



Department
of Health

Improving Health Based Places of Safety

Guidance for Capital Funding Applications

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<p>Author: Directorate/ Division/ Branch acronym / cost centre Community Care/Community, Mental Health and 7 day Services/11167</p>
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<p>Contact details: E:mail: placeofsafety@dh.gsi.gov.uk Web site http://www.gov.uk/dh/</p>

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Improving Health-Based Places of Safety

Guidance for Capital Funding Applications

Prepared by Community, Mental Health and 7 day Services, Department of Health

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Section 1 – Executive Summary

1.1 Programme description

In May 2015, the Government announced that the Department of Health would be making up to £15 million in capital funding available to improve the provision, capacity and quality of health based places of safety to better support people detained under section 136 of the Mental Health Act 1983. This document describes the kind of projects that the Department is hoping to support, and explains how to make an application.

Since the publication of the mental health Crisis Care Concordat¹ at the beginning of 2014, there has been a step change in the service responses for people who need urgent crisis care.

The Concordat brought together over 20 national organisations, including NHS England, the Home Office, the Care Quality Commission and the National Police Chiefs Council, to ensure that people in crisis situations get the care they need in the most appropriate setting.

The leadership shown by national Concordat signatory organisations has been matched by the establishment of nearly 100 local Crisis Concordat groups, which have delivered improved practices and new innovations, resulting in the halving of the number of people being taken to police custody as a consequence of a mental health problem that brings them to the attention of the police².

These local Concordat groups have all published detailed action plans, which are available to view on the Crisis Care Concordat website at <http://www.crisiscareconcordat.org.uk/explore-the-map>

The availability of a health based place of safety, after a police officer has detained a person in a mental health crisis, is usually the crucial difference between the person being taken to a hospital for assessment, treatment and care, or taken to police custody. Therefore, it is a vital tenet of the Concordat that adequate health based places of safety must be available in all areas, along with mental health and other services that provide support to people both before and after crisis episodes. All local areas have already started to review their provision of places of safety in response. This programme aims to help to support and further these plans.

1.2 Places of safety

Places of safety are defined under the Mental Health Act 1983, which states that when a police officer finds a person who appears to be suffering from a mental disorder, in a public place, who appears to be in “immediate need of care and control”, the officer may remove that person to a place of safety, under the power in section 136 of the Act.

This place of safety should ideally be a health based place of safety, where the person can be rapidly examined by a registered medical practitioner and interviewed by an approved mental health professional so that any necessary arrangements for care and treatment can be made.

¹ Department of Health. Mental Health Crisis Care Concordat: Improving outcomes for people experiencing mental health crisis. February 2014. <https://www.gov.uk/government/publications/mental-health-crisis-care-agreement>

² Department of Health. Use of police cells for those in mental health crisis halved. Press release. August 2015. <https://www.gov.uk/government/news/use-of-police-cells-for-those-in-mental-health-crisis-halved>

But the Act also allows for police cells to be used as places of safety in “exceptional circumstances”.

The Policing and Crime Bill, currently before Parliament, seeks to make a number of amendments to section 136. For example, it will seek to define what is meant by “exceptional circumstances”, it will remove police custody as a place of safety for people aged 17 and younger, and it will reduce the amount of time a person can be detained under section 136. These, and other proposals contained within the Bill will likely have the effect of further reducing the use of police custody for these detentions.

This programme therefore aims to help local areas prepare for an increase in demand for local health based places of safety. The fund, of up to £15 million in total, is to be used to make payments to NHS providers, as well as to Local Authorities and organisations in the third and voluntary sectors, to fund improvements to the provision of health based places of safety in England, or to fund other facilities that provide support for people in, or recovering from, mental health crisis.

All bids under the scheme must be agreed jointly in local areas, through an established local Crisis Care Concordat group. Bids must also follow the principles and criteria contained and described in this document. The Department will use these criteria as the basis for reviewing and assessing bids and making its decision on which applications are successful.

1.3 Programme objective

The purpose of the capital funding is to enable NHS providers, as well as Local Authorities and organisations in the third and voluntary sectors, as agreed by their local Crisis Care Concordat group, to provide:

- additional facilities to respond to people in mental health crisis; in particular, new or improved health based places of safety for people who have been detained by police officers under section 136 of the Mental Health Act 1983
- additional facilities, such as crisis houses or places of calm, to support people who are at risk of a mental health crisis, or who need support to help them recover
- additional vehicles to transport people to places of safety, or vehicles for street triage services.

