

Mental Health Service Provision Briefing Report

Prepared for: Adult Social Care & Health Scrutiny Committee

19 October 2020

1.0 Introduction

At the Adult Social Care and Health Scrutiny Committee on 16 October 2019, there was an agenda item regarding Mental Health Services in Blackpool, and Lancashire & South Cumbria Foundations Trust representatives, along with colleagues from Blackpool Teaching Hospital Foundation Trust, the Local Authority, and commissioners were in attendance. Following this meeting, a follow up progress report was requested to a future Committee meeting.

Progress has continued with the delivery of the Mental Health Improvement Plan, working in partnership across the Integrated Care System with health and social care colleagues and with other key stakeholders, like the voluntary sector and with patient and carers groups. In addition there has been significant progress in making improvements following the Trust's last CQC inspection. This report is provided to give the Committee further details on the improvement progress and to also provide information that has been requested, specifically the following

- The implementation of the recommendations of the external review report.
- The progress in establishing Crisis support including the crisis café and crisis house and the 24/7 crisis line.
- The issue of drugs and alcohol in the Harbour the extent of the problem and the action taken to address it.
- The number of new beds opened and how many more were to be opened.
- That the report be a joint report provided by LSCFT, Blackpool Teaching Hospital NHS Foundation Trust and any other applicable partners.

2.0 Service Provision in Blackpool

It is important to note the mental health and learning disability service provision across the Fylde Integrated Care Partnership, which includes Blackpool Teaching Hospitals as a service provider. This service provision is illustrated in Appendix 1 of this report.

2.1 Mental Health Services provided by Blackpool Teaching Hospitals NHS Trust

The following services are commissioned by Blackpool CCG for Blackpool residents only.

Supporting Minds Blackpool IAPT is a free, NHS evidence-based talking therapy service for people 16 years old and over, who have mild to moderate anxiety or depression related problems. A range of evidenced based treatment programmes are provided including one to one therapy, courses and group work for people living in the Blackpool area.

The range of talking therapies offered includes:

- Cognitive Behavioural Therapy (CBT)
- Counselling
- Guided self-help
- Eye Movement Desensitisation Therapy (EMDR)
- Stress control course
- Online CBT
- Mindfulness classes

There are two pathways into the service: a self-referral pathway and a pathway for professional health staff supporting people with long term health conditions. Following referral a telephone appointment (triage) will be offered with a Psychological Wellbeing Practitioner (PWP). The practitioner will ask for some brief information about the difficulties being experienced and discuss which treatment or therapy may be most helpful. This appointment is normally within two weeks of referral. The following table gives the service activity since April 2020.

Contact Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	YTD
							Total
Face to face attendances	285	8	6	193	276	486	1254
Telephone contacts	1643	1648	1726	1557	1171	1044	8789
Telemedicine/video							
contact	52	96	207	457	378	163	1353
Total Activity	1980	1752	1939	2207	1825	1693	10266

The following tables show performance in relation to access and recovery targets.

Improving Access to Psychological Therapies: Access and Recovery Rates (National Standard)	April 2020	May 2020	June 2020	July 2020	Aug 2020
Access Rate (Monthly target of 1.583%) 2019/20 Target (From Apr 2020): Green: > or =2.083%, Amber: 1.970%-2.082%, Red: < or = 1.969%	1.17%	1.11%	1.19%	1.54%	1.22%
Moving to Recovery Rate (Monthly target of 50%) Target: Green: > or =50%, Amber: 45%-49%, Red: < or = 44%	56.0%	50.0%	54.0%	51.0%	53.0%
Improving Access to Psychological Therapies: Treatment Access Source: Information Team - MDS Results from published HSCIC data	April 2020	May 2020	June 2020	July 2020	Aug 2020
95% accessing treatment in 18 weeks	99%	100%	100%	100%	100%
75% accessing treatment in 6 weeks	97%	86%	92%	93%	96%

Primary Intermediate Mental Health Team

The Primary Intermediate Mental Health Team (PIMHT) delivers evidence-based, integrated mental healthcare, to promote quality and outcomes. The PIMHT team is a unique mental

health team in Blackpool that aims to accommodate high referral rates, provide a preventative approach in person centred care that enables our clients to develop coping strategies and manage mental illness. The following table gives the service activity since April 2020.

Contact Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	YTD Total
Face to face attendances	556	762	688	693	415	3114
Telephone contacts	356	303	258	270	198	1385
Telemedicine/video contact	0	15	27	26	29	97
Total Activity	912	1080	973	989	642	4596

The Service consists of:

Single Point of Access Team (SPA that is the initial point of access for all complex mental health referrals for adults in the Blackpool area, receiving approximately 6,000 per year from a wide variety of sources, mainly GP's, police, substance misuse team and social care. A duty team operates Monday-Friday 9am-5pm, and is responsible for screening and telephone triaging all referrals before signposting to the most suitable service.

Urgent referrals are managed the same day with close liaison with the Lancashire & South Cumbria Foundation Trust (LSCFT), Home Treatment Team (HTT) or other secondary care mental health services. A menu of service, pathways, processes and interface with colleagues from other teams provides a guide for staff in determining the most suitable pathway of care, with risk issues being a predominant factor during the signposting process.

The PIMH team has access to a Consultant Psychiatrist 4 days per week for consultation surrounding:

- Mental health diagnosis or diagnosis review and management
- Identifying and managing symptoms to minimise risk
- Effective use of medication

The Consultant conducts interface with local Networks and has established a Multi-Disciplinary Team approach to the team and by offering easier access for GP's to discuss patient referrals. At present, a nurse led follow-up clinic enables short term review/follow up of patients, who are signposted for on-going support/discharge.

The service has 3 part-time clinical psychologists and a complex therapist who provide intervention to those clients with complex and enduring mental health needs.

The service operates within a similar framework to Supporting Minds, (IAPT) being based on Care Cluster Models. Psychology provides intervention for cluster types 5-9.

The Neighbourhood and Locality Team are based in Blackpool north and south locality areas and act as links to the Primary Care Networks.

As an outcome of Covid19, the locality teams have incorporated new ways of working to include a 4 week on-line service. The team also provides telephone support to the patients while they are working through the sessions and offers face to face treatment for those patients who require a more individual approach at home or in clinic.

The Outreach Team offers specialist services that provide intervention to complex patients and/or families. This team consists of mental health social workers who conduct Care Act Assessments (2014) and commissioning of services, autism practitioners who provide assessment, diagnosis and educational support, ADHD consultant psychiatrists who offer outpatient appointment clinics for diagnosis and treatment of patients in conjunction with a senior mental health nurse to screen and review patient referrals. The Families in Need practitioner works collaboratively with the social care team in Blackpool providing input to the most high risk families in the area.

