

Freedom of Information Request 20 005

Our Reference: FOI 20 005 / AA / LB / LP

Name:

Date: 5th March 2020

Address:

Dear

Further to your Freedom of Information Request, please find the Trust's response below:

I am writing with an inquiry as to how does your trust deal with patient referrals below are several questions if you would be prepared to answer them

1) New patient Referrals

Humber Teaching NHS Foundation Trust (the "Trust") is a multi-specialty provider of mental health, primary care and community services. A new patient referral will be processed differently by each service delivered by the Trust.

In relation to <u>Adult Mental Health</u> services, all adult and older adult referrals come through the single point of access, Mental Health Response Service (MHRS). The MHRS ensures that all referrals from Service users, carers, GPs, and all other health and social care professionals are processed and responded to in a timely way, following a robust clinical triage process. Designed for routine, emergency or urgent referrals and enquiries, this single point of access and contact is staffed by fully qualified and skilled healthcare professionals 24 hours a day, seven days a week, 365 days a year. The team provides advice and guidance through a triage process, where the urgency of care required is assessed.

In relation to <u>Secure Services</u>, the Trust is commissioned by NHS England, and has both a local and regional remit for certain categories of patients. All referrals are considered at a Monday Risk and Referral meeting, where the referral is initially screened. Where appropriate, assessment teams are agreed, and assessments are undertaken within set timescales. The final decision for admission is also agreed at that meeting, again in line with set timescales.

In relation to <u>Addictions Services</u>, patients can drop into a number of venues across the East Riding and access immediate support / assessment throughout the week. Alternatively, GP's can refer directly to the Addictions Service staff that work within their surgeries on a weekly basis.

In relation to the <u>Adult Learning Disability Services</u>, referrals to the Service are discussed in the first instance at a Meeting on a Monday morning to establish the appropriate course of action on a case-by-case basis. Where an out-of-area referral is made, the referrer will be asked to complete a referral form before a MDT meeting is arranged.







In relation to <u>Children's Therapy Services</u>, referrals may be received via email or letter. All new referrals are screened to ensure they meet service criteria. If the referral is accepted, an acknowledgment of referral is sent to families and / or referrer with service contact details informing them they have been placed on the waiting list. Alternatively families will receive a letter requesting they phone to make an initial appointment. For referrals which don't meet service criteria a letter is sent to the referrer informing them. Each service has individual priority criteria based on clinical need.

In relation to <u>CAMHS</u>, all new patient referrals come into our Hull and East Riding contact points (Our single point of access for each CAMHS team). All referrals are reviewed and triaged according to urgency by an appropriate clinician. A plan of care will then be decided with the young person and / or family if appropriate on how best to proceed. Should the referral need further CAMHS input, this will be transferred to our treatment teams. Should it be decided that another service is more appropriate, this will be facilitated accordingly.

In relation to <u>Community Services</u>, all new patient referrals are into a single point of access for each of our community teams in Whitby, Scarborough & Ryedale and Pocklington 24/7. Referrals come in via telephone, SystmOne or email. The referral is triaged by an appropriate member of the multi-disciplinary team and allocated based on clinical urgency/need and either allocated to a member of the team or placed on a waiting list to be seen in clinic or at home.

2) Existing patients under another trust recently moved to your area

In relation to <u>Adult Mental Health services</u>, patients recently moved to the area will come through the single point of access, Mental Health Response Service (MHRS), however these are then passed to a Community Mental Health Team for further communication and engagement. An individual Care Co-ordinator will be allocated and will engage with both the patient and those currently providing care to facilitate the transfer.

In relation to <u>Secure Services</u>, as an inpatient service, patients would not usually 'repatriate' where the patient is detained in services elsewhere. There are various reasons for out of area (OOA) placement – these may be victim issues, MAPPA concerns, or specialist care needs. Our NHSE case managers monitor OOA placements, and we do assess to repatriate, much in line with the processes in 1 (above) for Secure Services.

In relation to the <u>Addictions Service</u>, depending on level of care, a referral may be requested from the existing service alongside the prescribing information to be taken over. Structured appointments are given in the Open Access service for motivational work.

In relation to the <u>Adult Learning Disability Services</u>, where a patient comes back into area, the referral process detailed above would be followed and an MDT arranged to decide on the appropriate course of action for the patient and the timescales for this.

In relation to <u>Children's Therapy Services</u>, patient's moving to the area are referred in the same way as a new patient and the process outlined in Q1 is followed.

In relation to <u>CAMHS</u>, patients will come in through the Hull or East Riding Contact point but will be transferred straight through to the correct treatment team as no triage will be required.

In relation to <u>Community Services</u>, patients moving to the area will come through the respective single point of access for that area and follow the process outlined in Q1. Based on clinical presentation/urgency of information received, patients will be allocated an appointment or placed on a waiting list.







3) Non fixed abode patients

In relation to <u>Adult Mental Health services</u>, within the single point of access, Mental Health Response service (MHRS), is a small team who work with the homeless hub. The Service links in with Hull City Council, Hostels and Emmaus to assess and support individuals who are homeless or approaching homelessness.

In relation to <u>Secure Services</u>, the decision as to which unit a patient should be admitted to is totally dependent on most recent GP registration. Where a patient is registered with a Hull GP, Trust Secure Services are then their 'home' service, and would assess / admit if necessary. There is new national guidance about managing this difficult to engage group. We would work in accordance with those guidelines (Homelessness Reduction Act, 2017).

In relation to <u>Addictions Service</u>, patients of no fixed abode can refer in the same way as any other patient. The East Riding Partnership do however work alongside Emmaus (rough sleepers charity) to provide structured assessment appointments that the Emmaus staff member can attend with the patient, to help meet the need of the rough sleepers who often struggle to attend appointments.

In relation to the <u>Adult Learning Disability Services</u>, patients of no fixed abode would not be relevant to this service.

In relation to Children's Therapy Services, this has not been an issue.

In relation to <u>CAMHS</u>, patients would be processed as normal through the contact point though we are mindful they may only be contactable on a mobile telephone. We would look to have an agreement with the young person about how they wish to be contacted, for example, they may give permission for us to contact a manager at a hostel.

In relation to <u>Community Services</u> this has not been an issue but would follow the process set out in Q1 and be mindful of the method of communication regarding appointments.

Kind regards,

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https://www.humber.nhs.uk/about-our-trust/freedom-of-information-enquiry-form.htm





