



## **Doncaster and Bassetlaw Teaching Hospitals**

Mental Health Strategy







## A word from

**David Purdue**, Director of Nursing, Midwifery and Allied Health Professionals



Mental health service improvement is a national priority, particularly focusing on crisis care, perinatal mental health, children and young people, avoiding inappropriate out of area admissions, ending inappropriate use of police intervention, better access to psychological therapies and parity of esteem (giving equal value to mental and physical health).

Building on the NHS Mandate, NHS England has published the Five Year Forward View and the NHS Long Term Plan. The long term plan builds on the mental health five year forward view.

Over the next 10 years, NHS 111 will be established as the single point of contact for those experiencing a mental health crisis. There will also be a new Mental Health Safety Improvement Programme, with a focus on suicide prevention. Milestones for mental health services for adults:

- New and integrated models of primary and community mental health care will give 370,000 adults and older adults with severe mental illnesses greater choice and control over their care and support them to live well in their communities by 2023/24.
- By 2023/24, NHS 111 will be the single, universal point of access for people experiencing mental health crisis.
   There will also be an increase in alternative forms of provision for those in crisis, including non-medical alternatives to A&E and alternatives to inpatient admission in acute mental health pathways. Families and staff who are bereaved by suicide will also have access to post crisis support.
- By 2023/24, the wider health service will introduce mental health transport vehicles, introduce mental health nurses in ambulance control rooms and build mental health competency of ambulance staff to ensure that ambulance staff are trained and equipped to respond effectively to people experiencing a crisis.

Many patients at Doncaster and Bassetlaw Teaching Hospitals (DBTH) have mental health needs which need addressing if we are to achieve high quality care and good clinical outcomes. DBTH provides services for people who are particularly vulnerable or present a high risk.

People with a mental health problem or a learning disability tend to experience poorer physical health and die younger than other people. They also experience ignorance, prejudice and discrimination which may result in their health needs being misdiagnosed or missed altogether. There are examples of good practice in the promotion, prevention and intervention of mental health needs across DBTH, but as a Trust we have organisational development needs to support the improvement of mental health care which include training, practice development, communication and commissioning.

This Mental Health Strategy is aligned to our over arching strategic direction and fits with our vision and our True North objectives which can be viewed on the next page.

#### **David Purdue**

Director of Nursing, Midwifery and Allied Health Professionals



## **Our vision and 'True North'**



## Introduction and Context

The development of our Mental Health Strategy for 2019 - 2021 has been informed by a number of strategies and directives.

These pieces of guidance include:

- A literature review including national guidance in particular the Five Year Forward View for Mental Health- NICE and good practice evidence and the Long Term Plan.
- A review of what service users and carers have said about what is important to them following our System Perfect week in April 2019
- Key public health messages about mental health problems and our local population
- The views and needs of our local commissioners
- The expertise and knowledge of our local Mental Health providers and;
- Our vision and values as an organisation.

#### **Engagement**

To develop our approach and identification of key priorities, discussions have been held with commissioners, clinical leaders and managers, Trust Governors, service users and representatives within our Children and Young People's Services, Adults and Older Adults Services.

#### Why mental health matters?

DBTH is the major provider of hospital-based healthcare for the adults of Doncaster, Bassetlaw and the surrounding areas. Most of the services we provide focus upon an illness group, or type of injury and consequently the emphasis of DBTH is that of physical health. However, physical health is not independent from other aspects of wellbeing and it is now widely recognised that physical and mental health are fundamentally linked: Perceptions of the relationship between physical and mental disorders have changed. This has been a key development.

It is now widely acknowledged that this relationship is complex, reciprocal and acts through multiple pathways. Untreated health disorders result in poor outcomes for co-morbid physical illnesses. Individuals with health disorders have an increased risk of suffering from physical illness because of diminished immune function, poor health behaviour, noncompliance with prescribed medical regimens and barriers to obtaining treatment for physical disorders.

Individuals with chronic physical illness are significantly more likely than other people to suffer from health disorders.

- 1). The occurrence of physical and mental health conditions at the same time is common.
- 2). It is evident therefore that in order to achieve high quality patient care and good healthcare outcomes DBTH must be capable of understanding and responding to the mental health needs of the people who use its services. At its most fundamental level this is achieved through the humanity of care exercised in the multitude of interactions that take place between service users and staff.

Building on this foundation and moving beyond the generic are the particular needs of people with a mental health problem or a learning disability who require the support of staff with specialist skills and the development of services that have the capacity to provide effective physical and mental health care.

However compelling the experience of the people who use DBTH services, and the research, national guidelines and legislation that underpin this strategy, it is important to acknowledge that people with a mental health problem or a learning disability are subject to widespread prejudice and disadvantage that contribute to their unequal access to services, treatment and health outcomes.



