

▶ Culture and information sharing in mental health crisis care

**Sharing information to monitor and track outcomes**



# Summary

The Centre of Excellence for Information Sharing has supported Surrey to explore the cultural factors impacting on information sharing for the various stakeholders working in mental health crisis care.

Through this work seven key themes have been identified around culture and information sharing:

1. Scaling up successful information sharing
2. Working in a complex partnership setting
3. Supporting assessment of risk for people in crisis and for organisations
4. Supporting out of hours working and people in crisis
5. Working together to identify and support people with complex needs
6. Monitoring and tracking outcomes for service user and supporting commissioning
7. Building the mind-set, capacity and willingness to share information

**The report has been split in to the seven themes which are available from [www.informationsharing.org.uk/hsc](http://www.informationsharing.org.uk/hsc)**



## 6. Information sharing to monitor and track outcomes for service users and inform commissioning

### Issues covered

#### Evaluation, resources, accessibility, systems and processes, information system sophistication

Local places need to be able to demonstrate that by taking a whole system approach to mental health crisis care and by working differently together to share information they can realise better outcomes for service user and services. This requires a local place to be able to share and match case level information so it can track individuals through the mental health crisis care system and across the transitions between services.

This information sharing generates the essential evidence that informs, supports and builds the case for further changes to the mental health crisis care system, increases the level of commitment of existing stakeholder and also secures commitment from new partners; and finally enables the prioritisation and release of resources to support further improvements. This information sharing to develop an improved understanding of the mental health crisis care system, its operation and the effectiveness of interventions enables improved strategic decision making and commissioning.

The risk is that if the mental health crisis care system is unable to share information to support monitoring and evaluation it will jeopardise the local places ability to evaluate its success, report to government, identify further areas for improvement and support strategic working.

### Learning and challenges

At the operator level one key factor that can get in the way of information sharing is an insufficient commitment from professionals and organisations to share information arising from the perceptions and beliefs from those delivering services that regardless of any changes put in place in the mental health crisis care system the demand for services will ultimately be unaffected and that people will still come through the door of the their service or partner agency.

At the other end of the relationship is the challenge for local places to successfully negotiate with regulators and commissioners so that the resources within the mental health crisis care system can be prioritised and focused on priority areas. This enables the systems, process and staff essential for the recording and sharing of the information identified as essential to enable monitoring and tracking to be properly resourced. Key to this is the need for the local place to reach an agreement on the information that funders and regulators currently requires but which can be ceased to be collected.

To be able to share case information between different agencies and services local places need to recognise and manage the confidentiality concerns of all stakeholders around sharing mental health information, including the concerns of professionals, clinicians, users and carers. As previously highlighted, a key enabler to ensure this happens in a local place is identifying an organisation that will own and take responsibility for leading on monitoring and coordinating the development of information sharing on the behalf of all of the mental health crisis care system partners. Also attention needs to be given to ensure the systems and process put in place to support it need to be simple to operate and straight forward to use.

**Tracking and Impact: Aldershot Safe Haven community based mental health crisis support service and the local acute service have been working together to try and track the service users who attend the Safe Haven to see what the impact has been on service user presentations at the nearby A&E. The situation described is that although A&E record a lot of information due to factors such as the limits of existing reporting systems and lack of capacity to interrogate data it is proving problematic to provide information that supports regular tracking of service users.**