

The following questions were put to NHS North Norfolk Clinical Commissioning Group's (CCG's) Governing Body ahead of its public meeting on 24 July 2018.

**1. 'Are you concerned about the lack of services for mental health in North Norfolk and what plans do you have to prevent suicide in our area?'**

Suicide prevention is being taken forward via the Norfolk and Waveney Sustainability and Transformation Partnership (STP); specifically within the primary and community care work stream, with clear links to the mental health work stream. There is a suicide prevention plan in place and the STP has received national funding to support its implementation.

**2. 'Do you have any plans to set up a genuine Emergency Walk-in Psychiatric Clinic in North Norfolk such as exists in other rural parts of England?'**

There are no current plans to set up a standalone psychiatric walk-in clinic in North Norfolk. Anyone needing emergency support for their mental health can access primary care, out of hours/111 services, or specialist crisis provision via the Norfolk and Suffolk NHS Foundation Trust (NSFT). This provides full coverage seven days a week for the North Norfolk area.

**3. 'Are there any real plans to restore Link Workers (Community Mental Health Nurses) attached to GP surgeries as existed in Norfolk before the financial cuts of 2013?'**

The term link worker is outdated. However, NSFT work closely with primary care to continually improve integrated working. This includes providing each GP surgery with a named mental health lead.

**4. 'Is there any intention to increase the number of psychiatric beds in Norfolk given the fact that admission to a psychiatric hospital which is well staffed and not overcrowded (Royal College of Psychiatry suggests that maximum should be wards full only of two thirds of patients) is often the only way of ensuring the safety of patients at high risk of suicide?'**

As a principle of best practice, all parties in health and care across the country recognise the need to help people to manage their conditions as far as possible, so they can remain safely in the community rather than need an acute bed. This is the same for mental health as it is for physical health. An important focus in mental health care across the country and in Norfolk and Waveney and is why we are looking at community wellbeing hubs. There is a growing body of evidence that wellbeing hubs or crisis cafes are providing ongoing support for people and reducing admissions.

However we are also committed to ensuring that those people who need an acute bed are found one in an appropriate location and environment. The STP has commissioned an external evaluation of all mental health provision across Norfolk and Waveney and one outcome will be to look at how many specialist and non-specialist beds are needed. This

work builds on the NSFT's internal review and related outcomes produced by Mental Health Strategies. The overarching review is due for completion December 2018; decisions will be taken thereafter about how provision for mental health services are configured going forward.

**5. 'Why not set up a pilot project Emergency Psychiatric Clinic at the recently opened brand new GP surgery in Cromer?'**

Please refer to the response to question 2.

**6. 'Finally, given the fact that prevention of mental illness and recovery from acute illness is absolutely essential, and given the fact that North Norfolk is a huge geographical area, why have services in all sectors been reduced severely, or denied placements in this area. EG The NSFT Recovery College courses are only available in Norwich, or in Kings Lynn and possibly Gt Yarmouth. To attend a Recovery College course in Norwich costs a lot for travelling, or if by car a lot to park. On the emergency side there used to be two Crisis Intervention and Home Treatment Teams in Central Norfolk; now there is only one team with reduced staff, and it is very difficult to get an urgent response; similarly the Mind Support Line has reduced its hours of availability and there is often a delay in getting through for help. Why will the so-called Crisis cafe only be available in Norwich for people who live miles away in North Norfolk? Why has Together for Mental Wellbeing suffered such a financial cutback that they have reduced staff and closed their office based in Cawston?'**

The system-wide external review of mental health referenced in question 4 will consider, amongst other things, patterns of demand – geographical and demographical – to ascertain if services are meeting local need, and what the unmet need is. As stated the deadline for completion of this work is December 2018.