Call to reduce travel distance for mental health inpatients

Government urged by the BMA to ‘get a handle’ on situation

By Chris Longhurst @news_rcni

Patients are travelling as far as 500 miles from home to get appropriate mental healthcare.

Detailed figures were released by the British Medical Association (BMA) last month using the Freedom of Information Act to obtain information from 54 trusts and all clinical commissioning groups in England.

They reveal that in 2016-17, 5,876 adults were sent out of area for mental health treatment, a rise of almost 40% on the 4,213 from 2014-15.

The longest journey concerned a patient from Somerset who was sent to a facility in the Highlands, 587 miles away.

The BMA also revealed that the amount spent on placing patients in out-of-area beds rose by 47% from £108 million in 2014-15 to £159m in 2016-17.

Mind’s head of policy and campaigns Louise Rubin said hospitalising people away from their homes comes at a great cost.

‘When you’re experiencing a mental health crisis, you’re likely to feel scared, vulnerable and alone, so your support network of family and friends are instrumental to recovery,’ she said.

If relying on public transport, the average travel time to an ‘out of area’ placement could be as much as 13 hours.

NHS England has announced 11 sites that will trial a new method of delivering mental health services to reduce travel.

The Arden and Greater East Midlands Commissioning Group has saved more than £12 million over three years by providing local services to 100 people who had previously been treated far from home. And authorities in Sheffield and east London have already reduced out-of-area placements to zero.

NHS consultant psychiatrist and mental health policy lead of the BMA’s consultants committee Andrew Molodynski called the problem ‘endemic’ in the NHS: ‘The government needs to get a handle on this situation because patients are being routinely failed by a system at breaking point.’

To read more go to rcni.com/out-of-area

RCN backs prisons ombudsman’s plan for older people

The Prisons and Probation Ombudsman has called for a national strategy to address the healthcare needs of older inmates.

Ombudsman Nigel Newcomen said a ‘sharp demographic change’ is taking place that needs a strategic response. He said that while local authorities have a legal responsibility for assessing the care needs of older prisoners and providing support, they are struggling to meet those needs.

‘Prisons designed for fit, young men must adjust to the largely unplanned roles of care home and even hospice,’ Mr Newcomen said.

‘There has been little strategic grip of this sharp demographic change. Prisons and their healthcare partners have been left to respond in a piecemeal fashion.’

Fastest growing sector

RCN professional lead for criminal nursing Ann Norman said older people make up the fastest-growing sector of the prison population in the UK, but their specific needs were not being met by services ‘desperately strapped for cash’.

Ms Norman questioned whether prisons were the most suitable place for an older patient to be receiving care.

‘I’m not saying: “Just let them off”. But is a Victorian era prison the best place for a person in their seventies or eighties? They are usually at low risk of absconding and could be better cared for in places such as secure care homes.

‘The bespoke kind of services that we need are just not there. This creates a challenge for nursing staff as they try to care for people with increasingly complex conditions, such as being in wheelchairs, or living with dementia.’

Read the full report at tinyurl.com/yx4e34xo