

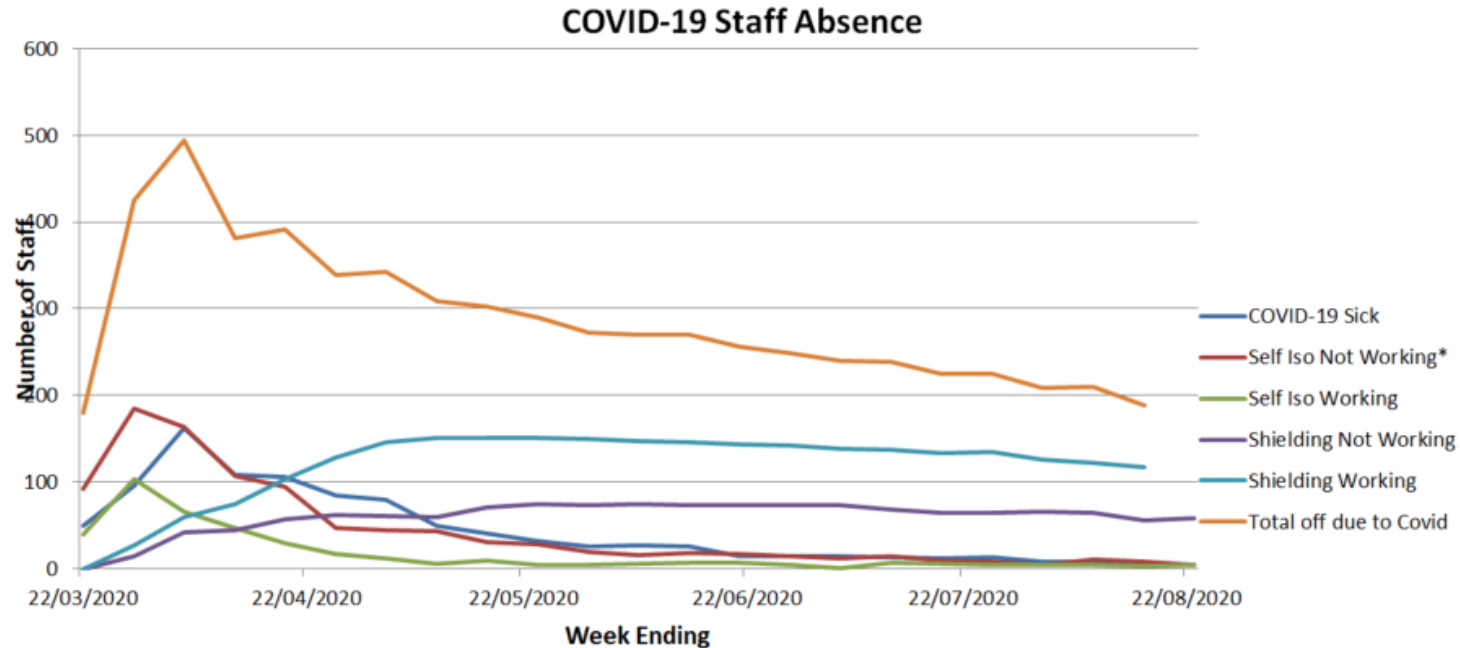
Essex Adult Mental Health Services Update

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Overview of the Response to the Pandemic

- Emergency planning in Trust and across systems continues – Tactical command has recently increased frequency in response to second surge
- Vulnerable patients and staff continue to be a focus with regular reviews of risk management plans
- Digital consultation continue to be utilised with individuals where appropriate though increasing numbers of people are requiring face to face contact
- Stepped up a Staff Wellbeing and support service for all of Essex – recently received funding to expand this and currently working across 3 STP's
- Implemented A&E diversions in each Acute Hospital Setting and these continue
- Continued with the transformation – 111 24/7 Crisis Response Service to support pandemic demand

Impact on Workforce



- Absence among staff groups remains low
- Twice weekly testing due to be implemented on all patient facing staff groups

Mapping Increase in Demand

- Need to understand demand for services had the pandemic not struck
- People might need more support due to a deterioration of their mental health during the pandemic
- New demand driven by people needing support due to wider impact of pandemic

