

Delivering the 18 Week Patient Pathway in Mental Health Services

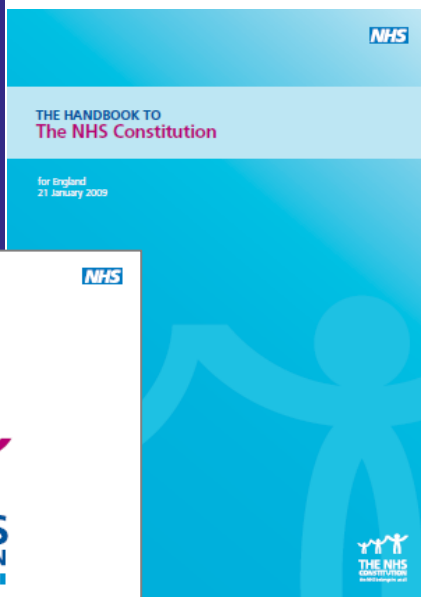
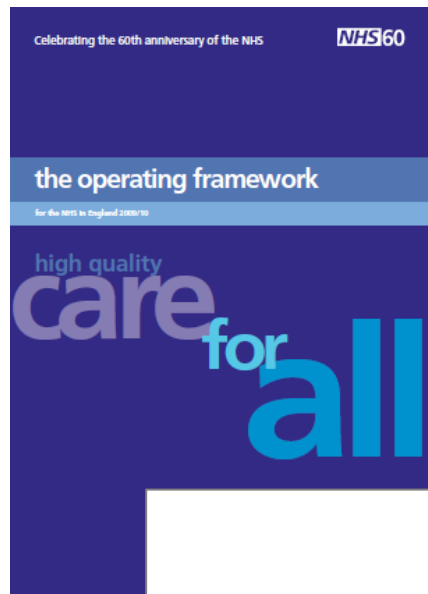
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Aims:

- **Outline some of the key issues in relation to the 18 week patient pathways in mental health services.**
- **Refer to current policy guidance.**
- **Identify next steps.**

Policy



The NHS Constitution

“All patients should receive high quality care without any unnecessary delays”

The Operating Framework - High Quality Care for All

“18 weeks in an absolute performance level applicable at the organisation level.”

“No-one should wait more than 18 weeks.”

Patient experience will be the ultimate measure of success ... in 18 week Access

Guidance

The screenshot shows the NHS 18 Weeks website interface. At the top, there is a search bar and navigation links for 'Forums', 'Register here', and 'Login'. Below this, there are several featured articles and a 'Newsflash' section. The main content area displays a 'Welcome to 18 Weeks' message and a large image of a woman in a nurse's uniform. A detailed view of the '18-WEEK RULES SUITE - NATIONAL CLOCK RULES' document is shown in the foreground, detailing the following sections:

THE 18-WEEK RULES SUITE - NATIONAL CLOCK RULES

Clock Starts

1. An 18-week clock starts when any care professional or service permitted by an English NHS commissioner to make such referrals, refers to:
 - a) a consultant led service, regardless of setting, with the intention that the patient will be assessed and, if appropriate, treated before responsibility is transferred back to the referring health professional or general practitioner;
 - b) an interface or referral management or assessment service, which may result in an onward referral to a consultant led service before responsibility is transferred back to the referring health professional or general practitioner;
2. An 18-week clock also starts upon a self referral by a patient to the above services, where these pathways have been agreed locally by commissioners and providers and once the referral is ratified by a care professional.
3. Upon completion of an 18-week referral to treatment period, a new 18-week clock only starts:
 - a) when a patient becomes fit and ready for the second of a consultant-led bilateral procedure;
 - b) upon the decision to start a substantively new or different treatment that does not already form part of that patient's agreed care plan;
 - c) upon a patient being re-referred in to a consultant-led; interface; or referral management or assessment service as a new referral;
 - d) when a decision to treat is made following a period of active monitoring;
 - e) when a patient rebooks their appointment following a first appointment DNA that stopped and nullified their earlier clock.

