

## **Healthwatch York Report: Breaking Point: A recent history of mental health crisis care**

### **Summary**

1. This report is for the attention and action of Board members, sharing a report from Healthwatch York which shares local experiences of seeking support for a mental health crisis in the city.

### **Background**

2. Healthwatch York provides information and advice about health and care services, signposts people to support, and listens to their experiences when accessing health and care services. Whilst looking at people's experiences of urgent care, we recorded a number of stories relating to poor experiences of mental health crisis support. We began work to explore these experiences further. We worked with staff working in and alongside crisis care services to understand their views on support available.
3. We also worked with partner organisations York Mind and York Carers Centre, to reach out to and record the experiences of people with lived experience of mental ill-health and those caring for them.
4. We appreciate this has been a very difficult time for everyone working in health and social care. We aimed to produce a report that acknowledges the difficult national picture with regards to crisis care and to highlight the concerns being reported to us. We have shared this report to encourage further discussion of these challenges and consideration of ways we can collectively address them.

## **Main/Key Issues to be considered**

### **Consultation**

5. In producing this report, we held 1-2-1 interviews with people working in the local health and care system, people with experience of crisis care services, and carers supporting people who had experience of mental health crisis.

### **Options**

6. There are two sets of recommendations within this report set out on pages 100-102. These are participant recommendations based on local experiences alongside further recommendations based on everything that was shared with Healthwatch York in developing the report. These recommendations are:
  - i. Increased provision of preventative care so that fewer people end up in crisis in the first place
  - ii. Lower level support: decrease the threshold for support so that people don't have to end up in crisis before they get support
  - iii. Improved follow up after discharge or after calling the crisis line so that crisis is not a revolving door and people do not repeatedly find themselves in crisis
  - iv. Strengthening the crisis line alongside promoting the second line for those who need support but are not in crisis
  - v. Clarify what constitutes 'crisis' for both service users and professionals
  - vi. Reinstate and strengthen the Mental Health Crisis Care Concordat to clarify care pathways, provide clear minimum performance standards for all those working in services, and make sure members of the public can access the right help and support at the right time delivered by appropriately trained professionals.
  - vii. Review existing resources, support services and gaps in the pathway and identify the most effective ways to deliver support and fill gaps, including those best provided by the VCSE sector.
  - viii. Restructure approaches to coproduction to make sure everyone's views and experiences are heard and influence service design and delivery. This must include working with external partners to facilitate involvement for those who cannot engage directly. Consideration must be made of the resource implications for VCSE organisations to make this possible.

- ix. Learn from schemes improving people's experiences of crisis response / changing the system to identify ways to invest in and maintain those that work (for example, the positive feedback about police street support).
- x. Make sure workforce plans reflect the specific challenges for attracting health and care staff to York (including lack of affordable housing, transport). Work together locally to learn from historical examples such as the Rowntree Housing model and how these fits with Local Plans.
- xi. Embed a compassionate culture towards all people experiencing mental ill health.

### **Implications**

- 7. There are no specialist implications from this report.

- **Financial**

- There are no financial implications in this report.

- **Human Resources (HR)**

- There are no HR implications in this report.

- **Equalities**

- There are no equalities implications in this report.

- **Legal**

- There are no legal implications in this report.

- **Crime and Disorder**

- There are no crime and disorder implications in this report.

- **Information Technology (IT)**

- There are no IT implications in this report.

- **Property**

- There are no property implications in this report.

- **Other**

- There are no other implications in this report.

### **Risk Management**

- 8. There are no risks associated with this report.

## Recommendations

9. The Health and Wellbeing Board are asked to:
- i. Receive Healthwatch York's report, Breaking Point: A recent history of mental health crisis care.
  - ii. Confirm how they wish to be informed on progress against the recommendations within the report.

Reason: To keep up to date with the work of Healthwatch York, be aware of what members of the public are telling us and identify the best route for the development of partnership improvement plans.

## Contact Details

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Report  
Approved



Date 12/07/23

Wards Affected:

All

For further information please contact the author of the report

### Background Papers:

**Annex A – Breaking Point: A recent history of mental health crisis care**  
[Breaking-Point-Mental-Health-Crisis-Care-June-2023-updated.pdf](https://healthwatchyork.co.uk/Breaking-Point-Mental-Health-Crisis-Care-June-2023-updated.pdf)  
([healthwatchyork.co.uk](https://healthwatchyork.co.uk))