

Enter and View Report

Integrated Mental Health Team (IMHT): Cannock, Rugeley and Great Haywood, based at Park House, 12 Park Road, Cannock, Staffs., WS11 IJN



Healthwatch Staffordshire

Support Staffordshire, Civic Centre, Riverside, Stafford ST16 3AQ

Website www.healthwatchstaffordshire.co.uk

Email enquiries@healthwatchstaffordshire.co.uk

Twitter https://twitter.com/HWStaffordshire

Facebook https://www.facebook.com/HWStaffordshireOfficial

Instagram https://www.instagram.com/hwstaffordshire/

0800 051 8371

Report on Enter and View Visit Undertaken by Healthwatch Staffordshire on 1st August 2023

Service Visited: Integrated Mental Health Team (IMHT) S.S.

IMHT South Staffordshire – Cannock, Rugeley and Great Haywood, based at:

'Park House', 12 Park Road, Cannock, Staffordshire, WS11 1JT.

Telephone: 0300 303 3428

Context of Visit:

Since the Covid 19 pandemic and the cost-of-living crisis, reported mental health issues have substantially increased. Under the national mental health strategy there has been investment. Recently, there was a public consultation undertaken by Staffordshire and Stoke Integrated Care Board on finding a long-term solution for in-patient services. The visit to this service was a routine Quality Assurance visit, to find out from the team what was working and if any improvement or measures needed to be considered.

Review Method:

This visit was undertaken jointly between Midlands Partnership Foundation Trust, who were conducting an internal quality visit and Healthwatch Staffordshire, who were conducting an independent Enter and View. By combining the visits, the aim was to gain a comprehensive view of the service, with minimal disruption to daily operational delivery.

Before the visit, the Quality Standards Assurance Visit Lead had been in contact with the Operational Lead of the service and had independently completed surveys with staff to gain insight. This feedback was positive for staff, stating that the new leadership team were very proactive, and they have achieved significant progress since joining the team; the trainee Advanced Nurse Practitioner joined the team in Feb.23, with the Operational Neighbourhood Lead from April 2023 onwards, and both built excellent rapport with staff.

The Healthwatch Engagement Officer looked at the database it holds to see if there was any feedback from service users and carers via the Healthwatch Enquiries Line; no feedback specifically found on the IMHT services, based at the Park House, within the Healthwatch Staffs. database.

The visit consisted of an overview meeting with the Operational Lead and the review team. The review team then split up and was talking to various members of staff.

Healthwatch (HW) officer spoke to service users about their experience of using the service, which was overall positive; the HW officer spoke to the Business Admin Officer at Reception desk and was also able to observe interactions between patients from point of arrival, to point of exiting the premises, and briefly spoke to some of them, which again was positive.

The review team then met up again at the end of the visit with the operational lead for final clarifications and feedback.

Both Healthwatch and the MPFT Quality Standards Team are producing their reports individually and this report is an independent view from Healthwatch. Thanks go to all Mental Health & Social Inclusion Hub staff who made us welcome and participated in the process.

The Review Team:

The visiting team consisted of:

- Daniela Ballantine Engagement Officer, Healthwatch Staffordshire
- Quality Standards Assurance visit (QSAV) Programme
 Lead, Quality Assurance and Effectiveness Team, MPFT
- NHS MPFT; Non-executive Director;
- Trust Governor;
- Quality Lead, Telford and Wrekin CMHT.
- Quality Lead, Brockington and Baby Unit
- Integrated Mental Health Team: Cannock, Rugeley & Great Haywood; Operational Neighbourhood Lead.
- Integrated Mental Health Team: Cannock, Rugeley &
 Great Haywood; Trainee Advanced Nurse Practitioner.

Service Outline:

As part of the Community Mental Health Transformation, the Integrated Mental Health Teams work within neighbourhoods to deliver place-based care, based on need and not diagnosis. The Integrated Mental Health teams support adults who experience a range of mental health problems.

The team provides assessment, intervention, and treatments for people experiencing complex mental health difficulties, which drastically impact

their daily life. This may include anxiety disorders, complex trauma, mood disorders, psychosis, and other complex mental health conditions.

There are Integrated Mental Health Teams (IMHT) in the following areas in South Staffordshire: Burntwood, Lichfield & Mercian; East (Burton and Uttoxeter); Stafford and Seisdon; Cannock, Rugeley & Great Haywood.

The Integrated Mental Health Team (IMHT) provides secondary community mental health services in South Staffordshire areas, including Cannock, Rugeley and Great Haywood - the services are based at the 'Park House', 12 Park Road, Cannock, Staffs., WS11 IJT.

The teams receive referrals from GPs and other organisations, including self-referrals into the NHS MPFT Access team. The staff working within this part of the service includes the following specialities: Community Mental Health Nurses, Community Mental Health Practitioners (CMHPs), Healthcare Support Workers, Psychologists, Occupational Therapists, Medical Staffing, Psychiatrists, Social Workers; these are examples, but not an exhaustive list.

