



# MHLDC BULLETIN



## Welcome message

*Tony Mayer, MHLDC Director, for and on behalf of our members*

Hello and welcome to the October edition of our quarterly bulletin.

The MHLDC Provider Collaborative has made significant progress within our 2024/25 priority areas of focus since our last bulletin. At a time when the national direction is a move from reaction to prevention and enhancing the offer of both physical and mental health in the community it has become increasingly important to be able to evidence this progress. The recent release of the Lord Darzi independent investigation of the NHS England highlights several opportunities to improve the health of the nation through early intervention, collaboration between community partners and a strong focus on data and digital programmes which aligns well with the work of the Collaborative. There is now an expectation that the 2025/26 planning guidance and the NHS 10-year plan, expected for release early next year, will further support our work in helping to address the challenges within the system.

The MHLDC Chief Executive Forum were particularly pleased to see the shift in the utilisation of virtual wards in Cheshire and Merseyside and the increased referrals to urgent community response services that will help not just the financial pressures but provide an offer that allows our population to remain safe and well in their own homes. The CEO Forum also received a positive report on the work of the Mental Health programme and noted the development of the CYP Mental Health Transformation Plan as well as the Mental Health Workforce Strategy. The team are looking forward to updating you further in the next quarterly bulletin on the work that is currently being taken forward to further improve the links between the talking therapies pathways and Cancer services as well as several other areas of mental health transformation.

I would encourage you to look through the bulletin and contact the team if you would like to know more or have any questions or suggestions on the work of the MHLDC Provider Collaborative.

### **NEW!!** Lunch and Learn Sessions

Join us for our engaging lunch and Learn sessions, where peers come together to share insights, create discussions, and tackle any questions! These informal gatherings are a great opportunity to learn from each other and foster a collaborative atmosphere. We'd love your input on how to make future sessions even better—share your ideas for topics that excite you.

#### **Next Session - How might we drive up referrals into virtual wards?**

**Thursday, 21<sup>st</sup> November** 1230 – 1330 via Teams. **Contact** [Bchft.mhldc@nhs.net](mailto:Bchft.mhldc@nhs.net) for an invite

This interactive discussion will cover several key topics, including evaluating inclusion and exclusion criteria, assessing the effectiveness of case finders, and sharing best practices among peers.

*Our neighbouring ICB, East Lancashire and Cumbria will be presenting their journey. There will be representation from the Northwest Regional team, NHSE to respond to any questions along with the VW Programme team, MHLDC Collaborative.*

