education and Core Skills Framework.

Develop training programmes that encompasses gaps identified in Tier One and Tier Two Standards and a trust-wide implementation plan.

Develop robust mechanisms to capture and evidence training compliance.

#### Year two and three

The NWAS Mandatory Training Programme is developed in line with the learning outcomes within the Dementia Core Skills, Education and Competency Framework ensuring that by December 2022, all staff who provide direct support and care to people with mental health problems are compliant with Tier One and Two standards.

Undertake a robust evaluation of training provided to ensure that it is improving the knowledge and practice of our staff.

#### Lead(s)

**Head of Education** 

Assistant Director Workforce & Organisational Development

Consultant Paramedic in Education and Training

Mental Health and Dementia Lead

**Date to Complete** 

Service

All services across NWAS

**Right Care Strategy Domain** 

Safe

Effective

Patient-centred

#### Recommendation

Commission a six month task and finish/project group to develop a Strategic Management Group or Committee which will provide strategic direction and oversight of the strategic plan and mental health and dementia work programmes across the organisation. This group will report directly into the Safety Management Group.

#### Rationale

The development of a Strategic Mental Health Management Group will provide robust governance for the development, delivery, monitoring and evaluation of all **NWAS Mental Health and Dementia work** programmes and play a key role in monitoring progress of the NWAS Mental Health and Dementia Strategic Plan and assurances that care is safe and effective

#### **Actions Required**

By 1st October 2019 set up an initial meeting to consider defining the membership and Terms of Reference for the task and finish/ project group which will work collaboratively to develop a Mental Health and Dementia Strategic Group.

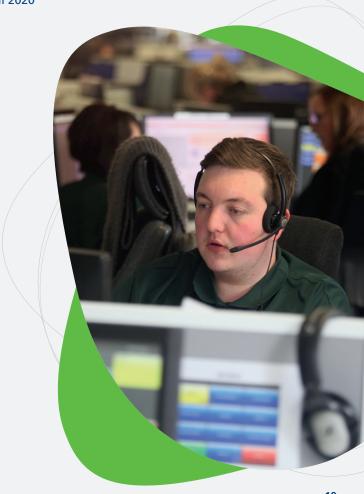
Hold agreed task and finish/project group meetings to develop the membership, purpose or terms of reference and governance and reporting mechanisms for the Strategic Management Group or Committee with the aim of this commencing in April 2020.

Lead(s)

Mental Health and Dementia Lead

**Date to Complete** 

April 2020



#### **Service**

All services across NWAS

#### **Right Care Strategy Domain**

Safe

Effective

#### Recommendation

Develop a robust process for the evaluation of mental health and dementia projects operating within the trust to ensure learning is informed by vigorous scrutiny of impact and effectiveness. This should include collaboration with academic institutions to increase capacity and provide the necessary expertise to build a research portfolio and research and evaluation output relating to mental health and dementia.

#### **Rationale**

Historically, there is evidence that supports the view that NWAS has undertaken a range of mental health and dementia developmental projects, however there has been some inconsistency in terms of the vigorous evaluation processes adopted and this has led to varied outcomes and missed opportunities for shared learning. NWAS is committed to strengthening its research portfolio, and research and evaluation output and are keen to ensure this encompasses mental health and dementia.

#### **Actions Required**

The Consultant Paramedic/Research Lead, the Research Support Manager and the Mental Health and Dementia Lead will develop a detailed programme of work with the aim of developing a robust process for the evaluation of mental health and dementia projects operating across the trust.

Mental health and dementia research will be a standing agenda item within the Mental Health and Dementia Strategic Management Group/Committee.

The group will continue to build on the existing relationships with academic institutions to increase capacity and provide the necessary expertise to build a research portfolio and research and evaluation output relating to mental health and dementia.

#### Lead(s)

Consultant Paramedic/Research Lead

Research Support Manager

Mental Health and Dementia Lead

Date to Complete
December 2022



#### **Service**

All services across NWAS

#### **Right Care Strategy Domain**

Safe

Effective

#### Recommendation

Development of a trust wide programme of work to support suicide prevention that incorporates local multi-agency working in terms of suicide prevention and reflecting the guidance from national work programmes relating to prevention of suicide.

