

North East, Yorkshire and Humber Mental Health Network 21 November Key Discussion Action Points

Session One: Physical Healthcare in Severe Mental Illness

- What steps are we taking to increase the chances of patients with Psychosis/SMI being routinely screened and treated for any physical health conditions?
- What are we doing to reduce the risks of inducing physical health problems from our prescribing for SMI conditions?
- Who needs to be involved in ensuring physical health checks and management is systematically offered across all parts of the patient's journey, and how are we recording/auditing this?
- What progress have we made in the last 6 months and how can working across the STP/ICS help us continue to improve locally?

South Yorkshire and Bassetlaw & West Yorkshire

Key Action points

- 1) Recognising medication is only part of the answer to managing mental health.
- 2) Use of mix professionals – OT, SW, GP, Psych. So information of what is available is shared. Education is key not all parents know what is healthy (food, exercise).
- 3) Older people seem to get a better service as physical health and baselines are collected and smaller doses.

Humber, Coast and Vale

Key Action points

- 1) Identifying needs of local population by working with service users.
- 2) Working across services so that you know exactly what is happening – why do same assessment more than once? An audit is needed.
- 3) Encouraging med. reviews. NM prescribers – bigger role. Does there have to be a physical / mental health boundary?

Session Two: Tackling Enduring Depression

- Do we have a register of patients with enduring/resistant depression? What are we doing to treat such patients currently, do we commission a specific service and if so where from? Do we know the outcomes this delivers, if so what are they?
- Who needs to be involved in developing a service spec to ensure an optimal recovery-focused service is offered to such patients and what are the success measures/KPIs?
- What progress have we made in the last 6 months and how can working across the STP/ICS help us continue to improve locally?

South Yorkshire and Bassetlaw & West Yorkshire

Key Action points

- 1) Getting a good history of meds tried along with social circumstance.
- 2) Being clear on expectations – having smart goals and more than just meds.
- 3) Service spec – GP, voluntary sector, primary care professionals, service users, carers. KPI from peer review tools, personal. Permission to do something different.

Humber, Coast and Vale

Key Action points

- 1) Don't have to register but do have clustering – could use this.
If we have a register – implications to act on this – follow algorithm.
Trigger points which are missing now.
- 2) Scoping exercise to identify population. Costs of treatment v non treatment.
- 3) This process should identify who should be involved.