



HILLINGDON

LONDON

Policy Overview Committee Review Scoping Report 2012/2013

OBJECTIVE

Short title of review

ADULT COMMUNITY MENTAL HEALTH SERVICES

Aim of review

To review and make recommendations in respect of supporting adults with mental health issues in Hillingdon.

Terms of Reference

1. To consider existing internal and external arrangements in the Borough with regard to adult community mental health services and any improvements that could be made;
2. To review whether the local processes in supporting adults in the community with mental health services are adequate, timely, effective and cost efficient;
3. To review the support that is currently available to assist people to remain in or return to employment
4. To review the guidance and support that is currently available from the NHS, voluntary organisations and the Council to these individuals and their families and carers;
5. To seek out the views on this subject from service users, carers and partner organisations using a variety of existing and contemporary consultation mechanisms;
6. To improve awareness and understanding of adult mental health issues for staff working in mainstream services arranged or provided by the Council including housing, leisure, libraries and adult learning;

PART 1 – MEMBERS, PUBLIC AND PRESS

7. To examine best practice elsewhere through case studies, policy ideas, witness sessions and visits; and
8. After due consideration of the above, to bring forward cost conscious, innovative and practical recommendations to the Cabinet in relation to adult mental health service arrangements in the Borough.

Reasons for the review

There is a growing acceptance that the promotion of mental health and well being and providing support to aid recovery from mental illness are important issues for both national and local government and health services. Good mental health is central to our quality of life and to our economic success. It is interdependent with our success in improving education, training and employment outcomes and tackling some of the persistent problems of society. Mental health problems of some form may affect as many as 1 in 4 of the population over their lifetime. The associated costs of mental health problems to the economy in England have recently been estimated as £105 billion, and treatment costs are expected to double in the next 20 years.¹

Despite widespread prevalence there remain issues of stigma. It is a particular problem and a major barrier to the use and take-up of services. As a result, people with mental health problems too often experience isolation, discrimination and a lack of acceptance by society. Addressing this issue will be a central element of this review.

The Council and NHS commission a wide range of community mental health services to meet the needs of people with mental health problems. Adult social care services are provided through a joint arrangement with Central and North West London NHS Foundation Trust (CNWL). It is one of the largest Trusts in London, offering a wide range of health and social care services across ten boroughs. CNWL specialises in caring for people with mental health problems, addictions and learning disabilities, as well as providing community health services to residents in Hillingdon and Camden and primary care services in a number of prisons. Social care staff are located in joint teams and are accountable to both managers within the Council and CNWL. This arrangement is underpinned by a formal partnership under Section 75 of the National Health Services Act 2006.

Traditionally services were often hospital-based. Increasingly both social care and health services reflect a growing trend towards community-based options that emphasise the importance of helping people gain or regain the skills and confidence to help them live a life in the community where they can realise both their social and economic potential.

¹ No Health Without Mental Health – a cross government mental health strategy February 2011

Current funding levels for social care mental health services in Hillingdon are in line with those of comparator councils². The Council also spends similar proportions of its budget on mental health as other similar London boroughs.

The balance of current spending on mental health services reflects a relatively traditional model of care with disproportionately high expenditure on residential care and nursing homes. There is a correspondingly low spend on home –based solutions such as support during the day including home care where it is the lowest within the same comparator group. Work is already underway to rebalance care through reducing reliance on institutionalised care and support and substituting greater use of community options including personalised budgets supported housing and floating support for people within their own tenancies.

Improved mental well-being does not and should not rely upon social care support alone. We need to ensure that people with mental health difficulties can access the full range of mainstream services that promote greater social inclusion. This requires a whole-system response from the Council and partners. This is reinforced by the Government's recent White Paper³ where it says leisure centres, libraries, day centres and community centres ...'should be open, inclusive and culturally sensitive venues. Promoting the innovative use of venues in our communities will help to reduce social isolation and increase connections.'