#### **Rationale**

Suicide in the UK is a significant social issue, and in six months from 1/9/2018 to 28/2/2019; NWAS attended 102 incidents where the patient had died as a result of a suspected suicide. The impact of supporting patients who are suicidal affects all our clinical staff and one in four emergency services workers have thought about ending their lives (Mind).

#### **Actions Required**

#### Year one

A Suicide Prevention Steering Group that represents all parts of the organisation will be developed.

Terms of Reference including the governance and reporting mechanisms will be defined.

A three year programme of work that incorporates multi-agency working, use of data to inform practice, training, development and support for staff will be developed by the end of December 2019.

Implementation and evaluation of the Year one objectives within the programme of work will take place and a detailed report provided to the Executive Team by the end of December 2020.

#### Year two

Implementation and evaluation of the Year two objectives within the programme of work will take place and a detailed report will be provided to the Executive Team by December 2021.

#### Year three

Implementation and evaluation of the Year three objectives within the programme of work will take place and a detailed report will be provided to the Executive Team by December 2022.

#### Lead(s)

Mental Health and Dementia Lead

Suicide Prevention Lead(s)

**Suicide Prevention Champions** 

#### **Date to Complete**

#### Service

Patient Engagement Team
Communications Team
IMT Services

#### **Right Care Strategy Domain**

Patient-centred

#### Recommendation

Enhance opportunities to engage and involve patients living with mental health related problems and dementia in a meaningful way, building on existing feedback mechanisms for sustained improvements and ensuring that the Patient and Public Panel, which is being established, are representative of those living with mental health and dementia.

Ensure the right information is available to adults and children in mental distress on the trust website and that this is based on feedback from patients and carers and there is a mechanism in place to review and update.

#### Rationale

There is a growing recognition that because of their direct experiences of using services, service users have a unique insight into what works, which can be used to improve services.

Involvement in services can lead to enhanced quality of care, improved quality of life, improved relationships between staff and service users, and improved outcomes for service users; it can also lead to improved outcomes for providers.

#### **Actions Required**

#### Year one

Develop an accurate and up to date directory of mental health and dementia service user and carers groups across the region and establish meaningful links and communication mechanisms with identified groups.

Ensure as a minimum that there is one visit to a mental health or dementia group each quarter (4 per year) to gain feedback in relation to our services and capture patient stories.

Review membership of the current representatives on the Patient and Public Panel to ascertain if this includes people living with mental health problems or dementia. If required undertake some targeted recruitment with these groups to support inclusivity.

Working in collaboration with our patients and staff, define what information would be helpful to include on the NWAS website in terms of support and advice when they are in distress.

#### Year two

Ensure as a minimum that there are 6 visits per year to mental health or dementia groups to gain feedback in relation to our services and capture patient stories.

#### Year three

Ensure as a minimum that there are two visits to mental health or dementia groups each quarter (8 per year) to gain feedback in relation to our services and capture patient stories.

#### Lead(s)

**Head of Communications and Engagement** 

Mental Health and Dementia Lead

#### **Date to Complete**

Service

**Urgent Care** 

**Right Care Strategy Domain** 

Patient-centred

#### Recommendation

Review and agree a consistent approach in relation to the information provided to patients both over the telephone and face to face when they are experiencing mental health crisis in terms of where they can access further help and support.

#### **Rationale**

The Directory of Services is available to support staff in determining the support that is available to signpost patients to in mental health crisis. However, the resources are limited and wider support could be used.

Our staff who offer telephone support and who are call takers have limited training and support in managing calls from patients who are often distressed and have complex needs and they may need to stay on the line for a protracted period of time. It is essential that they feel confident and competent in relation to communication and providing information and support.

#### **Actions Required**

Develop a programme of training and suite of resources for staff to utilise in relation to supporting patients in acute distress due to mental ill-health.

Review, refresh and standardise Mental Health Crisis Cards across the organisation.

Develop a Mental Health communication briefing on a quarterly basis that will be available for all staff which will include sources of information that can be provided to patients.

#### Lead(s)

Mental Health and Dementia Lead

**Date to Complete** 



**Service** 

PES

**Right Care Strategy Domain** 

Safe

Effective

Person-centred

#### Recommendation

Progress the development and implementation of a holistic mental health assessment BASIC STEP framework that meets the specific needs of the pre-hospital care (PES) and that incorporates and improves the assessment and management of risk.

