Oxford Academic Health Science Network

www.oxfordahsn.org

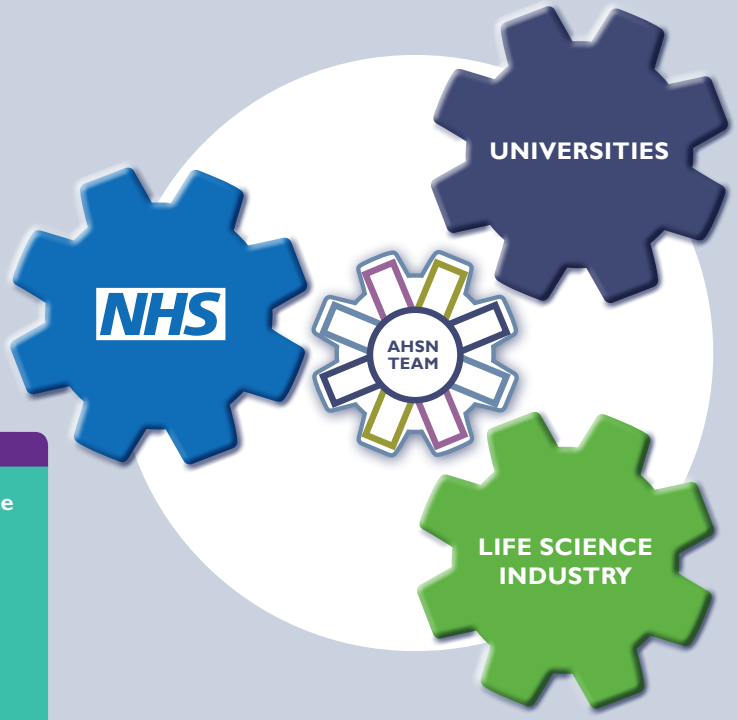
Summary of Oxford AHSN Mental Health activities

Mental Health 2016

What is the Oxford AHSN?

Oxford Academic Health Science Network is a partnership of NHS providers, commissioners, universities and life science companies to improve health and prosperity in Bedfordshire, Berkshire, Buckinghamshire, Milton Keynes and Oxfordshire. Success comes from collaborative working by the partners and stakeholders across the region.

3 Million People



Our 7 programmes and themes facilitate shared work across all partners:

- Best Care Clinical Networks
- Clinical Innovation Adoption
- Research & Development
- Wealth Creation
- Patient and Public Involvement, Engagement and Experience
- Informatics
- Patient Safety

Benefits of collaboration across the whole system:

- Leverage clinical and management best practice and expertise to improve outcomes
- Share clinical evidence and benchmarking
- Scale innovation adoption
- Learn from each other – clinical standards, models of care, commercial models
- Enable data sharing, operational, patients and research to improve outcomes
- Share evaluation knowledge
- Share clinical and management resources
- Improve region's attractiveness for commercial research
- Make region more attractive for inward investment and product development
- Make the region healthier

Accelerating health and economic gains by working together

Summary of activities in Mental Health

The Oxford AHSN has a focus on mental health, not only through its three clinical networks – Anxiety and Depression, Dementia and Early Intervention in Psychosis – but also through its patient safety work and its programme to spread clinical innovation.

This document sets out these activities and provides links to other sources of information, including the Best Care review for 2015/16; our annual review of 2015/16; and our website www.oxfordahsn.org. The website also provides details of specific programmes and themes and associated projects.

The grid on the next page summarises the activities, and the following pages provide more detail.

For further contact information please see detailed pages in the document.

