

A decorative graphic consisting of approximately 20 white circles of varying sizes arranged in a loose, abstract pattern on a solid purple background. The circles are scattered across the upper and right portions of the slide.

Forward Thinking Birmingham

Update: March 2018



CQC report – published Feb 2018



- Report follows inspection of 0-18s Community Mental Health Services in July 2017
- Overall rating of 'Inadequate'
- Trust and service have already taken action to rectify a number of issues
- Continuing to work to improve services

What the report found

- Systems were not in place to keep patients safe
- Infection control principles were not always adhered to
- Medicines management was poor in some areas
- Not all patients had up-to-date care plans and risk assessments
- Staff could not always access electronic patient records
- Mandatory training rates in some areas were low
- Governance within the community services lacked co-ordination
- The service had a vacancy rate of 27% with 44% of these posts unfilled by agency staff

Overall rating for the service	
Overall rating for the service	Inadequate ●
Are services safe?	Inadequate ●
Are services effective?	Requires improvement ●
Are services caring?	Requires improvement ●
Are services responsive?	Inadequate ●
Are services well-led?	Inadequate ●

What we have done so far

- Set up a Taskforce within each service area to address issues
- Appointed a Chief Operating Officer for Mental Health Services and Mental Health Improvement Director
- Put in place revised governance processes following the CQC key lines of inquiry i.e. safe, well-led, effective, responsive, caring, as well as revised medicines management and infection control processes
- Developed care planning tools and run workshops to drive increase in quantity and quality of care plans
- Introduced regular care plan audits and dip samples to maintain standards
- Increased access to training and removed barriers to
- Set up improvement teams in each area to ensure staff from across the service are directly involved in driving change



What else have we achieved

- Dedicated Crisis helpline available between 8pm and 2am, alongside the existing 24/7 Crisis team
- Increased public awareness of mental health, through work with schools, support of wider initiatives including MH2K, social media and online information, outreach work through Pause
- Improved access to low-level interventions through Pause workshops and groups
- Supporting vulnerable young people at risk of sexual abuse or exploitation through work with RSVP and Bernardos

What next?

- Development of Forward Thinking Birmingham Quality Summit
- Range of activity as part of the Birmingham and Solihull Sustainability and Transformation Plan, including:
 - Piloting mental health support within Primary Care settings
 - Developing an integrated model of Urgent Care alongside other providers
 - Introducing a dedicated Personality Disorder pathway
 - Launching Crisis Cafes across the city
- Signed Memorandum of Understanding with Birmingham and Solihull Mental Health Foundation Trust to formalise joint working in some of these areas
- Developing a Forward Thinking Birmingham Training and Development Hub
- Improving access to early help for vulnerable children and young people through stronger links and joint-working with children's services

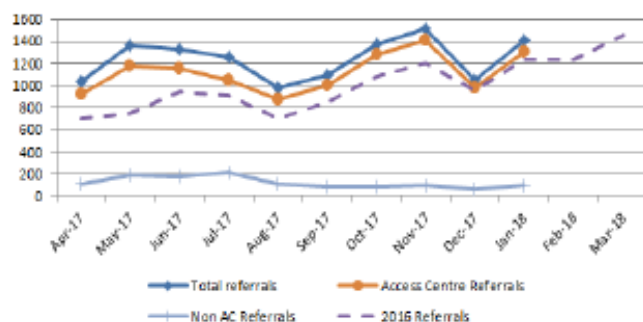


What risks remain?

- **Workforce challenges** – national shortages within some professions, recruitment and retention pressures experienced across the NHS
- **Funding** – current funding does not meet demand for services, NHS as a whole facing financial pressures
- **Demand** – demand for mental health services is far exceeding expectations, demand likely to increase in the short to mid-term given increased awareness of mental health