We have recently commenced joint working arrangements with Blackpool Council on the Homeless and Domestic Violence Projects, seconding a senior mental health nurse to work in partnership with other community services and third sector providers in challenging the homeless, domestic violence and substance misuse issues in the area.

The perinatal practitioners have established strong links with colleagues at BTH and LSCFT in providing an intermediate mental health service to ladies in the perinatal period.

The Assistant Practitioner (AP) has commenced liaison with GP surgeries in Blackpool to offer patients with severe mental illness (SMI), a more flexible approach in accessing their annual physical health check. The AP is able to engage with the patient and if necessary, signpost to other services for additional care. We have 3 social inclusion support workers in the team who work across the Primary Intermediate Mental Health service to promote the social inclusion agenda, working in partnership with local people and organisations to reduce inequalities.

PIMHT practitioners link-in with other teams and services in the community to provide easier access to mental health services, working closely with other teams mainly: adult social care, secondary care mental health, children and young people's services, housing, police and substance misuse services.

Community Learning Disability Service

The Community Learning Disabilities Health Team works primarily with adults aged 18 plus who have a diagnosed learning disability (16-18 for young people in transition); which includes significant impairment in intellectual functioning combined with an impairment in social functioning which was evidenced during developmental years before adulthood. The Learning Disability team is a multi-agency team who will work with people whose needs cannot be met by mainstream health services without some short or medium term specialist support. Interventions include specialist assessment, health facilitation, behavioural interventions, desensitisation to enable access to essential health checks and treatments, in-reach hospital liaison support.

2.2 Mental Health Services provided by Lancashire & South Cumbria Foundation Trust and improvement progress

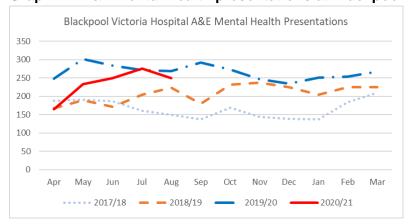
As previously described, in response to the NTW review, a robust system wide improvement plan has been developed. This plan is led and scrutinised by the ICS and focuses on immediate and long term improvements required for the acute care pathway across the system. From a governance and oversight perspective the plan was reviewed on a monthly basis by the ICS Mental Health Improvement Board, which is a collaboration between commissioners, health and social care providers and the police, being chaired by NHSE England/Improvement. As a result of Covid-19, a new governance structure has been established, with the Chief Executive from LSCFT chairing a multi-agency Cell for Mental Health and Learning Disabilities. It has been agreed that this will continue to oversee the recommendations from CNTW and the Mental Health Improvement Plan, as well as the Covid-19 response and recovery planning, and the Long Term Plan requirements for Mental Health and Learning Disability.

Significant Improvements have been achieved including:

2.2.1 Blackpool A&E Liaison

Following the national investment awarded for the development of the urgent care pathway which includes the provision of an 'A&E Village' at Blackpool Victoria Hospital, the Trust has worked with its partners at Blackpool Teaching Hospitals (BTH) to develop a clinical pathway to ensure that patients are not unnecessarily waiting within the emergency department and that the assessment environment is appropriate and suitable for those people experiencing mental health issues. The A&E Village is not due for completion until 2022, however there will be access to safe rooms within the emergency department to enable a timely response in A&E for patients requiring both Mental Health and physical health assessment. LSCFT has made a significant investment of £660k to provide a dedicated mental health unit adjacent to A&E (The ADAS building) which will be complete late January early February 2021. This will improve responsiveness to patients LSCFT are grateful for the input that has been offered from members of the Fylde Family support group with this programme of work. The Trust is also working in partnership with North West Ambulance Service and Blackpool Teaching Hospitals to support the deployment of NHS 111 First, which is a service that has the ability to sign post patients to mental health services, as well as arrange pre booked appointments at Emergency Departments, as part of NHSE/I response to addressing overcrowding in A&Es.

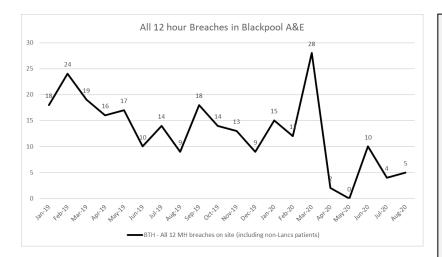
Since the £368,000 investment into the Mental Health Liaison Team, as part of the national CORE 24 programme in June 2019, there has been a marked improvement in 12 hour breaches and 136 breaches at Blackpool Victoria as shown in the following graphs



Graph 1 – A&E Mental Health presentations at Blackpool Victoria Hospital

This graph demonstrates the increased demand that has been seen regarding Mental Health presentations at Blackpool A&E Department in 2019/2020, with a Covid-related fall in April but subsequent return to high

Graph 2 – 12 hour breaches in Blackpool A&E for patients awaiting a Mental Health assessment



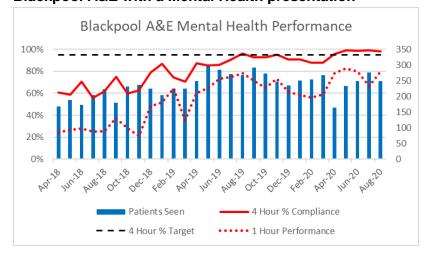
The graphs demonstrate that despite increasing demand in people attending Blackpool A&E with Mental Health presentations, the numbers of people waiting in A&E for 12 hours or more has significantly reduced. Breach causes were:

• Lack of Bed Availability - 86%

• Transport Delays: 6%

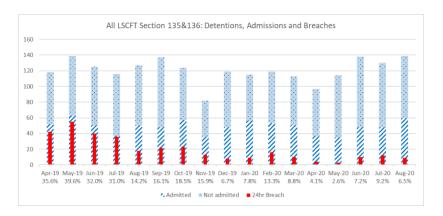
• AMHP Availability: 8%

Graph 3 - Numbers and percentage of patients seen within 4 hours when attending Blackpool A&E with a Mental Health presentation



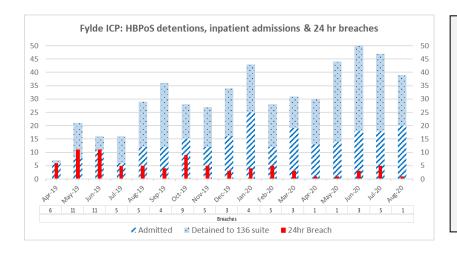
This graph demonstrates the increase in performance and sustained improvement of people being seen within 4 hours when they present to Blackpool A&E with a Mental Health presentation.

