



CLEAR Mental Health 2021

Midlands Partnership NHS Foundation Trust

Increasing capacity through changing current team roles and skill mix to reduce waiting times and improve retention

AT A GLANCE

CLEAR CHALLENGE

Long waiting times for patients for community mental health services in Staffordshire because of high case loads and cancellations of planned care

KEY CHANGES

Two new roles created with patients streamed into planned or crisis care. A new responder role dedicated to urgent care would enable other staff to deliver consistent planned care

FORECAST BENEFITS

More than 20% increase in workforce capacity within the existing team, offering staff the choice of how they deploy their skills and a reduction of 218 hours lost every week to unplanned care

THE CHALLENGE

Adult community mental health services in South Staffordshire were managing high caseloads and struggling to provide a responsive service, resulting in patients facing longer waiting times than usual for treatment.

The service, which provides assessment and treatment to patients with a range of mental health needs requiring secondary care, came under review as the trust was reorganising the service in line with the Community Mental Health Framework for Adults and Older Adults and the NHS Long Term Plan's vision for a place-based model of care.

WHAT THEY DID

Eleven clinical engagement sessions were held and an in-depth analysis carried out of clinical and workforce data dashboards. Of the two main patient pathways, the community intervention pathway (CIP) received ten times more referrals each year between 2019-2021 compared to the psychosis pathway. The key findings showed an increase in acuity and complexity of patients with clinicians spending more time on unplanned activities and responding to urgent situations. This was leading to planned care cancellations and patients spending longer with the service.

CLEAR RECOMMENDATIONS

Two recommendations focused on changing the skill mix and developing two new roles - responder and intervention - within the existing team while streaming patients into planned or crisis care.

These were designed to relieve pressure on the four neighbourhood teams that had recently been launched and reduce the time lost responding to emergencies. The proposed new responder roles would be dedicated to delivering urgent, unplanned care, enabling clinical staff to deliver consistent planned care to patients. The intervention roles would provide planned structured and timely care to patients to improve outcomes, increasing continuity and enhancing patient experience.

The third recommendation proposed a review of data collection on the RIO electronic patient records system to ensure accurate and consistent data was gathered to improve monitoring and support future service developments.

Increased
productivity
within the
existing team
with two new
roles created,
leading to an
increase in
workforce
capacity of
up to 22%

FORECAST IMPACT

The new roles are projected to lead to a 22% increase in workforce capacity across the four neighbourhood community teams, the equivalent of around seven WTEs, as well as give staff the choice of how they deploy their skills, improving job satisfaction and retention.

This includes a forecast reduction in time lost to unplanned activities each week of around 218 hours, with lower sickness rates and fewer vacancies.

Patient benefits include faster access to planned and unplanned mental health services with reduced waiting times, a decline in rescheduling of appointments and less likelihood of their needs being unsupported and escalating to a crisis.

For further information, visit clearprogramme.org.uk or contact the 33n team at info@33n.co.uk