Oxford Academic Health Science Network

Anxiety and Depression	Dementia	Early Intervention in Psychosis	Adopting Clinical Innovation	Patient Safety
Enhancing clinical outcomes for psychological therapies	Improving standards at memory clinics	The EIP matrix	Eating disorders online support network	Improving returns to psychiatric wards
Integrated care for long-term conditions	Roll-out of support services for young people with dementia	Dashboard development in Berkshire	Benefits of memory improving drugs	
	Improving support for new dementia patients	Service innovation		
	Supporting the identification and implementation of best practice in care homes	Sharing good practice on services and patient experience		
Improving outcome data on psychological therapies for children and young people	Use of outcome measures for patient and carer wellbeing		Reducing alcohol-related admissions	
	Reducing variation in diagnosis of fronto-temporal dementia			**Corporate**
			Use of Nalmefene to reduce alcohol consumption	Get Physical programme

Anxiety and depression

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Enhancing clinical outcomes for psychological therapies

The Anxiety & Depression Network is linked to the nationwide Improving Access to Psychological Therapies (IAPT) programme, which aims to implement NICE-recommended talking therapies for adults with common mental health problems. IAPT is open to patients who refer themselves, as well as those who are referred by GPs. Patients receive therapies such as cognitive behavioural therapy, brief psychodynamic therapy, couples therapy, and counselling.

There are now an additional 3,199 people experiencing an improvement in quality of life in the Oxford AHSN region compared to the national average thanks to improvements in recovery rates following therapy for anxiety and depression.

Recovery rates in the region have gone up by 10 percentage points from 47% to 57%. This was achieved through improved training and through sharing best practice, improved data collection, innovation and research. Improved recovery rates have also saved the taxpayer £750,000.
Work continues to improve recovery rates further.

Integrated care for long-term conditions

Psychological therapy services across the region have been sharing effective treatments for people with anxiety/depression and long-term conditions such as chronic lung disease, cardiac disease, diabetes and persistent physical problems (previously known as medically unexplained symptoms)

Looking ahead the A&D Network is supporting IAPT services across the Thames Valley to bid for IAPT expansion funding from NHS England.
We aim to become early implementers for this initiative, creating new, integrated and co-located services for people suffering with Long Term Conditions and co-morbid anxiety and/or depression.

Improving outcome data on psychological therapies for children and young people

We have begun to improve the amount of data collected on the outcome of psychological therapies for children across the region. Collection of these data has traditionally been low, and better collection will allow services to identify areas for improvement.

We have achieved our aim of improving routine outcome measures collection rates by 10% by April 2016 and aim to improve it by a further 20% by April 2018.

Dementia

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Improving standards at memory clinics

We have worked with six memory clinics in the Oxford AHSN region to help them look at standards and share ideas on the best ways of working. All have now won Royal College of Psychiatrists accreditation, and three have been rated excellent.

Benefits of the work have included improvements to the physical environments of the clinics, a new website for memory services, ideas for working more efficiently and better multi-disciplinary and inter-agency working.

Roll-out of support services for young people with dementia

An Oxford AHSN-funded project to improve services for young people with dementia in East Berkshire saw the number of participants in the area almost double from 11 to 21 and demonstrated improved outcomes for patients and carers. The service is now being funded by the East Berkshire Clinical Commissioning Groups.

We will now support the extension of this model across our region. A two-day training course has already received interest from local dementia services, charities working in this area and from services outside the region.

Improving support for new dementia patients

Carers across the Oxford AHSN region have begun work to improve the support people receive once they have been diagnosed with dementia. A strategy group has agreed the aims and objectives of the work and a list of all the dementia support services has been compiled.

Supporting identification and implementation of best practice in care homes

A strategy for implementing best practice in care homes for people with dementia across the region will be released towards the end of 2016. It will include an overview of the provision and skills currently in place, and the methods for implementing and evaluating projects.

Use of outcome measures for patient and carer wellbeing

In collaboration with the CLAHRC we are developing a set of dementia- specific patient outcome measures to help guide and improve treatments.

Reducing variation in diagnosis of fronto-temporal dementia

We are working to improve the diagnosis of fronto-temporal dementia by aiming to gain a consensus on the appropriate route for patients and on recommendations for neuropsychological tests to be used.