Population Group	Research Determined Increase %	Mental Health Condition
General population without pre-existing mental health conditions	3.6	Moderate severe anxiety
	7.4	Moderate severe depression
People with pre-existing mental health conditions	67.4	Moderate severe anxiety
	56.3	Moderate severe depression
Healthcare workers	30.4	Burnout
	13.8	Post traumatic distress
	44.9	High psychological distress
	41.0	Anxiety (38-44 %)
People recovering from severe Covid-19	29.5	Depression (26-33%)
	23.0	PTSD (22-24%)
	19.5	Anxiety (15-23%)
Adult family members of those recovering from severe Covid-19	6.0	Depression
	35.0	PTSD
	9.8	Prolonged grief disorder
Bereaved people	14.0	PTSD
	18.4	Depressive symptoms
People economically affected by Covid-19	8.2	Major depression

Projected Surge

- We have forecast that the mental health surge in the next 6 months could be as high as 10%, but no national forecast yet and the surge could be higher
- We with other Mental Health organisations are beginning to identify that the mental health surge includes a cohort of patients that are new to the service or have not been engaged with secondary health services for a number of years and are presenting with complex mental health needs.
 - We believe that through technology, improved bed management and a new crisis service and A&E diversion arrangements, integrated ways of working with the whole West Essex system we can mitigate a potential second surge of up to 10%.
 - The Trust aims to maintain 85% occupancy to support social distancing on the ward – recognise this is a challenge at current level of demand.

North East Essex Future Planning

- Recovery Planning continues- expect NHSE Phase 4 Planning Phase 18.12.20
- Focus so far on transition back to sustainable 'business as usual'
- Delivery of NEE CCG Mental Health Investment Standard (MHIS) fully committed to
- EPUT and Essex CCG's currently discussing Out of Area Placements and local capacity available.
- Investments into;
 - EPUT 24/7 Psychiatric Liaison Service at ESNEFT and 111 press (2) Mental Health Crisis Line
 - EPUT Pan Essex Specialist Perinatal Service
 - EPUT Adult ADHD Service
 - EPUT Personality Disorder and Complex Needs
- Improving Access to Psychological Therapies (IAPT) - additional capacity business case in development to deliver 30% intervention rate

North East Essex Future Planning Cont.

Areas of focus;

- Support for health and care workforce
- Second wave of pandemic and Winter Pressures
- Increased levels of anxiety and depression
- MH impacts on workforce inclusive of burnout.
- Increased risk of suicide and crisis situations due to life-style impacts / increase in self harm.
- Increase in prescription of antidepressants
- Long Covid

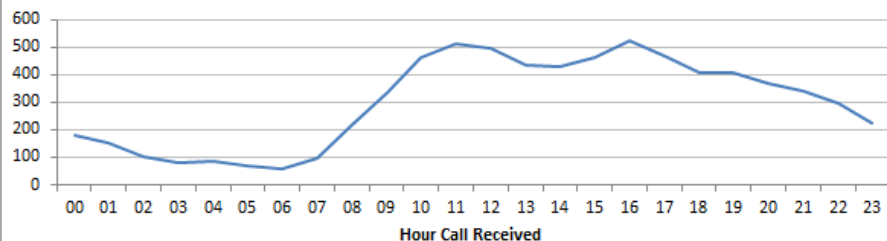
The Data

North East Essex 111 and Crisis Triage Activity Apr-20 to Oct-20

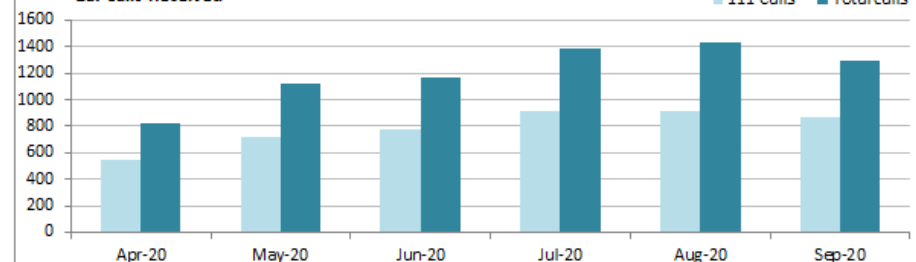
1a. Calls Received	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	YTD
111 Calls	545	723	780	913	920	871	4752
Crisis calls received from 0300 number	263	340	323	395	433	307	2061
Ded line - Ambulance	0	2	0	0	1	10	13
Ded line - GP Crisis	5	5	11	5	5	6	37
Ded line - Police	0	0	1	0	1	0	2
Ded line - Professional	11	52	53	77	68	96	357
Total calls	824	1122	1168	1390	1428	1290	7222

