

Bath & North East Somerset Council		
MEETING:	Wellbeing Policy Development and Scrutiny Panel	
MEETING DATE:	September 2013	AGENDA ITEM NUMBER
TITLE:	Specialist Mental Health Services update	
WARD:	ALL	
AN OPEN PUBLIC ITEM		
<p>List of attachments to this report:</p> <p>Appendix 1 – Bridging the Gap – B&NES Peer research report (Exec Summary). Appendix 2 – Mental Health Community Services re-design draft flow chart Appendix 3 – Creativity Works - Executive summary of activity 2012-13 Appendix 4 – List of Mental Health Quartet grants 2011-13 Appendix 5 – CCG Board presentation – Primary Care Talking Therapies</p>		

1 THE ISSUE

- 1.1** This paper gives an updated progress report on local mental health community support services and the Primary Care Talking Therapy service.
- 1.2** The report also describes the new locality management structure for the Specialist Mental Health services delivered by the Avon and Wiltshire Mental Health Partnership Trust.

2 RECOMMENDATION

The Wellbeing Policy Development and Scrutiny Panel is asked to note:

- 2.1** Progress in implementing more service user led, recovery focused community support services and suggested next steps.
- 2.2** The implementation of the new Primary Care Talking Therapy service.
- 2.3** The new locality management structure in AWP.

3 FINANCIAL IMPLICATIONS

Continuing re-design of mental health community support services is taking place in the context of the overarching savings requirements of the council for the supporting people and communities programme. Whilst the re-design for mental health support services concentrates on delivering longer term efficiencies through better use of the existing budget (previous savings having been released at the beginning of the re-design 2 years ago), following the sector reviews and final proposals we will clarify whether any further savings can be delivered.

4 THE REPORT

4.1 Mental Health Community Support services update

In our original strategy for redesigning community support services we stated that from 2011-12 – 3013-14 we wanted to focus on better facilitating:

- the development of personalised services
- the expansion of peer led and localised support activities
- the centralisation of local information accessible to all
- access to the intensive support needed for people to remain in their own homes
- engagement with creative and practical activities that develop confidence and skills
- individual's access to mainstream community education, training, leisure and employment opportunities

Our key aim has been to work with a recovery and solution focused approach to supporting people where contact is based on identifying and building on people's strengths and sense of hope for the future. To this end we have successfully worked with local providers to set up and deliver:

4.1.1 Building Bridges to Wellbeing Project/Community Options

This service, currently delivered by both St Mungo's and Sirona Care and Health has been very successful in:

- Establishing a peer facilitation and support network for service users called New Hope.
- Supporting New Hope to carry out and produce a peer research paper on what matters to local people with mental health problems (Appendix 1).
- This work is now integral to shaping an updated mental health commissioning strategy (in development).
- Continuing to support people through short and long term provision of groups and one-to-one support (85 people 06-13)
- Helping individuals access mainstream activities and opportunities
- Enabling service users to shape services and events (e.g. membership of Wellbeing Forum, Acute Care Forum, setting up World Mental Health day events)

Next steps: We wish to further support the development of peer networks, facilitation and mentoring. We are in discussion with service providers about this including the strengthening of social prescribing (Appendix 2)

4.1.2 Creative Engagement Activities

- Closely aligned to the above teams Creativity Works have continued to offer a range of creative opportunities as well as working very hard to help people establish their own projects.
- We envisaged that the arts could support people in the process of recovery from on going mental health problems, anxiety and depression through a wide range of creative projects including arts, crafts, creative writing etc. Participants could learn new skills, build confidence and make friends and be encouraged to continue the work themselves, supporting groups to become independent and self supporting.

- This has been successful e.g. the new art collective Tiny Monuments exhibition and the resultant Arts Award at the International Conference for Culture, Health and Wellbeing held in Bristol plus an award from Bath & North East Somerset Council for Outstanding Work with Children and Families for the project My Time My Space which supports women with low mood and postnatal depression (Appendix 3)

Next steps: we wish to continue these activities linked to peer support networks (see above) and the B&NES Wellbeing College – see 4.1.8.

