

Utilisation of Mental Health Beds for Halton residents

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Beds commissioned by Halton place

Adult Beds: 14,890 bed days comprising:

- 10,220 Adult MH beds days (28 beds) (Mersey Care)
- 4380 older adult bed days (for those aged 65 and over) (Mersey Care)
- 280 MH PICU bed days (0.75 bed) (Mersey Care)
- 3650 Adult MH rehabilitation bed days (10 beds) across Halton and Warrington (Alternative Futures).

What ICB Commission

Admission Avoidance Services:

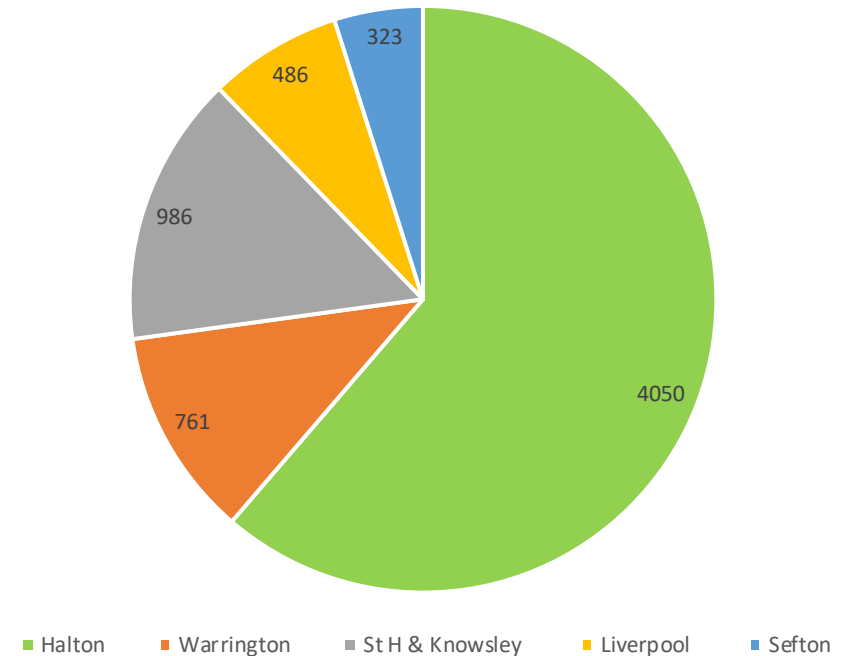
- Care Home liaison service to provide support to care homes to meet the needs of older adults with mental illness and dementia and reduce need for hospital admission.
- Home Treatment team to provide intensive home support to manage Adults mental health in the community and prevent admission/readmission to hospital. The service is 24/7, 7 days per week, 365 days per year.
- Park House crisis beds to provide short term support for those in mental health crisis.
- Personality disorder service to work with patients with complex and severe PD, reducing hospital admission and preventing need for any out of area admissions.
- LD Intensive Support Team. Provides support to Adults with LD whose behaviour is challenging for those involved in their care and who, because of this behaviour, may be at risk of a placement breakdown and inappropriate hospital admission to a MH bed. Intensive support for adults with autism only is currently being scoped.

Adult Mental Health Beds

2023/24 Adult MH Bed utilisation

- 6606 Adult MH occupied bed days (proportion by ward location shown in pie chart)
- 88% Adult in pt beds utilised were within mid Mersey region (61% within Halton)
- Of those admitted to Mid Mersey beds there were 102 Halton admissions and 80 discharges.
- Average length of stay in adult MH bed 26.7 days.(16.9 days in Sefton; 22.7 days in both Liverpool and St Helens and Knowsley; 60.84 days in Halton)

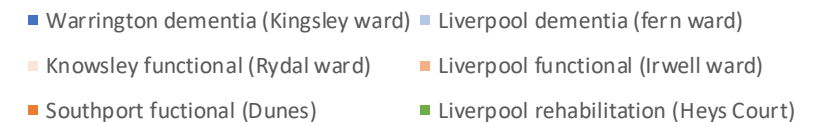
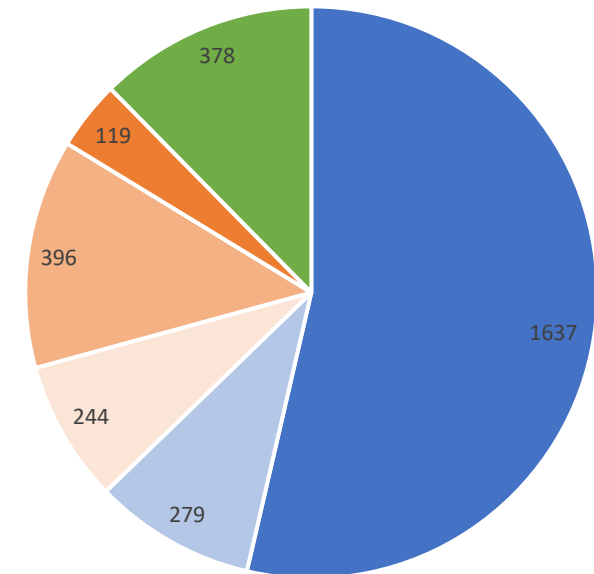
2023/24 Occupied Adult bed days per Mersey Care location



