

**Manchester City Council
Report for Information**

Report to: Health Scrutiny Committee – 21 July 2021

Subject: Manchester Covid Recovery – Summary for Manchester Health and Scrutiny Committee

Report of: Greater Manchester Mental Health NHS Foundation Trust

Summary

This paper provides Manchester Health and Scrutiny Committee with a summary and overview of the activity across the GMMH Manchester services and the Covid response.

Recommendations

The Scrutiny Committee is asked to

1. Note the summary of this report; and
 2. Advise of further information required.
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Background documents (available for public inspection):

None

Manchester Covid Recovery – Summary for Manchester Health and Scrutiny Committee 21 July 2021

1. Introduction

This paper provides Manchester Health and Scrutiny Committee with a summary and overview of the activity across the GMMH Manchester services and the Covid response.

Specific areas of focus include:

- Urgent Care/Crisis response
- Early Intervention
- Community Mental health Teams
- Delayed Transfer of Care
- Out of Area Placements

We will also present an update on the Manchester Wellbeing Fund which was launched in October 2017 as part of the Manchester Clinical Transformation Programme to build community assets, promote mental wellbeing (feeling good and functioning well) and support people living with mental health conditions in the community. Its key purpose was to invest in community groups and improve resilience around mental health.

The Fund has three main objectives:

- to develop community support around people's mental health needs
- to promote mental health and wellbeing
- to challenge the stigma around mental illness

2. Service response

2.1 Mental Health Liaison Service (MHLS)

As the lockdown restrictions have been eased since March 2021 MHLS activity through Accident and Emergency Departments (A&E) has increased slightly. Analysis of this has, however, demonstrated that this has not increased significantly above pre- pandemic referral activity.

Figure 1 – Manchester ED Attendance



*The area highlighted is project range based on previous data.
In relation to ED attendance and MHLS activity the following is noted:

- North Manchester referral activity has increased slightly through May 2021
- NMGH and the MHLS now benefit from the new Mental Health Urgent Care Area. 'The Green Room' which is part of an NHSE, MFT & GMMH partnership, as part of the GM Urgent Care by Appointment Scheme.
- North Manchester continues to sustain a high 4-hour MHLS response time due to the establishment of the Urgent Care Centre (achieving 91.1% in May 2021).
 - The North MHLS are completing a Quality Improvement initiative with acute partners on site to start to pilot the GM Urgent and Emergency Care by appointment scheme and planned appointments in this area for primarily mental health service-users which is a positive and learning for other MFT sites.
- South Manchester are operating an interim model with the Urgent Care Centre estates work due for completion in July 2021. (achieving 97.4% in May 2021).
- There has been no estate for an Urgent Care Centre identified at Central Manchester, the impact of 'Project Red' at MRI challenges the available site. This can impact on the 4-hour response standards and the support to the A&E Leads in developing the streaming from the front door. (In May 2021 the Central Manchester service achieved 90.5%).
- The development of the Urgent Care Centres at North and South are in line with the GM agreed improvement models regarding the GM Urgent Care by Appointment Scheme and the Fist Call streaming initiatives as part of the First Call 111 National Directive.

2.2 Helpline Activity

As part of transformational COVID 19 emergency planning GMMH expanded the 24/7 freephone helpline, accelerating the crisis benchmark improvement outlined within the Long-Term Plan.

Specific strengths of this service as highlighted previously: -

- Available to all people in a mental health crisis or requiring COVID 19 specific support recognising the increased prevalence of mental health problems across the population because of the pandemic.

- The helpline provides a directory of services, helping to signpost and connect people with the appropriate VCSE services that can offer support and reducing pressure on primary and secondary care where appropriate.
- Enabling direct access to GMMH Home Based Treatment services for Manchester residents experiencing a crisis where the level of need indicates.
- Linked to the NHS 111 and CAS system recently connected to the GP extended hours service.
- The Helpline provides beyond mental health crisis and also provides a response for people with substance misuse problems and children and young people.

As the Helpline is continuing to develop and evolve, the service is currently engaged with Manchester Foundation Trust Urgent and Emergency Workstream to align the ED to the Urgent Care by Appointment scheme. This is involving GMP and NWAS partners to explore the diversion pathways for admission in line with the Long-Term Plan.

In the last 7 days, 505 Manchester people accessed the helpline, in crisis or requiring further assistance.

2.3 Crisis Café

As a component of the GMMH Crisis and Urgent Care response in Manchester, GMMH established the first MH Crisis Café across GM. The GMMH North Crisis Cafe is an out of hours friendly and supportive space open to anyone experiencing a mental health crisis and was opened rapidly as part of the winter resilience planning on the 14.12.20.