1.4 Available funding

The total amount of funding available under this scheme will be £15 million.

Bids must come from a local Crisis Care Concordat group and be received by the Department by **23rd September 2016**.

Although the Department has not set minimum or maximum bid amounts, the main aim of the programme is to provide new and improved health based places of safety and mental health crisis support facilities across England.

Funding is available for the financial years 2016/17 and 2017/18. All funding awarded under this scheme must be drawn, and expenditure undertaken, before 31 March 2018.

1.5 Eligibility

To be eligible, the bid must come from a local Crisis Care Concordat group, as is listed on the Concordat website at: <http://www.crisiscareconcordat.org.uk/explore-the-map/>

Bids should indicate how proposals form a part of, or otherwise support, the action plan owned by the local Crisis Care Concordat group. These action plans detail activities underway, or under consideration, that aim to improve crisis care services.

Bids will also nominate a lead organisation within the area that will receive the funding and carry out the work, thereby creating or improving the asset. For this purpose, eligible organisations in England are:

- NHS Trusts and NHS Foundation Trusts
- Local Authorities
- Third sector/voluntary organisations

Applications must show clearly how bidding organisations plan to staff and run the funded facility, both on completion, and into the future, on a sustainable basis.

In two-tier Local Authority areas, counties are encouraged to work in partnership with relevant district authorities.

1.6 Legal requirements

Payments will be made in accordance with the legal provisions described in this section.

NHS organisations – NHS Trusts and NHS Foundation Trusts.

NHS Trusts and NHS Foundation Trusts will be able to draw down capital funding as additional Public Dividend Capital if successful.

Local Authorities

Capital awards will be made to successful bidders under the provisions of Section 31 of the Local Government Act 2003, unless otherwise advised.

Third sector/voluntary organisations

These organisations must meet the conditions set out in Section 64 of the Health Services and Public Health Act 1968 to be eligible to receive funding. They must also meet the following legal requirements (which are a summary of the criteria in Section 64 and not a complete description of the law):

- Your organisation must be carrying out activities that involve "... providing a service similar to a service provided by the National Health Service or by local authority social services, promoting, publicising or providing advice to do with providing either a national health or local authority social service or a similar service".
- A 'relevant service' is defined in the 1968 Act and means, "a service which must or may, under relevant law, be provided or arranged by the Secretary of State or a number of other public authorities". Or, it is a service a primary care trust or other a health service body under Part 2 of the National Health Service Act 2006 are is under a duty to make arrangements to provide.
- A 'voluntary organisation' is defined in Section 64 of the 'Health Services and Public Health Act 1968 as "... an organisation which carries out activities but not for profit, but does not include any public or local authority".

- The 1968 Act gives the Secretary of State for Health the power to award grants to not for profit organisations in England whose activities support our priorities.
- In order to apply, third sector organisations must be at least one of the following:
 - a registered charity;
 - a voluntary and community unincorporated charitable association;
 - a community benefit society registered as an industrial and provident society;
 - a community interest company; and
 - an organisation of another type, if it operates as a social enterprise and principally reinvests its surpluses for social benefit.

1.7 What happens if you are successful

If your application for capital funding is successful, the Department will inform you by email. Payment will be made under cover of a Memorandum of Understanding between the Department and the lead organisation that is receiving the funding.

The Department will only transfer funding through approved financial accounting systems.

To enable funding transfers, organisations must provide contact details for their finance department as part of their applications.

Some larger bids may require staged payments, and in these cases the Department will also ask you to confirm a funding profile. This should include information on when the project will start, when you expect it to complete, and any interim payment dates, including estimated funding amounts to be paid.

The Department of Health will provide for each successful applicant:

- Department of Health capital allocation through Capital Grant or Public Dividend Capita
- A project monitoring framework

1.8 What happens if you are unsuccessful

If your application for capital funding is unsuccessful, the Department will inform you by email.

Please note that costs incurred before funding agreement is issued are not eligible for repayment and are incurred at the bidder's risk.

Section 2 – Information relevant to all applicants.

2.1 Capital classification

For the purpose of this programme, capital is classified as work that generates a physical asset, with an expected life of more than one year.