Graph 4 – Numbers of patients who have breached Section 136 legislation (Trustwide)



This graph demonstrates the significant improvement made with regard to Section 136 breaches across LSCFT. August saw the lowest percentage of s136 breaches (outside of Lockdown) since April 2019. Lack of available bed has been the predominant reason for s136 breaches.

Graph 5 –Numbers of patients who have breached Section 136 legislation (Fylde ICP)



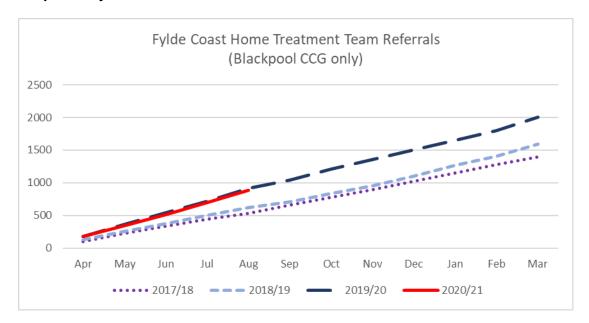
This graph demonstrates the significant improvement made with regard to Section 136 breaches.

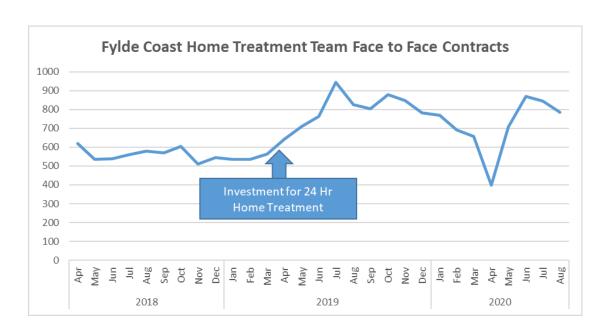
To note Fylde locality manage a higher number of Section 136 detentions than any other localities (487 Sept. 2019 – Aug.2020 compared to 287 in Central and 289 in Pennine localities).

2.2.2 Extension of Home Treatment Team Service (including Blackpool)

The Fylde Coast Home Treatment Team (HTT) has always provided 24 hour crisis support, albeit via telephone only after 9pm. However following the additional investment and recruitment into the team, face to face appointments 24/7 have been made available routinely since June 2019. The HTT is fully recruited to, with all vacancies now being filled within the team, pending references and start dates. The Home Treatment Team has experienced a sustained increase in demand over the last 12 months. The increase in demand is demonstrated in the graph below.

Graph 6 - Fylde Coast HTT referrals





2.2.3 Additional Crisis House Development in Blackpool

The Trust has established a new Crisis House in Blackpool, in partnership with Richmond Fellowship. The Crisis House was originally due to open August 2020, but due to unforeseen delays with COVID, it will now be due to open in November 2020. Richmond Fellowship will invest over £450k in capital investment to secure this property.

The crisis house model is in place in other localities within the Trust's footprint and provides short-term (up to seven days) intensive 24 hour, specialist mental health support to people who are assessed by the local Crisis Intervention and Home Treatment Teams as needing additional support to avoid admission to hospital.

The service will be delivered by Richmond Fellowship in a centrally located residential property, staffed by a team of mental health support workers and a service manager. The service will offer a holistic support package that considers the individual's housing, employment, educational, physical, social and emotional needs, supported by appropriate medical intervention from the Crisis Team.

Work has been undertaken locally to ensure the new crisis house adds value to the area and a local pathway to understand how the crisis café can complement the support already provided by the Phoenix Centre has been developed.

The Trust has also worked with Richmond Fellowship and wider partners to open a Crisis Café in Blackpool. Please see section 4.2.2 for more details.

2.2.4 Community Mental Health Teams (CMHTs)

In order to provide the adequate care to service users within our community teams, the CMHT workforce has been enhanced to ensure each mental health practitioner has the capacity to support service users aligned to their case load. The Fylde Coast has seen an increase of 8 qualified practitioners across its CMHTs, in addition to this there is also investment for psychology provision and pharmacy provision. Nursing recruitment continues to be a challenge nationally, however the team continue to proactively recruit into the vacant posts and will continue with a rolling recruitment to fill all Nursing posts. The workforce model has also been enhanced with the provision of peer recovery support workers through a pilot project with Calico. This has enabled the team to provide the care co-ordination to people to prevent relapse, support recovery and develop strategies to enable people to live in their own home. The Calico pilot has proven successful in offering enhanced CMHT services, such as group therapy and 1:1 support for our service users and carers.

2.2.5 Frequent Attender Team

This is a new team established. The team provides outreach work, visiting service users in their homes and using a holistic approach to aid engagement with services to meet individual needs, and to prevent 'inappropriate' attendance to A&E or detainment under section 136. Recruitment to the Blackpool and Fylde Coast Frequent Attender Team continues. In the interim, the locality Multi-Agency Group provides a monthly review of the individuals who attend A&E most frequently within the locality. This group looks at what can be offered collectively and without the need for constant re-referral into services. Individual care plans are then developed with the service user which are shared across the agencies to ensure a consistent and safe approach to the management of these individuals. The team also work closely with all partners within Blackpool and the Fylde Coast to ensure the crisis plans are agreed in collaboration with other professionals to ensure a consistent and comprehensive response when a service user presents in crisis.

2.2.6 Psynergy Street Triage

The Psynergy street triage project has been in place in Blackpool since December 2018, with agreement to continue for a further year. The aim of this team comprising Police, NWAS and Mental Health Practitioners from the Trust, is to respond to people in the community who are in mental health crisis, and who may have previously been automatically brought through to A&E or placed on a section 136 of the Mental Health Act.

This team offers an immediate response and is able to assess individuals to explore alternative ways to support the person through the crisis rather than default to A&E or Section 136 detainment. The team has access to a broad range of information, both clinical and non-clinical, to enable them to make an appropriate decision that best supports individuals, with the principle of diversion to alternative provision being the key outcome.

The current Psynergy service operates between 4pm-midnight, 7 days per week. As part of support for winter pressures, the A&E Delivery Board has agreed to enhance the service provision to a twelve hour service; 2 p.m. until 2 a.m. seven days a week. December 2018 and July 2020 the Psynergy team responded to 2,677 incidents, 1,237 required advice only and 519 were resolved through a telephone contact. An external evaluation has been commissioned and will be complete end Quarter 3 and shared by the University of Central Lancashire (UCLan) for the pilot of Psynergy to date. The outcome of this review will be used to develop further models and a Street Triage working group has been convened with the Police to develop this service across the Trust.

