

ACUTE CARE – THE NEXT STAGE

Building on the Mental Health Care Commission Review

**Warwick
NAPICU**

10TH September 2009

**Malcolm Rae, OBE, F.R.C.N.,
Mobile: 07969 895 710**

Email: malcolmrae@blueyonder.co.uk

Why Have An Acute Care Declaration

Rationale

- § **Critical time – redefining NHS policy and priorities: ‘World Class Commissioning’, ‘New Horizons’**
- § **Ensure acute care services are not marginalised**
- § **Healthcare Commission Review: ‘It is clear, it is possible to provide patients with excellent acute hospital care and some services are doing exactly that’.**
- § **Need to push on and achieve similar standards for all**

Why Have An Acute Care Declaration (cont'd...)

Rationale

- § Need to disseminate good practice and improvement methods
- § Healthcare Commission Recommendations:
 - Improved quality commissioning
 - Priority given to acute care, part of overall care pathway
 - Strengthen acute care forums
 - More effective leadership
 - Increase in workforce capability
 - Better outcome indicators

Why Have An Acute Care Declaration (cont'd...)

Rationale

- § H.C. Assessment Framework – defines good quality care: appropriate, purposeful, therapeutic, safe and enables measurement
- § Negative media coverage – change perceptions
- § Develop connections and obtain a consensus for acute care to be a priority

Acute Care Declaration

Questions:

- § What should be the main features of the acute care declaration?
- § What should be the priority focus in order to achieve progress?



Summary of Declaration

WE DECLARE THAT:

Good quality of care, inpatient and community, are essential and achievable

We will work together to:

- 1. Further encourage the commissioning and provision of high quality acute care by developing:**
 - Sense of hope, culture of therapeutic optimism, support recovery**
 - Integrated and co-ordinated, with choice and better evidence**

Summary of Declaration (cont'd...)

- **Safe services, context of positive risk management**
- **Safe, clean and welcoming environment**
- **Equality of access to appropriate needs led services for all age groups**
- **Simple and timely access into and discharge out of inpatients**
- **A body, mind and spiritual approach**
- **Respectful service for users and carers and included as partners**

Summary of Declaration (cont'd...)

2. Promote recovery and inclusion by:

- Orientated to strengths and abilities – help participate in local communities**
- Effective links to primary care and wider health and social care systems**
- Support in accessing income, housing, leisure, education and employment**
- Services close to home, maintain positive contact with family, friends, communities**
- Provide purposeful stimulating physical and mental activities for inpatient**
- Promote community engagement in supporting their local services**

Summary of Declaration (cont'd...)

- 3. Support the development of a specialist acute care workforce by:**
 - Staff are valued and receive training, support and supervision**
 - Excellence in leadership and management is attained**
 - Workforce capacity, competence and capability designed to deliver expected outcomes, using evidence based practice**
 - Openness to different ways of working, partnership opportunities and innovation**

Summary of Declaration (cont'd...)

4. **Champion positive perceptions of acute care by:**
 - **Address issues of exclusion and stigma**
 - **Encourage more positive language**
 - **Encourage informed and respectful views**
 - **Shift thinking towards integrated care pathways – each component understands, respects, and works well together**
 - **Asserts the legitimate role of healing in a safe place of sanctuary**

Summary of Declaration (cont'd...)

5. Support research and service development by:
- A culture of enquiry, service improvement, innovation and evaluation based on evidence and feedback
 - Further researching, investigating and defining most effective and appropriate care
 - Ensure evidence informs care / treatment delivery to individual, family, and local tailored community needs
 - Support local / national research and audit
 - Robust evaluation and governance systems
 - Support work of ACFs to share best practice
 - Use influence to focus on standards and care pathways
 - NOT TARGETS!!!

Summary of Declaration (cont'd...)

6. Involving People who use services and their families and carers:

- Prominence to those who have most serious mental illnesses and who currently use services**
- Seek new and better ways of accessing their views on quality and development**
- ACFs to facilitate feedback and make sure Trust Board receive**
- Avoid Mid Staff and West London type investigation**

Questions

1. **What actions will be helpful in developing and embedding the declaration?**

2. **What is required:**
 - § **Nationally?**
 - § **Regionally?**
 - § **Trust?**
 - § **Local Authority?**
 - § **Representative Groups?**
 - § **Individuals?**

3. **Who are main organisations locally and nationally, to target who can block or enable progress?**

Outline Thinking and Action

- § Sign up key stakeholders
- § Learning sets and tools for Commissioners
- § Lobby for acute care in New Horizons consultation
- § National launch, positive stories, leaflets, posters
- § UK wide involvement
- § Specific national forum
- § Brochure of positive examples of building design and environments
- § Hot house events and early implementers
- § National Association of ACFs

Outline Thinking and Action (cont'd...)

- § **Specific charter, pledges and guides**
- § **Explore 'NICE' Acute Care Best Practice Toolkit**
- § **Explore Acute Care Audit Tool and related research topics / materials**
- § **Individual memory sticks with evidence and guidance**
- § **Development of anti stigma materials**
- § **Develop incentives – beacons, best practice awards**
- § **Acute care psychology project**
- § **Leadership**

Other Current and Future Acute Care Initiatives

§ Safety

- Suicide prevention toolkits
- Risk assessment and management skills training pack
- Accreditation and regulation of prevention and therapeutic management of violence training
- Missing patients workbook

§ Virtual Ward

§ Triangle of Care

§ Acute Care Pathway

§ Smoking Policy

§ Talkwell

§ E learning package for dual diagnosis

§ Laying the Foundations

**‘WE MIGHT NEVER ACHIEVE
PERFECTION BUT WE SHOULD
ALWAYS BE SEEKING EXCELLENCE’**

**‘TAKE CARE TO GET WHAT YOU LIKE
OR YOU WILL BE FORCED TO LIKE
WHAT YOU GET’**

How to Have Your Say

§ Use the online questionnaire:

www.info.doh.gov.uk/questionnaire/newhorizons.nsf

§ Post comments to:

*New Horizons
Programme Administrator
Mental Health Division
Wellington House
133 – 155 Waterloo Road
London, SE1 8UG*

You can download the full document, easy read version at:

www.dh.gov.uk/mentalhealth