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Caring Subcommittee

Tuesday, 16 January 2024

Wednesday, 24 January 2024 0.02 Chamber - Quadrant, The Silverlink North, Cobalt Business Park, North Tyneside, NE27 0BY **commencing at 6.00 pm**.

Agenda Page
Item

5. Overview of North Tyneside Safehaven and Northumberland 1 - 8 and North Tyneside Universal Crisis Service

To receive an update on:

- the plan and progress of providing the North Tyneside ICB area with a crisis alternative in the form of a third-sector led Safehaven offer; and
- Northumberland and North Tyneside Universal Crisis service, providing support to those presenting in a mental health crisis.

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Members of the Caring Sub-committee

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Councillor Liam Bones Councillor Julie Cruddas
Councillor Michelle Fox Councillor Tracy Hallway

Councillor Andy Holdsworth Councillor Joe Kirwin

Councillor Louise Marshall Councillor Pam McIntyre

Councillor Martin Murphy Councillor Tricia Neira

Meeting: Caring Sub-Committee

Date: 24 January 2024

Title: Overview of North Tyneside Safehaven and

Northumberland and North Tyneside Universal Crisis service

Author: Jonanthan Flanagan, Programme Manager,

Cumbria, Northumberland, Tyne and Wear

NHS Foundation Trust (CNTW)

Service: Adult Social Care

Wards affected: All wards

1. Purpose of Report

- 1.1 Provide the Sub-Committee with an update on agreed plan and progress of providing the North Tyneside ICB area with a crisis alternative in the form of a third-sector led Safehaven offer.
- 1.2 Provide the committee with an update on Northumberland and North Tyneside Universal Crisis service, providing support to those presenting in a mental health crisis.
- 1.3 To respond to any further questions the Sub-Committee may have in relation to North Tyneside Safehaven.
- 1.4 To respond to any further questions the Sub-Committee may have in relation to Northumberland and North Tyneside Universal Crisis service.

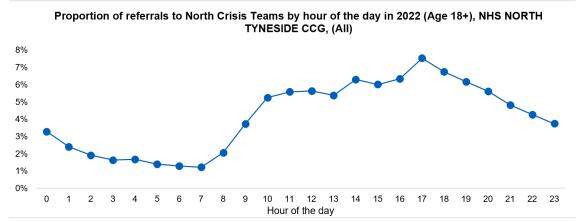
2. Recommendations

Members of the Sub-Committee members will be asked to note the contents of the report and seek responses to any further questions in relation to North Tyneside Safehaven and Northumberland and North Tyneside Universal Crisis service.

3. Information

3.1 Background information

- 3.1.1 The Office for National Statistics (2022) reported that the population of North Tyneside was approximately 209,000 people following the last Census in 20211. In 2019, 14.4% of the population was income-deprived and of the 316 local authority areas in England, North Tyneside was ranked as the 85th most income-deprived. Additionally, 36 of the 131 neighbourhoods in North Tyneside were among the 20% most income-deprived in England.
- 3.1.2 The association between rates of mental illness and poverty, unemployment and social isolation is well established. Evidence also suggests an association between increased alcohol consumption, poor diet and mental illness.
- 3.1.3 The Mental Health and Wellbeing Joint Strategic Needs Assessment dataset reported in 2017 that the estimated prevalence of common mental disorders for people aged 16 and over in North Tyneside was 17.3% (20,082 people). This was greater than the English average of 19.9% and was close to the English median value of 17.75%.
- 3.1.4 Additionally, from 2016/17 to 2021/22, the number of North Tyneside residents in contact with secondary mental health, learning disabilities and autism services rose from 8,600 to 12,600 people. In 2022, there were 6,574 contacts by North Tyneside residents with CNTW's Northumberland and North



Tyneside Crisis Team, at a rate of around 547 contacts per month. Local demand for support from the Crisis Team varied by time of day, increasing from around 1pm, peaking at 5pm and slowly reducing throughout the night.

3.1.5 The need for alternative models of mental health service provision was identified within North Tyneside CCG's 'Commissioning Intentions 2019/20' strategy which outlined a local need for non-clinical support services for people experiencing mental health crisis who did not meet the clinical threshold for support. A 'Together in a Crisis' service was commissioned to deliver a community mental health support service to bridge this gap. This service is open access, allowing North Tyneside residents to self-refer in addition to accepting referrals from professionals.