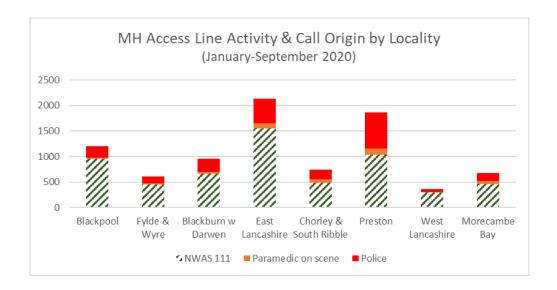
2.2.7 Mental Health Access Line

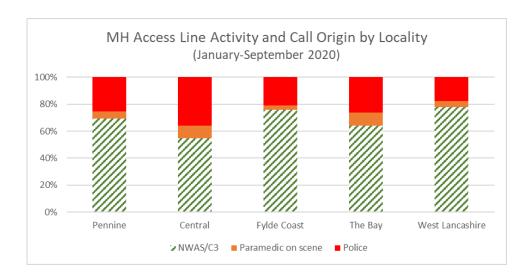
Further investment into the Mental Health Access Line (MHAL) has enabled it to provide a more timely and responsive service to both NWAS and the Police. An enhanced service has been provided from September 2019, enabling NWAS and the Police to speak to a qualified mental health practitioner. This allows them to ascertain if there is a care plan for the patient to inform decision making and avoid a 136 detention or transfer to an A&E department. The increase in capacity of this service has enabled the Police to be able to directly access the team without the need to go through Ambulance Control as they did prior to September 2019 and as such, there has been an increase in the calls coming through to the service.

The graph below demonstrates that for January to September 2020:

- Calls from Fylde accounted for 21.2% of all calls to MHAL
- Calls from Fylde accounted for 24.4% of NWAS advice calls
- Fylde accounted for only 16.2% of police advice calls—the lower percentage of calls from the police suggests the positive impact that improved working relationships with the police and the Psynergy team is having.

Graph 7 - Mental Health Access Line activity broken down by Localities





Police calls to the Mental Health Access Line from Blackpool are lower than expected when compared to Preston which has a similar level of demand via the NWAS 111 service. 18% of Blackpool calls to the Mental Health Access Line from Blackpool are from the police, the second lowest proportion after West Lancashire. It is likely that the Synergy Car and its joint working between the police and LSCFT is key factor in this lower level of advice seeking by Blackpool police officers via the Mental Health Access Line.

2.2.8 Mental Health Crisis Line

In response to COVID-19, NHS England and NHS Improvement requested all Mental Health Trusts across the country, to immediately establish a single telephone number 24/7 urgent NHS mental health telephone for all age support, advice and triage.

LSCFT currently provide 24/7 access to MH services through a number of different routes and access points. In response to the request, LSCFT have established the Mental Health Crisis Line, a single number that is available to the public and published on the LSCFT Website. The service is a 24/7 open access telephone line for urgent NHS mental health support, advice and triage, through which people of all ages can access the NHS urgent mental health pathway or further support if needed. Calls are 'warm' transferred through to our Mental Health services as required following triage, such as Home Treatment Teams, Community Mental Health Teams, IAPT and START teams. Put in re average response times

The crisis line is now closely linked with the NHS 111 First Service rollout across Lancashire and South Cumbria (see 2.2.11).

2.2.9 Development of Mental Health Rehabilitation Beds

The Trust's acute bed provision has historically had a large cohort of patients with longer term rehabilitation needs, resulting in extended lengths of stay. This has led to capacity issues on the acute wards which in turn has impacted on the acute care pathways and the availability of timely inpatient care.

Over the past 6 months there has been further investment and engagement with independent sector organisations to provide inpatient rehabilitation care for LSCFT service users. LSCFT are now commissioning 94 beds in the private sector and over the next year plans are in place

to increase capacity to 99 independent sector rehabilitation beds and 28 LSCFT rehabilitation beds.

The rehabilitation pathway will be underpinned by a community recovery and rehabilitation team to support flow and provide interventions to meet people's needs in their own home. A business case is being developed to address this.

The Trust has developed a 'Moving On' 11 bed rehabilitation unit, called the Skylark centre. This unit opened in August 2020 and is based in the Avondale unit in Preston.

A capital business case has also been submitted to NHSI to develop a 28 bed 'Moving On' facility in Wesham on the Fylde Coast. Subject to formal approval from NHS Improvement, this proposal also incorporates service improvements for the Fylde Coast to improve mental health care across the urgent care pathway, discharge pathway and preventative interventions.

Niche Consulting was commissioned by LSCFT to review bed modelling assumptions that have previously been made. Niche's analysis was based on longitudinal data to assess the stability of demand and the bed capacity required (including rehabilitation beds) to ensure admission to a local bed within the Trust's inpatient services. The report confirmed that:

- The number of acute mental health beds for adults of working age within the Trust will be sufficient for demand for these beds, but only when other specialist bed capacity is available
- Specifically, additional capacity is required in:
 - o Rehabilitation beds (High Dependency, Long-term Complex Care, Moving On)
 - Older Adult Beds
 - Psychiatric Intensive Care Unit beds
 - Specialist Learning Disability beds

The Niche review concurs with the Trust and ICS strategy of developing a mixed model of rehabilitation bed capacity, developing the Wesham Unit within the Trust and a range of specialist independent sector rehabilitation beds within Lancashire and South Cumbria. The planned total rehabilitation bed stock of 127 would meet current demand, though is below the national average for a population of Lancashire and South Cumbria's size, and will be subject to ongoing monitoring.

There are currently no specialist Learning Disability Beds within LSCFT, resulting in specialist placements being sourced outside of Lancashire & South Cumbria. The Niche review of Learning Disability bed requirements identified:

- Demand of around 40 admissions at any time for people with a Learning Disability and / or an Autistic Spectrum Condition
- Some of these admissions would be for primarily mental health needs within mainstream mental health provision
- There is a need for 26 specialist Learning Disability / Autistic Spectrum Condition beds within the Trust

The Trust had made the decision that one of the outputs from the bed modelling work was to eradicate dormitory style inpatient accommodation throughout the Trust's inpatient units. In light of covid and the need to enact strict social distancing measures, the Trust took the action to close all dormitories within the inpatient units, a measure which was supported by the national lead for mental health. Whilst this places additional pressure on current under bedded inpatient capacity resulting in additional out of area placements, the long term position of

having all single occupancy rooms within inpatient units is the agreed future position. The Trust has worked up plans to commence capital works to increase the single occupancy room provision within the estate and is currently waiting on funding to be agreed and released from the Treasury.

2.2.10 Memory Assessment Service Accreditation

In July 2020 the accreditation for the Memory Assessment Service on the Fylde Coast as well as in Lancaster and Morecambe was approved by the Royal College of Psychiatry. The teams committed to showcasing the gold standard service and evidence required to gain this accreditation which will be in place now for the next 3 years when it will be reviewed.

