



Healthwatch Trauma Informed Learning Event June 2025 Report Response



Isle of Wight Division
Hampshire & Isle of Wight Healthcare NHS Foundation Trust

Background

Healthwatch Isle of Wight convened a collaborative learning event following a serious incident involving multiple Island services, including the Police, Isle of Wight NHS Trust, Hampshire & IOW Healthcare NHS Foundation Trust, the IOW NHS Trust Ambulance Service, and the Isle of Wight Council. The incident resulted in inadequate care and treatment for a person living with dementia. A discussion was held regarding the incident, focusing on the impact on the person, but reviewing the perspectives from each organisations.

In line with the Trust's new strategy and the NHS 10-year plan. throughout 2025-26, the IW Division will scope and develop plans to continue moving towards an Integrated Neighbourhoods approach. Working with place-based partners focusing on sustained, cultural change and piloting new models of working where possible

As a division we continue to coordinate the Island's Neighbourhood Health Development Steering Group. The group includes representatives from a number of key services across the island, including primary care and secondary care, colleagues from the acute Trust as well as those in adult social care and the voluntary and community sectors. Colleagues from these services and partner organisations have been working hard to deliver neighbourhood health improvements, including more joined up Mental Health pathways between primary and secondary care. This work was already important but has now taken on additional importance following the NHS 10-year plan which emphasises the shift from hospital to community health.

Within the Trust's new strategy and the NHS 10-year plan, there has been a shift to focus on a number of key areas. These include moving to community-based alternatives and a focus on preventative care, with each of the Trust's divisions supporting and delivering these in different ways. On the island, our divisional strategy includes plans to engage in the Hampshire and Isle of Wight Healthcare Assertive Outreach Clinical Network to increase crisis alternatives and to review the Adult Community Mental Health Pathway. The review will include our Crisis Resolution and Home Treatment model, Community Mental Health Team phased model and No Wrong Door approach to ensure our staff are in a connected, end to end pathway and that patients are aware of these services.



<https://hiowhealthcare.nhs.uk/about-us/trust/our-strategy>

01

Themes 1,2,5 and 8

1. Pathways of care
2. Access to services
5. Hospital as default
8. 'No wrong door' process isn't working'

Themes

1. **Pathways of care** - There were multiple breakdowns in the care pathway, leading the individual to reach crisis point. There is a need for earlier interventions and clear, responsive care pathways that prevent crisis escalation.
2. **Access to Services** - Several services were contacted but did not or could not respond in person. Some services (e.g., Ambulance and Emergency Department (ED)) are perceived as the default response during crises, though they may not be the most appropriate or equipped to manage complex dementia-related needs.
5. **Hospital as default** - There is a persistent misconception that hospital is the best or only place for people in distress. Families and carers often don't know where else to turn for help, leading to overuse of ED

Theme

8. **'No wrong door' process isn't working** - The principle of "no wrong door" is not being realised in practice — people are often "bounced around" services without clear ownership of care. The system must be redesigned to ensure coordinated responses and shared accountability.

Recommendations for Hampshire and Isle of Wight Healthcare NHS Foundation Trust

- Review the need for a mental health Emergency Department.
- Review the number of ambulance conveyances to hospital, and also attendances at ED, where there is a non-medical condition and publish alternative routes for care to improve public and carer awareness of non-ED options for support.
- Revisit the "No Wrong Door" principle to make it a meaningful and operational standard.

