Integrated Mental Health Tri-Agency Triage Car
Background

- East Midlands Ambulance Service cover 6425 square miles across Lincolnshire, Nottinghamshire, Leicestershire and Rutland, Derbyshire and Northamptonshire.

- We serve a population of approximately 4.86 Million people delivering both Emergency and urgent care transport, as well as PTS within the North of Lincolnshire.

- On a daily basis EMAS receive 2155 emergency calls via 999.

- Ambulance staff nationally receive limited mental health training during their standard paramedic education.

- The most probably outcomes for Mental health patients in crisis when seen by EMAS are section 136 and ED attendance.
What is a Tri-Agency Mental Health Triage Car?

- A car with the specific function of meeting the needs of those in mental health crisis.
- Supported by three agencies, Ambulance, Mental health and Police
- Unmarked Car provided by and maintained by EMAS
- Trained staff man the car from ambulance and mental health services to ensure a complete Psycho-Social assessment is completed combining the expertise of the two health professionals
- Provides on scene support for Patients, Ambulance staff and Police
- Provides telephone triage for Ambulance and Police
Current Operating Procedure

- All call outs are processed through the Lincolnshire Emergency operations centre for EMAS.
- The car is staffed from 16:00 to 00:00 seven days a week and is accessible by EMAS frontline staff and police.
- Police calls and 999 calls are processed through AMPDS(Card 25).
- EMAS frontline staff call control for support the car then attends to provide back up.
- The car provides assessment and intervention as required and a care plan is agreed on by the paramedic and mental health nurse.
- If a police officer is present at the call then the care plan is tri-agency with agreement from the police officer as well.
- Care plans will be created with, and provided to the patient if appropriate.
Impact

Pre-car Outcomes

Current Outcomes
Who Benefits From This Outcome?

- Improved outcomes for patients who are detained in the community.
- Reduction in ambulance crews and police on scene time.
- Reduction in the use of conveyance by police and ambulance crews.
- Reduction in the number of inappropriate detentions made under the s136 of Mental Health Act.
- Reduction in the call out of Forensic Medical Examiner (FME) and Approved Mental Health Professional (AMHP) within custody.
- Increased accessibility to mental health service staff beyond normal working hours.
- Experimental learning due to multi agency teamwork, leading to greater understanding of roles of other professionals within the mental health service.
- Improved use of resources and multiagency working leading to financial benefit for the National Health Service and the Criminal Justice System.
Where Do We Go From Here?

- Review the hours the Lincoln Car runs
- Review the need for a second car
- Consider expanding the role of the car to include adolescents
- Integrate the car across EMAS to improve patient services across the trust
- Develop a paramedic rotation to combine time on the MH car and standard responding.
- Up-skill the Paramedics to include suturing/gluing
- Expand the paramedics Mental Health knowledge and skills
- Use the links developed with Mental Health services to create pathways for Paramedics when the car is unavailable