Mental Health Crisis Care

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Despite a lot of positive work occurring, there continues to be unacceptable variations in the help, care and support available to people in a mental health crisis:

- Issues exist in the **quality and accessibility** of mental health crisis services;
- Significant **fragmentation** of care occurs between different crisis service providers;
- Mental health crisis patients feel they **do not get the support** they need, particularly in Emergency Departments;
- This is occurring whilst the incidences of mental health crisis and section 136 detentions are increasing throughout London.

**There continues to be a need to ensure parity of esteem for those patients in mental health crisis compared to those in a physical health crisis.**
## Mental Health Crisis Care within U&EC

### Ensuring parity of esteem

We need to tackle the differences between the treatment received by people with physical as opposed to mental health needs when they are at their most vulnerable.

The difference in treatment is apparent throughout the crisis pathway, examples are provided below:

<table>
<thead>
<tr>
<th>Mental Health Crisis Pathway</th>
<th>Access to crisis care support</th>
<th>Emergency &amp; urgent access to crisis care</th>
<th>Quality of treatment of crisis care</th>
<th>Recovery and staying well</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Variation in knowledge of mental health in NHS111</td>
<td>Variation in MH facilities and resources in U&amp;EC settings</td>
<td>Lack of transparency of referral routes for those in crisis</td>
<td>Ongoing delays in crisis care</td>
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<td>Lack of understanding about roles and responsibilities when faced with someone in a crisis</td>
<td>Inconsistent MH training levels amongst clinical staff</td>
<td>Limited provision of crisis services (e.g. AMHP)</td>
<td>Unsatisfactory patient experience (14% of people who have experienced a crisis felt the care received provided the right response).</td>
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</tbody>
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It is vital that any changes to the urgent and emergency care system are taken forward in a way which takes full account of people with emergency mental health needs.
Mental Health Crisis Care within U&EC

The **Mental Health Crisis Care Concordat** and **London’s Mental Health Crisis Commissioning Standards** were developed in recognition of issues within the crisis care system.

The Mental Health Crisis Commissioning standards (which align with the Mental Health Crisis Care Concordat) are included in the UEC facilities specifications.

**London’s U&EC Networks are asked to implement the standards by:**

- Ensuring mental health crisis care is fully incorporated into the U&EC network plans;
- Supporting U&EC facilities to achieve the crisis commissioning standards;
- Ensuring robust links with London’s crisis concordat groups as well as both national and pan-London crisis care work programmes.
With extensive engagement across the mental health crisis system the MH crisis care subgroup is progressing work in two focus areas:

**Health Based Places of Safety:**

- Understanding the current HBPoS context by collecting baseline data;
- Defining what good looks like for a HBPoS and developing a facility specification.

**ED Crisis Care Pathway:**

- Defining the ED pathway for mental health crisis and guidance to support a better, more consistent approach across London.

To ensure the work above address the needs of the public and U&EC system the U&EC networks are asked to:

- Provide expertise to the crisis care system to help develop the specific pieces of work, in particular ensure London’s U&EC networks are represented in the new crisis care governance functions;
- Ensure involvement of key stakeholders to offer guidance and advice to the crisis care work programme;
- Support the implementation of newly developed guidelines or standards resulting from the work undertaken by the subgroup and key stakeholders across the crisis care system.