Area of focus	Actions	Progress to date	Measure of success
Older persons mental health (OPMH) pathway	Improve the OPMH pathway - expand the Community model to support the pathway including organic diagnosis into the all-age Community Mental Health Teams (CMHT).	Recruitment has commenced for posts to support this new model.	By October 2025 patients living with dementia will begin to be supported within the Community Mental health team where appropriate.
Adult Community Mental Health pathway	Review the Adult Community Mental Health Pathway to collate recent Mental Health service developments such as no Wrong Door, Crisis Resolution and Home Treatment Team (CRHTT) Model and Community Mental Health Teams (CMHT) Phased model, to enable a connected end to end pathway communication channels and promotion/awareness of service offers.	We have started to implement the phased model in the Community Mental Health Teams. Crisis Resolution and Home Treatment Team has been expanded to cover 24 hours, seven days a week.	By March 2026 the IOW Division will have increased the number of brief interventions in the community to reduce the number of patients requiring secondary mental health services. By March 2026 there will be a reduction in the length of time people remain on the Community Mental health team caseload.
Attendances to Emergency Department (ED) for non-medical conditions.	Review of number of ambulance conveyances, use of 111 and attendances to ED. Details to include age profile, whether patients are known to Mental Health services or have ever been known to Mental Health Services to support identifying when attendance was appropriate and when alternative support was available through existing services. HIOWH is seeking to create an enhanced medically led liaison team but due to physical restraints we are not in a position to consider a Mental Health ED at this time. This will be considered as part of our medium-term plans	Review of data underway	By March 2026 Isle of Wight Division will be in a position to publish and communicate alternative routes for care to improve public and carer awareness of non-ED options for support. Subject to successful recruitment to vacancies an enhanced medically-led liaison team will be in place by October 2025



Area of focus	Actions	Progress to date	Measure of success
<p>Co-develop and deliver mental health crisis alternatives including assertive outreach services</p> <p>Fully implement the recommendations of the Nottinghamshire Homicide review and publish our position and learning</p>	<p>Throughout 2025-26, the IW Division will engage in the HIOWH Assertive Outreach Clinical Network with clinical and operational representation and ensure local plan alignment and delivery.</p> <p>Throughout 2025-26, the IW Division will work with Trust partners and provide leadership to CHRT Transformation work stream to implement an Assertive Outreach model of care.</p> <p>Internal visits and self-assessments were completed in all Community Mental health Services before the end of March 2025..</p>	<p>IOW division has clinical and operational representation in both the Adult Mental Health Transformation programme which includes Assertive Outreach and the CRHTT clinical network.</p> <p>Internal visits and self assessments completed for all Community Mental Health Teams, reports received, and an action plan being developed.</p>	<p>Increase access to crisis alternatives to improve flow and reduce 12-hour breaches in Emergency Departments (EDs) by 50% by 2027</p> <p>By March 2026, the Trust Board will have published the report detailing the implementation of learning directly related to the Nottinghamshire Homicide review</p>
<p>Mental health discharge and onward flow</p>	<p>Working Group to be established (comprising of representatives from the Mental Health Liaison service/Dementia Outreach Team/Isle of Wight Trust) to embed procedures to deliver the 10 high-impact actions for mental health.</p>	<p>Working Group established, Improvement in flow enabled a reduction in use of Out Of Area beds.</p>	<p>By March 2027, reduce out of area placements to zero and maintain at this level</p>
<p>Improve efficiency across the Adult Mental Health pathway.</p>	<p>Carry out demand and capacity assessments to identify actions needed to improve efficiency - this will be by a phased and prioritised approach (including Access to Intervention (A2i) and CMHT as part of Assertive Outreach).</p>	<p>Case weighting tool has been utilised to assess demand and capacity in Community Mental Health teams.</p>	<p>By March 2026 data required will be available and actions will have been identified.</p>

02

Themes 3,7 and 9

- 3. Constraints on emergency responders
- 7. Police & mental health
- 9. Culture & capacity

Themes

3. **Constraints on emergency responders** - Paramedics are limited in their ability to manage behavioural crises due to restrictions (e.g., they cannot chemically sedate in the community). This constraint increases reliance on ED or police interventions, which may not align with the person's needs.
7. **Police and mental health** - Police often struggle to secure appropriate mental health support for individuals not in immediate crisis. The use of powers under the Mental Health Act can be misinterpreted as criminalising mental illness, leading to tension around appropriate use.
9. **Culture and capacity** - Many professionals are going above and beyond, but systemic issues are placing strain on services. There is a need for culture change toward greater tolerance, empathy, and trauma-informed decision-making. We must also recognise that not everyone asking for help needs to be admitted to hospital — a nuanced, person-centred approach is vital.