Older Adult Mental Health beds

- There are 81 older adult beds within Mersey Care (32 for dementia/memory; 49 functional). In addition to this there are 16 MH older adult rehabilitation beds in Liverpool
- 3053 older adult bed days utilised during 23/24. Pie chart shows how these were split.
- In 23/24 There were 12 admissions to mid Mersey older people's beds (11 Kingsley (Warrington), 1 Rydal (Knowsley)).
- The average length of stay was 99 days on a dementia/memory ward; 80 days on functional ward; 198 days on rehab ward.
- Care Home liaison team received 98 referrals. 11 patients were admitted to a Mersey Care Mental Health bed by the team. None of the 11 required readmission

2023/24 Older Adult bed days



PICU (Psychiatric Intensive Care Unit)

Cheshire and Merseyside

- 2023/24 – There were 2 Halton patients (1 male, 1 female) that used a total of 28 bed days
- This is lower than historical admissions due to improved outreach support patients to remain on the ward where appropriate and prevent unnecessary transfer to PICU

Rehabilitation Beds

- Warrington commission 10 rehabilitation beds from Alternative Futures Group (Lea Court, Warrington) to patients detained under the Mental Health Act and to informal patients that Halton patients can access with a recharging arrangement.
- 23/24 No Halton Bed usage. There were 6 requests for admission but these patients either did not require rehabilitation or were provided less restrictive support in the community.

Out of Area Placements

- 2023/24 – No Out of Area Mental Health hospital bed placements (Out of area being outside Mersey Care footprint)
- As at 30 April 24 there are 3 Halton patients in community out of area placements (2 females are due to be repatriated to Halton when their house is ready; 1 male is moving to another out of area placement)

Forensic Beds

- Commissioned by Specialist Commissioning (Not commissioned by ICB)
- In 2023/24 Halton patients utilised 732 bed days on Chesterton, Marlow and Tennyson Mersey Care forensic wards.
- Chesterton, Marlow and Tennyson are low secure inpatient units, based at Hollins Park, Warrington, for adults with mental health problems who are involved in the criminal justice system. This will often be people who have been given a custodial (prison) sentence but have been moved to low secure mental health wards to support their mental health needs.

Challenges

- 2023/24 9.59% (929/9687) Halton MH bed days were for those that were clinically ready for discharge. During Q4 there was a reduction in the number of bed days for Halton clinically ready for discharge patients to 7.6%
- Of the 929 CRFD days 612 were due to delay in finding housing, and 305 were due to social care; 12 uncoded. Time is needed to find and put in place suitable community provision to enable patient to be discharged (e.g. additional staff may be required)
- At 30th April 24 – 63 patients Mersey Care footprint CRFD. Of these there were 2 Halton adults CRFD within in-patient beds (1 patient requires a nursing home, the other requires a care package).
- Proportionally more delayed discharges relate to older adult placements. During 23/24, 15% (465/3053) of Halton older adult bed days were used by patients that were clinically ready for discharge, compared to 7% (464/6606) adult MH bed days.
- HBC have flagged via the care home group that care homes are struggling with challenging behaviour. There has been an increase in the requests to Halton CHC team for 1:1 support. Mersey Care report recent increase in number of requests for older adult beds for Halton patients and query whether in pt bed is required.
- High bed occupancy across C&M. 100% MH bed occupancy on Bank Holiday Monday (6th May)
- Mersey Care leads bi-weekly mental health capacity and flow meetings with representatives from Halton Continuing Health Care team and Adult Social Care to support with delayed discharges.

Next Steps

- NHS Cheshire and Merseyside is implementing a Mental Health System Flow programme in 24/25. The intention is that this programme will:
 - Reduce the number of patients waiting in a community setting for admission to a hospital bed
 - Reduce the number of patients waiting in acute hospital emergency departments for discharge into the community or to a mental health inpatient bed.
 - Reduce the number of patients who are clinically ready for discharge in mental health in-patient settings.