Department of Health capital resources may only be used to finance the delivery of what, under International Financial Reporting Standards (IFRS), are regarded as non-current assets (tangible, intangible or investments).

A key requirement of non-current assets is a reasonable probability these will deliver future economic benefit (i.e. valuable service) for more than one year, and in most cases many years.

A non-current asset can be bought or enhanced (e.g. an extension to an existing property) with capital funds. Expenditure to maintain an asset at its current state (e.g. repainting walls) is not normally regarded as capital expenditure and cannot be funded with DH capital.

A threshold value of £5,000 per item inclusive of VAT must generally be reached before expenditure can be funded with capital.

Exceptions may be allowed, where the assets form part of a group of assets that aggregates to more than £5,000. The most common example of this is in the initial equipping of a building.

To qualify as a group, the assets must meet all of the following criteria:

- functionally interdependent (e.g. an equipment network)
- acquired at the same date and likely to be disposed of at about the same date
- under single managerial control
- each component asset of the group must cost £250 or more

Only costs that are directly attributable to bringing a non-current asset into being and into appropriate condition for their intended use can be capitalised and funded with DH capital.

For example, professional fees associated with acquiring the asset, delivery costs, installation costs, site clearance and stamp duty are capital expenditure. In-house costs, e.g. staff time that is directly identifiable to bringing a fixed asset into being, may be capitalised, but not general administration and wasted costs.

Capital funding may be used to fund grants to non-NHS third parties, where the grant-giving power exists, and where funding will be used to deliver fixed assets in the recipient's books, i.e. assets that meet all of the above qualifying criteria, including the £5,000 de minimis threshold.

The aim of the programme is to support coherent improvement 'schemes' - these may include a number of improvements that combine to form one overall project. Examples of the kind of schemes that could be supported by the scheme are listed below. Please note these examples are for guidance only and we encourage applicants to be innovative in their approach.

2.2 Examples of projects that could be eligible for funding

This list is not meant to be exhaustive and is not intended to prevent innovation.

- New health based places of safety
- Refurbishments or improvements to health based places of safety, for example to increase capacity.
- Making existing health based places of safety suitable for use for people aged 18 and under.
- Mental health crisis cafes or places of calm.
- Ambulance vehicles for transportation to places of safety
- Vehicles for mobile street triage services.

Discrete elements of large capital projects or new builds are eligible. However, any Department funded elements must be completed within programme timeframes (and be able to deliver its benefits, and be capable of providing evidence and findings to develop Department policy),

even if the overall project may take place over a longer period. Additionally, you should make clear how the funding for the rest of the project, i.e. non-Departmental funded, is being secured.

Evidence that statutory planning and building regulations applications are underway must be provided.

All projects must demonstrate tangible physical improvements in their environments and show how these contribute to improved provision.

2.3 Examples of projects that may not be eligible for funding

- Refurbishment of staff rest rooms/kitchens or other ancillary areas that are not directly utilised by people experiencing Mental Health Crisis.
- Staff training or any other revenue funded activity.
- Information technology, except where such technology can be demonstrated to provide an improvement to crisis friendly environments.
- Routine building maintenance and statutory compliance upgrades which fall into planned maintenance schedules.
- Safety compliance or enforcement issues, which should be part of the organisation's budgeted costs for delivering mental health crisis care.
- The VAT on professional fees such as architects and externally appointed project managers, although the fee itself is an eligible budget cost.
- Other non-recoverable VAT on project costs can be included in the budget.

2.4 Shared learning

The Department of Health exists to improve the health and wellbeing of people in England. It is committed to improving the quality and convenience of care provided by the NHS and social services. Its work includes setting national standards, shaping the direction of health and social care services and promoting healthier living.

Therefore, once your project is complete:

- We will ask for a final report twelve months from the date your funding was awarded in which we will ask for further information about what you have achieved and what wider differences the work has made to mental health crisis care.
- In addition, in order to increase and share the learning from projects that are funded under this scheme, the Department may request information required from applicants as part of the project monitoring and evaluation process, for example 'before and after' photographs
- The Department may ask for case studies for the funded projects and applicants should be aware that they might be requested to participate in their preparation, for example, by sharing supportive comments from people who have used the improved resources
- Successful applicants will be expected to acknowledge the Department of Health in any information that is circulated about the project. This could include advertisements, publications or other promotional materials.