The aim of the service is to offer a practitioner led community facing alternative to A&E for those experiencing emotional or psychological distress. Using a recovery approach, the cafe offers support and advice from qualified Mental Health Practitioners and support staff in a relaxed and comfortable environment. As part of the GM Mental Health Task and Finish Group diversions from NWAS and GMP are being planned for the summer surge in A&E activity to support all partners.

Crisis Café Attendances

January	February	March	April	May
105	93	99	64	64

The second Crisis Café in partnership with VCSE Turning point opened on the 17th June 2021 (Wednesday through to Friday night 1900hrs- 0100hrs initially) and additional crisis beds are also being used by the Central Manchester MHLS as an alternative to crisis admission and gatekept by Central Manchester HBTT as per best practice standards. These additional beds are being delivered in partnership with VCSE colleagues and collocated within the Turning Point Crisis Café facility.

2.4 Home Based Treatment (HBT)

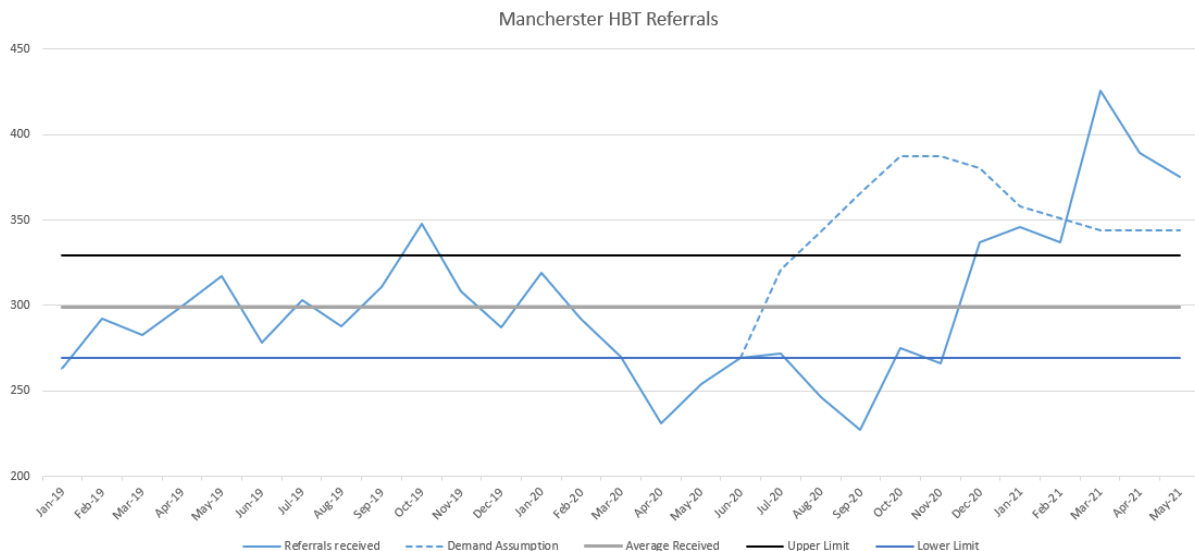
GMMH operates locality HBT services in North, Central and South Manchester. All of which operate to core fidelity standards in line with national guidance.

In response to the pandemic, and as a component of the GMMH recovery response, the HBT Services in Manchester fulfil the following additional functions to support the crisis response:

- Direct link to the GMMH Helpline enabling rapid escalation and response.
- Collaborative working with Mental Health Liaison Services to gatekeep admission to Hospital.
- Managing the Crisis Café – this is enabling people who are not under secondary care to access HBT services.
- Systematic in-reach into the GMMH MH in-patient bed base to free up capacity regarding supporting discharge and alternatives to a MH in-patient admission.

There continues to be an increase in referrals across the Manchester HBT the teams accepted 90% of referrals received in May 2021 for HBT support.