It is evident that these are multi-disciplinary teams; they provide community and in-patient care. The referrals get allocated accordingly, into the appropriate team & service. The referrals are for anybody aged 16 or over. Many of the services are provided in collaboration with statutory and non-statutory partner agencies: 'Partner Provider Services' (PPS).

The services are organised into a series of *pathways*: Non-psychosis team, Psychosis team, Intensive like-skills (ILS) team, PPS's, Memory service and dementia team; additionally, there are: Staffordshire and Stoke-on-Trent Talking Therapies; Eating Disorders team; the (EIP) Early Intervention Pathway or At Risk Mental Health (ARMS) – South Staffordshire; Integrated Co-occurring Needs (ICON), Older Adults, EIP Shropshire, Telford and Wrekin.

The Early Interventions Pathway (EIP) service is a multidisciplinary community mental health service that provides treatment and support to people experiencing first-episode psychosis, or are at high risk of developing psychosis, in South Staffordshire.

Mental Health and Social Inclusion Hub provides a First Point of contact for Community Mental health in South Staffordshire districts, including: Cannock, Rugeley and Great Haywood areas.

In recent times, the Integrated Mental Health Team (IMHT) service has undergone transformation; the service has changed its ways and ideas of working and evolved into the service it is today.

Staffing:

As highlighted above, the service has undergone transformation, therefore the changes had a detrimental impact on staff retention levels, especially during the previous year.

The staff working within the service is a multi-disciplinary team of operational lead, trainee Advanced Nurse Practitioner, Psychologists and Occupational Therapists, CPN's, other CMHT professionals, and Admin, based at the Park House.

Staff retention has improved since new leadership took over round March-April'23 onwards, but other important factors can impact this. The team all seem to be well supported, as support and well-being is a high priority to the managers and all colleagues.

The new leadership have been actively promoting a visible presence for the service; thus, staff work from the office, seeing patients faceto-face. This is working well, except for the reliability of the wi-fi in some meeting rooms and offices, which can disrupt calls recording and access to notes on systems where potentially, work could be lost and, in such cases, had to be re-entered or re-typed.

We were told during the visit that, although they have only been in post since February for the ANP and April for the Operational Lead, they have made considerable positive changes. They have ideas for the future to make the service a more holistic approach so that service users' main problems can all be dealt with in-house, effectively.

The team seem very supportive of the changes, and it shows that the management style is appreciated. Staff are feeling valued and supported. Staff were well motivated and working as a cohesive team.

Staff have regular supervision monthly, plus a six-week clinical supervision that discusses rationale decision-making & progress, and an annual appraisal. It also offers additional staff training, wellness plan for staff, access to resources (buddies/ champions, team chat, Team Prevent, Occupational health).

Referrals and Wait Times:

The team receives referrals directly from a service user, concerned family members looking for advice, or via GPs or other professionals.

Referrals and Wait Times (continued):

Referrals are received via the 'single point of access' and initially dealt with as they come through, to the call centre. The staff have a system that has multiple signposting avenues. As the cases come to the call handler, it is decided what action needs to be taken and triaged; sometimes passed to a more senior member of staff within the office, if needed. It is then decided if the service can assist or refer to other services, any action is agreed upon and communicated to service users.

Staff can refer from the inclusion hub (=single point of access) to the relevant IMHT, if or when a face-to-face appointment is needed. From a previous report into that service, we were aware that the waiting list at the Inclusion hub had increased to 82 cases, with approximately a 2½ week wait. However, the manager is aware of this and feels it is due to the new ADHD workload (as 0 before) and is hopeful it will be manageable & back down by the end of September.

Staff at the IMHT admitted that caseloads can be high; however, leads encourage them on drawing on the full range of resources across the team, including signposting, empowering clients to use a range of self-help tools, and working with other partners offering a more holistic approach.

Contact Details for Professionals and the Public:

The contact details for adult mental health services in Staffordshire are widely advertised and are set out below:

South Staffordshire Mental Health & Social Inclusion Hub:

Tel: 0808 196 3002 Email: mhsi.staffordshire@mpft.nhs.uk

Service User Experiences:

The Healthwatch Engagement Officer spoke to some patients, which were at the venue for their monthly reviews and to pick up their medication. The patients spoke very highly of the team (managers, therapists, nurses, & administrative staff), and they were grateful for the good quality of care they have been receiving over a period of time, supporting them in their recovery.

The service users were grateful to the team for their patience and continuous support.

"I am so grateful to the staff, for their kindness and empathy".

"Staff help me all the time here, at 'Park House'. They are fantastic!"

"There has been an easy access into the service, and I have developed good relationships with staff. They are brilliant!"

Location of premises and conditions at the venue:

Park House is conveniently situated in Cannock Town Centre, two minutes' walk from the main bus stop, with very good public transport links. If travelling by car, residents such as patients and visitors, benefit from car parking facilities. The car parking has adequate bays, including for people who park, displaying a disabled badge. Mobility aspects have been considered: there are ramps for wheelchair access and, inside the building, doors are wide enough; and there is a lift, for getting access onto the upper floor.