4.1.3 Access to Quartet grants

- Quartet is a Charitable Foundation for the Bath & NE Somerset area, which holds funds and disburses them in the form of grants to charities, social enterprises and individuals against agreed criteria with the donors.
- We have donated mental health monies annually to Quartet to set up an endowment which provides seed funding for social enterprises, service user led groups and activities to provide the impetus and means to start or develop a service or group.
- This has provided an opportunity for peer groups to become established when they might otherwise have been denied the opportunity due to lack of capital or resources, as many service users are reliant on benefits. The Building Bridges and creative arts teams have supported people/groups to access this opportunity (Appendix 4).

Next steps: to continue with this community capacity building opportunity

4.1.4 Mental Health Re-enablement services

- The re-enablement service, delivered by Sirona Care and Health, works with residents who are experiencing mental health problems and who are eligible for social care under the terms of the local authority's eligibility criteria. The service works with people for up to 8 weeks and is free of financial contributions.
- The team works closely with AWP's Specialist teams and enables people to avoid admission into hospital as well as leave hospital appropriately, safely and as promptly as possible. The overall objectives are; to help people to remain living at home, to achieve maximum independence, to prevent hospital admissions (or re-admissions) and when appropriate, to reduce the level of care needed.
- The team also encourages people who have lost their skills for daily living, to re-learn them (or to acquire new skills), to build up their confidence and to enable them to be as independent as possible within their own homes.
- Kings College London have contacted the team to discuss being part of wider piece of research as currently we appear to be one of only two such services in the country.

Next steps: to investigate the possibilities of accessing a short stay, bed-based respite facility as part of this model.

4.1.5 Floating Support Services

Social Care funded Floating Support services are provided both as part of Supported Living accommodation and within the community. This service is chargeable.

4.1.5.1 Community Floating Support

- Since 2011-12 commissioners have retained within Sirona a social care funded Community Floating Support service for people with more complex social care support needs. This enabled retention of the skills and expertise of the pre-

existing social support teams and enabled us to measure the impact of personal budgets and the reablement service on local provision.

- This has resulted in being able to move staff into the reablement team in order to respond to demand as we have right-sized the provision.
- This team also offers a telephone support service which has been very popular and a floating support service that is funded by Supporting People monies and concentrates on housing/tenancy related support needs.
- Floating support services are also provided by other 3rd sector organisations via individuals' personal budgets for social care support and via supporting people funding for housing related support.

Next steps: Review the possibility of encouraging a village agent type of approach to delivering this support for the rest of the life of the Sirona contract.

4.1.5.2 Accommodation based Supported Living provision

- Whilst also providing floating support to people in their own homes- as above – some 3rd sector providers deliver more intensive support to people within accommodation units that the providers also manage. This is called Supported Living provision.

Next steps: We are currently working with providers to better understand their implementation and costing models for these services so that they represent good value for money as well as stability of accommodation for service users as we move forward with a more nuanced approach to individual budgets.

4.1.6. Work Development Team

- The team has continued to work well with the specialist mental health teams as well as with the Primary care talking therapy service. It hosts vocational advice network meetings (membership of 24 organisations) as well as training and holding advice sessions with the mental health teams.
- There has been an increase since 2012-13 in the numbers of clients seen for job retention support which often requires the team to work with the employers as well as the employee.
- A key area of concern for the team has been to support clients who have been in "permitted" work placements/experience who may be affected by the welfare reforms.

Next steps: Continue with plan of working with the Learning Disability commissioner to create an inclusive employment development service iduring 2014-15.

4.1.7. Advocacy services

- Access to advocacy services is a key component of mental health service provision.
- Following a re-commissioning process advocacy services for people under the requirements of the Mental Health or Mental Capacity Acts is now provided by Swan Advice centre.
- Bath MIND offer general advocacy support to people contacting them directly.

