## Mental Health Commissioning Strategy for Devon, Plymouth and Torbay, 2014 -2017

## **Action Plan Summary**

The Mental Health Commissioning Strategy provides an overview of national policy, evidence bases, and current commitments and is informed by stakeholders, people who use services and carers.

In developing the associated action plan for the strategy the approach has been based around the six key priorities identified within the strategy that reflect national priorities; all local planning and delivery will focus on:

- Prevention
- Personalisation
- Integration
- Improving health and wellbeing
- Supporting recovery
- Access to services

The above priorities are underpinned by a system-wide commitment to:

- Engagement and involvement of people who use services and carers in both service monitoring and the commissioning process
- Financial sustainability
- Effective safeguarding arrangements for vulnerable adults and for children in families affected by mental ill health
- High-quality services

Examples from the work plan include:

1) Prevention: A focus on understanding the causes of mental ill health and attempting to address them before they become severe. Approaches include intervening with individuals, families or communities to prevent the development of predictable mental health issues, early intervention at the first signs of severe mental health issues and rapid response at times of relapse.

**Example from Action Plan:** The redesign of the mental health acute care pathway includes the development of access to increased options at time of crisis, including a drop in sanctuary service, planned respite provision, a crisis house, and step up and step down beds from mental health inpatient care.

- **2) Personalisation:** A commitment to the individuals who receive support to take control of their own mental health issues and retain independence.
  - **Example from Action Plan:** The CCG is within the demonstrator site for the integrated personal commissioning programme: a programme which will include individuals with mental health problems who have high levels of need where a personalised approach would address acknowledged challenges in care provision, help prevent people from becoming more unwell, and enable people to retain their independence.
- **3) Integration**: Ensuring primary and secondary care services have shared and integrated processes for managing care and treatment, including integrated treatment pathways.

**Example from Action Plan:** Specialist link workers from mental health secondary care services provide important linking with primary care to provide advice and consultation and promote integration. Working with GPs, standardised transfer documents from secondary to primary care have been produced; rapid referral protocols from primary care to secondary mental health services have been devised. This newly introduced change requires a period of embedding and review.

**4) Improving health and wellbeing**: Mental and physical health should be treated with equal importance. Key expectations relate to the improvement of liaison psychiatry services and health improvements within primary care for people with mental ill health with emphasis on healthy lifestyles.

**Example from Action Plan:** The liaison psychiatry service is being developed further, in particular working hours are being extended and collaborative care arrangements put in place regarding those with complex needs who frequently attend the district hospital. High quality liaison psychiatry services have been shown to reduce hospital admissions and length of stay.

5) Supporting recovery: The priority is for services to engage people with mental health problems in effective and appropriate care and treatment, psychological therapy and activities that help them regain their resilience, while also maintaining their place in family, community and employment.

**Example from Action Plan:** A Multi Agency Psychological Therapies Strategy has been developed: key priorities for implementation are access to psychological therapies at the time of need with clear standards related to timeliness of access, informed choice, provision of evidence based psychological therapy and transformation of outcome measures to include a focus on patient reported outcomes.

6) Access to Services: People experiencing mental health issues, regardless of the severity, will be able to access advice, guidance, education, treatment and support to enable their recovery and support their mental health and wellbeing.

**Example from Action Plan:** The redesign of the acute care mental health pathway, in line with principles of the Crisis Care Concordat, will ensure access 24 hours a day, 7 days a week to advice, support and urgent mental health assessment. Access will include a 24 hour helpline and an out of hour's psychiatric assessment and management service.

The strategy is being implemented through a co-produced approach between the CCG, providers and stakeholders. Actions arising from the mental health commissioning strategy are contained in the CCG work plan which detail each required outcome, the actions and tasks required to achieve the outcome, lead agencies and individuals, timescale and milestones; the work plan is informed by provider detailed implementation plans. The complex challenge of providing services that are responsive to need requires the work plan to be a live document, complemented by opportunities to reflect on the latest evidence on what can help to achieve the outcomes identified.

Progress in implementing the strategy is monitored through the Mental Health and Learning Disability Redesign Board and associated task and finish groups, using measures of process and outcome.