# Urgent Community Response

Programme Lead: Val McGee

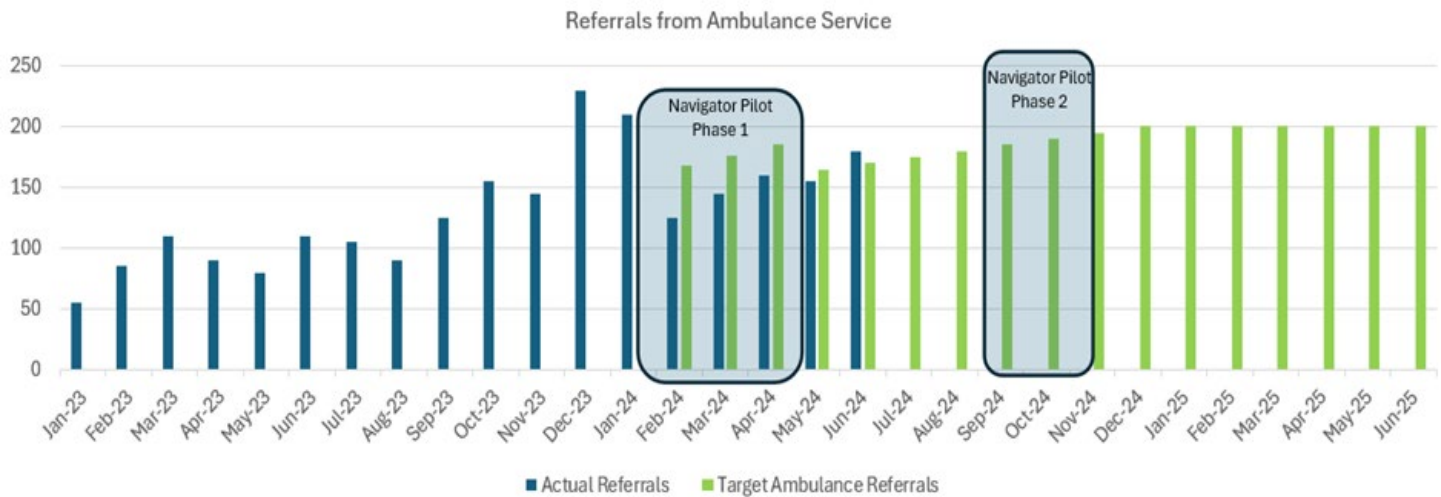
Cheshire and Merseyside

Programme Manager: Carrie Woods

Mental Health, Learning Disability and Community Trust Provider Collaborative

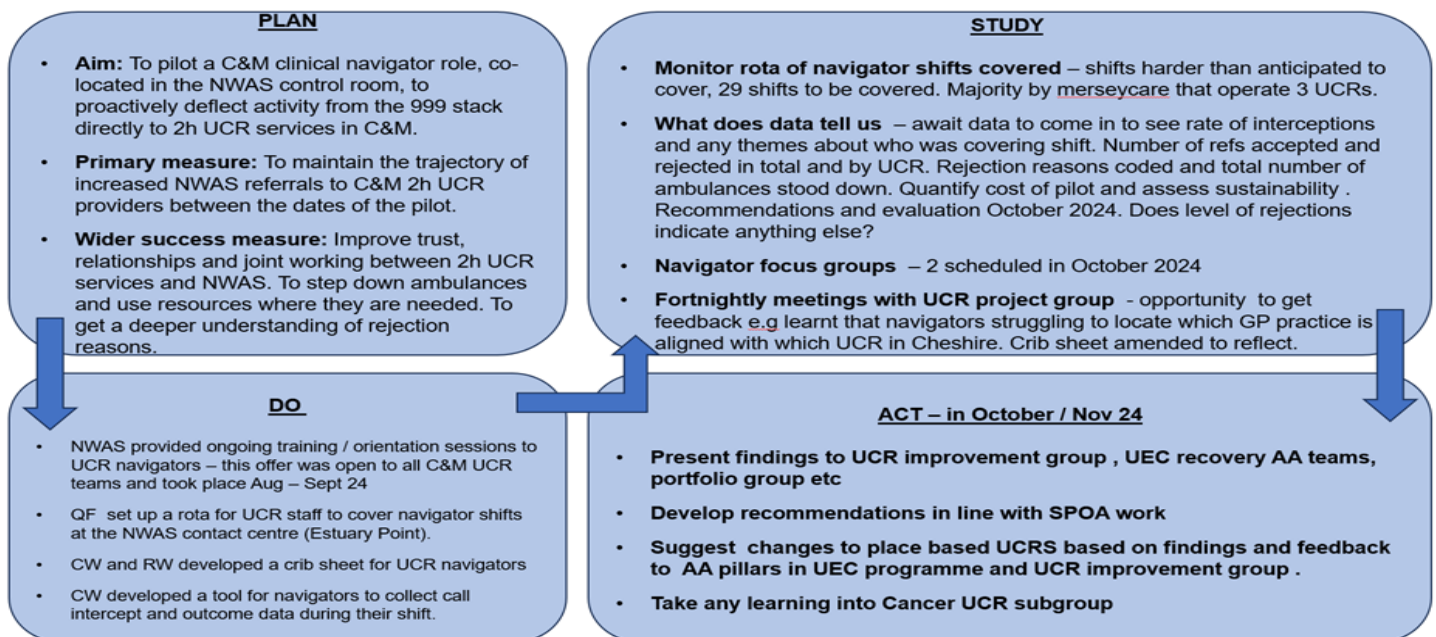
In our July newsletter, we told you about the pilot in Feb, Mar and April that aimed to increase ambulance referrals into UCR services. After completing a full evaluation and seeing some positive post-pilot improvements in May and June, the UCR improvement team have decided to conduct a second test of change in September and October.

The aim is to sustain the positive improvements we have seen in ambulance referrals through winter. We will measure this by counting the number of ambulance referrals into UCRs, using the below trajectory as a guide.



Our plan for the pilot is to use a PDSA approach, collecting evidence and evaluating impact as we go. The PDSA plan is shown below

## UCR Navigator PDSA: 10.09.24 - 18.10.24



In addition to the Navigator Pilot, we will be working with colleagues from the cancer and palliative care collaboratives to try to increase the number of patients they successfully refer into UCR. We know that people in these cohorts need some additional support, and we think that community services are well placed to deliver this.

The CYP Mental Health Transformation Plan was endorsed at C&M Childrens Committee and approved at ICB public Board on 25<sup>th</sup> July 2024. A huge thank you to system partners who engagement to support the development of the plans priorities.