#### **Rationale**

Practitioners within the paramedic emergency service are not mental health practitioners, and have had limited training in terms of mental health assessment, however having a robust mental health assessment of some form can help to differentiate between mental and physical health problems, ensuring that the patient receives the right care, at the right time and at the right place. A mental health assessment can also identify risks and enable the practitioner to put a plan in place in collaboration with the patient to reduce the risks identified.

An assessment framework for staff to follow can provide prompts for staff in terms of assessing the patient and improve consistency in terms of the information collated from the patient and can support formulation and forward planning of care.

#### **Actions Required**

#### Year one

In conjunction with the Project Management Office (PMO), develop a BASIC STEP working group who will develop and oversee a detailed three year programme of work which supports the delivery of strategic change and implementation of the BASIC STEP tool throughout the organisation, beginning with pilot across the Cheshire and Merseyside locality.

Implementation and evaluation of the year one objectives within the programme of work.

#### Year two

Implementation and evaluation of the Year two objectives within the programme of work.

#### Year three

Implementation and evaluation of the Year three objectives within the programme of work.

#### Lead(s)

Mental Health and Dementia Lead

**BASIC STEP Project Lead** 

**Medical Director** 

**PMO Office** 

**Date to Complete** 

**Service** 

111

PES

**Urgent Care** 

Frequent Caller Team

**Right Care Strategy Domain** 

Safe

Effective

Patient-centred

#### Recommendation

Play an integral part in the developmental work that is emerging in relation to high intensity mental health service users in conjunction with partners in Mental Health Trusts and the Police.

This will be mainly supported through the Frequent Caller Team thus supporting robust strategies for the management and acceptance of risk for this patient group.

#### **Rationale**

The high intensity mental health programmes adopt models of care which encourage emergency services and mental health services to work together to help support service users struggling with complex, behavioural disorders and who are often frequent callers to the ambulance service.

The models used combine the best clinical care with compassionate but consistent behavioural boundary setting to reduce harm, promote healthier futures and reduce repetitive patterns of crisis from impacting 999 and other emergency care teams.

#### **Actions Required**

Ensure that NWAS and the Frequent Caller Team are engaged in all work streams that are implementing high intensity models of care.

Raise awareness of the model across the organisation and ensure the patients that are being supported by the model are easily identifiable to our staff.

Ensure that care plans developed are accessible to teams within NWAS so that the care prescribed and agreed by the multi-agency teams is adhered to.

Share any learning across the organisation and within the multi-agency groups that are implementing the high intensity models of care.

Evaluate and define outcomes specifically for NWAS as the model is implemented and embedded into practice.

#### Lead(s)

Mental Health and Dementia Lead

Manager of the Frequent Callers Team

#### **Date to Complete**



#### **Service**

All services across NWAS

**Right Care Strategy Domain Effective** 

#### Recommendation

Further development, review and 'future proofing' of the mental health workforce across the trust, ensuring that leadership and effective governance structures are in place to ensure mental health staff are clinically supported and utilised effectively.

#### **Rationale**

The ambulance service is often the first point of contact for those experiencing mental health problems or problems associated with dementia, and there is evidence to support that the number of people contacting the service is increasing and many present with complex and challenging needs.

The NHS Long Term Plan (2019) reinforces the importance of introducing mental health nurses into the ambulance service to ensure that mental health patients receive the right care, in the right place at the right time by staff that are skilled and competent in terms of the patient's care and support needs.

#### **Actions Required**

Participate in the planned national review of mental health nurses within ambulance trusts which is being undertaken by the National Mental Health Leads Group.

Work with commissioners in terms of the developing work programme generated from the NHS Long Term Plan aspirations.

Develop a 'virtual network' of all mental health staff to support improved communication and sharing of best practice.

Identify any areas where mental health staff would enhance the patient experience and work flexibly within budgets to bridge these gaps.

Ensure that all mental health practitioners are receiving a high standard of clinical supervision from an appropriate clinician a with mental health background.

Develop a training programme in relation to clinical supervision to support staff to deliver a high standard of clinical supervision.

Explore the role of new and innovative extended roles to support the care and support provided to patients with mental health problems and dementia, for example Associate Nurse and Advanced Practitioners.

#### Lead(s)

Mental Health and Dementia Lead

**Chief Nurse** 

Workforce Development Lead

**Heads of Service** 

**Date to Complete** 

**Service** 

PES

**Urgent Care** 

**Right Care Strategy Domain** 

Safe

Effective

Patient-centred

#### Recommendation

To review and learn from the mental health triage car pilots currently taking place within the Merseyside and Lancashire areas, and agree a trust wide plan for the future which is variable dependant on demand and geographical constraints.