3.2 North Tyneside Safehaven

In 2022, CNTW and NENC ICB applied for NHS England capital funding to support the development of physical safe haven space to support with mental health crisis. Revenue costs were funded through the ICB and funding was identified for the refurbishment of a Safe Haven venue and a steering group was developed to support service model design. Service modelling has included engagement with service users and the wider Community Mental Health Transformation working groups to identify the essential scope and features of the proposed service.

The project group, formed in late 2022 and inclusive of representatives of service users and carers, took onboard a co-produced view to provide a safehaven service with the following principles:

- To provide safe, high quality and flexible support to people experiencing mental health crisis.
- To provide a 'whole person' approach to the delivery of mental health crisis services which accounts for both the immediate distress experienced by the person as well as any contributory factors.
- To develop a positive patient experience and improve mental health outcomes for those accessing the service.
- Increase the proportion of people who are assisted with a non-clinical urgent mental health need.
- To reduce demand on statutory urgent care resources, including repeat access, by building resilience and asset-based capacity of people worked with to selfmanage their difficulties.
- Promote 'mental health self-management skills' and wider approaches to recovery
- Improve the proportion of people who have a plan to improve their mental health and emotional resilience.
- Contribute to reducing the stigma and discrimination associated with mental ill health.
- Support families and carers to care for their own needs as well as those of the person in mental health crisis.

- Improving service user knowledge of services and resources available to them locally.
- Support the service user to make use of peer-support and other community resources.
- Support the service user to access relevant statutory and third sector services.
- To ensure that staff within the service are appropriately trained and experienced to appropriately support people to address the social determinants of mental health crisis including financial, employment, relationship and other social stressors.
- To ensure that staff within the service are trained and experienced to appropriately support people with substance misuse.
- Continually develop and refine the service to meet user's needs.
- To deliver the services in close collaboration with CNTW and other key statutory partners to ensure a safe and seamless experience for service users
- When needed support to access assessment for urgent mental health support.

A dedicated expert by experience network within the North Tyneside transformation programme were also engaged with by Healthwatch and Launchpad to create an insights report on views, wants and needs of the local community for a safehaven crisis alternative offer which was heavily considered in the creation of the above principles.

With the recommendations from the above in place, a project group worked to plan, fund and launch the safehaven service. From the insights report outcomes it was highlighted that Wallsend would be a preferential location for the service so an options appraisal of potential venues was carried out based on Janlocation, space available, safety, and accessibility. The outcome of the appraisal was the choice of the Wallsend Memorial Hall as the host venue for the service, with good space available needing minimal estates work to create the layout needed. It is also in close proximity to local GP services and public transport routes.

The Safe Haven will operate 7 days per week between 2pm and 10pm. These operating hours allow for the delivery of the Safe Haven during the hours where support is most required by local residents, accounting for the hours of most demand for the local Crisis Team.

The North Tyneside Safe Haven will have two key support access routes:

- 1. The service will offer a physical mental health safe haven space for people in North Tyneside who are experiencing a mental health crisis to access face to face support in a safe and non-clinical environment.
- 2. The service will offer a telephone support option for people experiencing a mental health crisis who cannot or choose not to access the service in-person.

People who access the service will be offered 1:1 mental health support either in person or by telephone depending on the person's preferred method from suitably trained non-clinical staff working in Mental Health Support Worker and Peer Support Worker roles. 1:1 intervention will focus on the delivery of interventions designed to contain and reduce the person's distress as well as the risks associated with the mental health crisis. Please find the pathway of access included in the appendices.

The service, from go-live date, will be managed and staffed by Everyturn for an agreed interim of 12 months upon which time tenders will be invited from the wider 3rd Sector. It has also been agreed to review ongoing the use of the space for co-working with additional VCSE providers to enhance the offer and to create more options for support to the local population.

3.3 Overview of Northumberland and North Tyneside Universal Crisis Team

Northumberland and North Tyneside Universal Crisis Team (UCT) is an ageless service, providing support to those presenting in a mental health crisis. There are three defined pathways within UCT; Young Persons Pathway, Older Persons Pathway and Working Age Adult Pathway.

The Young Persons Pathway offers treatment to individuals up to the age of 18 years. Within the Young Persons Pathway, there is an Enhanced Follow up Pathway, this enables any service user up to the age of 25, who has presented at A&E following an episode of self-harm, to be assessed by the Young Persons Pathway, withing 72 hours.

