

23 January 2020		ITEM: 8
Health and Wellbeing Overview and Scrutiny Committee		
Services for People with Personality Disorders and Complex Needs		
Wards and communities affected: All	Key Decision: Non Key	
Report of:		
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Accountable Assistant Director: N/A		
Accountable Director: N/A		
This report is a progress update on the development of services for people with Personality Disorders and Complex Needs.		

Executive Summary

The purpose of this report is to update the Health Overview & Scrutiny Committee on the development of services for people with Personality Disorders and Complex Needs. This paper builds upon a previous paper dated 12 March 2018, from the Principal Social Worker and Strategic Lead for Safeguarding and Complex Care and a presentation on the model to Thurrock HOSC in January 2018.

1. Recommendations

- 1.1 The Health and Wellbeing Overview and Scrutiny Committee is asked to discuss and note the current position regarding services for people who have a personality disorder.**

2. Introduction and Background

- 2.1** The International Classification of Mental and Behavioural Disorders (ICD-10) (World Health Organisation 1992), defines a personality disorder as: *'a severe disturbance in the characterological condition and behavioural tendencies of the individual, usually involving several areas of the personality, and nearly always associated with considerable personal and social disruption'*.
- 2.2** The development of services for People with Personality Disorders and Complex Needs links with the transformational intent within the NHS Long Term Plan (NHS LTP), published in December 2018. The development of

services for people with Personality Disorders and Complex Needs has been developed for Essex. This pathway was developed with input from people with lived experience as well as with representatives from the statutory and voluntary sector.

For the Mid and South Essex Health and Care Partnership (formerly Mid & South Essex STP) the development of the Personality Disorders (PD) service forms an integral part of the proposed strategy and investment plans for Mental Health services across the Partnership.

The model has also been discussed and presented to a wide audience, including stakeholders, clinical reference groups, professional staff bodies, local staff, Health & Wellbeing Boards, Primary Care groups, and service user groups. Various elements of the service, including proposed joint working between secondary and IAPT services, training for staff, clinical skills training, group interventions and interventions with high intensity service users have been piloted successfully to test elements of the model. The pathway is attached in Appendix 1.

In summary, adjustments to our existing service will entail:-

- Those patients with Personality Disorder diagnoses occupying in-patient beds, according to NICE guidance, are best treated in the community, and should occupy in-patient beds for a recommended stay of 72 hours or less.
- A new and bespoke staff training programme to improve awareness and ensure the identification and diagnosis of PD is provided, including problem formulation training and values and resilience training aimed at ensuring the right care and treatment is provided in a timely way in the most appropriate setting.
- A specialist multi-disciplinary team will provide treatments and interventions for the most complex cases, hold those with severe complex needs on the caseload (thereby supporting the care co-ordination process) and facilitate the PD Knowledge and Skills training programme.
- PD treatment interventions will be expanded and provided throughout and across services, rather than through a specialist referral pathway, with the development and identification of PD Leads throughout all EPUT services to ensure that PD is properly considered in treatment plans.
- Enhanced clinical skills training will be provided, including group-based interventions and specialist psychological interventions for key staff.
- In-patient admissions for people with PD will be brief, targeted towards stabilisation, and transitioned to Community Mental Health teams, or primary care services.
- A range of innovative initiatives and interventions are to be developed and supported, such as telehealth, modularised interventions, PHC-based support and psychoeducation groups and trauma-focused therapy.
- The service will work with partners to develop a multi-agency approach to the management of frequent users of services. A *service user network* is proposed, to provide user support and engagement opportunities in collaboration with wider community assets and resources.

The Personality Disorder and Complex Needs pathway is integrated with wider primary care services and will provide evidence-based interventions and enhanced self-care. It emphasises prevention of crisis episodes through being linked with both urgent care and primary care pathways delivering multiple benefits for patients and the system.

Progress during 2019 and Next Steps

The pathway was included in a Business Case for the development of this service during 2019. The Business Case was approved by CCG Boards and the Mental Health Partnership Board in September 2019 resulting in a further investment of more than £550,000 in this service for the residents of Mid & South Essex Health and Care Partnership.

In addition to the utilisation of existing skills and knowledge from medical and psychology staff across the Partnership, there is a large component within the Business Case for training. A range of additional training for staff engaged in the delivery of services to this client group is planned, including:

- Knowledge and Understanding Framework (KUF) to enhance clinical skills and problem recognition training. Thirty KUF trainers will be trained (this is a three day training programme).
- Six clinicians will be trained in Intensive Dialectical Behavior Therapy (ten days training).
- Fourteen staff trained in Dialectical Behavior Therapy Dialectical Behavior Therapy skills (five days training).
- Eight staff trained in Eye Movement Desensitization and Reprocessing (EMDR) for Trauma.
- Staff trained in Cognitive Analytic Therapy and two staff trained in Family Systemic skills training.

The service aims to introduce enhancements to the pathway from April 2020, and a detailed implementation plan is now in place. The implementation plan has a range of actions including:

- Developing referral pathways,
- New arrangements for people with complex needs,
- Training for NHS staff and partners,
- Engagement with primary care and other agencies from the statutory and voluntary sectors. This will include on IAPT, Drug & Alcohol, Police and Ambulance services,
- Strong clinical engagement on operational policies and procedures,
- Linkages to the other initiatives within the development plan for mental health services e.g. 24 Mental Health Emergency Response and Crisis Care Service,
- Recruitment of additional staff to support the new pathway,

- Developing PD leads with each secondary core service,
- Establishment of a virtual team with broad and explicit expertise across the system,
- Establish and agree outcome and evaluation outcomes,
- Review and transition clinical treatment structure e.g. developing group problem solving and crisis management for this client group.

The implementation will be closely evaluated for operational and clinical effectiveness.

3. Issues, Options and Analysis of Options

- 3.1 Changes to the pathway for people with Personality Disorders and complex needs requires a system wide response. A strong part of the investment relates to working across statutory and voluntary services as a number of agencies are involved in supporting this client group. The PD and CN service is one of a number of initiatives for mental health services, and the other initiatives will need to reflect the additional arrangements being put in place.

4. Reasons for Recommendation

- 4.1 N/A

5. Consultation (including Overview and Scrutiny, if applicable)

- 5.1 N/A

6. Impact on corporate policies, priorities, performance and community impact

- 6.1 No.

7. Implications

7.1 Financial

The local health system is investing £55,000 to enhance this pathway.

7.2 Legal

There are no legal issues arising from this report.

7.3 Diversity and Equality

There are no diversity and equality issues arising from this report.

7.4 Other implications (where significant) – i.e. Staff, Health, Sustainability, Crime and Disorder, or Impact on Looked After Children)

EPUT is leading on this enhanced pathway and is liaising with other statutory and voluntary sector organisations.

8. Background papers used in preparing the report

- 8.1 This paper builds upon a previous paper dated 12 March 2018, from the Principal Social Worker and Strategic Lead for Safeguarding and Complex Care and a presentation on the model to Thurrock HOSC in January 2018.

9. Appendices to the report

Appendix 1 – Summary of Personality Disorder and Complex Needs Pathway.

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