Figure 2 – Manchester HBT Referrals



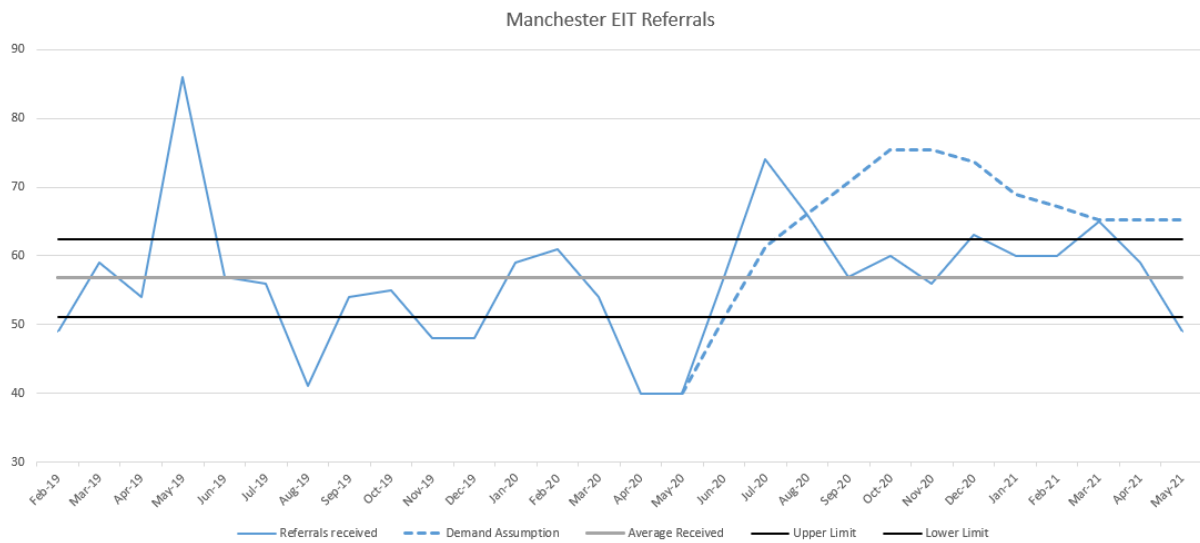
2.5 Early Intervention in Psychosis (EIT)

The referral demand for Manchester Early Intervention is shown in Figure 3. Referrals have reduced from April to May 2021 and now remain comparable to pre-covid rates. The service has experienced challenges in meeting the Referral to Treatment target for March to April after experiencing spike in appointment non attendance and delays in referrals reaching the service. Performance has since improved, and May referral responses were in line with national guidance. In addition:

- Attention is focused on improving physical health, family interventions and outcome measure performance across all three Manchester EI teams

- Teams continue to deliver the service through face to face interventions in line with IPC guidance

Figure 3 – Manchester EIT Referrals

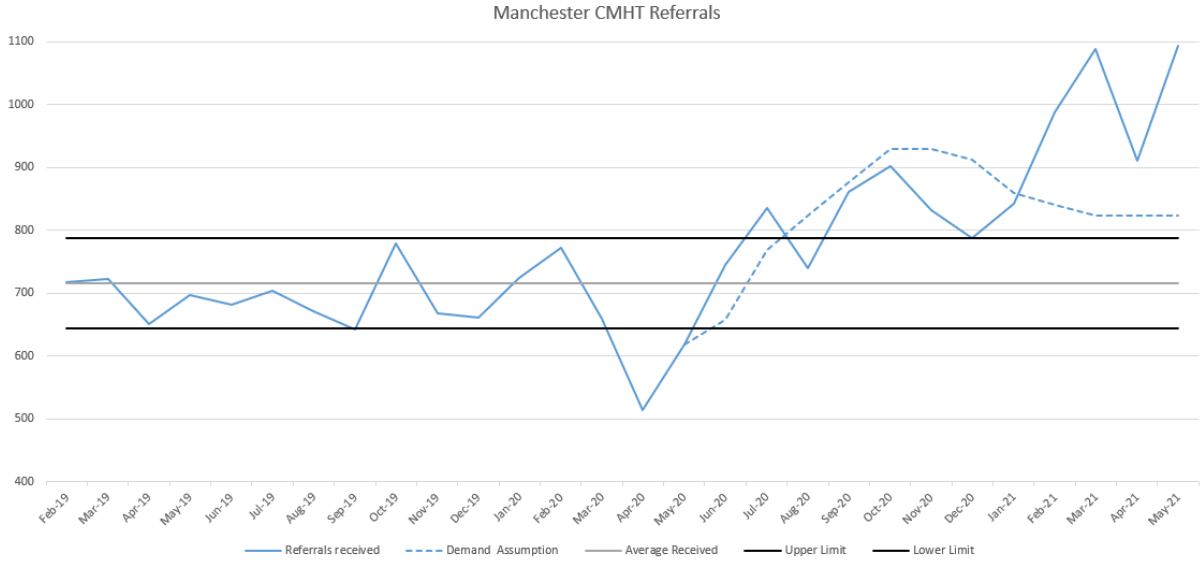


2.6 Community Mental Health Teams

Manchester CMHTs have experienced sustained, higher levels of demand that are above pre-covid rates. The following points are to be noted in relation to CMHT services:

- CMHTs continue to deliver care through face-to-face interventions, in line with Infection Prevention and Control (IPC) practice and this is monitored through the roll out of MAST (supervision system) locally and through divisional Senior Leadership Teams.
- Digital clinical contacts have also been successfully piloted.
- CMHT Bolster and Sustain investment continues to support the system to address capacity and delivering new roles to manage demand, such as Advanced Practitioners, additional administrative support and support staff.
- Physical health remains a priority. GMMH and MIND have delivered new physical health roles jointly within CMHTs that will support the promotion of high-quality holistic care including support to vulnerable groups for vaccination programmes.
- Improved response times have been demonstrated within services.
- Significant challenge in regards to escalation and increase of Safeguarding referrals for Manchester residents and those being directed to Mental Health teams.

Figure 4 – Manchester CMHT Referrals



2.7 Delayed Transfer of Care (DTOC)

At time of writing, there are 43 inpatients (Manchester Residents) whose discharges are delayed; 30 are Adults of Working Age and 13 are Older Adults. Nine people are awaiting rehab placements; four are awaiting further hospital care; four are awaiting residential care; four are awaiting nursing home care; two are awaiting an EMI care home (one residential and one nursing home); five are awaiting a Package of Care in their own home; 13 are awaiting a supported living placement and two are awaiting discharge to their own tenancy.

A deep-dive exercise is currently underway in partnership with MHCC and Greater Manchester Health and Social Care Partnership to understand the cause of the delays, identify why Manchester is highlighted as an outlier with Long Length of Stay for patients in hospitals and the trends with a view to removing some of the barriers in place.

2.8 Out of Area Placements (OAPs)

GMMH has noted an increase in demand across the system including demand for inpatient beds. Subsequently there has been an increase in demand for OAP placements. This is having a significant impact on service users and the overall resilience of the workforce. GMMH is currently the lead provider for the North West programme for OAPs provision and, in addition, has taken the following actions to support the system:

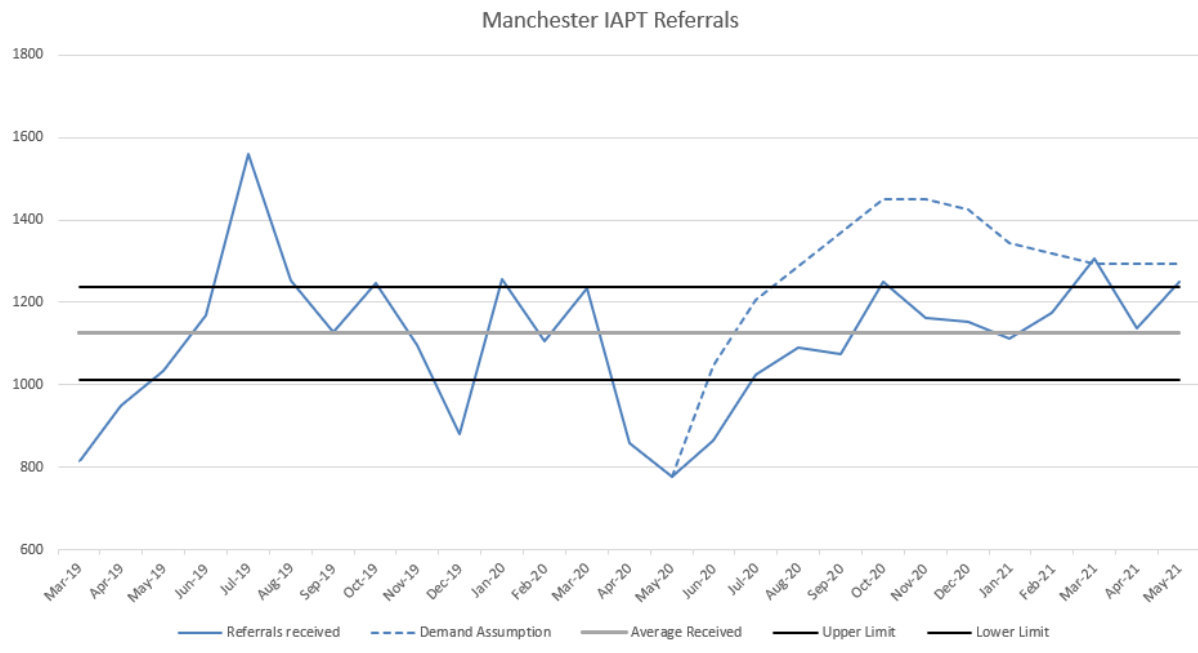
- Increased community resources to prevent admission and support early discharge.
- Temporary increase to the GMMH bed base to absorb some of the additional demand.
- Introduction of Service Manager on site at weekends to support patient flow systems.