1b. Triage calls answered	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	YTD
111 Calls	198	374	417	461	483	451	2384
Crisis calls received from 0300 number	231	256	286	341	359	275	1748
Ded line - Ambulance	0	2	0	0	1	8	11
Ded line - GP Crisis	5	5	9	4	5	6	34
Ded line - Police	0	0	1	0	1	0	2
Ded line - Professional	10	47	51	76	64	91	339
Total calls	444	684	764	882	913	831	4518

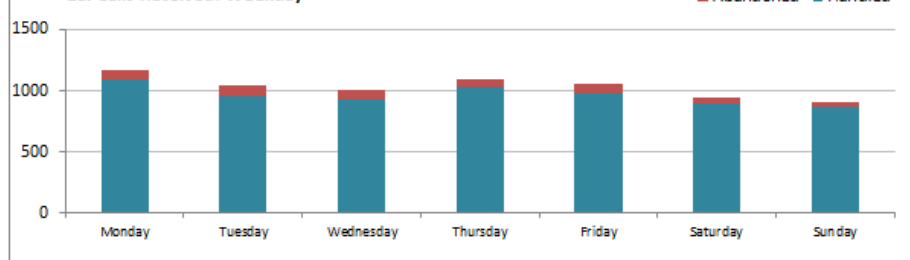
1a. Calls Received: Hour