2.2.11. NHS 111 First Service

The long term plan is committed to ensuring that NHS 111 will be the single, universal point of access for people experiencing mental health crisis by 2024. Blackpool commenced 111 First in September 2020 and although the current focus is on the physical health of patients and to support patients away from A&E they are linking with secondary mental health services to work alongside the Mental Health Crisis Line and Home Treatment Team to evolve this service with mental health services going forward.

3.0 CQC Update

3.1 Overall Progress Update

The CQC action plan (which also incorporates actions arising from the inspection of South Cumbria services prior to transferring over to LSCFT) is monitored and reviewed within the monthly CQC Steering Group and reported to the Board of Directors. The action plan has been shared with regulators, commissioners and ICS colleagues.

There are 211 actions within the CQC action plan as at 30 September 2020. There are no overdue actions and the action plan is on track to be finalised and implemented by end October 2020.

To provide independent assurance of the organisation's response to the enforcement requirements, the Trust's internal auditors have also completed a review of completed actions. This review has independently assessed and verified on a sample basis 'completed' actions from the enforcement requirement plan to determine whether significant improvements have been evidenced. All completed actions reviewed have been validated as being completed.

3.2 Enforcement Notices

At the last meeting the committee were notified that the CQC had issued the Trust with two warning notices under Section 29A of the Health and Social Care Act 2008 in July 2019. These related to Crisis Services & Health Based Places of Safety and Acute Wards and Psychiatric Intensive Care Units (PICUs). The report also included details of the immediate actions that had been taken by the Trust in response to the warning notices issued and in response to the feedback from CQC.

The Trust formally responded to the CQC by the 30 December 2019 deadline and provided evidence of the progress made against the areas outlined in the notices. The CQC wanted to see a significant improvement in people waiting in place of safety over 24 hours and the Trust has been able to provide assurance that this has been achieved. From October to December

2019, 17.8% breaches were recorded compared to 70% in April 2019. This is indicative of the improvements that have been put in place including: improved partnership working with police, increased utilisation of the mental health access line, the extended operation of crisis and home treatment teams and establishment of the frequent attender service, all of which have been referenced previously within this report. The main reason for long waits now are people needing an inpatient bed.

A significant improvement in training was required within adult inpatient units and psychiatric intensive care units (PICUs) and the Trust can now evidence that all inpatient units and PICUs are compliant with essential training and levels of supervision. In addition to this, specialist training to support patients with learning disabilities and autism has been rolled out, which was not previously in place.

Smoking was another issue that the Trust was required to address. In response there has been a review of the policy with an associated action plan put in place to achieve becoming smoke free. Additional support has been put in place to support staff to implement the refreshed policy and educational events have also been organised for staff. Smoke free champions have been identified on wards and significant progress has been made with the smoke free action plan.

Further assurance has been provided to the CQC with regards to safe staffing, acknowledging the challenges faced and the actions that have been taken to improve reporting and scrutiny around safer staffing. Evidence and assurance was also provided with regards to the actions that the CQC wanted the Trust to take with regards to its environment. All actions have been progressed and risk assessments undertaken across all areas. Further to this submission of evidence to the CQC, a re-inspection occurred and all warning notices were lifted.

4.0 Recommendations from Previous Overview & Scrutiny Committee

4.1 Impact of Drugs & Alcohol at The Harbour

It is widely recognised that mental illness and illicit substance misuse can often go hand in hand. Whilst the reasons behind this are numerous and complex, the effects on the individual are clear. In 2018 it was reported that rates of suicide and admissions to hospital for drug abuse in Blackpool were significantly higher than the national average. An investigation highlighted that hospital admissions of drug-takers were eight times higher in Blackpool than London.

Since the opening of The Harbour in 2015, there has been sporadic incidents in relation to illicit substances being available/consumed on the wards.

In 2019, nine incidents were recorded relating to concerns about the use of illicit substances amongst patients. Whilst this is an improved positon from 2018 when 38 incidents were reported, equating to a reduction of 76%, the Trust recognises that there is still work to do to continue to support and safeguard patients.

Review of incidents show that in the majority of cases, patients are consuming illicit substances during leave from the ward. The inpatient team at The Harbour have introduced a number of approaches and strategies in place to safely manage the issue of illicit substances being consumed, shared or being present on the ward. These include:

- Working closely with the police
- Multi-disciplinary approach to managing patients who use illicit substances

- Regular room and ward searches
- Locker facilities introduced for visitors belongings
- Review of local security procedures with staff.

The Service Manager of The Harbour prior to the COVID pandemic started to link with some of our carers and family members of The Harbour patients who have shown an interest in supporting reduction of patients taking illicit substances and can support how we work on this issue together.

4.2 Management of Aggression and Challenging Behaviour at The Harbour

The Trust is committed to providing a safe environment for its staff and service users. It is acknowledged that concerns have previously been raised about incidents of violence and aggression at The Harbour.

The following actions have been taken in response to this:

- Development of new training for staff (Positive and Safe) which is being rolled out across the Trust;
- Improving liaison with the police;
- Reviewing the environment and clinical practices and taking action to ensure these are not triggers for violence;
- Implementation of new clinical practices, such as zonal observations for older adult wards, to reduce triggers for violence;
- Reducing Restrictive Practice specialist nurses have been put in place to support wards to manage violence.

The CQC acknowledged that these measures were in place during their last inspection stating:

"The wards had a good track record on safety. The service managed patient safety incidents well. Staff recognised incidents and reported them appropriately and when things went wrong, staff apologised and gave patients positive information and suitable support.

"Staff assessed and managed risks to patients and themselves well and followed best practice in anticipating, de-escalating, and managing challenging behaviour. Staff use restraint and seclusion only after attempts at de-escalation had failed."

Furthermore six wards at the Harbour have commenced a Quality Improvement collaborative on Reducing Restrictive Practice, supported by AQUA and are making significant progress on reducing incidents of aggression.

4.3 Partnership Working with Voluntary & Community Mental Health Support Groups

The Director of Nursing and Quality and the Chair of the Trust Board held Open Space events in November 2019 and March 2020 with service users and carers. The purpose of the event was to agree the service user and carer strategic plan and establish the basis for meaningful co-production and also to agree the Trust Quality Priorities. To further enhance this agenda, the Trust has employed an Associate Director of Patient Experience, who commenced in role April 2020. The Trust has also held constructive discussions with Peter Armer, to see how we can further develop joint partnerships between the voluntary sector and the Trust.

There are numerous quality improvement initiatives being undertaken across the Fylde Coast that have co-production as a core principle. Examples include:

4.3.1 'Young Onset, Young Outlook' - Living Well With Young Onset Dementia

The Fylde Coast Memory Assessment Service alongside a number of younger people with dementia and community groups are working together to co-design their improvement ideas with a local focus. This work is aligned with the national Always Event programme supported by NHS England.

