

## **FOI 0330/2024 Request**

Under the Freedom of Information Act 2000, I would like to request the following information regarding the services your organisation provides for individuals with co-existing mental health and substance use difficulties:

### **1. Overview of Services:**

#### **A comprehensive list of all services and programmes currently offered specifically for people with co-existing mental health and substance use needs.**

The COMPASS Programme delivered by Birmingham and Solihull Mental Health Foundation Trust (BSMHFT) supports clinicians in the Trust to provide interventions to individuals experiencing co-existing mental health and substance use needs (otherwise known as dual diagnosis).

The COMPASS Programme is part of the Integrated Community Care and Recovery (ICCR), Recovery Programme, within BSMHFT. As co-existing mental health and substance use needs is a service issue for all Trust services, the work of the COMPASS Programme is conducted across all Trust structures, with the exception of the secure care community.

The service works to a philosophy of shared care and integrated treatment as outlined in the Dual Diagnosis Good Practice Guide. A manualised treatment model for working with dual diagnosis Cognitive Behavioural Integrated Treatment (C-BIT) has been developed and researched by the COMPASS Programme within local assertive outreach services (Graham et al 2000).

COMPASS covers the following:

- 16 Acute inpatient areas attended as routine.
- 3 Speciality, 3 Older Adult and 7 Steps to Recovery Wards; as requested for COMPASS presence.
- 5 Assertive Outreach Teams .

COMPASS offers, direct patient support (both individual and group based), and deliver a training, consultation and supervision model to clinicians, to include:

- A referral pathway for time limited, patient face to face interventions.
- Attendance at BSMHFT acute ward inpatient Multi-Disciplinary Teams.

- Embedded within Community Mental Health Teams, offering guidance and best practice to support the development of a holistic care plan for patients.
- Offer supervision/consultation to patient care-coordinators/named clinician and other patient facing clinicians working with and in the support of patients experiencing co-existing mental health and substance use needs.
- Responsible for writing, reviewing and updating BSMHFT statutory and mandatory training for BSMHFT clinicians.
- Development, review and delivery of level 1 Dual Diagnosis statutory and mandatory training to all BSMHFT clinicians, and 2 further tiered and targeted, as required training.

**Details on whether these services are integrated (addressing both issues simultaneously) or if they operate separately.**

Services are integrated.

COMPASS activity is recorded within the patient care plan, managed by the patients' care-coordinator/named clinician and services are separate however, work in tandem.

In addition to this, responsibilities and arrangements between mental health services and the local substance misuse service in Birmingham (CGL) and in Solihull (SIAS) are in place.

## **2. Access and Eligibility:**

**The eligibility criteria for accessing these services.**

The eligibility criteria for patients to access 1:1 support from within the teams listed in question 1 are :

*For Community Teams:*

- *Minimum of 18 years old.*
- *Patient has an allocated care-coordinator / named clinicians within secondary mental health care services.*
- *Uses substances problematically.*

- *Has consented to referral.*

*For Acute inpatient ward teams:*

- *Patient has been admitted to inpatient acute or Psychiatric Intensive Care Unit.*
- *Minimum of 18 years old.*
- *Patient has an allocated care-coordinator / named clinician within secondary mental health care services.*
- *Received a severe and enduring mental health diagnosis.*
- *Uses substances problematically.*

**Information on referral processes, including whether self-referrals are accepted.**

Electronic referrals are received from the patient’s care-coordinator/named clinician directly to the COMPASS Team shared email inbox. Referrals are then screened and a response is communicated to the referrer on a weekly basis. Self-referrals are not accepted.

**Average waiting times from referral to initial assessment and from assessment to commencement of treatment.**

Year	Individuals accessing services	Average Wait Times (Days) for completed waits	
		Referral to Initial Assessment	Assessment to Treatment
2021/22	398	21	25
2022/23	318	22	26
2023/24	283	18	19

**3. Service Capacity and Utilisation:**

The total number of individuals who have accessed these services in the past three years, broken down by year.

