

Date: 10/07/2015

**FREEDOM OF INFORMATION REQUEST Ref: FOI/012292 – Mental health issues.**

When I use the term 'due to mental health' below I mean attendances where the reason for the person's attendance is primarily related to their mental ill health or a health issue directly resulting from their disturbed mental health.

**1. How many patients attended A&E due to mental health in each year covering the period financial year 2010-11 to 2014-15?**

Please break down the statistics into the number per financial year.

**2. What percentage of total A&E attendances did patients attending for mental health account for in each year? Again please cover the period financial year 2010-11 to 2014-15 and break down the statistics into the number per financial year**

**3. What was the average wait for patients attending A&E due to mental health to have an initial assessment in each year 2010-11 to 2014-15?**

**4. What was the average wait for patients attending A&E due to mental health to be assessed by a specialist in each year 2010-11 to 2014-15?**

**5. How many patients attending A&E due to mental health received inpatient treatment as a result of their visit to A&E? Please list stats for each year 2010-11 to 2014-15.**

**6. How many patients attending A&E for mental health were discharged without further treatment?**

Please list stats for each year 2010-11 to 2014-15.  
-11 to 2014-15.

Response for questions 1 to 6

**1) Number of ED Attendances with a Presenting Complaint of "Psychiatric"**

Fin_Year	1011	1112	1213	1314	1415
EDPsychAttendances	821	852	917	969	1094

## 2) Percentage of ED Attendances with a Presenting Complaint of "Psychiatric"

Fin_Year	1011	1112	1213	1314	1415
EDPsychAttendances%	0.8%	0.9%	0.9%	1.0%	1.1%

## 3) Average Time to Triage for ED Attendances with a Presenting Complaint of "Psychiatric"

Fin_Year	1011	1112	1213	1314	1415
EDPsychAvgTimeToTriage(mins)	11	18	11	8	10

## 4) Average Time to Treatment for ED Attendances with a Presenting Complaint of "Psychiatric"

Fin_Year	1011	1112	1213	1314	1415
EDPsychAvgTimeToTreatement(mins)	65	78	85	78	85

## 5) Number of Inpatient Admissions resulting from an ED Attendance with a Presenting Complaint of "Psychiatric"

Fin_Year	1011	1112	1213	1314	1415
EDPsychAttendancesAdmitted	229	238	165	208	323

## 6) Number of ED Attendances Discharged/Not Treated with a Presenting Complaint of "Psychiatric"

Fin_Year	1011	1112	1213	1314	1415
EDPsychDischarges	264	267	369	411	383

## 7. Does your A&E have a psychiatric liaison service? If yes, when was this service established? -

Yes, The onsite Psychiatric Liaison service was established 2012 from 8am until 22.00 and then through the winter of

8. What proportion of total delayed transfers of care were related to mental health for each year between 2010-11 to 2014-15?

**SITREP DELAYS IN JOINT ASSESSMENT CATEGORY**  
(for mental health assessment)

	2010/11	2011/12	2012/13	2013/14	2014/15
April	161	0	28	15	27
May	112	0	49	56	0
June	112	15	14	24	30
July	158	0	7	28	19
August	136	3	7	39	11
September	96	0	0	14	4
October	47	0	0	52	10
November	41	0	13	12	21
December	7	16	42	15	60
January	0	4	8	93	89
February	26	0	13	29	16
March	11	0	14	20	19
Total	907	38	195	397	306
Total delays in year	9662	4845	6188	7092	10109
as percentage	9.40%	0.80%	3.10%	5.60%	3%

There may be flexibility in numbers for 2010 to 2011 as the Trust's method of recording has changed

9. Please provide copies of any correspondence sent from your trust chief executive to NHS mental health trusts, CCGs, NHS England or the Department of Health regarding pressures on your services linked to mental health in 2013-14 or 2014-15.

Please see 3 letters below.