Click on the link to view the plan and supporting animation: - <https://www.cheshireandmerseyside.nhs.uk/latest/publications/plans-and-strategies/children-and-young-people-s-mental-health>



### Helping to tackle health inequalities

Those with serious mental illness often experience poor physical health too. Life expectancy can be up to 20 years less if you have an SMI. Physical health checks for this population are one of the priorities in the current NHSE plan and across our ICB. C&M are seeking to improve the delivery of such checks to improve uptake and to try to reduce health inequalities. Various task groups are established at Scale and across Place to support improvement

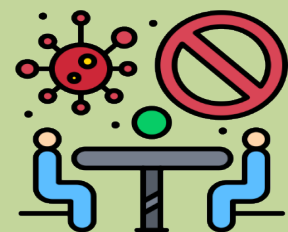
### Mental Health Workforce Development Strategy

Work continues at pace around developing an effective and focussed workforce development strategy, with a number of planning groups now looking at workforce development through the lens of specific role/ service groups (e.g., Talking Therapies, CYP, MH crisis etc.) and particular aspects of workforce development (e.g. supervision requirements and availability).



**Cheshire and Merseyside**  
Cancer Alliance

Work is underway to improve the patient pathways between Talking Therapies and Cancer services. Further updates to come soon!



### Inpatient Quality Transformation

A C&M self-assessment and 3- year plan for the Inpatient Quality Transformation Programme has been signed off by ICB execs and published on the ICB's public website and can be accessed here:

<https://www.cheshireandmerseyside.nhs.uk/latest/publications/plans-and-strategies/mental-health-learning-disability-and-autism-quality-transformation-programme-plan/>

# Virtual Wards

Programme Lead: Tony Mayer

Programme Manager: Emma Danton

Cheshire and Merseyside

Mental Health, Learning Disability and Community Trust Provider Collaborative

On 10<sup>th</sup> September, we held a Hospital@Home workshop about safe and effective prescribing for virtual wards, at the Peace Centre in Warrington.

The aim of the workshop was to share best practice and spread learning whilst at the same time, canvassing stakeholders for their views about priority improvement actions.

Participants told us they would like to prioritise the following:

Improving data and record sharing for VW teams

Standardising VW pathways and inclusion criteria

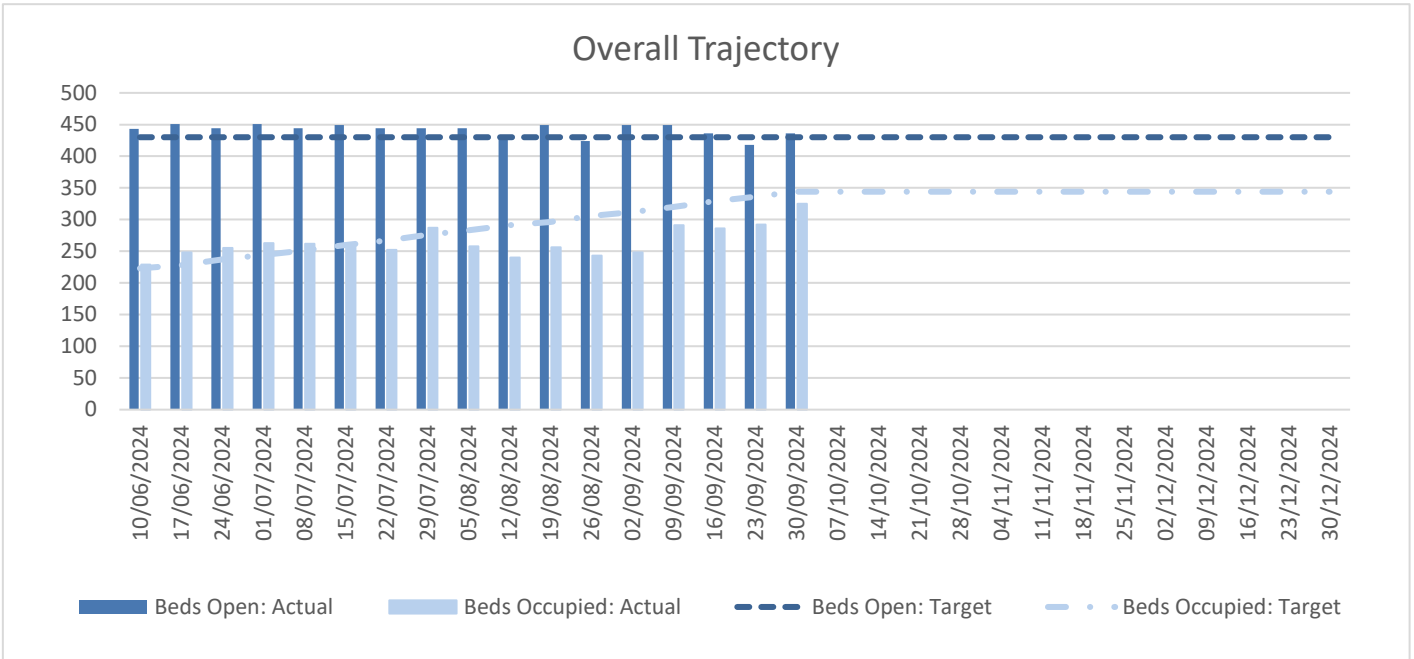
Standardising VW discharge summary documentation

We will be taking these actions forward via a VW prescribing task and finish group and we will keep you updated as that group develops.

