

## 2019/20 Performance Overview: Mental Health

### 2019/20 high-level summary

The Mental Health Service (MHS) has a caseload in excess of 4500 patients (March 2020 Scorecard). Care and treatment are delivered in line with the stepped care model with provision outlined in the 2019/20 Mental Health and Wellbeing Plan approved by Tynwald, where treatment is determined by acuity of need and age profiles. The majority of provision is delivered within community settings with less than 1% of treatment provided within inpatient settings. Service delivery is distributed across six operational areas:

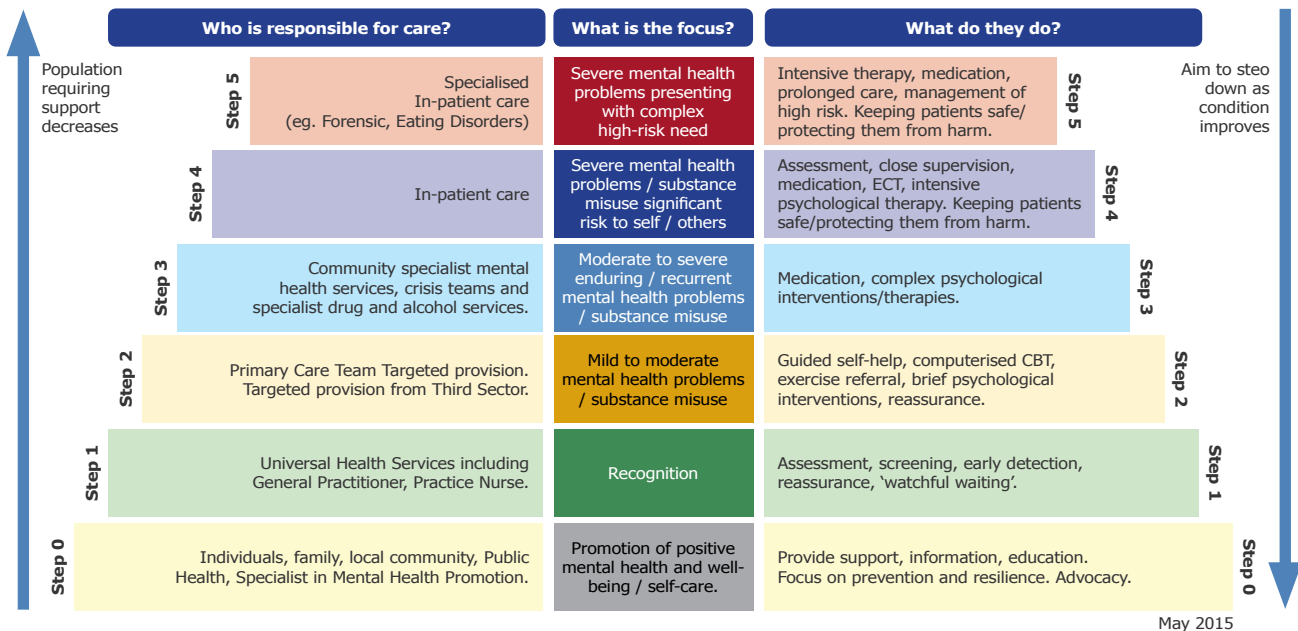
Operational Area	Caseload (March 2020)
Community Wellbeing Service (CWS)	934
Child and Adolescent Mental Health Service (CAMHS)	887
Community Mental Health Service for Adults (CMHSA)	1351
Older Persons Mental Health Service (OPMHS)	962
Acute Services (AS)	36
Drug and Alcohol Team (DAT)	334

The caseload remained broadly consistent with only a 2.8% increase over the reporting period April 2019 – March 2020.

**Figure 2 Stepped Care Model for Mental Health and Wellbeing**

**Stepped Care for Mental Health and Well-being**

Having the right support in the right place at the right time delivered by the right person



**MHS Data Sets**

The MHS produces monthly data sets or 'scorecards' demonstrating activity. It should be noted that whilst significant work has been undertaken to establish a mental health scorecard it is recognised that the existing mechanism remains relatively generic. During 2016/17/18 a programme of work was undertaken to develop dedicated individual service pathway dashboards which will include both patient and clinician related outcome measures. This enabled far more granular data collection supporting significantly improved resource management and analysis of effectiveness.

The MHS Scorecards for the 2019/20 year will be made available on request. Six of the 23 parameters are subject to benchmarking against expected ranges or targets, these are:

1. New Referrals (expected range)
2. Number of re-referrals (expected range)
3. Bed Occupancy (target)
4. 5 day follow up (target)
5. Coding Compliance (target)
6. Financial Position (positive/negative variance)

The performance against each of these parameters for 2019/20 is outlined in Figure 3.

**Figure 3 2019/20 Performance against parameters**

Parameter	Measure	Performance	Commentary
New Referrals	Expected Range		The mean remained within the expected range of 6.7 -8.4% per 1000 total population
Number of re-Referrals	Expected Range		The mean remained within or lower than the expected range of 6.7 -8.4% per 1000 total population
Bed Occupancy	Target		Bed occupancy consistently exceeded the 85% target with the lowest occupancy being 88% occurring in November
Five day follow up	Target		Attaining the target of 100% is reliant on the patient's willingness to engage with follow up. The associated scorecard narrative demonstrates very good compliance when this context is applied.
Coding Compliance	Target		The mean consistently exceeds the 80% target.
Financial Position	Variance		End of year demonstrated a negative variance of 19%. This associated with off island placements and statutory costs associated with Section 115

### Focus areas for Mental Health Services in 2019/20

- **Bed Occupancy:** Enabling effective patient flow is an intrinsic function of a Crisis Response and Home Treatment Team (CRHTT) approach. The existing CRHTT delivery model was subject to a redesign process with a view to increasing the capacity to undertake home treatment.
- **Five day follow up:** In the 2019/20 year the five-year target has remained in place. However, a decision was taken to reduce five days to three days, which is consistent with emerging best practice guidance, and will be in place for the next reporting year.
- **Financial Position:** The 2019/20 overspend was associated with off Island placements and Section 115 applications. All Section 115 applications are now subject to rigorous scrutiny through the Complex Needs Panel, a process that began in January 2019, although consideration of the underlying recurrent funding position will be required.