

Media release 17 February 2016

## Improvements to mental health services in Bristol

As of today the number of people in Bristol waiting more than four weeks for assessment has been reduced to 10. Each of those 10 individuals either has an appointment or an appropriate plan in place.

This was achieved by bringing in extra resource to speed up and improve access to specialist services, which we recognise had fallen below standard, and was one of a number of concerns raised following a recent Care Quality Commission (CQC) visit.

We have liaised with patients individually and with referrers and other partners to ensure everyone is dealt with in the most appropriate way. We have also improved training and administrative and information systems.

Some of this work was undertaken to ensure we were meeting the standards set by the Care Quality Commission (CQC). Other concerns raised which we are actively working to address include:

- Timeliness of care, a lack of safe care and treatment
- A lack of governance systems
- Staff with inappropriate experience and competence
- Staff not taking appropriate safeguarding measures, and unsuitable premises for care.

Since the beginning of January, a dedicated support team has been working in Bristol and, together with the Bristol management team, have already made progress. A new system to monitor referrals has been set up, and there has been a reduction in the numbers of people waiting longer than four weeks for an initial assessment.

The support team are also working to reduce the frequency of non-attendance at appointments, and are implementing a more robust triage system with effective signposting and advice for further help.

We are implementing action plans accordingly, with the support of our local Bristol Mental Health partners.

Our target is to assess 95% of people within four weeks of them being referred to us. This is subject to our teams prioritising the most urgent cases and individuals making choices about when they would like to have an appointment – for example some people might not be available for assessment within four weeks or may request an appointment beyond the four-week period.

Richard Lyle, Programme Director for Community and Partnerships at NHS Bristol Clinical Commissioning Group (CCG) said: "Over the last two years, Bristol CCG has invested in mental health services in Bristol, developing new service specifications in response to feedback from service users, carers and clinicians. AWP, working with its partners, responded to that service specification by developing a new model of care for Bristol and was awarded the contract on this basis in October 2014. This model has now been in operation for nearly a year; it is still evolving and developing and we are keen to continually review its effectiveness to ensure patients and service users can get the best possible care.

"We recognise that one of the major issues for AWP has been recruitment and retention of staff in the service and we're working with AWP to put in place appropriate measures to address this and to ensure staff feel well supported.

"We always welcome feedback from staff and service users regarding the services we commission, particularly where it raises concerns that need addressing and although we recognise there are issues, we have also received positive feedback from service users following the introduction of the new model which demonstrates good work undertaken by AWP and its partners in the last year. We are however taking these reports very seriously and will now do what is necessary for service improvements to be made."

AWP's Acting Chief Executive Dr Hayley Richards said: "It is important to realise that services should always be learning from the challenges and having them inform improvements. That's why we are in constant dialogue with our commissioners to make sure we are all providing the best care.

"I am grateful to our staff for the way they have adapted to new ways of working. Their professionalism and knowledge are helping us to strengthen services for the future."

## **ENDS** \*\*

## **Notes to the Editor**

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