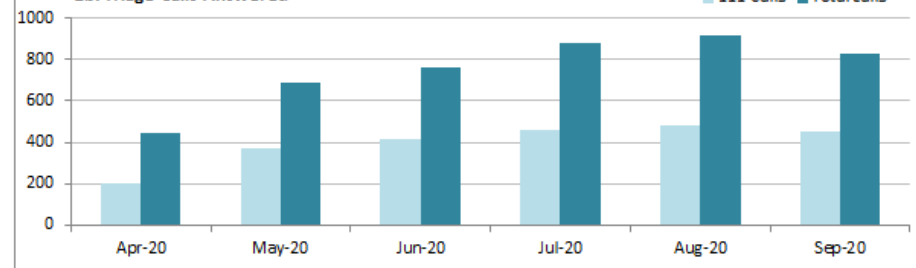
1a. Calls Received



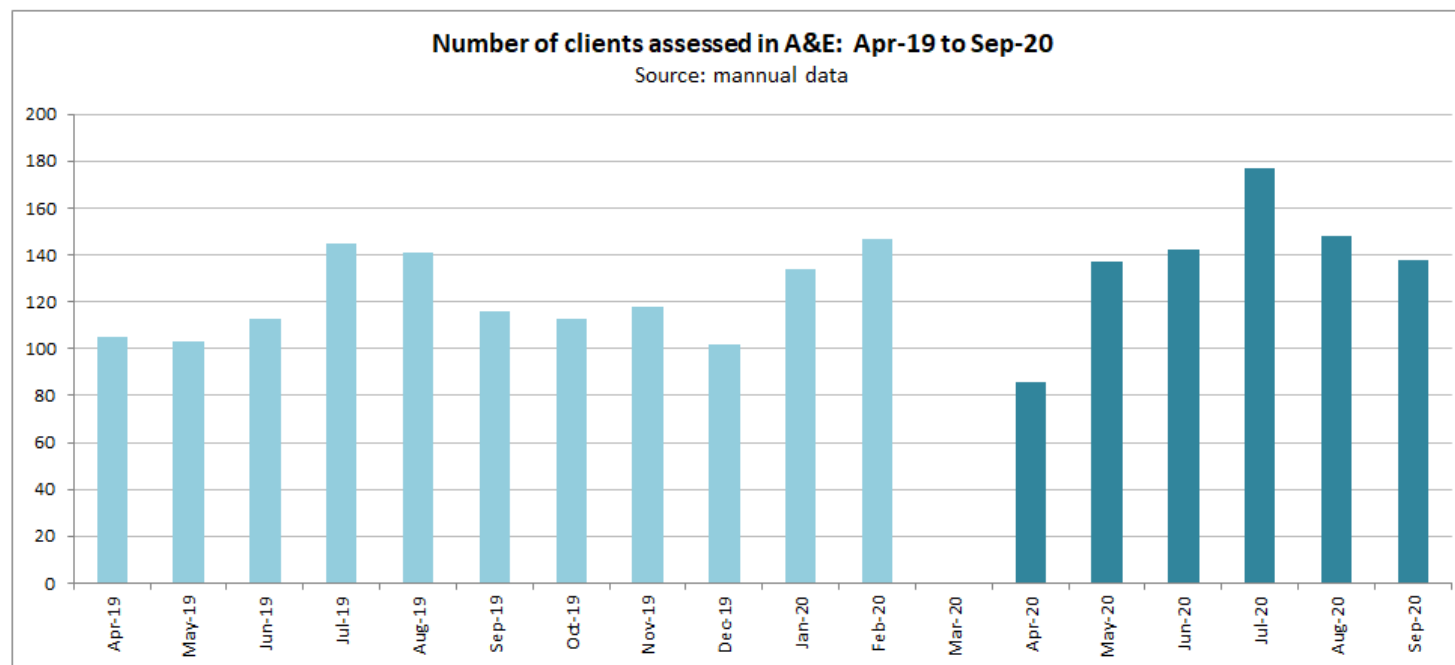
1a. Calls Received: Weekday



1b. Triage Calls Answered



The Data

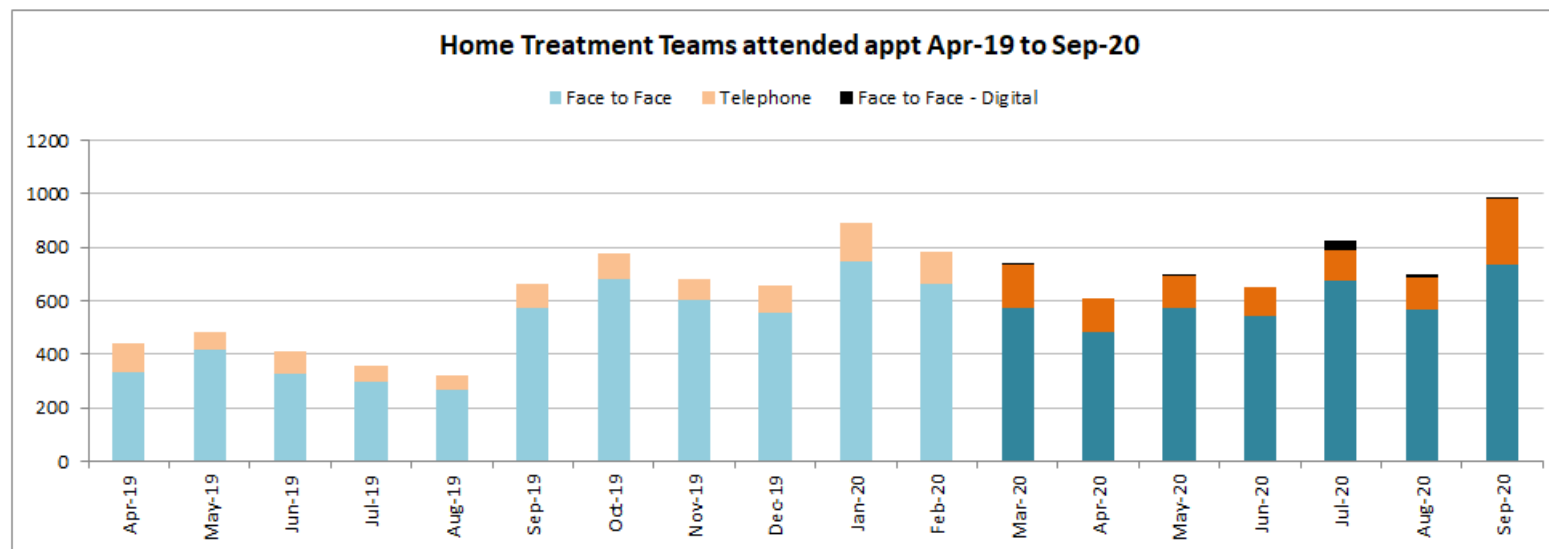


Client assessed in A&E 2019-21	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
	105	103	113	145	141	116	113	118	102	134	147	-*

Client assessed in A&E 2020-21	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
	86	137	142	177	148	138	-	-	-	-	-	-