A launch event took place on 2 October 2019, led by the co-design group and involving community groups, GPs, clinicians and other public sector partners. The improvement group have shared their experience journeys along with their ideas for making improvements and co-producing solutions.

4.3.2 Rethink

Work has been undertaken between the Trust, the Rethink group and Blackpool Council, to co-design a Crisis Café for the Fylde Coast.

The Light Lounge opened in January and is located at Blackpool Centre for Independent Living on Whitegate Drive, Blackpool. The Trust is working with Richmond Fellowship to provide the service initially planned from 4pm until midnight, seven days a week, with the Home Treatment Team also providing input.

The café will provide a safe environment for people requiring emotional and psychological support that may or may not be attributed to a mental health need. The 'soft launch' of the service in took place in January 2020 and following some challenges with the covid pandemic is now able to offer opening hours of 10am – 10pm with drop-in opportunities from 4pm-10pm the operating hours will continue to be reviewed to inform future development and expansion of its operating hours.

In addition Rethink are developing carer stories, to build into a library of learning being established within the Trust.

4.3.3 Peer Support Workers

The Calico Group were commissioned to provide 18 Peer Support Workers within Community Mental Health Teams (CMHTs) across the Fylde Coast and 5 Recovery Liaison Workers (RLW) within the Blackpool Mental Health Liaison Team. Peer Support Workers and Recovery Liaison Workers are members of staff with lived experience of mental health, substance misuse or other social or psychological issues. The intention of the role is to utilise these experiences as a basis for encouraging recovery-orientated behaviour change. The inclusion of peer support workers into community teams is a key recommendation within the Long Term Plan.

The Peer Support Workers specifically support individuals referred to Blackpool, Fylde, and Wyre CMHTs. The intention is to improve engagement, overcome barriers to recovery, and offer hope through their own lived experience. The key difference between Peer Support Workers and the traditional Support Worker role within CMHTs is that of having lived experience, with an emphasis on client-facing tasks and service-user engagement. The Peer Support Workers provide support to people to achieve their recovery goals.

Recovery Liaison Workers are embedded within the Blackpool Mental Health Liaison Team and are tasked with completing a one-hour 'meet and greet' function, primarily within Accident & Emergency but occasionally on other wards within the hospital. The intention is to ensure patients understand the process they will follow, whilst responding to their immediate needs and concerns.

Since the last report to this committee, engagement has been undertaken with the following groups across the Fylde Coast in relation to the Peer Support Model:

- Fylde Family Support Group
- Mental Health Partnership
- Drug and Alcohol Forum

Feedback from people using the services and staff has been positive overall with examples being: "My worker has given me hope, understanding and patience helping me be a better person."

"Care coordinators are able to focus on the support for people needing their skills and expertise with the Peer Support Workers able to focus on their recovery goals supporting people with their wider needs having positive impacts overall on people's mental health."

4.3.4 Collaborating with the Third Sector

Services provided by the Trust across the Fylde Coast are delivered with a range of partners including the voluntary sector:

- Healthwatch Blackpool
- Healthwatch Lancashire
- MIND
- Blackpool Carers
- NCOMPASS Northwest
- Empowerment Charity
- AGE UK Lancashire
- Lancashire Carers
- Clover Leaf

4.3.5 Blackpool & Fylde Recovery College September 2019 – Present

A pilot of Lancashire Recovery College commenced in September 2019 and is now in its second term of delivery.

A monthly Advisory Group has been set up which welcomes all to co-develop a community focused model, drawing on knowledge from service users/ carers, professionals, community members and partners. The Advisory Group has attracted many partners from across Blackpool and is evolving and developing.

Volunteering

We currently have three volunteer applications in process. Contact with local voluntary organisations has been made and opportunities will be widely advertised for recruitment.

Recovery College Course summary (Blackpool and Fylde)

The Recovery College is in further development, with increased numbers of courses and an on line offer. In the next 12 months, a Wellbeing Academy will be developed. The following gives an update on some of the significant work being undertaken:

- Change Talks is being rolled out across the Trust footprint, including Blackpool, which is work with young people and families regarding mental health and wellbeing awareness;
- The Recovery 'Harri' Bus has been operating in Blackpool town Centre, in partnership with Blackpool Teaching Hospital;
- Working with partners such as Blackpool FC to host men's Mental Health events and awareness raising;
- 6 different partners worked with (Live in the moment CIC, Lancashire Adult Learning, Myplace, Blackpool Adult Learning Service, Go get you, Greenclose) as well as "in house" co-produced courses.

Examples of course feedback are as follows.

'Very friendly, put people at ease, quality simple presentation of what the course is. Wonderful ability to allow people to be honest and open up'.

'Very caring, good listening skills, inclusive, happy atmosphere, loved it'.

A map of partnership working aligned to the Recovery College is outlined below.

Partnership	Current
Richmond Fellowship	Ongoing partnership working with crisis support and links with recovery college.
Blackpool Adult Learning	Provision of health, wellbeing and social learning opportunities. Recent addition of Tenancy Training is better attended.
Blackpool Carers	Awareness of Recovery Learning offers for Carers. Distribution of prospectus.
	Participated in Mental Health Family Hour re young carers and support with young carer mental health education.
Frontline Network	Network, raising awareness amongst frontline staff and people at risk of homelessness.
	Funding for shadowing & training.
BRIC	Awareness, chatty bus, inclusion and volunteering opportunities. Distribution of prospectus on board chatty bus.
Live in the Moment CIC	Provision of Assertiveness, Creative Recovery and Laughter Yoga.
Blackpool Transport	LSCFT on Advisory Group. Help with transport to opportunities. Community projects and wider networks.
Blackpool Adult Health & Social Care Academy	Partnership (hosted explore event for us) to signpost learners to each other's service.
Peer Support Workers (Calico)	Sub-contracted LSCFT Peer Support Workers involved in Advisory Group. Offered space to meet clients, signpost to opportunities and host groups/ learning opportunities.
Survivor's Circle	Peer Developed Group supporting people with lived experience of childhood sexual abuse/ exploitation. Held bi-weekly at Claremont Park CC.

Partnership	Current			
DWP – Job Centre	Awareness of Recovery College offer and circulation of			
	prospectus.			
Empowerment Blackpool	Network, signposting and co-production all being explored.			
Go Get You	Provision of Ko-Do physical health and mindfulness sessions.			
Horizon	Signposting individuals who have completed DEEP to further			
	volunteering and learning opportunities.			
Revolution	Sit on Advisory Group			
Entwined minds	Listen to service users on how to improve services in Tier 4			
	CAMHS – which was fed back into Children and Young People			
	network and into Healthy Lancashire ICS.			