4.1.8 New development – B&NES Wellbeing College

We are currently working with the Public Health team to fund a project to develop a Wellbeing College to support local people to develop their confidence and ability to manage their conditions and maximise their wellbeing. We are extremely grateful to local providers and service users for coming up with and developing this idea.

The Wellbeing College will have a focus on providing courses which help people manage their long term conditions and mental health, develop a healthy lifestyle and achieve wellbeing. The work of the College will be integrated with mainstream

community activities and education in its broadest sense and will provide an umbrella concept for the delivery of many of our existing groups etc.

Through a "college" approach a range of educational courses and access to resources can be made available for people to understand their conditions, share their experiences, learn ways to manage their conditions, build their skills, support one another and take control. It is based on the premise that people can learn how to take care of themselves and others through education.

The College will enable participants to have more independent and fulfilling lives by positive access to a wide range of opportunities that include social, leisure, sport, health, work, training and volunteering.

Next steps: A specification for the two year pilot, delivered through existing resource, is currently being finalised.

4.2 Primary Care Talking Therapy service update

- As previously reported the CCG re-commissioned its GP based counselling services and the Improving Access to Psychological Therapies (IAPT) into a single Primary Care Talking Therapies service.
- The Avon and Wiltshire Mental Health Partnership Trust were the successful bidders for the service (Appendix 5).
- The new service started on August 1st and is currently running its consultation on staffing structures for transferring staff as well as seeing new and waiting clients as part of its transition plan.
- The commissioners are working very closely with AWP to ensure integration of the service with the primary care liaison service and successful short and longer term implementation of the specification. This is being most helpfully supported by the new AWP locality specific management team for B&NES who are absolutely committed to working in partnership with other organisations and practitioners to deliver services. The team is:
 - o Dr Bill Bruce-Jones – Clinical Director
 - o Liz Richards – Managing Director
 - o Claire Williamson – Head of Professions

(Please note the new locality structure is in line with the previously reported Fit for the Future programme of change in AWP that committed to restructuring to ensure locally responsive operational activity and on-going quality and performance improvement.)

5 RISK MANAGEMENT

- 5.1** Risks associated with redesign are being managed as part of the Supporting People and Communities and the Primary Care Talking Therapies implementation programmes.

6 EQUALITIES

- 6.1** Equality impact assessments have been reported previously. Not applicable to this update.

7 CONSULTATION

- 7.1** There is on-going consultation (sector reviews) taking place with community providers through a series of events.

- 7.2** All mental health developments taking place in conjunction with the Mental Health Wellbeing Forum and service users.

7.3 AWP are working closely through formal HR processes with all staff on the implementation of the new services model.

7.4 No specific consultation has been undertaken on the contents of this update.

8 ISSUES TO CONSIDER IN REACHING THE DECISION

8.1 Social Inclusion; Customer Focus; Human Resources; Health & Safety; Impact on Staff

9 ADVICE SOUGHT

9.1 The Council's Monitoring Officer (Divisional Director – Legal and Democratic Services) and Section 151 Officer (Divisional Director - Finance) have had the opportunity to input to this report. The Strategic Director and Programme Director have had the opportunity to input to this report and have cleared it for publication.

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Background papers	<p><i>Equity & Excellence: Liberating the NHS (DH 2010)</i>, sets out ambitions to make primary care the nexus of health care planning, commissioning and delivery, with acute/secondary care services restricted for those with the most severe conditions. Care close to home is emphasised, as is a focus on clinical outcomes and the patient experience.</p> <p><i>The Transforming Community Services (DH 2010)</i> program states that Community services are changing to provide better health outcomes for patients, families and communities and to become more efficient; by providing modern, personalised, and responsive care of a consistently high quality that is accessible to all.</p> <p><i>Bath and North East Somerset Joint Mental Health Commissioning Strategy 2008-2012 (currently under review for 2013-18)</i></p>
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