

Single Point of Access: South West Yorkshire Partnership NHS Foundation Trust

Single Point of Access (SPA) is an engagement, triage and assessment service, helping users of mental health services keep well in the community and avoid unnecessary hospital admissions. Important features include high quality patient assessments, delivery of interventions to reduce distress and provide practical help, and signposting some patients to voluntary sector and primary care services.

South West Yorkshire Partnership NHS Foundation Trust provides community, mental health and learning disability services across Barnsley, Calderdale, Kirklees and Wakefield. It also provides some medium secure (forensic) services to the whole of Yorkshire and the Humber. Over 98% of services are delivered in the community.

Aims

SPA is a pilot project in the trust's acute and community transformation programme. SPA receives all urgent and routine referrals to secondary mental health services, including service users considered to be at risk of admission.

Previously assessment teams managed referrals for adult community mental health teams (CMHTs) only, but SPA manages all referrals to adult and older adult CMHTs and primary care mental health services. Some specialist services continue to take direct referrals (memory services, improving access to psychological therapies (IAPT) and early intervention in psychosis), but SPA may triage and can help ensure rapid access to these services.

Origins

Developing a single point of access to secondary mental health services is a strategic priority for the trust and a local

Characteristics

- aims to see service users within three days where urgent needs are identified
- staffed by a multidisciplinary team
- medical leadership and input
- referrals from primary and secondary care and self-referrals
- 7-day service available until 8pm weekdays
- part of the trust's transformation programme – a key component in improving community mental health services by streamlining referral and assessment

priority for commissioners and users of mental health services. In particular, local GPs asked for quicker, simpler pathways to specialist mental health services and for mental health assessment to be available when they needed it.

Until this pilot, referrers and service users had to rely on psychiatric emergency services (crisis team and accident and emergency liaison) after 5pm and at weekends. This placed a burden on these services, on GPs and other referrers. It was linked to delay in patients accessing specialist mental health services, both community and hospital-based. This led to increased demand for acute services, particularly from patients with mental health deterioration presenting at A&E.

Structure

Clinical commissioning group winter resilience funding has allowed SPA to extend its operating hours. It is now a **seven-day service**, receiving referrals from 8am to 8pm Monday to Friday, with shorter opening hours on Saturday and Sunday.

SPA is run by a **multidisciplinary team** of mental health nurses and social workers, and includes staff experienced in primary care mental health and care for older adults. A consultant psychiatrist works with the team providing medical leadership, rapid access to medical assessment and offering advice and consultancy to referrers. Specialist psychological advice is available to the team from the host CMHT.

How patients benefit

SPA receives referrals from primary and secondary care, and people can refer themselves. The team accepts and triages routine, urgent and crisis referrals of mental health service users.

The SPA team accepts and triages crisis referrals on behalf of the home treatment team and can undertake joint assessments with it. This makes referral simpler and safer as **there is only one number for GPs to call 24/7** for mental health crises. It also allows SPA to divert or quickly escalate people who in fact need an urgent rather than crisis response.

Enabler: high quality assessments

One of SPA's key tasks is to assess people presenting with risk of self-harm and suicide. By developing its practice in this field, and by offering extended assessments to people with identified risks, the team aims to expertly manage this challenging dimension of mental healthcare.

All service users are contacted on the day of referral to find out how urgent their needs are. SPA can respond on the same day to the most urgent, with a commitment to see all non-routine referrals within three days. It assesses routine referrals within 14 days.

Enabler: supportive interventions

SPA can see service users several times in a short period. This may be to complete an extended assessment or to provide 'brief interventions'. These aim to reduce levels of distress and anxiety, provide practical help and advice (eg with debts) and increase family/carer resilience through support and education. The approach can be highly effective, partly because help is provided quickly and at a time of stress when people can be more receptive to making changes. Brief interventions have been found to substantially reduce the number of service users requiring referral to secondary services.

SPA conducts a **face-to-face assessment** wherever possible. After referral, a team member contacts the service user, determines urgency of need and arranges an appointment in the user's place of choice – sometimes at their GP surgery, sometimes at the team base and often in their home.

The team works with the patient to **agree a care plan, action any referrals and signpost the patient to self-help groups** and activities, including the local Recovery College. Patients with identified mental health needs may be

referred to CMHTs, the primary care mental health team, trust specialist services or IAPT services. The service user and assessor sign the agreed care plan and share it with the patient's GP, so they are aware of what services the patient will be receiving and can monitor progress. The service user keeps a copy for their own records.

Multidisciplinary working that involves social workers in the team ensures that SPA properly understands and addresses social dimensions of mental ill-health.

Challenge

Changing ways of working

It was a challenge to convince CMHTs and other receiving teams to stop managing referrals in favour of a centralised specialist team. The trust is doing this by demonstrating the value to the organisation of a single point of access and assessment. The trust has reduced its 'Did Not Attend' rates for appointments, reduced CMHT waiting lists and increased opening hours. The team regularly discusses referrals with staff outside the single point of access to maintain trust and accountability across wider teams.

Impact

The trust reports quality improvements since SPA's introduction:

- **improvements in the timeliness and nature of patients' care** – centralised referral and assessment enable the team to triage service users effectively and direct them rapidly to the right parts of the system for care that is most appropriate for their immediate and future needs
- **improved ability to manage growing demand** – the streamlined referral and assessment process has helped the trust meet growing demand
- **shorter time between referral and first appointment**, therefore reducing waiting times for patients
- **increased capacity to care for patients in the community** – SPA has increased throughput, and the CCG's investment in staff has enabled expanded operating hours
- **reduced waiting lists for CMHTs** as the new approach to triage means only appropriate referrals are passed to secondary services.

SPA rapidly assesses and directs people to the right part of the system according to their needs. By reducing pressure on crisis services and redirecting people who do not need specialist mental healthcare, the local health and social care economy could benefit from improved efficiency. The trust reports that SPA helps deal with growing demand, and by reducing missed appointments it can make a considerable contribution to cost-effectiveness, despite no direct evidence yet that it saves money.

More information

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This is one of a suite of case studies designed to increase awareness of the impact of moving healthcare out of hospital. For more materials see [Moving healthcare closer to home](#)