Clock Pauses

4. A clock may be paused only where a decision to admit has been made, and the patient has declined at least 2 reasonable appointment offers for admission. The clock is paused for the duration of the time between the earliest reasonable offer and the date from which the patient makes themselves available again for admission.

Clock Stops

Clock stops for treatment

5. A clock stops when:
 - a) First definitive treatment starts. This could be:
 - i. Treatment provided by an interface service;
 - ii. Treatment provided by a consultant-led service;
 - iii. Therapy or healthcare science intervention provided in secondary care or at an interface service. If this is what the consultant-led or interface service decides is the best way to manage the patient's disease, condition or injury and avoid further interventions;

www.18weeks.nhs.uk

The 18 week Rules Suite

How to Measure

Definitions

Measuring Success

Patient Tracking

18 Weeks Patient Experience

Survey

“Clock Start”

Date of any referral from any “permitted service”

or

Date of validation by a care professional of any self-referral to MH services



Referral received by ANY mental health service



no

Clock stops for “non-treatment”

yes

Include all referrals where the client needs MH service in the denominator

No more than 18 weeks -
126 days, typically 88 working days

“Clock Stop”

The first client contact AFTER the LAST assessment

A “Permitted service” is any service permitted by a NHS Commissioner to make referrals and can include (but is not restricted to):

- GP and Primary Care Staff
- Accident & Emergency
- Hospital
- Education
- Social Care / Local Authority
- Emergency Duty Teams
- Out of Area Permitted Services

Validation by a care professional of any self-referral to (but not restricted to):

- Local “Single Point of Access” arrangements.
- Community Mental Health Teams
- Crisis Resolution Home Treatment Teams
- Clinics

A “care professional” is a person who is a member of a profession regulated by a body mentioned in section 25(3) of the NHS Service Reform and Health Care Professions Act 2002

Clock Start:

Date of any referral from any “permitted service”

or

Date of validation by a care professional of any self-referral to MH services

18 weeks = 126 days, typically 88 working days

Clock Stop:

The first client contact AFTER the LAST assessment.

Some people may take the view that assessment sessions have a treatment value, however, this is not the case for all sessions, therefore, the default “Clock stop” event must be a treatment contact with the client.

Given that programmes of treatment should be outlined in a care plan then it *may* be considered that an initial care plan should be dated no later than a Clock Stop contact.

Risks to clients receiving treatment within 18 weeks of referral

“Clock Start”



Delayed allocation of staff member for assessment

Delayed communication with client to arrange assessment

Inconclusive assessment that cannot determine clients MH needs or most appropriate treatment

Delayed allocation of staff member for treatment / co-ordination of care

Re-assessments due to inadequate assessments or “internal” referrals to separate parts of the mental health services

“Internal” waiting lists for separate parts of the mental health services, i.e. response time is too long

Un-integrated configuration or management of mental health services

“Clock Stop”

MH Teams comments on how to maintain delivery of this standard

- ✓ **Aim to provide patients with efficient access to treatment following referral**, do not view the 18 week as a “target”. 18 weeks is the period after which a policy breach is created
- ✓ **Mental Health services should manage the processes** between accepting or validating referrals and providing treatment to clients supported by using RTT data (Referral to Treatment) as “process data”. That is all events for each referrals are recorded showing who carried out each event and a date stamp for each event. Patients acceptance / refusal of appointments should be recorded as events. (Monthly referral to treatment data)
- ✓ **Mental Health services should identify key local risks** that contribute to the time of referral to treatment approaching 18 weeks by using RTT “process data”, and process mapping if necessary.
- ✓ **Use the “first client contact AFTER the LAST assessment” as the clock stop event for each referral.**

Next Steps

“PCTs and providers should plan how to maintain... delivery of this standard” The Operating Framework - High Quality Care for Patients and the Public.