## Development of Strategic Intentions

The Mental Health Strategy intentions were developed following the week long system perfect completed on the 2nd of April 2019. The week was run supported by numerous social media and communication campaigns to address the needs of patients with mental health, learning difficulties and those with a dependency issue, who present to DBTH.

Throughout the project, there was a commitment between partners to continue to work closely together to identify areas for improvement and to further engage with staff and the public to provide even greater insight to inform this strategy development. The organisations involved in development of this strategy are:

- Doncaster and Bassetlaw Teaching Hospitals (DBTH)
- Nottinghamshire Healthcare Foundation Trust
- NHS Doncaster Clinical Commissioning Group
- NHS Bassetlaw Clinical Commissioning Group
- Rotherham, Doncaster and South Humber Foundation Trust (RDaSH)
- ASPIRE, Project 3
- Fylde Coast Medical Services (FCMS)
- Primary Care Direct (PCD)
- Healthwatch Doncaster
- Doncaster Metropolitan Borough Council (DMBC)
- Peoples Focussed Group (PFG)- Doncaster
- Change, Grow, Live (CGL)
- BCVS
- East Midlands Ambulance Service
- MIND
- Yorkshire Ambulance Service (YAS)

The key findings from the media campaigns, service user feedback and surveys were:

- The majority of patients did not know what mental health (MH) services where available in the area. This was a consistent message throughout the feedback
- The majority of patients stated that their first port of call if they needed MH support would be to visit their GP
- The majority of patients stated that they would access their GP for information on MH services
- Some people said that they would talk to their family and friends about how to get help in a crisis.
- A large % of patients stated that they would look for information on the internet for information on MH issues
- 40% of all patients who attended ED with a mental health need where known to community mental health services
- Individuals use ED due to not being able to get a GP appointment
- Individuals attend due to not getting the outcome expected from the community services
- Police bring individuals to ED and do not follow protocol
- Services do not understand the pathway for individuals with a diagnosed or suspected mental health issue.

In order to address the issues raised from the local surveys and National publications the following strategic intentions have been developed.













# Our Strategic Intentions: What we intend to do

#### Effective and compassionate help

- Evidence-based and responsive care delivered through clearly described pathways
- Focussed on providing safe, effective services that consistently achieve outcomes which are meaningful to service users
- All services represent a "centre of excellence"
- in line with best practice
- Move towards all core 24 standards

#### Supporting our staff

- Recruiting and retaining skilled and compassionate staff
- Developing new roles and innovative approaches to Joint mental/physical health workforce planning
- Valuing, training and engaging staff to enable creativity, innovation and effective service delivery
- Building strong clinical and managerial leadership, a quality improvement and research culture.

#### Working with service-users and carers

- Engagement with service users and carers guiding the development of our services.
- Developing supported self management models of care and support for carers.



#### Good experience of treatment and care

- Personalised care supporting individual choice, independence, recovery and quality of life.
- Both physical and mental health needs of service users are assessed and responded to in an integrated way.



#### **Straightforward access** to **services**

- People can access our services without discrimination or stigma where they live, learn and work
- Effective and integrated urgent care coordinated around service users and their families
- Using technology to provide more online and telehealth services where this makes sense.



#### Working with partners and communities

- Effective partnerships with our Mental Healthcare Providers, primary care, social care and voluntary sector organisations
- Ensuring mental health is a core part of integrated locality services and local system initiatives and wider sustainability and transformation plans
- Supporting development of prevention, early intervention, and peer support services .



# Implementation planning

This summary strategy document will be supported by implementation plans within our major services.

- Adult Mental Health
- Child and Adolescent Mental Health Services (CAMHS)
- Learning Disabilities
- Dementia
- Autism

These plans, including existing and new initiatives, will be completed by November 2019. They will reflect the importance of partnership planning with commissioners and other providers to achieve a joined up experience for people who use services, along with effective use of resources within our two place plans.

We will work with partners to ensure effective engagement of service users and carers in our implementation, which will be supported by a communication and engagement plan to facilitate engagement of our staff, commissioners and partner providers. DBTH is part of the South Yorkshire and Bassetlaw Integrated Care System (ICS).

We will continue to actively contribute to these plans, seeking to ensure that mental health is embedded throughout, that specific targets are included and achieved, and the needs of people with serious mental illness are addressed.

#### Strengths to build on

- Our organisational reputation, and good relationships with both commissioners, councils and Mental Health Providers
- Our existing strategies and governance for Learning Disabilities and Autism
- Our innovative approach to Dementia and jointly managed Older Peoples Mental Health Team
- Our engagement with people who use our services and carers in the Trust

#### Risks

Key risks and issues affecting implementation will be included in our plans. A number have been identified due to the complexity of commissioning across 2 CCGs and Mental Health Care Providers.

#### Governance

The strategy implementation is the responsibility of the Director of Nursing. The progress against the strategy will be monitored through the Quality and Effectiveness Committee, as a standard item on the agenda.

This strategy will form part of the supporting clinical strategy.















# Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust

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