Section 3 – Application Process

3.1 Application process

Applications should show how a project supports its local Crisis Care Concordat group's action plan and how this will result in improved care for people experiencing a mental health crisis.

The bid evaluation framework criteria (Table 1) are structured to establish how your bid meets the main themes of the funding allocation. These criteria are:

- Partnership working and joint planning
- How your projects meets current legislation
- Sustainability of your project
- How your project meets any shortfall in current or projected demand for health-based places of safety
- How your project will provide improved access to health-based places of safety for children and young people
- Your commitment to deliver the project on time, and by 31st March 2018 at the latest
- Plans for further reductions of the use of police cells for adults detained under section 136 , and for an elimination of such use for people aged 18

Under the umbrella of the local Crisis Care Concordat group, we encourage local organisations to develop innovative approaches to delivering integrated care and to consider, where practical, opportunities to make a joint bid to deliver tangible improvements to mental health crisis care.

3.2 How to apply

Bids must come from a local Crisis Care Concordat group and be received by the Department by **23rd September 2016**. Bids received after this deadline will not be considered.

To apply please download the supporting documentation and application form, from the www.gov.uk website.

Completed applications and supporting documentation should be returned to:
placeofsafety@dh.gsi.gov.uk

All applications must be clearly marked “Health Based Places of Safety – Application”. Applicants will be notified by email confirming receipt of their application.

When filling your application form, please give concise answers, some questions have a limit on the number of words you can write.

If you are successful, we will ask you to report back periodically, and may refer to the responses you provide in your application form, so it is important to be realistic in the answers you provide.

3.3 Application Criteria

The bid evaluation framework criteria (Table 1) has been structured to help applicants describe how their bid meets the main themes of the funding scheme.

Applications will be assessed and ranked by an evaluation panel against these criteria.

These criteria are not listed in order of importance; however it is important that you address each criterion in your application.

Table 1. Bid Evaluation Framework Criteria

<p>Partnership Working and Joint Planning</p> <p>The bid must come from a local Crisis Care Concordat group, with evidence that it has been developed and agreed by that group as a whole and reflects local partnerships and joint planning arrangements.</p> <p>Within the wider group, one organisation must be nominated to receive funds, with the agreement that it will own the asset when completed or improved. This organisation must demonstrate the agreement of its Chief Executive or Director of Finance to receive the funding.</p> <p>The bid must indicate how it satisfies local need – for example, for extra or improved health based places of safety, or mental health crisis service provision – and how it will further reduce the use of police cells for adults detained under section 136, and support the elimination of such use for people aged 18 and under.</p>
<p>Legislation</p> <p>The bid must ensure that its project would be compliant with relevant legislation – including but not limited to, planning law, the Public Sector Equality Duty, and Health and Safety law.</p>
<p>Sustainability</p> <p>The bid should provide supporting evidence of how your project will:</p> <ul style="list-style-type: none">• spend the funding allocated to the project on time, and by 31st March 2018 at the latest, for example by including a timeline with key milestones and delivery dates• result or contribute to a sustained service that will remain fully funded and operational after the capital funded project completes

Demand

The bid should indicate the level of demand, and the anticipated impact that the proposal will have in meeting this.

This might include:

- An outline of how the proposal will support improved access to services for people in crisis
- Evidence on how the proposal supports local need, for example (but not restricted to):
 - The need for improved crisis services for adults, and children and young people
 - Access to services out of core hours or 24/7
 - Services to rehabilitate people who are regularly brought to health-based, places of safety

Commitment to Shared Learning

Bids should indicate:

How you will set a framework of principles and aims for your project.

How you will put in place a multidisciplinary team of people to plan and manage your project, which should draw on the experience of stakeholders, including previous service users.

Following evaluation, the Department of Health will consider the recommendations from the panel and will make final decisions on awarding the grants. An application's success cannot be guaranteed and the Department's decision is final.

3.4 Anticipated key dates for applications and allocation of funding

August/September 2016

All local Crisis Care Concordat groups can apply.

Supporting documents and application form available from www.gov.uk website

*Completed applications and supporting documentation should be returned to:
placeofsafety@dh.gsi.gov.uk*

23rd September 2016

Application period closes. All applications should be sent to the Department of Health by this date. In these cases, please email the team at placeofsafety@dh.gsi.gov.uk

October 2016

Successful bidders will be informed.