The Older Persons Pathway offers support and treatment to those aged 65 years and over. The Working Age Adult (WAA) Pathway provides care and treatment to those individuals predominantly aged 65 years and over, however there is flexibility within this, should a person's needs be more suited to the WAA Pathway.

The Working Age Adult Pathway consists of experienced clinical practitioners including, consultant psychiatrists, junior doctors, non-medical prescribers, specialist nurses, clinical nurse specialists, a clinical psychologist, peer support workers, clinical support assistants, call handlers, a carer lead, and a specialist pharmacist.

The UCT operates 24 hours a day, 7 days a week, with no restrictions on referrers, for example, a self-referral, referral from a friend, carer, relative, professional. A referral can be made by contacting the 24/7 telephone number, there is also a text message service for those who are hearing impaired or have communication difficulties.

The team offers a telephone triage function, assessment, home based treatment, and carer support to those experiencing a mental health crisis. The team will work with service users and their carers to formulate the most appropriate plan, this may

include an onward referral to another service within CNTW or to our partners within the local community.

The main focus of the service is to treat individuals in their home, where it is deemed safe to do so. The UCT aims to deliver the least restrictive intervention. As reported in a national survey by Lamb et al., (2018), home based treatment is recognised as a safe and effective way to treat service users in their own home. It is described as a supportive intervention whereby service users recover quicker in their own surroundings, with psychological intervention and support from their carers and family.

Home based treatment will involve co-producing a care plan of a service user's needs, involving the service user and their family/carer. The plan will be continuously reviewed and amended when needed. The service user will have access to the full multi-disciplinary team (MDT) as outlined earlier, and their progress/treatment plan will be discussed within a daily MDT meeting.

Within the team, there are experienced peer support workers who work alongside service users and their carer's, sharing lived experiences and focusing on developing Wellness Recovery Action Plans (WRAP).

If it is felt home based treatment is not to most appropriate plan, the team are able to offer informal admission to a psychiatric hospital. The need for this will be reviewed at every contact and risk assessed. Prior to discharge from the team, the discharge plan will be discussed with the service user and carer/family, this will also be communicated with the service user's GP.

4 Background Information

- 4.1 Information on safehaven is available on everyturn latest news release

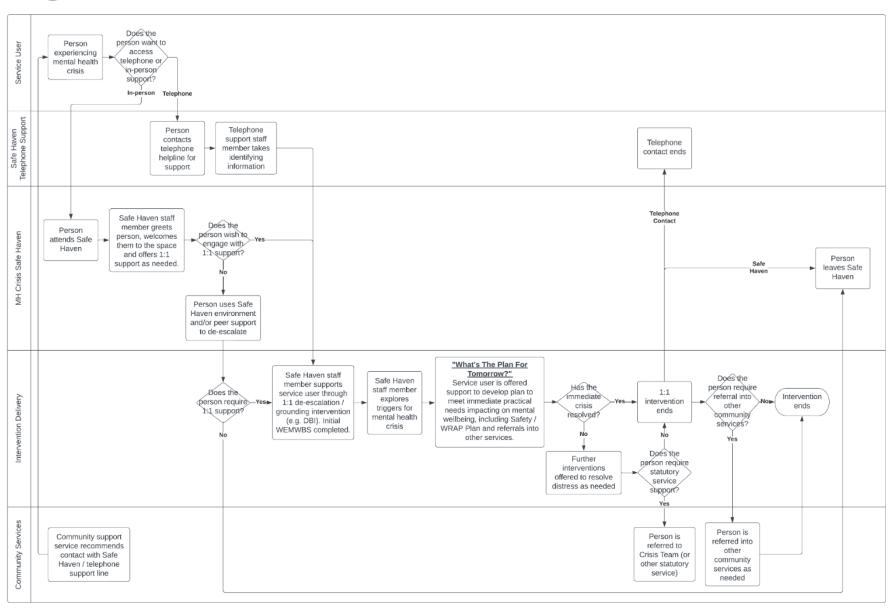
 New Mental Health Crisis Safe Havens to Open Across North East After £1m

 Investment | Everyturn
- 4.2 Information on universal crisis team is available on CNTW resources https://www.cntw.nhs.uk/resource-library/universal-crisis-team-northumberland-north-tyneside/

5 Appendices

Appendix 1: North Tyneside Safe Haven – Service User Pathway





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