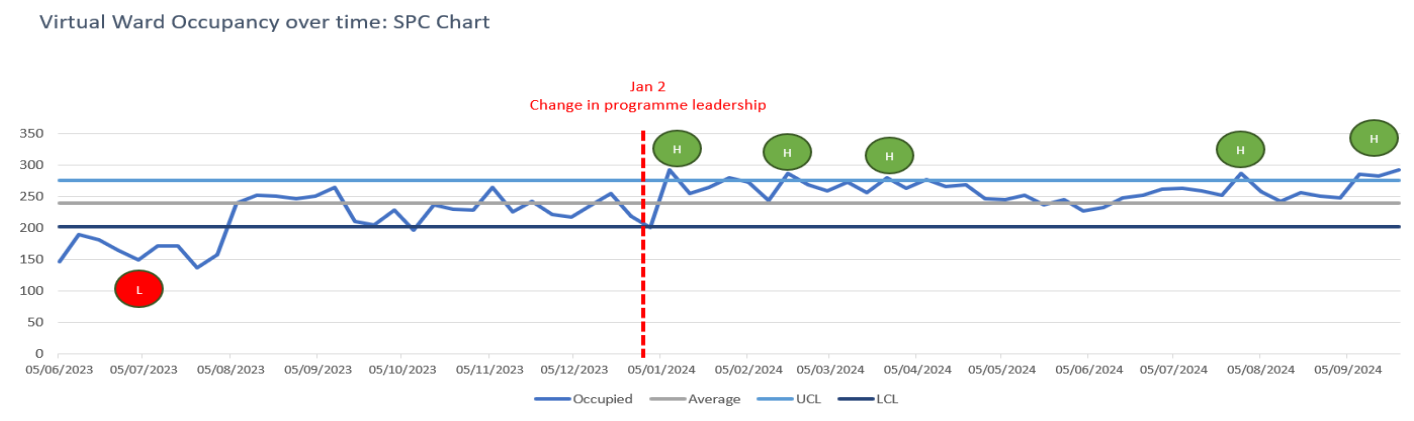
*“Interesting session learning from each other and awareness of how vastly differently organisations work. What went well was the interaction and getting people involved. I hope we can get simple solutions put into action straight away and would love to see more sessions like this”* Bazza (workshop participant)



The Virtual Ward programme is going well. This month, we have seen utilisation reach 74.5%, which is the highest ever level and is good progress towards the 80% target.



Not only is occupancy higher as a percentage, but the data also shows that the number of people using virtual wards is higher than ever, as can be seen in the below SPC chart.



A big thanks to all the virtual ward operational and clinical leaders across Cheshire and Merseyside, who have been leading the way on making change happen in their organisations.

# Community Data Quality

Programme Lead: Emma Danton

Cheshire and Merseyside

Project Manager: Qazeeb Faniran

Mental Health, Learning Disability and Community Trust Provider Collaborative

We are excited to announce the launch of a new **Data Quality Maturity Index (DQMI)** report for the Community Services Data Set (CSDS). Developed in collaboration with the Community Providers Data Quality Group and approved by ICB BI, this report went live on the Cheshire and Merseyside Business Intelligence Portal (C&M BIP) on 30th September 2024.

The DQMI report offers a detailed breakdown of data quality performance by provider and metric, enabling providers to benchmark against each other and track performance trends over time. This valuable insight will help organisations identify data quality challenges and target areas for improvement.

Moving forward, the report will be published monthly on the C&M BIP. To access the report, simply log in to the [C&M BI portal](#), navigate to the Community section, and select Data Quality Maturity Index Scores.

As part of our data quality monitoring efforts, the following mandatory fields are included in the report:

1. Ethnic Category
2. General Medical Practice (Patient Registration)
3. NHS Number
4. Person Birth Date
5. Person Stated Gender Code
6. Postcode of Usual Address
7. Source of Referral for Community
8. Activity Location Type Code
9. Attendance Status
10. Language Code
11. Primary Reason for Referral



Additionally, two experimental fields are being monitored:

12. Coded Finding
13. Consultation Mechanism (Community Care)

We encourage all providers to regularly review their performance in these areas and leverage the report to drive continuous improvements in data quality.