The team explained that they liaise with the occupational therapists, if any other additional adaptations are needed for their service users.

They also gave examples of making services accessible, through the use of large print information leaflets, using language interpreters, or BSL, and other similar initiatives, aimed at removing any potential barriers that patients might face.

The premises were very clean, tidy, and presentable, with a very pleasant décor, and a lovely Welcome & waiting area, situated opposite the main reception. There were colourful pictures of flowers and nature on the walls, which create a warm atmosphere. Water was easily accessible via Water stations. There was sufficient lighting in all areas. Sink and sanitizer dispensers were available on the ground floor, plus toilets (standard and for people with disabilities); the same on the first floor.

Healthwatch Engagement officer remarked that hygiene was excellent, and that Posters were encouraging all, to regularly wipe touchpoints after use, to reduce the risks of spreading viruses.

There were various information points, with the central one in the waiting area, where CQC ratings were clearly displayed. The Overall rating for this service is: 'Good'.

There was a wealth of information on support services, such as about: 'Changes' Wellbeing Services, NHS transformation of mental health services, Help Beat Dementia, 'Step On' Programme – an Employment Support Service within the NHS MPFT, genetic Links to GLAD – a study on Anxiety and Depression that residents can opt to take part into.

Service User and Carer Surveys on Community Mental Health Services of NHS/ MPFT, were also clearly displayed, for residents to complete.

For the Safety of staff and service users, each room was equipped with panic alarms & clear notices in visible places regarding the Staff Atack System (SAS) and how to operate in case of an emergency. Legislative Framework displayed, informing visitors of Section 119/120 Criminal Justice & Immigration Act 2008, regarding potential disturbance or nuisance from non-patients coming onto the NHS Trust premises.

New and existing Partnerships:

IMHT have partnered with several different providers across South Staffordshire. These partner providers will offer support with the wider aspects that impact mental well-being, such as housing, financial well-being support and lifestyle services.

Maintaining People in Community Settings:

- It was reported, that being able to offer a more personalised and integrated approach to supporting and treating service users locally, means it is now possible to successfully case manage more people at home. Staff recruitment and retention have improved, and combined with the addition of partners, has made it possible to consistently deliver a more effective service.
- Staff use a system tracker to look at a Service user's case, to see what is working and what may be needed.
- There is also a Platform called 'Silver Cloud' that service users can use independently once a staff member has signed them up, this gives access to tools for Managing Anxiety, Low mood etc., to empower a service user's independence & well-being.

Summary

This was the first time Healthwatch has done a joint quality visit with MPFT's Quality Team *for this geographical area of the service*. It was a positive visit, with The Integrated Mental Health Teams – South Staffordshire.

Staff and managers were able to demonstrate considerable progress in the service, with a holistic approach that is Needs led. The manager has a good insight into what is needed to support both staff and service users.

Strengths:

- Evidence of positive team leadership and management, that has created a supportive environment within which staff and partners operate.
- Staff wellbeing has been prioritised by the Operational Neighbourhood Lead and the Advanced Nurse Practitioner;

the leadership team - are to be commended for this, as staff morale and confidence - have greatly improved, in the past six months or over, since the new leadership team has taken over; team culture has improved, as well.

- Staff all have a visible presence, as they are encouraged to work from the office base and see patients face-to-face.
- Robust buddy system within the IMHT team and good support right from the start through the Induction; then through continuous professional development (CPD).
- Acknowledging and continuously trying to improve staff recruitment and retention.
- Serious Mental Health (SMI) pathways have been working well, with good relationships between the IHMT and the GP's.
- Staff surveys have indicated a major improvement in their motivation levels, and how they perceive leadership to be supportive of their everyday work.
- Compliments from service users of positive experiences.
- Evidence of IMHT using a holistic approach, while also valuing early interventions pathways (EIP), and using the correct pathway for each individual case.

Needs:

Staff report that they have issues with the reliability
of the Wi-Fi system in some areas of the building,
such as: meeting rooms or offices, which makes it
problematic at times for professionals, to record into
the appropriate systems.

- More staffing resources are needed to manage additional demands.
- To reduce caseloads, if possible, as it has proven rather difficult to have to cope with caseloads that can vary between 35 – 51/55 cases, for each IMHT professional or MPFT clinician.
- To reduce the waiting list to a more manageable level, although waiting lists do vary: some patients do not have to wait that long, while others might have to wait longer.
- There is a recognised gap in neurodiversity, which is both a local issue, as well as a national problem, in terms of meeting the needs of patients with neurodivergent conditions (Autism, ADHD etc.); the team is aware of this and trying to address issues.

Useful link/s:

Community Mental Health Transformation

Next Steps

The report will now be published on our website and copies will be forwarded to MPFT.