Please refer to the table provided in question 2.

**The maximum capacity of each service or programme**

*COMPASS do not currently have a defined number representing service capacity.*

**4. Staffing and Expertise:**

- **The number of staff dedicated to these services, including their professional qualifications.**

<b><u>Headcounts - 31 Oct 24</u></b>	<b>Additional Clinical Services(HCA's, OT helpers/Assistants, STR Workers, OT Technical instructors</b>	<b>Administrative and Clerical</b>	<b>Allied Health Professionals</b>	<b>Nursing and Midwifery Registered</b>	<b>Grand Total</b>
436 SMS Compass Team	4	2	1	4	11

- **Details of any specialised training provided to staff for working with co-existing conditions.**

All clinical staff working within the listed 'compass coverage' have access to COMPASS supervision, consultation and training.

All BSMHFT clinical staff have access to COMPASS, Level 1 Dual Diagnosis Training

**5. Funding and Resources:**

- **The annual budget allocated to these services for the past three financial years.**

	<b>2021/22</b>	<b>2022/23</b>	<b>2023/24</b>
<b>Budget Costs</b>	375,180	390,456	401,788

- **Information on any funding changes during this period and the reasons for such changes.**

*There have been no funding changes during this period (apart from applying the standard NHS inflationary uplift), and as a result the costs incurred in the team have continued to exceed the budget and contract value in recent years.*

**6. Performance and Outcomes:**

**Copies of any evaluations, audits, or performance reports related to these services from the past three years.**

*COMPASS have not received any evaluations, or performance reports in the last 3 years.*

**Key performance indicators used to measure the effectiveness of the services.**

*COMPASS have not received any Key Performance indicators.*

**7. Partnerships and Collaborations:**

**Information on any partnerships with other organisations (e.g., NHS trusts, charities, community groups) in delivering these services.**

*COMPASS work alongside locally commissioned substance use providers Birmingham, Change Grow Live (CGL) and Solihull Integrated Addictions Service (SIAS) for the purpose of training and patient delivery.*

**Details of joint initiatives or programmes aimed at supporting this client group.**

Supported training and awareness sessions in conjunction with community substance use providers is deployed to inpatient teams, with the purpose of increasing awareness of referral routes as well as activity provided by specialist commissioned substance use treatment providers.

**8. Future Developments:**

**Any planned changes, expansions, or reductions to these services in the next 12 months.**

COMPASS continues to review its delivery in line with guidelines such as the NICE Guidance Coexisting severe mental illness and substance misuse quality standard [QS188] Published: 20 August 2019 and 'Better care for people with co-occurring mental health and alcohol/drug use conditions PHE guidance 2016', which contributed towards re-orientation of service, and ensured that all patients who experience co-existing mental health and substance use receive appropriate intervention and their needs addressed.

The re-orientation to training, supervision and consultation mode is to expand the reach of dual diagnosis interventions via the clinical practitioners/teams who are already working with the individual and therefore, well placed to offer timely interventions in existing relationships.

COMPASS are currently reviewing tiers 2/3 of a 3-tiered targeted training packages to BSMHFT clinicians.

**Strategies in place to improve service delivery for individuals with co-existing mental health and substance use needs.**

COMPASS, with a focus on Dual Diagnosis model of training, consultation and supervision are orientated to upskill and maintain appropriate level of knowledge, skill and competency for all patient facing clinician's across BSMHFT.

The purpose of this is to ensure all patients receive a Dual Diagnosis intervention that is appropriate and responsive of their assessed presenting need.

From spring 2023, COMPASS has rolled out a re-orientated offer to acute inpatient wards and is in concluding stages of developing a re-orientated offer to Community Mental Health Teams for roll out.

Once embedded, COMPASS will be developing the re-orientated offer to Home Treatment Teams and Assertive Outreach Teams.