Early intervention in psychosis

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The early intervention in psychosis matrix

The early intervention in psychosis matrix is a successful online tool developed in the NHS England South area as part of an Oxford AHSN initiative. It allows teams working in this field to track how closely they are working in line with National Institute for Health and Care Excellence (NICE) guidelines and to compare patient outcomes over time.

The concept has the capacity to be extended to measure how far any service is working in line with NICE guidelines.

Dashboard development in Berkshire

Oxford AHSN has played a key role in developing a dashboard that has helped psychosis services in Berkshire to treat newly diagnosed patients more quickly. The dashboard links with electronic health records to track referrals and treatments and help clinicians to manage caseloads.

Against the new National EIP acess and waiting time standards the teams in Berkshire have managed to assess and begin appropriate treatments within 14 days of referral for 80% of people who have experienced a first episode of psychosis. We aim to encourage the adoption of similar dashboards by other Early Intervention teams across the region.

Service innovation

A project group is looking at examples of innovation in local and national psychosis services. It aims to spread the best examples of practice across the Oxford AHSN region. These currently include: Patients Know Best, SHaRON, an approved app, SilverCloud, and integration of physical health checks.

New access waiting time Standards preparedness

Funding has been secured to support NHS England South in the achievement of new access and waiting time standards for early intervention in psychosis. This programme is a valuable way of identifying and sharing good practice from trusts outside the Oxford AHSN region.

A second survey of how far the South region is prepared for new access and waiting times is underway. It will show where marked improvements have already occurred, and where concerted effort is still required.

Adopting clinical innovation

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Eating disorders online support network

An online social networking site to help patients with eating disorders, SHaRON (Support Hope and Recovery Online Network), has been a key element in changes to the way eating disorders are treated in the Berkshire Healthcare NHS Foundation Trust.

Patients with eating disorders are difficult to manage and often rotate in and out of hospital over several months and years. A recent study showed that SHaRON was saving Berkshire Healthcare NHS Foundation Trust £715,000 a year and we hope to use this information to persuade other trusts of the benefits of adopting this innovation.

Benefits of memory improving drugs

We are planning an analysis to work out what benefits the increasing prescription of memory drugs will bring to dementia patients, their carers and the NHS. People taking these drugs will typically experience improvements in thinking, memory and communication. A combination of early diagnosis of dementia and treatment with memory drugs could lead to reduced use of care homes and a reduction in emergency admissions to hospital.

The CIA Programme and the Dementia Clinical Network have conducted an initial analysis within the region to understand the variation in diagnosis and prescribing. Further work will be done in the next few months to determine the next steps.

Reducing alcohol-related admissions

We are working with hospitals and clinical commissioning groups in Slough, West Berkshire and Buckinghamshire to make the case for hospital-based alcohol care teams. Hospitals with alcohol care teams have demonstrated improved outcomes for patients, shorter hospital stays, reduced death rates among inpatients, and associated cost savings.

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Use of Nalmefene to reduce alcohol consumption

We are leading a NICE project to understand why Nalmefene – a drug reducing alcohol consumption in people with alcohol dependence – is not more widely prescribed.

We have collected data from more than 20 areas in England and have identified factors holding back prescription and efforts that have worked in some areas.

Patient Safety

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Improving returns to psychiatric wards

Our project to reduce failure to return to adult psychiatric wards by 50% has been successful at six out of seven wards taking part in the Oxford Health NHS Foundation Trust. Absconding from wards is a significant safety issue that can lead to patients being at greater risk of self-harm and suicide, cause distress to relatives and health workers, and involve police time.

Improvements have come through better patient information, signing-in-and-out books, and introduction of ward phone cards and pre-leave forms. The changes are now being spread further across the region, including in Berkshire where a pilot project has been successful on one ward.

Corporate

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Get Physical programme

Get Physical is the idea of Oxford AHSN and the county sports partnerships in our region. It is looking at ways that NHS staff and patients can include physical activity in their daily lives to improve health and wellbeing.

An interactive event was held at the end of 2015, and plans are in place for three further events hosted by industry partners in Oxfordshire, Berkshire and Buckinghamshire at the end of 2016.

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