- Piloting a model of senior clinicians working out of hours to support discharge planning over a seven-day period.

2.8.1 IAPT – referral for Step 3, Cognitive Behavioural Therapy

Consistent with other GMMH services, the Manchester IAPT service experienced a dip in referrals received at the start of the pandemic in March 2020. While demand has not increased as predicted, there has been a trajectory increase upto May 2021 which as the country comes out of lockdown has the potential to increase further due to projected trauma and anxiety. Most recently in May the Manchester service received 1194 referrals into service. Within this period, performance against the six-week referral to treatment target has improved from 56.4% in April 2020, to an achievement of 72% in May 2021. The 18-week referral to treatment target, has incrementally improved through 2021 cumulating in compliance at 95.4% in May. This is against a target of 75% and 95% respectively.

Figure 5 – IAPT Referrals Received



The IAPT service, have engaged with system partners and agreed to deliver a Long Covid response via a GMMH Hub and Spoke model which delivers care and treatment and psychological support from Long COVID in localities.

2.10 Health and Well Being (Buzz)

The Manchester Health and Well Being Service operates three principle services; Physical Activity on Referral Service (PARS), Neighbourhood Health Workers and the Knowledge Service and Curve Library.

Buzz continues to successfully work in Manchester offering an innovative, inclusive and accessible service improving the Health and Wellbeing of Manchester residents.

PARS:

- The team has adopted a blended approach of working as the Lockdown eases, with some sessions being virtually delivered via Teams and others undertaken in the community in a range of venues and outdoor locations.
- There will still be the option of telephone consultations being available for those service users still deemed as vulnerable.
- Some of the exercise classes continued to be delivered on-line due to their popularity.
- The service is receiving a high number of referrals.

Neighbourhood Health Workers:

- The Neighbourhood Health Workers continue to support the Citywide Recovery plan including supporting the roll out of the vaccination programme.
- Community led projects and initiatives that were on hold and could not be delivered because of Lockdown restrictions are being reviewed and either redeveloped in light of the changes that Covid has brought or delivered as originally planned.
- New projects are being developed in Geographical Communities and with Communities of Interest including the LGBT+ and African and Caribbean Community.
- Community Consultations continue to take place to identify what Manchester residents require as part of the Recovery process.

Knowledge Service and Curve Library:

- Fallowfield Library has re-opened and is operating a click and collect service from 10:00am -3:00pm
- The Curve Library has re-opened.
- The Recovery Academy where coproduced programmes of care are delivered has now recommenced face to face support.
- After consultation with stakeholders the team will continue in the short term to deliver its training programmes on-line.
- Literature searches continue as usual.

2.11 Well Being Fund

To date, the Fund has offered 596 grants with a total value of £1,115,891. In addition to the main process for grants of between £250 and £3,000, the Fund has operated fast-track grant rounds to respond to specific circumstances around the COVID Pandemic.

A key strength of the Fund is the grant decision-making process. The grant budget is apportioned across the 12 Manchester neighbourhoods on the basis of need (Index of Multiple Deprivation). Locality groups for North, Central and South Manchester, as well as a citywide and communities of interest group, meet to review and progress applications. In the locality groups, service users, carers, residents and representatives of community groups sit alongside

mental health, public health, recovery and community development staff from the Trust to ensure good support for projects and robust decision making. The groups also monitor overall delivery of the Fund, play an active role in refining the programme and act as 'buddies' for grant applicants. The grant application process is not a competitive one – each application is assessed on its own merits and applicants are offered support throughout so that those with less experience of funding applications are not excluded.

Service users are at the heart of the delivery of the Fund. From the outset, service users' views and experiences shaped the objectives, the application criteria and the structures for decision making.

The Fund has strengthened collaboration across a wide range of GMMH services which might not normally work together. Mental health, recovery and community and public health services have been able to develop a deeper understanding of each other's roles and to enhance the support that each can offer to their service users and participants.

3. Priorities

1. Continue recovery from COVID and support teams and system in their resilience to deliver.
2. System working to reduce delayed transfers of care, improve Length of Stay in Hospital for Manchester residents and improving capacity for those requiring hospital admission.
3. Delivering support and alternatives to A&E for people experiencing Mental Health Crisis.
4. Strengthen Community services via a National Transformation programme and delivering care within Primary Care Networks and Integrated Neighbourhood Teams.
5. Support system response to delivering Long COVID care and treatment.
6. Supporting system wide working for CYP experiencing crisis.

4. Recommendations

The Health and Scrutiny Committee are:

1. Asked to note the summary of this report' and
2. Advise of further information required.