



Your e-newsletter

August 2024

The Mental Health, Learning Disabilities and Autism Delivery Board brings together partner organisations working across health and social care in Derby and Derbyshire. The Board is responsible, on behalf of Joined Up Care Derbyshire (JUCD), for overseeing system-wide delivery, performance improvement and transformation. The Board's aim is to collectively make improvements to outcomes for people with mental illness, learning disabilities and/or autism and to implement the requirements of the NHS Long Term Plan.

The Delivery Board met on 1 August 2024. This update shares key points of discussion from the meeting.

Transforming community mental health services: Living Well

An update was provided to the Delivery Board about the Living Well programme, which is transforming adult and older adult community mental health services in Derbyshire, in line with the national Community Mental Health Framework.

Transformation is taking place through a phased approach, with phase one creating a multi-agency approach which is now accessible via GP referral.

DHCFT, social care and VCSE partners have worked hard over the past 12 months to create new Living Well services that truly meet the needs of the local populations, with eight localities aligned to Place which have launched:

- High Peak (August 2023)
- Derby city (named Derby Wellbeing) (February 2023)
- Chesterfield (October 2023)
- North East Derbyshire and Bolsover (January 2024)
- Erewash (February 2024)
- Amber Valley (January 2024)
- Derbyshire Dales (March 2024)
- South Derbyshire (March 2024).

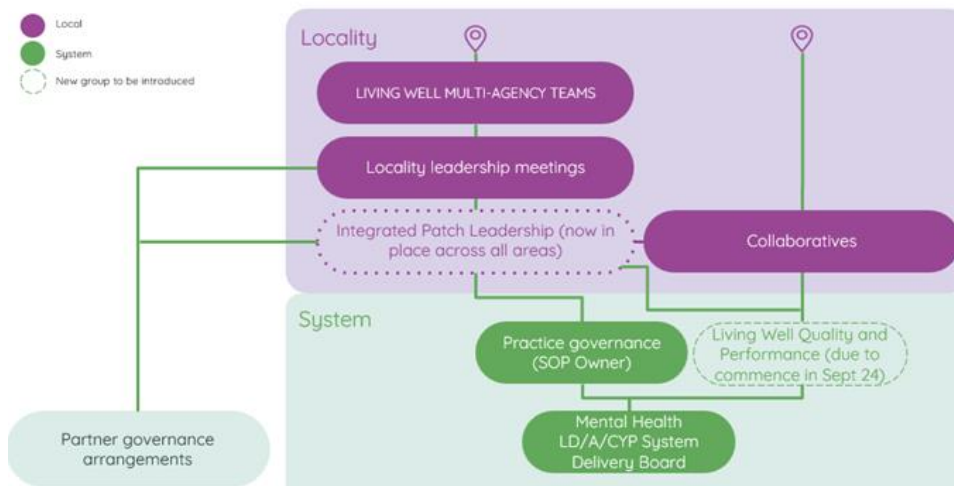
Phase two of the transformation (post April 2024) is focusing on movement between the short-term offer (Living Well) and the long-term offer (traditional CMHT) as well as expanding the 'front door' and developing a local network to improve flow. Work continues to embed the principles of phase one which include safely staffed teams, use of Living Well paperwork and a successful triage system. Teams will only start developing phase two once they are confident with the phase one principles and have operationalised these accordingly.

The services can be accessed by a multi-agency service single point of access (SPOA).

The team shared the metrics for performance and delivery that the national team have been tracking within the aspect of the community health transformation:

Measure of transformation	Metrics and indicators	Development status
Access	<ul style="list-style-type: none"> Increase number of people seen in all community mental health services (transformed and not-transformed) Increase number people seen in 'transformed' community mental health services (including in dedicated focus areas) Increase number people accessing IPS and physical health checks 	<ul style="list-style-type: none"> Target of 5% annual increase Progress on track nationally Target 370k by end of LTP and progress on track nationally. Data criteria developed. Target 55k and 390k by end of LTP Progress not on track nationally
Waiting times	<ul style="list-style-type: none"> Increase % of people receiving assessment, baseline outcome score, and social / clinical support within four weeks of asking for help <i>Proxy metric: Increase % of people receiving 2 contacts within four weeks of asking for help</i> Increase % of people experiencing first episode psychosis to start a NICE-recommended package of care with a specialist EIP service within 2 weeks of referral 	<ul style="list-style-type: none"> Waiting time standard guidance launched Proxy metric under development to track transformation Waiting time standard routinely monitored Progress on track nationally
Quality of care	<ul style="list-style-type: none"> Improve patient-reported outcomes scores in community mental health services Increase number of people accessing evidence-based psychological therapies Improve NICE concordance for people accessing EIP services 	<ul style="list-style-type: none"> National recommendations developed on specific PROMs tools Guidance under development Initial scoping underway Annual audit in place Progress not on track nationally

To ensure there is oversight on the performance and delivery of Living Well, the programme has developed the following governance and metric reporting arrangements which will be discussed during the August Living Well Programme Delivery Group.



This structure will replace the current transformation governance framework from March 2025.

Discussions with the Board included the continued work on population health and health inequalities, expanding the above metrics to understand what the impact is across the broader health and social care system.

Delivery Board members also acknowledged the workforce risks to the programme as the Living Well Programme team will not be in place beyond March 2025. The team updated that general reporting and governance will be embedded between now and next year, and the team will be working through how to mitigate the risks.

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The Delivery Board received an update from the Derbyshire Mental Health Helpline and Support Service which outlined a growing number of calls being received, creating an increased demand on the service.

Since June 2024 the service has seen an additional 1,000 calls into the helpline, following a direct transfer from NHS 111.

In order to help manage and respond to the additional demand, the team have introduced a range of triage tools, which seems to be effective. The team are also monitoring response times and the calls that do not get answered due to the busyness of the service.

The Board discussed bringing an update to the next Mental Health, Learning Disabilities and Autism Delivery Board with data from the helpline highlighting partner agencies' experiences - for example the use of the helpline within the police force.

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Performance update

The Delivery Board reflected on a generally strong set of recent performance figures:

- NHS Talking Therapies are seeing good recovery rates and access waiting times
- A positive number of referrals are being received by Dementia and Perinatal services. The Delivery Board particularly noted an increase in the number of local people accessing perinatal services in the last 12 months
- The number of inappropriate out of area placements for acute mental health care are lower than anticipated, but remain a challenge
- Waiting times to access an Autism assessment continue to remain high, but the number of assessments taking place each month is exceeding expectations.

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If you have any questions or comments on this bulletin, please email dhcft.communications@nhs.net

