

KMPT developments and the need to work with housing to support patients settle in the community

29th January 2020

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Forensic Outreach and Liaison Service (FOLS)

Overview

- Health led MDT community forensic team
- Operational since 1st April 2019
- Providing a Monday-Friday 9am-5pm Service
- Caseload of 90

Key Objectives

- Reduce the length of in-patient stay in secure setting
- Provide treatment in the least restrictive environment
- Reduce rates of admission and re-admissions to secure care for forensic patients
- Bring people back into their area

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FOLs Core functions

- Safe transition and management of high risk mentally disordered individuals from secure services into the community
- Clinical supervision and care coordination of conditionally discharged/life license patients in Kent.
- Mental health care and treatment needs of forensic patients met by FOLS - until the patient is ready to be transferred to the CMHT
- Working alongside the KCC Community Forensic Social Work team.

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Specialist Community Forensic Teams

- KMPT is one of thirteen national pilot sites developing a Specialist Community Forensic Team model through to March 2021
- We envisage providing the high level of specialist care received in hospitals in a community environment and we liken this model to “hospital care in a community setting”
- We will be utilising bespoke care plans and a network of intensive community support, knitting together the non-statutory and other community providers, to develop a successful community recovery pathway
- The following are the key objectives during 2020/21;
 - Discharge those who have been in medium and low secure for an extended time (5 years plus)
 - Repatriate patients who are currently out of the Kent/Surrey/Sussex area by March 2021
 - Establish vocational links who will accept service users
 - Deliver an evidenced based group programme including peer support worker led modules
 - Deliver the careers toolkit, providing at least 4 carers forums

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Rehabilitation

- KMPT is reviewing its overall rehabilitation service model in the context of whole mental health system changes. It will make recommendations for development of the service that include:
 - Implementing a *single operating model of community rehabilitation* across Kent and Medway. This will provide an equitable service across the county to further support working with people with a severe and enduring mental illness in the least restrictive environment. Currently there are only 5 rehabilitation community teams in East Kent – none in Dover or West Kent including Medway.
 - Developing at least one, and possibly two, *specialist high dependency rehabilitation units* serving the Kent and Medway population as part of a major capital bid. Currently people requiring specialist high dependency rehabilitation are accommodated in out-of-area treatment placements.
- These recommendations will deliver a number of key objectives that include:
 - improved quality and provision of care and patient outcomes for the Kent and Medway rehabilitation population;
 - improved use of available resources;
 - offers specialist rehabilitation intervention through an individual patient-centred pathway into local NHS and community services, and
 - supports the whole-system with the reduction of out-of-area treatment (OAT) placements into the rehabilitation service.

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Suggested next steps

- Regular standing item for KMPT on the Kent Housing Group
- Forming of a sub group for Specialist Community Forensic Teams

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Key contacts

- Louisa Powell, FOLs and SCFT Service Manager, louisa.powell@nhs.net, 01622 723118
- Victoria Nystrom-Marshall, SCFT Programme Manager, victorianystrommarshall@nhs.net, 07770 926731
- Sarah Day, Rehabilitation Programme Manager, sarah.day16@nhs.net, 07584-618075

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