5.0 Key Partner Updates

5.1 Partnership working with Police

A strong working relationship has been developed with the police resulting in an increase in collaborative working. The police have submitted the following statement in response to the request from the committee to provide a report that demonstrates collaborative working:

Regarding drug issues at The Harbour, the team have been working closely with LSCFT colleagues with regards to searching the grounds and on some occasions have used the drugs dogs to walk round the hospital. With regards to the number of reported drug related incidents, there has been a dramatic decline in the number of incidents which is positive and demonstrates the positive and strong working relationships we have. The police have an active presence at The Harbour and are working closely with patients and staff to offer a supportive community approach. The HTT are also attending the police morning risk and threat meeting to support with appropriate care and support for those with potential mental health issues and also those on a 136.

The Crisis Café work arose following meetings we were having with Arif Rajpura to discuss supporting people in crisis through the Psynergy team. One of the difficulties we have is that there are limited options available to the residents of the Fylde Coast other than the HTT & A&E. The Café will be welcomed from a police perspective as we will be able to signpost people into this and it is an alternative option to a 136 detention or A&E visit. We are working with LSCFT & Council colleagues to develop a standard operating procedure. This will be a huge positive for us as a service but importantly it will provide a quality service to our vulnerable community.

The Mental Health Access Line has been far more accessible since the capacity within the team has increased. Police staff have reported that they have found it more accessible and in turn, more supportive when dealing with someone in crisis.

Great partnership working is leading to some much needed resources for the Fylde Coast Community.

DSI Damian Kitchen & Inspector Pete Hannon

Additionally the Trust have recently developed a Clinical Police Liaison Lead role and are working with the Police to recruit a Mental Health Police Officer. Both roles will work with each other to further enhance partnership working.

5.2 Partnership working Public Health and social care

Continued collaborative working between public health colleagues from Blackpool Council and wider partners with the input of service users, carers and family members has resulted in the delivery of numerous developments described within this update.

Following the initiation of the successful Psynergy street triage pilot it was agreed that partnership working was having a positive impact and that open dialogue should be maintained. This has led to the progression of other joint initiatives including the development of the crisis café and the crisis house for the area.

Dr Arif Rajpura, Director of Public Health

5.3 Partnership working Blackpool Teaching Hospital NHS Foundation Trust

Blackpool Teaching Hospitals and Lancashire & South Cumbria NHS Foundation Trust have witnessed a much improved partnership working relationship ensuring we put patients are the centre of all we do. Since the establishment of the new leadership teams at both Trusts we have observed improvements across a number of key indicators and with common shared values. We commit to continue to work together to ensure continuous improvement in services for all patients.

Peter Murphy, Director of Nursing, AHP & Quality

It should be recognised how extensive the collaborative working has been over the last 12 months at all levels, e.g. service delivery, planning and strategic. There have been many constructively challenging meetings and discussions working through how we can improve the patient pathway and experience. It has been extremely positive to see all partners working together to deliver the many initiatives psynergy, crisis café, home treatment teams, escalation response. We recognise that further work is still required and will continue to do this through the well developed relationships, clinical governance and improvement meetings.

Berenice Groves, Director of Operations

5.4 Partnership working Fylde Coast CCGs

The CCGs are pleased to see the improvements made specifically in relation to patient experience and system working.

In recognition of the high numbers of people with mental health needs presenting in crisis across the Fylde Coast, increases into Crisis and Home treatment, A&E Liaison along with continued investment in Psynergy and the recent development of the Crisis Café had been

prioritised for investment in 2019/20. It is reassuring to see the impact of this within the report. While the challenges in relation to recruitment on the Fylde Coast are noted, it is also positive to see the commitment to overcoming these challenges. The CCGs will continue to work closely with LSCFT and wider partners to continue to improve the crisis pathway as well as looking to develop a more robust community offer, for people living with mental health needs on the Fylde Coast, in line with the Long Term Plan requirements.

David Bonson, Chief Operating Officer, Blackpool CCG and Fylde and Wyre CCG

Lesley Tiffen, Senior Commissioning Manager, NHS Fylde and Wyre CCG

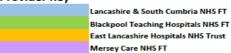
6.0 Summary

The Committee is asked to note the updates provided in this report. Whilst significant progress has been made since the last meeting, all agencies are committed to progressing further improvements. It is evident from the report that partnership working has greatly improved across health, social care, the police, voluntary sector and working with service users and carers. We will continue to work in partnership to ensure that the quality of care for patients requiring mental health service in Blackpool and all across the footprint of the Trust is of the highest standard.

Appendix 1

24/7 Services: Mental Health and Learning Disability

Provider Key





Abbreviations:

ALIS: Access & Liaison Integration Service (South Cumbria) CAIS: Crisis Assessment and Intervention Service (South Cumbria)

CAMHS: Child & Adolescent Mental Health Service

CASHER: Child & Adolescent Support & Help Enhanced Response Team CMHT: Community Mental Health Team (A-Adult & OA-Older Adult)