**From:** Clark, Paula  
**Sent:** 12 February 2015 15:22  
**To:** [REDACTED]  
**Subject:** Tier 3.5 CAMHS service from dudley and Walsall MHT

Hi Paul

I was disappointed to learn that an enhanced service was offered (and been put in place in Walsall successfully to help tackle the issue of Tier 4 CAMHS children being left in a hospital bed) but not taken up locally by yourselves. I would be helpful to understand if this is true and why this wasn't taken up given all the issues we'd had with the independent review of restraint we'd endured

I understand that [REDACTED] is going to pick it up with you in [REDACTED] role as Chair of Safeguarding as we still have children lodged here inappropriately. I understand the Walsall service supports most children at home while they wait for a Tier 4 bed and it's really helped

Thanks

Paula

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✉ Chief Executive, The Dudley Group NHS Foundation Trust, Russells Hall Hospital, Pensnett Rd, Dudley, DY1 2HQ

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Our Ref: PC/lar2(m)

E-mail: paula.clark@dgh.nhs.uk  
01384 456111 Ext. 1017

11<sup>th</sup> December, 2014

[REDACTED]  
Director of [REDACTED]  
NHS England – West Midlands Area

Dear [REDACTED],

**Re: CAMHS Patients inappropriately kept on Children's Acute Ward**

Welcome to the West Midlands and I hope that you are settling in.

I'm sorry to send my first letter to you raising concerns, but I feel that I must let you know about a problem that I have previously raised with [REDACTED] and your [REDACTED]. Despite raising my concerns the problem seems to be worse if anything.

My Trust was subject to vexatious whistleblower allegations of illegal restraint last year and whilst these were found to be untrue having been fully investigated by the police, CQC and the local Safeguarding Board, the concerns about children waiting for tier 4 CAMHS beds were correct. The response I got from the commissioners was "this is a national problem" but no action.

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This is not acceptable. During our busiest period for months our Children's Ward has had to cope with up to three CAMHS children at any one time. These children have to receive one to one care and psychiatric nurse support if we can get it, but by their nature they are often disturbing to the sick children on the ward.

I hope that you will work towards a rapid solution of this, even if we have to commission additional places or solutions on a temporary basis to get us through the winter.

Given the scrutiny that my Trust has received on this issue I will continue to alert you to children who are lodged with us inappropriately as I believe it is a clinical governance issue and risk, and one which we cannot bear alone.

Best wishes,

Yours sincerely

*Paula Clark*

**From:** Clark, Paula  
**Sent:** 01 April 2015 14:24  
**To:** [REDACTED]  
**Cc:** [REDACTED]  
**Subject:** CAMHS Tier 4 and potential Tier 3.5

Dear [REDACTED] and [REDACTED]

We discussed this at the last SRG and I said that the hospital team were anxious about waiting for the Tier 4 work to conclude before doing anything in commissioning terms. You asked me to find some figures for you

I get regular emails from the paed's team to keep me up to date with their situation. As a result I have raised this at LAT level and have a meeting after Easter with [REDACTED]

**The figures I've got are for Q4:**

- 56 children as inpatients with CAMHS referrals – most of these are 1-3 days LOS as seen and discharged home with support quickly. Some end up being readmitted and escalated
- 5 children have required Tier 4 assessment. These are the ones that cause the most disruption as they can be lodged with us for protracted periods and require 1:1. We don't always get help on the ward from DWMHT as this is informal and they help when they can but are not commissioned to do so I believe.
- Over Xmas we had [REDACTED] 20 days. Currently we have 2 children, one admitted on [REDACTED] and the other on [REDACTED], both awaiting tier 4 assessment/placement
- Most of the admissions are ODs but we also had [REDACTED] suicidal thoughts/self harm and [REDACTED] hearing voices so we have some seriously disturbed children coming through a medical/surgical children's unit

This would be a typical period having tracked it with the team and I hope this gives you some idea of what we need. It would be high level support for approximately 2 children per month to enable most of them to go home and wait for a tier 4 assessment/bed.

I hope that gives you the basis for opening up discussions with DWMHT who currently provide such a service to Walsall

Best wishes

Paula

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