

1 – Background

The Complex Case Panel was developed in 2014 by the Substance Misuse Team (SMUT). Since then, the Complex Case Panel works in partnership with various agencies involved.

A review held in 2017 highlighted that many of the high-end complex cases were often stagnated. A steering group was created to align the approach of the panel with the priorities of the local authority assuring all partners were working together in a person-centred, strengths-based and solution-focused way.

7 – Further information

All partners included in the complex case panel are signed up to the Humber Information Sharing Charter. The Humber Information Sharing Charter:

‘Creates a framework for the formal exchange of personal information and intelligence between the partners to the agreement listed in section 2, for the purposes listed below. Public Health activities which the data will support are:

- Monitoring and analysing local trends for key health outcome indicators
- Joint Strategic Needs Assessment
- Measuring health inequalities
- Assess the levels of disease and injury

6 – Consent

Where possible consent should be gained from the service user to discuss their case at the Complex Case Panel. However, if consent is not gained it is the responsibility of the referring agency to let the Chair know and to record this on their own recording systems.

The referring agency should then consider whether they have grounds to breach confidentiality and share the information under the following legislation:

- Working Together to Safeguard Children 2023
- The Care Act 2014
- Sexual Offences Act 2003
- The Crime and Disorder Act (1998)

2 – Why it matters?

The aim of the Complex Case Panel is:

- To share information to increase the safety, health and well-being of identified service users in North Lincolnshire
- To construct jointly and implement a solution focussed, multi-agency support plan for service users that provides professional support to all those in need and that reduces the risk of harm
- To improve agency accountability

3- Criteria

The definition of complex needs takes on many variables. The main criteria of complex case panel are:

- 1) Substance Misuse- long term history or substance misuse which affects stability
- 2) Homelessness- not just a housing issue but more inability to plan/cope long-term in suitable housing
- 3) Mental health/learning disabilities- not necessarily a formal diagnosis but a lack of ability to cope and present with similarities to a mental health condition or learning disability
- 4) Institutional care/ prison- has been subject to imprisonment for a variety of offences/ or has been in the care system at some point
- 5) Chronic physical health issues/physical disability

4- Criteria

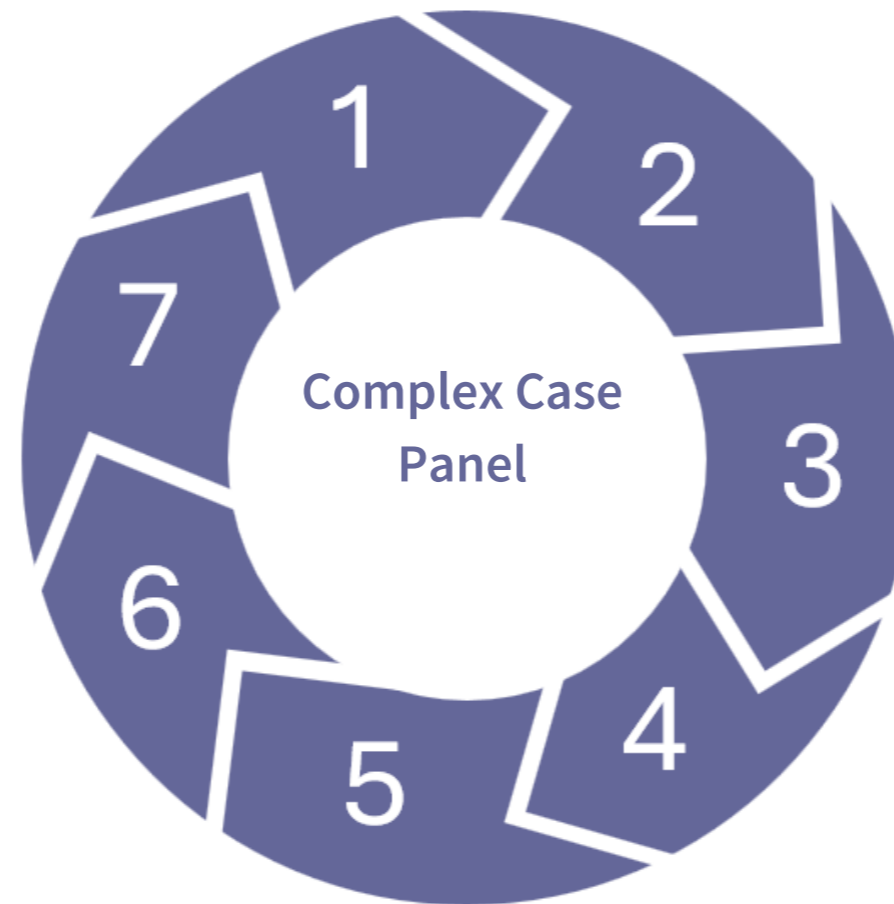
All referrals for the Complex Case Panel should be discussed prior with the chair of the meeting. The cut-off date for referrals is one week prior to the meeting. However, if an urgent case arises this will also be considered by the chair whether this is appropriate for the upcoming Complex Case Panel.

It is important that the referring professional/ agency representative attends the meeting when discussing a new referral. However, in exceptional circumstances information may be given to the chair of the meeting to discuss on the agency's behalf. There is no formal referral form for the Complex Case Panel. The name of the service user will then be added to the agenda and circulated to attendees 1 week prior to the meeting so agencies can collect the necessary information

5 – Escalation

Most of the representatives from partner agencies are operational staff. If the Chair and other panel members agree that a solution-focused approach cannot be achieved at this organisational level and the service user continues to be at risk to themselves or others, it is imperative that the case is escalated. There are many mechanisms to do this such as through the criminal justice system and other legislation such as the Mental Health Act or discussions with more senior practitioners.

In terms of existing multi-agency meetings, the Chair will action the primary agency involved to discuss with their service manager to escalate to the Vulnerable Adults Risk Management (VARM) meeting. There are also other ongoing multi-agency meetings within North Lincolnshire that may have oversight of cases, such as MAPPA and MARAC, but it is important to note that each of these meetings has a specific priority the same as the Complex Case Panel which focuses primarily on substance use.



7 Minute Briefing