* Mar-20 validated data not available at start of pandemic due to operational pressure

The Data



Appointment Type	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
Face to Face	335	417	330	299	266	574	684	602	556	748	664	573
Face to Face - Digital	-	-	-	-	-	-	-	-	-	-	-	2
Telephone	106	66	84	57	58	87	95	79	103	141	118	161
Attended Appointment Total	441	483	414	356	324	661	779	681	659	889	782	736

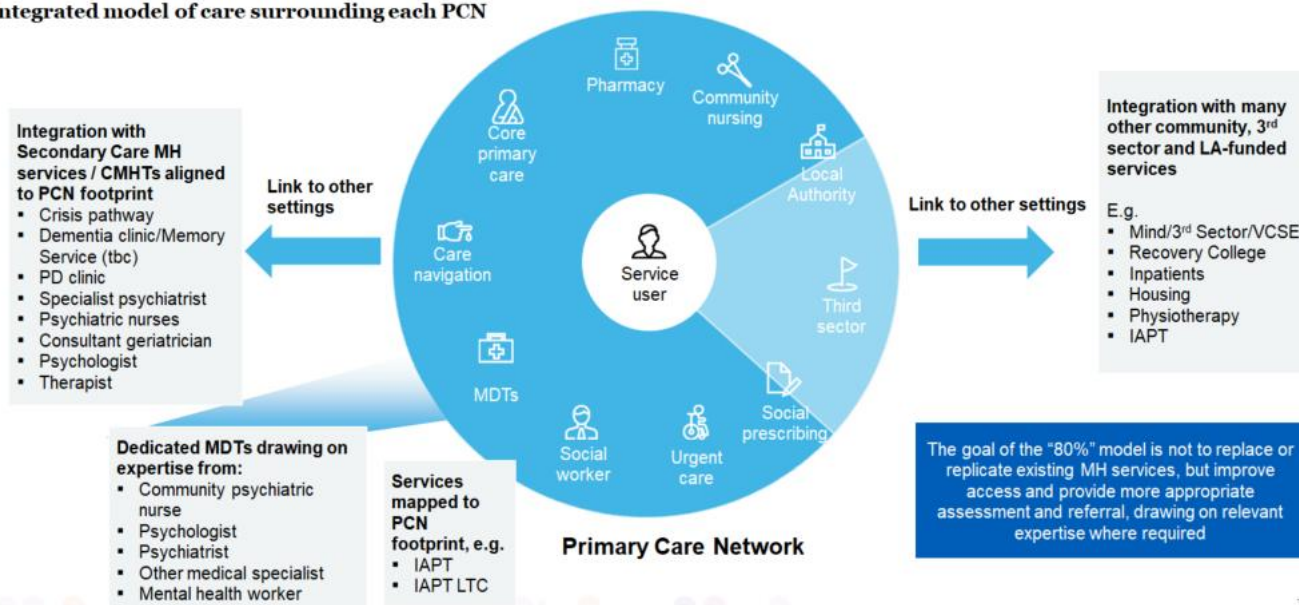
Appointment Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20
Face to Face	481	576	541	677	567	734	-	-	-	-	-	-
Face to Face - Digital	-	1	-	37	12	10	-	-	-	-	-	-
Telephone	131	116	108	110	120	246	-	-	-	-	-	-
Attended Appointment Total	612	693	649	824	699	990	-	-	-	-	-	-