Both pilots have been extended until June 2020.

#### Rationale

There is evidence that supports the view that mental health triage cars have improved outcomes for patients and results in improved use for resources and multi-agency working leading to financial benefit in particular for the wider NHS Service.



#### Year one

Work collaboratively with partners and commissioners in terms of potential new funding streams relating to the NHS Long Terms Plan recommendations in relation to Mental Health Triage Car developments.

In conjunction with partners and commissioners, consider undertaking a comprehensive independent review of the Psynergy Tri-Agency Mental Health Car that has been piloted across the Fylde Coast (this pilot has been extended until 2020).

In conjunction with partners and commissioners, consider undertaking a comprehensive independent review of the Liverpool Mental Health Car that has been piloted (this pilot has been extended until 2020).

Develop a multi-agency task and finish group that will develop and undertake a detailed and comprehensive peer review process of the two pilots currently being implemented within NWAS.

By the end of May 2020 prepare a report on the findings from reviews completed.

#### Year two and three

Based on the findings from the reviews in Year one, determine the next steps and further development of this model of care.

#### Lead(s)

Clinical Leads for both Pilots

Mental Health and Dementia Lead

**Date to Complete** 



Service

PES

PTS

**Right Care Strategy Domain** 

Safe

Effective

Patient-centred

#### Recommendation

In line with national direction, explore alternative methods of conveying mental health patients when an ambulance is deemed inappropriate, unnecessary or counter-productive.

#### Rationale

Our vision is to provide the right care, at the right time, in the right place; every time. For some patients with mental health problems or dementia, an ambulance may be inappropriate, unnecessary or counter-productive and transport choices should be appropriate and should use the least restrictive option possible. The NHS Long Term Plan (2019) advocates that ambulance services should consider introducing mental health transport vehicles and in response to this NHS England are developing a national specification for a mental health vehicle for ambulance services.

#### **Actions Required**

Ensure that NWAS is involved in the national work in terms of developing a national specification for a mental health conveyancing vehicle for ambulance services.

In conjunction with commissioners and as detailed within the NHS Long Term Plan, explore opportunities for alternative staffing models in terms of supporting people with mental health crisis who may or may not need hospital transport.

Lead(s)

**Head of Fleet and Logistics** 

Mental Health ad Dementia Lead

**Date to Complete** 

**Service** 

All services across NWAS

**Right Care Strategy Domain** 

Safe

**Effective** 

Patient-centred

#### Recommendation

Ensure that NWAS continue to be involved in the mental health work stream that forms part of the national collaborative #ProjectA.

#### **Rationale**

#ProjectA (for ambulance services) is a year-long (2019) programme of work to improve our ambulance services across the country using feedback, ideas and innovations directly from ambulance staff nationwide and one of the six priorities identified is 'Action on Mental Health and Emotional Distress'.

#### **Actions Required**

Ensure representation at future Accelerated Design Events in relation to the Mental Health Collaborative.

Promote the 'Good Ideas Directory' among clinical staff.

#### Lead(s)

**Head of Quality Improvement** 

**Head of Communications and Engagement** 

Mental Health and Dementia Lead

#### **Date to Complete**

April 2020



**Service** 

111

**Right Care Strategy Domain** 

Safe

Effective

Patient-centred

#### Recommendation

Begin a programme of work and negotiations with commissioners to work towards ensuring the 111 service is prepared to provide a single point of access and timely, universal mental health crisis care for everyone and that anyone experiencing mental health crisis can call NHS 111 and have 24/7 access to the mental health support they need in the community.

#### Rationale

A single point of access provides one route for patients and carers to access the appropriate service to meet their needs. Historically, accessing timely mental health care and support has been difficult for patients in mental health crisis with variations between how patients can achieve this across geographical footprints, resulting in hard to navigate systems to get the right care, in the right place and at the right time. The NHS Long Term Plan (2019) has aspired that in the next ten years anyone experiencing mental health crisis can call NHS 111 and have 24/7 access to the mental health support they need in the community.

#### **Actions Required**

The Head of Service for NHS 111 will lead on a specific work stream/programme of work to progress this recommendation which will require a collaborative approach with commissioners and partners within Integrated Care Systems or Sustainability and Transformation Partnerships across the NWAS footprint.