CPS: Child Psychology Service

HTT: Home Treatment Team MHLT: Mental Health Liaison Team

MHUAC: Mental Health Urgent Assessment Centre

RITT: Rapid Intervention Treatment Team

SPoA: Single Point of Access

START: Specialist Triage, Assessment & Referral Team

		FYLDE ICP		CENTRAL LANCS ICP		EAST LANCS ICP		THE BAY ICP		WEST LANCS MCP		
		FYLDE & WYRE	BLACKPOOL	CHORLEY & SOUTH RIBBLE	GREATER PRESTON	BLACKBURN WITH DARWEN	EAST LANCASHIRE	MORECAMBE BAY & LANCASTER	SOUTH CUMBRIA	WEST LANCS		
		Mental Health Crisis Line / The Weilbeing, Mental Health Helpline & Texting Service 24/7										
	Response Crish 24/7	MH Urgent Assessment Centre 24/7 (New service)		MH Urgent Assessment Centre 24/7 (New service)		MH Urgent Assessment Centre 24/7 (New service)		MH Urgent Assessment Centre 24/7 (New service)	MH Urgent Assessment Centre 24/7 (New service)	MH Urgent Assessment Centre (Preston) 24/7 (New service)		
ADULT		Mental Health Liabon Team Home Treatment Team 24/7 Extended working arrangements	Mental Health Lielson Team Home Treatment Team 24/7 Extended working arrangements	Home Treatment Team 24/7 Extended working arrangements	Mental Health Lisbon Team Home Treatment Team 24/7 Extended working arrangements	Mental Health Listson Team Home Treatment Team 24/7 Extended working arrangements	Merital Health Lisison Team Home Treatment Team 24/7 Extended working arrangements and Fellowship) 24/7	Mental Health Lisison Team Home Treatment Team 24/7 Extended working arrangements	ALIS (encompassing MHLT, HTT & Crisis Team) 24/7 Extended working arrangements	Home Treatment Team 24/7 Extended working arrangements Mental Health Lisison Team		
		CMHT 9am-6pm/ 7days	CMHT 9am-6pm/ 7days	Crisis House (Richmond Fellowship) 24/7 CMHT 9am-6pm/ 7days CMHT 9am-6pm/ 7days		Crisis House (Richmo CMHT 9em-6pm/ 7days	ond Fellowship) 24/7 CMHT 9am-6pm/ 7days	CMHT 9am-6pm/ 7days	CMHT (South Lakes & Barrow)	Mental Health Liaison Team CMHT 9am-6pm/ 7 days		
		Extended working arrangements	Extended working arrangements		Extended working arrangements	Extended working arrangements	Extended working arrangements	Extended working arrangements	9am-7pm /7 days Extended working arrangements	Extended working arrangements		
		START: Mon-Fri 9am-5pm	SPoA Mon-Fri 9am-Spm	START: Mon-Fri 9em-5pm	START: Mon-Fri 9am-5pm	START: Mon-Fri 9am-5pm	START: Mon-Fri 9em-Spm	START: Mon-Fri 9am-5pm	ALIS/HTT: Out of Hours	START: Mon-Fri 9am-5pm		
-			Mental Health Crisis Line / The Wellbeing, Mental Health Holpline & Texting Service 24/7									
ADULT	Response Crisis 24/7	HTT: Ou		HTT: Out of Hours		RITT Team: 8am-8pm/7 days HTT: Out of Hours Extended working arrangements	RITT Team: 8am-8pm/7 days HTT: Out of Hours Extended working arrangements	RITT Team: 8am-8pm/7 days HTT: Out of Hours Extended working arrangements	ALIS/HTT: Out of Hours	RITT Team: 8am-8pm/7 days HTT: Out of Hours Extended working arrangements		
OLDER	Routine	OA CMHT 9am-5pm/7 days Extended working arrangements	OA CMHT 9am-5pm/7 days Extended working arrangements SPoA Mon-Frt 9am-5pm			OA CMHT 9am-5pm/7 days Extended working arrangements	OA CMHT 9am-Spm/7 days Extended working arrangements	OA CMHT 9am-5pm/7 days Extended working arrangements	Memory In Later Life service 9am-Spm 7/days	OA CMHT 9am-5pm/7 days Extended working arrangements		
	Crisis response 24/7 (Using Mental Health Crisis Line / The Wellbeing, Mental Health Helpline & Texting Service 24/7											
CAMHS	OOH care pathway with access to safe beds if required)	CASHER (Child & Ado	am; Friday Spm - Monday 9am viescent Support & Help esponse Team)	Adult MHL / HTT: 10pm-8em 7/days	Adult MHL / HTT: 10pm-8em 7/deys	Adult MHL / HTT: 10pm-8em 7/deys	Adult MHL / HTT: 10pm-8em 7/days	Adult MHL / HTT: 10pm-8em 7/days	ALIS/ HTT: 6pm-9am 7/days	Adult MHL / HTT: 10pm-8am 7/days		
CA	Routine	Fylde & Wyre CAMHS Tearn /OPS Mon-Fri 9am-Spm	Blackpool CAMHS Team Mon-Fri 9am-Spm Extended working arrangements	Chorley & South Ribble CAMRS Team 8em-10pm /7 days Extended working arrangements	Preston CAMHS Team 8am-10pm / 7 days Extended working arrangements		dolescent Service (ELCAS) 7 days week urs cover*	Morecambe & Lancaster CAMHS Team Sam-10pm /7 days Extended working arrangements	Crish Assessment and Intervention Service (CAIS) CAMHS Team 9am-6pm /7 days Extended working arrangements	West Lancs CAMHS Team 3am-10pm / 7 days Extended working arrangements		
					Mental Health Cris	s Line / The Wellbeing, Mental Health H	elpline & Texting Service 24/7					
Α.		Intersive Support Function (ISF): Available: 8pm - 8am 7/days**										
LEARNING DISABILITY	Response Crisis 24/7	Community LD Service (Adults) 8am-8pm Mon-Fri Extended working arrangements	Service is primarily for adults 18+ (16- 18 in transition) Mon-Thurs 9em-Spm Fridey 9.00em - 4.30pm	8am-8pm Mon-Fri	Community LD Service (Adults) Sam-Spm Mon-Fri Extended working arrangements	Community LD Service (Adults) Sam-Sprn Mon-Fri Extended working arrangements	Community LD Service (Adults) Sam-Spm Mon-Fri Extended working arrangements	Community LD Service (Adults) Sam-Spm Mon-Fri Extended working arrangements	Community LD Service (Adults) Sam-Spm Mon-Fri Extended working arrangements	Community LD Service (Adults) Sam-Spm Mon-Fri Extended working arrangements		
RNING		Out of Hours Spm-Sam via Adult MHL / HTT for age 16+ 7/days	Emergency Duty Team*** On-call cover in place to cover Bank	Out of Hours 8pm-Sam via Adult MHL / HTT for age16+ 7/days	Out of Hours 8pm-8am via Adult MHL / HTT for age 16+ 7/days	Out of Hours 8pm-8am vie Adult MHL / HTT for age16+ 7/days	Out of Hours 8pm-8am via Adult MHL / HTT for age 16+ 7/days	Out of Hours 8pm-8am via Adult MHL / HTT for age16+ 7/days	ALIS/HTT: Out of Hours 7/days	Out of Hours Spm-Sam via Adult MHL / HTT for age 16+ 7/days		
LEA	Community LD Service - LD Routine	Community LD Service (all age) 9am - Spm Mon-Fri	Holidays only)	Community LD Service (all age) 9am - Spm Mon-Fri	Community LD Service (all age) 9am - Spm Mon-Fri	Community LD Service (all age) 9am - Spm Mon-Fri	Community LD Service (all age) 9am - Sprn Mon-Fri	Community LD Service (all age) 9am - Spm Mon-Fri	Community LD Service (all age) 9am - Spm Mon-Fri	Community LD Service (all age) 9am - Spm Mon-Fri		

^{*}ELCAS have extended hours of operation to 8pm, but do not have full out of hours cover in place. Out of hours cover 8pm - 8am provided by Adult MHL / HTT
** Intensitive Support Function provided in collaboration with Mersey Care NHS FT

^{***} Blackpool Community LD: Out of Hours the Blackpool Social Care Emergency Duty Team triage calls and redirect dependent on need to the LSCFT Adult MLT/HTT. Young people under 16yrs of age are directed through out of hours services covering CAMHS Crisis