

## **Proposal for more resources for Crisis Resolution and Home Treatment Team (CRHTT)**

A recent CQC inspection revealed that in Berkshire CRHTT deals with twice the national average of patient with limited resources.

The Sainsbury Centre and DH Policy Implementation Guide suggests a team of 14 staff to serve a population of 100,000. We have seen a year on year increase in the number of CRHTT patients in the last 3 years.

**This paper is proposing an addition of 36 staff in CRHTT to provide the service to the population of Berkshire. This will go a long in ensuring the service is safe, Effective, Responsive, Caring and well-Led as per the requirement of the CQC.**

- **Current staffing levels:-**

### **CRHTT-EAST**

The average caseload for Slough is between 25 to 30; WAM- 20-25 and Bracknell- 15 to 20 patients, excluding new referrals and 7 day follow up. Operating from the Hub, there is a Band 7 Shift Co-ordinator/Clinical Lead who in addition to co-ordinating the shift is also responsible to answer calls and take new referrals.

At weekends, there is no provision for band 7 and it is a band 6 who would take on the role of Shift. When there are urgent assessments, staff are redeployed to carry out assessments, thus cancelling their planned visit to patients who are already on the home treatment caseload. In addition, staff have the added duty of carry out 7 Day Follow-Up.

### **CRHTT-WEST**

The average caseload for Reading is between 25 to 30; Wokingham: 20-25 and Newbury: 15 to 20 patients, excluding new assessments and 7 day follow up appointments.

Reading is busier than Slough with patients turning up at PPH to be seen which can be a challenge.

On the late shift, given the geography of West Berkshire, it is not possible to base all staff at one location unlike in the East, hence the reason for having more staff on duty.

However, given that the service cannot stop taking referrals and the level of unpredictability in referrals, extra staff are brought in as and when the caseload increases in both East and West which is a cost pressure

### **Team Caseload:**

Although the service was expected to look after caseload of 90 patients, often the team would be looking after 130 to 180 on the home treatment caseload.

## **PROPOSAL**

- **Staffing proposal to be able to meet the demand on the service and deliver a safe service.**
  - To cover the whole of Berkshire with an additional of **4 x Band 6 staff on early shift and 2 band 6 on late shift, 7 days a week.** There will be no locality aligned worker to the Locality as the 2 band 6 covering the East will be expected to carry out assessment in either Bracknell or WAM or Slough depending on demand and urgency. Equally, the 2 band 6 covering Reading, Newbury and Wokingham will be expected to be carrying out assessment wherever there is demand.
  - **One Extra support Worker on late Shift at the East hub and West Hub.** The support worker will be deployed to support the band 6 wherever, 2 staff are required to carry out the assessment for health and safety reasons.
  - For an addition of **one band 7 Clinical Team Lead for both the east and the west,** which would allow for there to be B7's on duty each weekend to support the service [rather than the current weekday shift working].

### **Added benefit:**

- To formulate a Rapid Assessment team within East and West to operate within the current team.
- To assist with Home Treatment/Assessments/7 Day Follow-Ups and Discharge Pending.

### **CRHTT NIGHT SERVICE**

At present the CRHTT-East night staff, based in Slough provide cover for resident of Berkshire West.

- Proposed night staffing:-
- It is proposed that we should have 1 band 6 and 2 band 3 staff covering the West of Berkshire, based at Prospect Park Hospital who will also be able to visit patient at home during the night to prevent them from turning up to RBH or PPH and receive support and treatment in the own home.
- This would equate to **an additional Band 6 and 2 Support workers on night shift, 7 nights a week.**
- The benefits of having staff placed on night shifts in the West:-
  - Reduce mileage claims
  - Reduce patient complaints
  - Treat more patients in their own home
  - Reduction in hospital admission
  - Improve response time to patients in the west at night
  - Reduction in the number of patients attending RBH A&E

## PROPOSAL FOR MEDIC SESSIONS

Although the remit of CRHTT is to treat patient in the own home 24/7, the availability of medical staff within CRHTT is not 7 days a week

- To propose:-
  - For **1.0 WTE - Speciality Doctor** to cover Slough.
  - For one session of a Speciality Doctor based at the CRHTT-East Hub to work between the hours of 17:00 – 21:00 hrs on rotation Saturdays and Sundays and to visit patients at home in East Berkshire.
  - For **one session of a Speciality Doctor based at the CRHTT-West Hub To work between the hours of 17:00 – 21:00 hrs on rotation Saturdays and Sundays** and to visit patients at home in Berkshire West.

## Clinical Nurse Specialist / Governance Lead

There are a lot of governance issues in CRHTT that requires close monitoring and addressing on a daily basis. It has become evident that we now require a funded post for a Clinical Nurse Specialist / Governance Lead (Band 8A) to address the Governance issues. That latter will be involve in staff induction & training; disseminating Key themes from SIRI investigations and Outcome of Complaints; Clinical Audit; Risk Registers; Safeguarding, in addition to other governance issues.

### Proposal:

To recruit for a **Band 8A Clinical Nurse Specialist / Governance Lead** to cover 0.5 WTE in CRHTT-east and 0.5 in CRHTT-West.

## PSYCHOLOGIST

### Proposal:

For an additional **0.6 WTE Band 8A Psychologist** split between East & West. This will enable the Psychologist to work in each locality one day per week, to contribute in MDT reviews, see patient with complex needs and psychological needs and support staff on the ground. Supervision will be from the existing Band 8B psychologist.

## Pharmacy Input in CRHTT:

### Proposal:

It is proposed that we recruit an additional **0.6 WTE Band 8B Pharmacist to cover CRHTT**, which is equivalent to an extra 0.3 WTE for each hub.

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