Funding pro-forma for Mental Health Service Improvement Fund

Name of health board	Swansea Bay University Health Board
Allocation amount for full year (please see covering letter).	£82,718
Project Title	Development of ED services at Tiers 1 & 2

Please provide a general description of the project. This needs to include a clear case for proposed changes / service development, evidencing how this will provide additionality and added value to current service provision. This section should also include any relevant engagement activity undertaken which enabled prioritisation of proposals. (Max. 400 words).

In November 2019, in response to the Health Ministers request for feedback on the Eating Disorders Review 2018, Swansea Bay undertook a consultation with clinicians across the Health Board. This consultation highlighted areas for service development which would meet the Minister's request to:

- Reconfigure services towards earlier intervention.
- Work towards achieving the NICE 2017 standards on Eating Disorders within two years.
- Develop plans to achieve a four-week waiting times across services as recommended in the report.

People with an eating disorder are currently seen as part of a tiered model of care and can present to primary care or community mental health teams (CMHTs). Our tier 3 eating disorder team has never operated a strict referral criteria and thus patients access the team based on need and complexity rather than through employing a single indicator such as BMI. However, people with less complex needs or difficulties currently wait for an intervention at Tier 1 or 2. These waits, although within access targets for mental health, can be significant and certainly well beyond the recommended 4 weeks from receipt of referral to treatment.

The Adult Tier 3 Specialist Eating Disorders Service is fully compliant with NICE guidance with all staff delivering NICE concordant treatment, however this is not the case for the other tiers across adult mental health. The Tier 3 service has recently appointed two Band 6 Specialist Eating Disorder Clinicians to provide specialist eating disorder assessment and NICE concordant treatments at Tier 2. However, further investment is now needed. Expansion to the current team would:

- Increase capacity enabling more patients to be seen, reduce waiting times and support early detection of ED cases
- Broaden the existing skill base ensuring timely, multidisciplinary, specialist eating disorder assessment and intervention, as per NICE 2017 guidance, is available to eating disorder patients at all tiers (primary and secondary care).
- Enable Tier 1 and 2 to have access to dietetics support which is currently often absent
- Enable consultation and supervision to be expanded in line with Matrics Cymru

Expansion and development of the existing provision will enable early identification and specialist assessment and treatment as per NICE 2017 guidance for those people presenting within Swansea Bay at Tier 1 and 2. It will enable improvements in prognosis, and reduced morbidity and mortality associated with ED as highlighted in the 2018 Review.

Please provide detail on the key milestones that will need to be achieved following approval of funding. (Max. 150 words)

Following funding approval key milestones would include:

- Advertisement and recruitment of new staff 1 x 0.4 wte Band 7 Dietition, 1
 x 0.6 wte Band 7 Therapist and 1 wte Band 3 data processor
- Training of new clinicians in NICE concordant treatments (e.g. CBTe)
- Establishment of robust supervision/support arrangements

The development of the service would be evaluated and audited against the NICE Quality Standards 2018 and the Eating Disorders Review 2018. Data will be collected on an ongoing basis capturing waiting times as well as markers of change such as:

- Self-Reported Outcome measures completed by service users, including measures specific to ED: EDE-Q, CIA and CORE 34.
- Clearly outlined Care and Treatment Plans that underpinned by a recovery focus.
- Evidence of recovery oriented service provision and that service users are active partners in their own care
- Reduction in morbidity and mortality.
- Earlier intervention to ameliorate physical and psychological consequences of ED.
- Audit of service user and carer feedback.

Please provide detail here if your proposal includes any non recurrent funding in 2020/21 to support future planning or service delivery. (Max. 150 words)

Non recurrent funding to include physical health monitoring equipment (BP machines, scales, height measuring equipment) and IT equipment to enable flexible working arrangements within the proposed model of service. The IT equipment will enable the implementation of mobile solutions through the use of ipads etc. Throughout the pandemic, ED has been an essential service and good IT resources have proven essential in this context for managing appointments (virtual appointments, telephone contact), maintaining communication with professional colleagues and for timely recording of data and clinical information.

Total £2,500

Please provide detail on how you expect the proposal to achieve the expectations laid out in annex b of the covering letter. Please include how you will ensure that these are measured and monitored. (Max. 200 words)

The proposal will enable:

- Provision of education and training to clinicians working at Tier 1 and 2 including dietetic advice
- Provision of consultation, supervision and advice to clinicians working at Tier 1 and 2.
- Improved access to eating disorder expertise (assessment and clinical advice) at the point of entry into MH services
- Swansea Bay to move towards offering assessment and treatment for all people with an eating disorder within four weeks of receipt of referral, or one week if urgent.
- Eating disorder patients to be offered NICE concordant psychological treatment at an earlier phase within their illness
- Eating disorder patients being seen within Tier 1 and 2 services to access dietetic advice and input
- Seamless transition between services and ensure that a robust risk assessment (including attention to both physical and psychological risks) and management plan is in place for all eating disorder patients.

The Band 3 professional will be a key addition to the team, providing administration support and supporting in the establishment of systems to capture, analyse and report on data relating to the above so that service capacity and

demand can be monitored, evaluated and service provision adapted as required over time.

Please provide a broad breakdown of costs for this proposal. *Please provide the detail for both 2020/21 and 2021/22 (where appropriate) To note costs for 2020/21 are expected to be for the six months currently being issued.*

2020/21		2021/22	
Four Month Period		Twelve Month Period	
1 x 0.4 wte Band 7 Dietition		1 x 0.4 wte Band 7 Dietition	
1 x 0.6 wte Band 7 Therapist		1 x 0.6 wte Band 7 Therapist £55,831	
£18,610		1 x Band 3 Analyst	£25,887
1 x Band 3 Data Analyst	£8,629	Travel	£1000
Travel	£333	Total	£82,718
Non recurrent costs	£2500		
Total	£30,072		

Please use this space to provide a high level overview of how the initial six months funding was utilised within the health board to respond to the pressures associated with the current pandemic situation in mental health. (Max. 300 words)

The funding has been used principally to address additional costs in the following areas

- Loss of Income where we are unable to provide external training for PBM and PBS (Positive Behaviour Management and Positive Behaviour Support) to other HBs, local authorities and private providers
- Additional Medical Staffing rotas we initially doubled up on junior rotas at night and day and added an additional junior during the day, the additional junior in the day remains in place.
- Additional pay and enhancement costs from redeploying staff and backfilling where substantive staff have been unavailable due to being symptomatic/asymptomatic/shielding
- Additional CHC costs where additional arrangements have been put in place over and above the existing contractual arrangements in response to COVID and the needs of vulnerable patients
- Additional non-pay costs increased usage of PPE and increased pricing of consumable items

An electronic version of this form should be submitted to <u>mentalhealthandvulnerablegroups@gov.wales</u> for consideration once completed.