All successful bids

October 2016 to March 2018

Department of Health will issue payments and monitor funding spend.

By 31 March 2018

All funded elements of the projects must be completed and funding allocation spent.

Section 4 – Evaluation process

4.1 Bid evaluation process

All bids received by the closing dates will be evaluated against the criteria set out at paragraph clause 3.3. Organisations submitting bids by the deadline will be informed by email that their bids have been received. Bids will be rejected if they are:

- received after the deadline
- not signed by the organisation sponsor e.g. Chief Executive or Director of Finance.

Organisations that have their bids rejected for these reasons will be informed by email: there is no right of appeal for rejected bids.

4.2 Innovation

In considering the overall strength of your application, the evaluation panel will consider innovative proposals, and in particular look at:

- How your project will make a difference to the lives of people experiencing mental health crisis and their families e.g. the types of services or facilities you will offer and how closely your project meets the criterion.
- Why you think it will succeed in doing this, e.g. the strengths of the project, assurance of further funding and plans to actively involve stakeholders, including previous service users.
- How you propose to gather and deliver evidence and findings and how actively you can participate in sharing lessons learnt with other providers of health-based, places of safety.

4.3 Public Sector Equality Duty

For information on the Equality Duty please refer to Government Equalities Office at the link:

<http://www.homeoffice.gov.uk/publications/equalities/equality-act- publications/equality-act-guidance/equality-duty?view=Binary>

The Public Sector Equality Duty applies to any decision made, any policy developed, any programme implemented and any practices driving activity. It also applies to functions and services provided by others on behalf of a public body. In order to be compliant, applicants will need to demonstrate how they have paid due regard to the three aims of the Duty which are to:

- eliminate unlawful discrimination, harassment and victimisation;
- advance equal opportunity between people with a protected characteristic and people without;
- promote good relations between people with a protected characteristic and people without.

The overall aim of the Duty is to make sure that public bodies take equality into account as part of their decision making. What this means is that in decisions and activity there is a need to:

- remove or minimise disadvantages suffered by anyone with a protected characteristic;
- take steps to meet the needs of people who share a protected characteristic where these are different from the needs of other people;

- encourage people with a protected characteristic to participate in public life or other activities where their participation is low

The Duty covers the following protected characteristics: age; disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex, sexual orientation, marriage and civil partnership, (in respect of the requirement to have due regard to the need to eliminate discrimination) and carers 'by association' with people sharing some of the characteristics.

To demonstrate compliance with equalities legislation and, specifically, the Public Sector Equality Duty, you will need to provide evidence that demonstrates the impact, or potential impact your work may have on people sharing protected characteristics.

4.4 Core outcomes of the overall programme

The intended core outcome of this initiative is to work with local Crisis Care Concordat groups and provider organisations to increase the capacity and number of health based places of safety, and to improve other aspects of crisis care services.

The Department anticipates these improvements will reduce the need to use police cells, except in the most exceptional circumstances.

4.5 Reporting on progress and monitoring delivery

We are keen to hear about progress, good news and learning points throughout the life of your project and to sharing learning from the funded projects with the wider Department and other parties. If successful you will be required to participate and contribute to sharing lessons learnt.

If selected to receive funding, applicants will be expected to:

- set a framework of principles and aims for their project
- put in place a multidisciplinary team of people to plan and manage their project which should draw on the experience of previous service users
- identify a board member/senior officer (e.g. Finance Director) as local project sponsor and champion and nominate a single point of contact (SPoC) to liaise with the Department to ensure compliance with such monitoring and benefits realisation processes that will be established
- ensure ongoing communication with the DH team to ensure that your project goes as smoothly as possible and to help resolve any issues as they arise
- deliver the benefits identified in their funding application
- meet deadlines advised by the Department: 31 March 2018 is an absolute final deadline.

Section 5 – Contact details

To ensure we manage and respond in a timely fashion to all questions relating to the funding application process, please direct all questions to our generic email address:

placeofsafety@dh.gsi.gov.uk

Section 6 – Application form

The application form is in Word format. Bidders are requested to fill in and return this with any relevant supporting information as their submission. The application form is available from the email address above, or to download from www.gov.uk

Completed applications and supporting documentation should be returned to:
placeofsafety@dh.gsi.gov.uk