Mid and South Essex Planning

Primary Care

- Integrated Primary Care Model – progressing with IPCC transformation

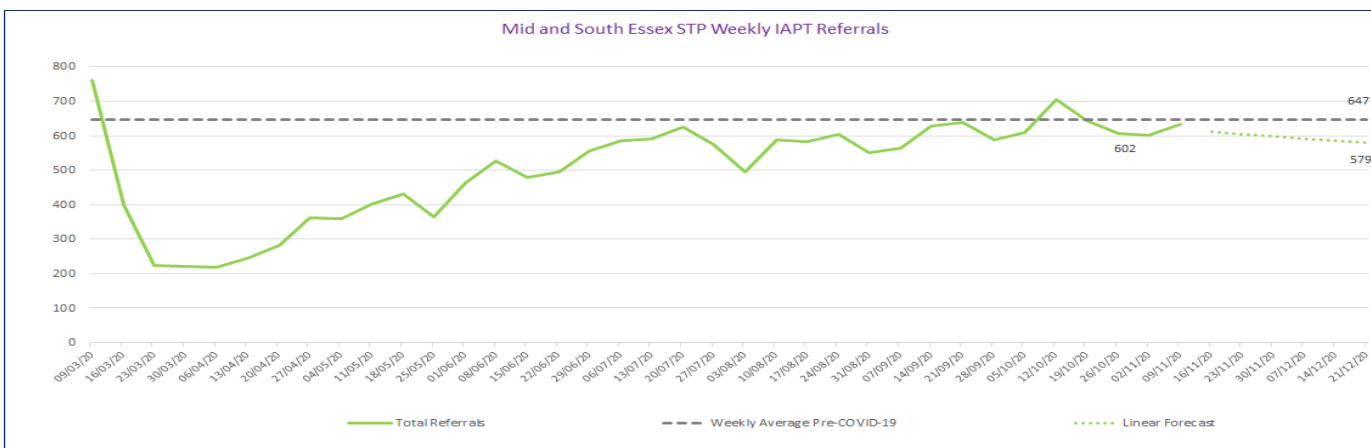
Integrated model of care surrounding each PCN



Mid and South Essex Planning *Cont.*

IAPT

- All IAPT providers have seen an increase in demand, but variably, for services and with increased complexity in some areas. Services are resourced to meet the additional demand. Close monitoring in place.
- The default mode of delivery is remotely via telephony and digital platforms as IAPT being a high volume service F2F at the current time would not be practicable. Measures in place to mitigate inequality of access as appropriate.
- Fast tracking of key workers and frontline staff to access support
- IAPT services part of transformation to integrate MH in primary and community care providing a wrap around offer for developing PCNs.



Mid and South Essex Planning Cont.

Secondary Care

- Increased focus on Psychological Therapies – increasing resources into psychological teams
- Escalation Beds with private sector provider in Mid Essex plus opening a ward
- Robust Gatekeeping for admission avoidance
- Operational Preparedness – strategic meeting that includes all partners to consider further surge management as it materialises
- Focus on throughput and reducing delayed transfers of care – introduction of additional discharge facilitators

Surge in Demand in Mid & South Essex

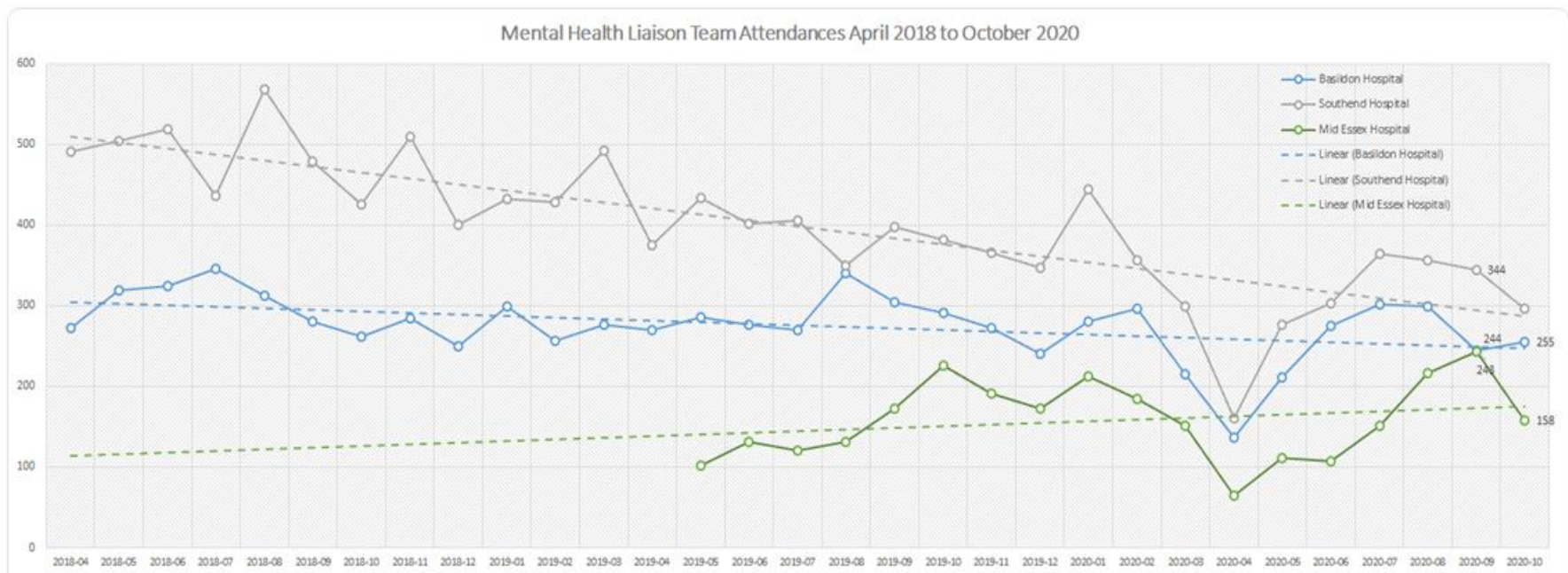
Population Group	No. in population (pre-Covid)	Research determined increase %	Mental health condition	Calculated predicted new cases
General population without pre-existing mental health conditions	912,807	3.6%	Moderate severe anxiety	33,135
		7.4%	Moderate severe depression	67,822
People with pre-existing mental health conditions	8,248	67.4%	Moderate severe anxiety	5,559
		56.3%	Moderate severe depression	4,644
Healthcare workers	14,491	30.4%	Burnout	4,405
		13.8%	Post traumatic distress	2,000
		44.9%	High psychological distress	6,506
People recovering from severe Covid-19	469	41.0%	Anxiety (38%-44%)	192
		29.5%	Depression (26-33%)	138
		23.0%	PTSD (22-24%)	108
Adult family members of those recovering from severe Covid-19	689	19.5%	Anxiety (15-23%)	134
		6.0%	Depression	41
		35.0%	Post traumatic stress disorder	241
Bereaved people	9,393	9.8%	Prolonged grief disorder	921
		14.0%	Post traumatic stress disorder	1,315
		18.4%	Depressive symptoms	1,728
People economically affected by Covid-19	47,310	8.2%	Major depression	3,879
Total	993,407			132,770