Lead(s)

Staff Wellbeing Lead (HR)

Mental Health and Dementia Lead

**Date to Complete** 

#### Service

Frequent Caller Team

#### **Right Care Strategy Domain**

Safe

Effective

Patient-centred

#### Recommendation

Due to the high number of frequent callers who experience mental health problems, align the frequent caller team within the mental health management and leadership structure ensuring that the service and the staff within this bespoke team have the knowledge and skills to provide effective mental health care and support.

#### **Rationale**

The majority of frequent callers have multiple and complex reasons for ringing 999 or 111. Mental ill-health, chronic illness, social isolation and poor engagement with primary and social care providers are all known reasons as to why patients call the ambulance service on a regular basis. The Frequent Caller Team estimate that 90% of their caseloads are people living with mental health related problems or dementia, yet the team do not have any specialist mental health support or experience.

#### **Actions Required**

#### Year one

Appoint a substantive Mental Health Lead for NWAS who will take over from the Chief Nurse as the Senior Manager for the Frequent Caller Team.

Review skill mix of the staff within the teams and consider the development of mental health practitioner role within the team.

#### Year two and three

Undertake a detailed training needs analysis in terms of mental health competencies of the staff and align with Tier Three of the Health Education England/Skills for Care guidance (Mental Health Core Skills Education and Training Frameworks).

Develop programme of training and implementation plan in line with training needs analysis.

#### Lead(s)

Mental Health and Dementia Lead

Frequent Caller Team Manager

#### **Date to Complete**

#### **Service**

All Staff across NWAS

#### **Right Care Strategy Domain**

Safe

Effective

#### Recommendation

Supporting the Organisational Development directorate to deliver the wellbeing theme of the Workforce Strategy through expert advice to keep our staff safe through support for trust wide initiatives to tackle violence and aggression, improving resilience, reducing mental health stigma and developing support for good mental health throughout the employee lifecycle.

#### Rationale

The Workforce Strategy 2019-2022 sets out key initiatives and programmes of work designed to deliver against the key improvement goals for each priority area. There is a specific improvement goal in relation to mental health which requires a creation of a mental health plan which is subsequently mapped against the employee lifecycle, it is imperative that the Strategic Mental Health and Dementia Plan and the Workforce Strategy are connected and inter-related.

#### **Actions Required**

#### Year one

Review mental health offering mapped against employee life cycle and develop framework for comprehensive offering and shared language/self-assessment.

#### Year two

Embed a clear wraparound offer to support mental health wellbeing of our staff

Review the provision of peer support throughout all front line service lines.

#### Year three

Evaluate the offering and maintain moving forwards.

#### Lead(s)

Head of Service 111



# Implementation and monitoring

The implementation phase of this strategy will begin on 1 January 2020 and will conclude on 31 December 2022; this will facilitate the comprehensive dissemination and awareness raising period of time from October to December 2019 and enable preparation for the implementation phase of the strategy. In addition to this, once approved, the plan will be shared with staff via formal presentations at team development meetings/events, a specific feature within the staff bulletin and via the intranet.

Both the Five Year Forward View for Mental Health and the NHS Long Term Plan have emphasised the need to redesign urgent and emergency care services for people of all ages who are experiencing mental health problems. This necessitates a fundamental shift to the way in which we currently provide our services, so engagement with staff, partners and patients is central to this process.

To support the implementation of the plan it is essential that NWAS remains an active participant in mental health multi-agency developments across our footprint through collaborative working with partners and patients.

To reflect the 17 recommendations, it is anticipated that there will be a number of specific work streams which will involve a range of services or departments both internally to the organisation and externally to NWAS. Each programme of work will have an identified lead, and detailed programmes of work which will evidence a clear purpose to the programme of work and key milestones to reach over the course of the work stream.

This plan will be reviewed and updated by the NWAS Mental Health Strategic Management Group on a quarterly basis and reported to the NWAS Safety Management Group. Reviews will take into account feedback received from partners, staff and patient groups. A quarterly progress report will be produced which will be provided to the Right Care Senior Management Team.



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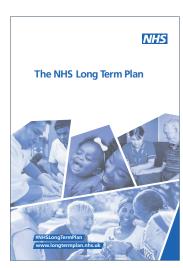
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