Referral data

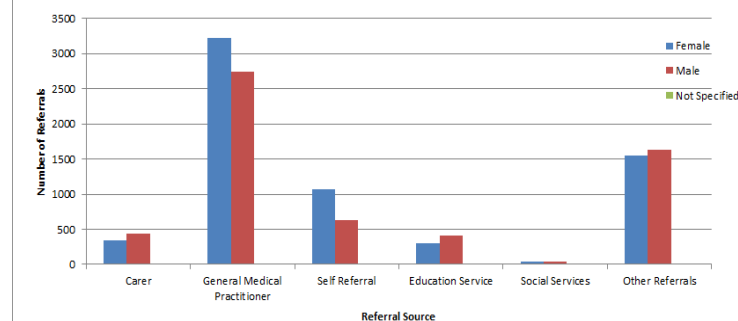
Referrals in Carenotes



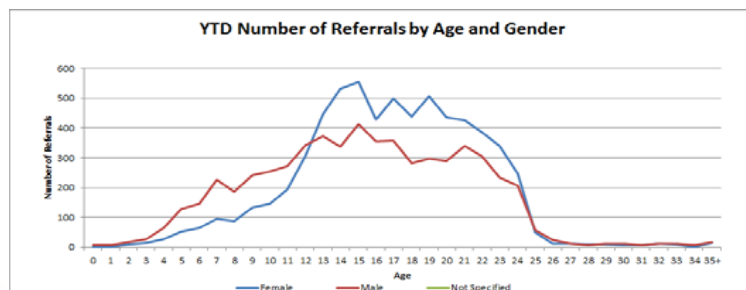
- Referral numbers for April 2017 – March 2018 predicted at 15,000, 30% over our activity target of 12,000 referrals

- We continue to see a higher number of referrals for females via the GP and self-referral routes
- Other referrals includes Police, out-of-area mental health services, health visitors and paediatrics

YTD Referrals Split by Gender and Source



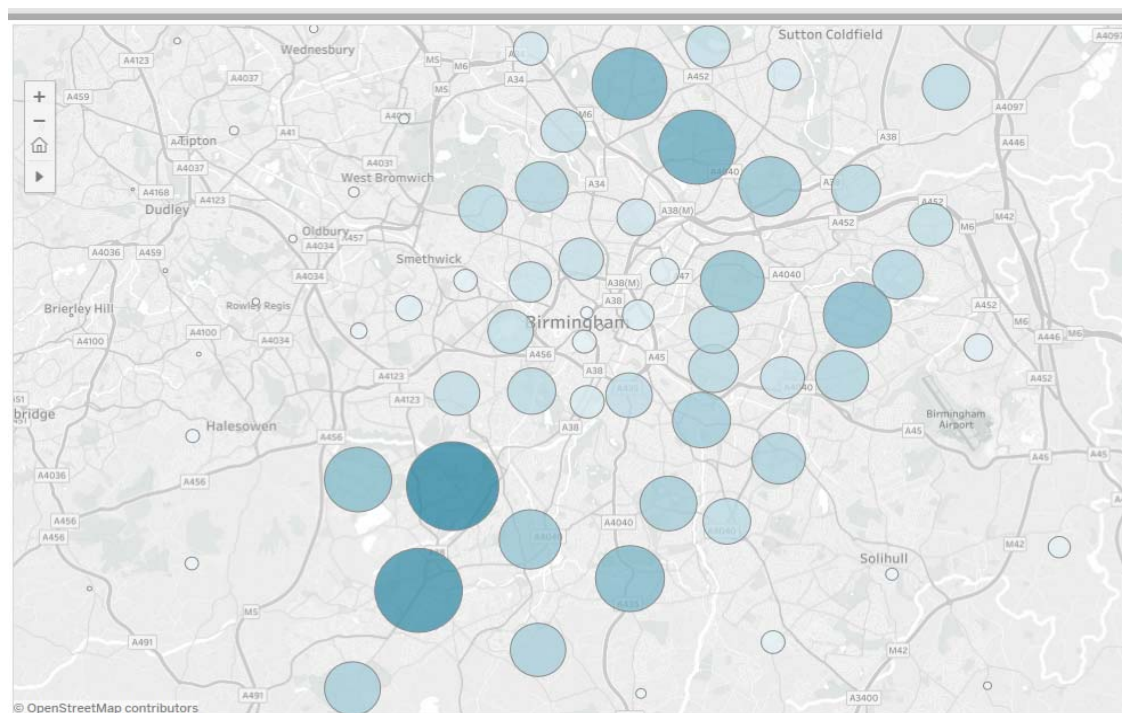
YTD Number of Referrals by Age and Gender



- Referral rates continue to be higher for females
- Peak referral age is 14-15 for both males and females



Referral data – where?



- Reviewing referral data for year-to-date 2017-18
- Larger/darker circles show areas with highest number of referrals
- High levels of referrals in the north (Stockland Green, Erdington, Kingstanding) and south-west (Shenley Fields, Weoley Castle, Northfield areas) of the city