- Majority of demand will come in via primary care but when primary care are under pressure demand rises to secondary care



Mental Health Liaison

	2018-04	2018-05	2018-06	2018-07	2018-08	2018-09	2018-10	2018-11	2018-12	2019-01	2019-02	2019-03	2019-04	2019-05	2019-06	2019-07	2019-08	2019-09	2019-10	2019-11	2019-12	2020-01	2020-02	2020-03	2020-04	2020-05	2020-06	2020-07	2020-08	2020-09	2020-10	Grand Total
Basildon Hospital	491	504	519	436	569	479	426	510	401	432	429	492	375	434	402	406	350	398	382	366	347	445	356	299	160	276	303	365	356	344	297	12349
Southeast Hospital	273	319	325	346	312	281	262	285	250	299	257	276	270	286	276	270	341	305	291	272	240	281	297	215	136	211	275	302	299	244	255	8551
Mid Essex Hospital														102	131	121	131	172	226	191	173	213	184	151	65	111	107	151	217	243	158	2847
Grand Total	764	823	844	782	881	760	688	795	651	731	686	768	645	822	809	797	822	875	899	829	760	939	837	665	361	598	685	818	872	831	710	23747



West Essex Integration and Primary/Community Care Model

West Essex Planning -Working in Collaboration

- ONE Health & Care Partnership
- The West Essex All Age Mental Health Partnership Board has been established – led by West Essex CCG. First meeting being held to agree attendees and membership, partners are engaging with district councils to join.
- EPUT provide both community health and mental health services are able to co-provide and respond to emergent community needs.
- Work in partnership with the voluntary sector – MIND, Samaritans and the Alzheimer's society are all embedded within our community services.
- Refocus on PCN/locality service development enables flexible service delivery reflective of local needs