Recommendations for Hampshire and Isle of Wight Healthcare NHS Foundation Trust

- Strengthen joint working protocols between police, ambulance, and mental health services. Acute & Crisis transformation/Acute frailty

Area of focus	Actions	Progress to date	Measure of success
Right care, Right people	HIOWH including the Isle of Wight Division to participate in the system wide 'Right care, Right people' strategy, led by the Integrated Care Board. As a provider the trust will submit their action plan to address the 13 standards as outlined in the 'Right care, Right people' document.	The Integrated Care Board are leading on this programme. Work streams have been identified which include representation from HIOWH and the IOW Ambulance Service. Providers are required to submit action plans by 04 September 2025.	Implementation of the 13 key areas of work as outlined in the National Partnership agreement: Right care, Right person framework.

03

Theme 4

4. Understanding dementia & trauma responses

Theme 4

4. **Understanding dementia and trauma responses** - Greater understanding is needed of how dementia affects communication, behaviour, and cognition. People with dementia may lack short term memory, their attention span may be very limited, and they may be unable to think logically. Approaches made to them need to be tailored accordingly. Services must also consider how trauma or unmet physical health needs might manifest as distress or confusion.

Recommendations for Hampshire and Isle of Wight Healthcare NHS Foundation Trust

- Increase training in trauma-informed and dementia-aware practices across frontline services.
- Capture and share learning from positive interventions to prevent future incidents.

Area of focus	Actions	Progress to date	Measure of success
Increase training in trauma-informed and dementia-aware practices across frontline services	<p>All service leads, and the Senior Leadership team to complete trauma informed leadership training including self-assessment, and improvement planning to implement a psychologically safe environment to enable effective challenge and accountability for staff to thrive.</p> <p>Trauma informed approach training to be rolled out as part of the Adult Mental Health Transformation programme</p>	<p>Trauma informed approach training is available on the Learning, Education and Development (LEaD) online training system.</p> <p>Senior Leadership Team have completed training in April 2025 to support them to provide a more psychologically safe environment for staff across the division.</p> <p>In Q1 divisional peer support and co-production leads worked alongside one of the psychological therapists to create a 3-day psychological skills training package for all staff in acute mental health, supporting to ensure these sessions are co-produced and co-facilitated courses. A 'Trauma Informed Training Workshop' was held at Newport Health and Wellbeing Centre where service users were invited along to review the slides for this staff training.</p>	<p>By March 2026, all service leads, and the Senior Leadership team will have completed trauma informed leadership training including self assessment and improvement planning.</p> <p>All staff working in the Adult Mental health Pathway will have completed Trauma Informed Approach Training.</p>
Increase training in Dementia-aware practices to frontline services	<p>Scope cost of accessing 'Communication and care-giving in dementia: a positive view' training which was previously delivered as part of the Isle of Wight Dementia Strategy.</p> <p>Staff to complete the Dementia Awareness e-learning available on LEaD online which is mapped to the National tiers.</p>	<p>Learning and development team aware of request for access to 'Communication and care-giving in dementia: a positive view' training and working with IOW division to review options/costs.</p> <p>Current dementia awareness training figures being reviewed.</p>	<p>90% of front-line staff will have completed Dementia Awareness training.</p>
Improve opportunities to capture and share lessons from positive interventions	<p>Develop Division wide proforma for team/service level meetings which includes sharing lessons from positive interventions.</p> <p>Explore opportunities with LEaD team, patient experience team, service user engagement team and divisional services to reflect on positive interactions/experiences in order to enhance understanding across the division of what makes a positive interaction/good experience for service user.</p>	<p>Proforma has been developed is currently going through the approval process. The proforma will be trialled in one mental health Service and one Physical health service for feedback and improvement before being rolled out across the division.</p> <p>Discussion item will be added to Clinical Effectiveness and Improvement Group (CEIG) September 2025 agenda.</p>	<p>By October 2025, the proforma will have been rolled out for use across the division and division monitoring of use will be in progress.</p> <p>By November 2025, there will be an increase in divisional reflection on best practice from a service user perspective.</p>

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