Further opportunities for collaboration

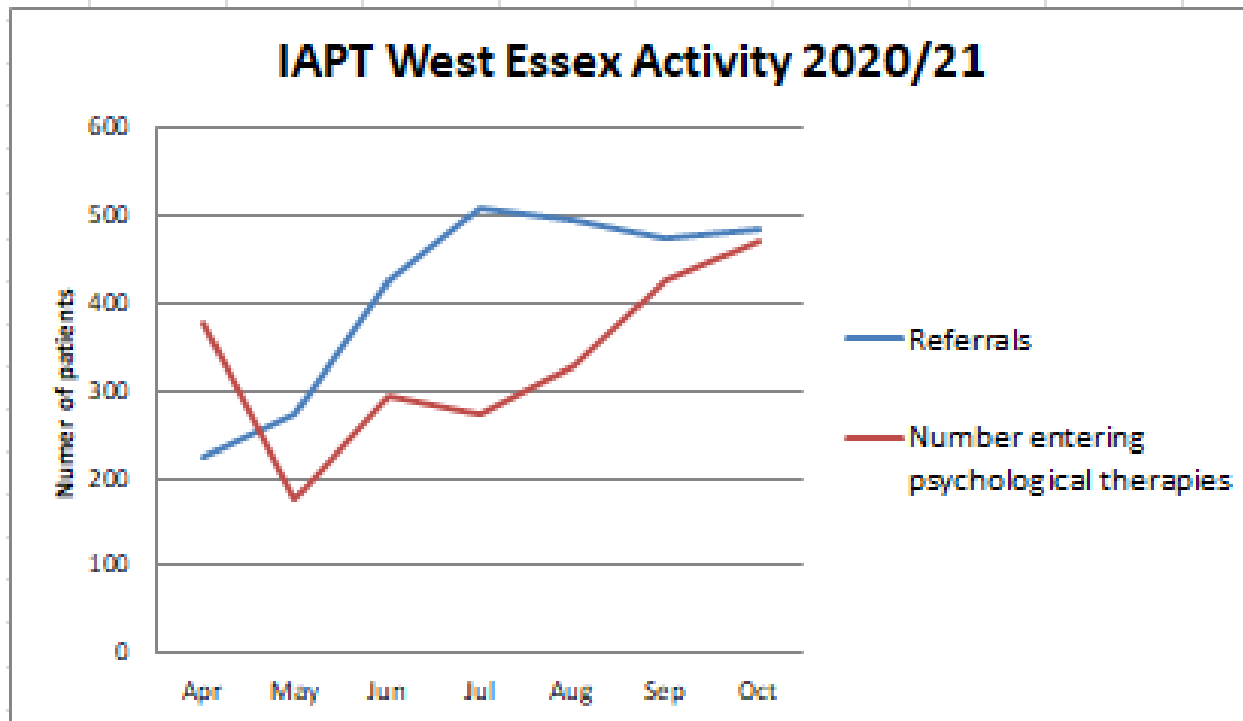
- Engagement with housing services
- Engagement with activity and leisure services
- Any other opportunity

NHSE first implementer

Pilot includes:

- Epping North PCN workers/Mental health Coaches/specialist pharmacist
- 18-25 service psychology led/specialist pharmacist,
- FREED - Early intervention eating disorder service 18-25
- Perinatal service
- Dementia older people and frailty service – based at St Margaret's aligned to the 2 primary care network
- First episode psychosis service

West Essex IAPT



- Referrals returned to pre-Covid levels
- Increased number of patients in therapy
- CCG is out to tender for service with increased capacity (start mid 2021)

Mental Health & Wellbeing of Students 18 & Over

- Increased ease of access to more complex MH services via primary care secondary services provided via Community Mental Health Service .
- 18-25 pilot
 - psychology led working with young people to develop strategies to manage their emotional and psychological well-being at any early stage.
 - Engaged with local forums to hear what the young people wanted
 - large demand mostly received via GPs clinicians and the crisis service.
 - Where young people are moving to universities outside the area advice and support is provided in respect of accessing support
 - First Episode psychosis service
 - 2 week referral to care plan work with children's and young people mental health services as referrals accepted from 14 Work in partnership with the IAPT services
 - Mental Health Wellbeing promoted within educational institutions

How we got here

Recognising what we have to offer

Sharing our experiences and track record with our partners to create awareness of our capabilities as viable partners in delivering the service.

Developing shared understanding of local need

Offering more than service provision through structured opportunities to contribute unique local knowledge in a way that enables better understanding of need and future service development.

Stakeholder Engagement

We engaged with our stakeholders including service users to identify gaps in existing services and how the voluntary sector can support with bridging the gaps.

Leveraging system wide capabilities

Mapping capabilities across the system whilst leveraging these in alignment with the service offers.

Delivering services together

Working with our partners to assess how existing services could be reconfigured to complement statutory provision and better meet the needs of particular groups.