Already there are excellent examples of support provided through mainstream services. Routinely occupational therapy and other staff assist service users in accessing a range of facilities that would be used by anyone for work, education, leisure, personal or social activities. These include sports facilities, gyms, swimming pools, leisure centres, Uxbridge college, education resources, libraries, community centres, religious organisations, cafes, voluntary organisations, and women's centres.

This review offers an opportunity to learn more of what works well and recommend more systematic approaches to implementation across the Council

Supporting the Cabinet & Council's policies and objectives

The review will support delivery of the Council's Well-being Strategy 2010 – 2015 to:-

1. ensure the provision of safe high quality services that support people to remain healthy and independent
2. give people more choice and control
3. deliver seamless services with partners
4. retain a customer focussed and community based model of service.

² LIT Results of Financial Mapping 2011-12 – Hillingdon – Department of Health

³ Caring for Our Future – reforming care and support - HM Government July 2012

The outcome of the review will also be used to contribute to the mental health and wellbeing elements of the Health and Wellbeing Strategy which will be driven by Hillingdon's Health and Wellbeing Board.

INFORMATION AND ANALYSIS

Remit - who / what is this review covering?

It is proposed this review will look at:

1. understanding the needs and requirements of people with mental health difficulties and those of their families and carers;
2. improving awareness and understanding of adult mental health issues for professionals;
3. identifying improvements that could be made through more effective use of community-based services;
4. how to ensure a higher quality of care and support for adults with mental health issues and their families; and
5. how to reduce mental health-related hospital admissions and unscheduled care costs on the health side and social care admissions on the Local Authority side.

The Committee's recommendations will go to the Cabinet and where appropriate the Council's partners for approval, including via the Health and Well Being Board.

Connected work (recently completed, planned or ongoing)

Health and social care commissioners are currently working on an up-to-date strategy and clear commissioning plan that better identifies need and improves the alignment of services to deliver more support in the community and reduce the need for care and treatment in more institutionalised settings.

The purpose of the strategy is to confirm the vision for adult mental health services and ensure the most effective use of community resources to support people to develop or regain the skills, confidence and social networks that will increase the chances of remaining in and contributing to the local community. This review will contribute to the delivery of the strategy.

"No Health Without Mental Health" identifies six shared objectives to improve mental health outcomes. They may also assist the Policy Overview Committee in determining in their evaluation of the current situation and shape recommendations for improvement. They are:

- More people will have good mental health
- More people with mental health problems will recover
- More people with mental health problems will have good physical health

- More people will have a positive experience of care and support
- Fewer people will suffer avoidable harm
- Fewer people will experience stigma and discrimination

It should be noted that the review develops further opportunities for Councillors to improve their knowledge of adult mental health care and to influence the contribution the Council makes in partnership with health services, the voluntary sector and, most importantly, service users and their carers. This follows on from the higher profile of mental health care within the Borough following the successful fund raising and support for mental health charities by the Mayor of Hillingdon 2011/12.

EVIDENCE & ENQUIRY

Methodology

1. The Committee will examine background documents and receive evidence at its public meetings from officers and external witnesses.
2. The Committee may also make visits to sites and/or to other Councils with best practice examples.
3. Relevant literature and websites for background reading for Members be researched.

Witnesses

Possible witnesses include:

1. Individuals with mental health issues living in Hillingdon and their carers (through informal 1:1 sessions and / or case studies).
2. Officers from Council Departments including sports, housing, leisure, libraries and adult education.
3. Staff from the joint CNWL/LBH mental health service
4. External partners, e.g. Voluntary and independent sector providers and Clinical Commissioning Group (formerly GP Consortium), NHS Hillingdon/Hillingdon

There may need to be some further prioritisation within this list of witnesses in order to make the review manageable and ensure that it is completed within the prescribed timescale.

Information & Intelligence

To the best knowledge of the Customer Engagement Team, there have not been any general consultations or surveys concerning general mental Health Services in Hillingdon. However, the Council's External Services Committee in partnership with Hillingdon NHS and the Centre for Public Scrutiny hosted a stakeholder event to contribute to a review of internal and external services for dementia care in Hillingdon.

Consultation and Communications

Consultation could be undertaken with individuals with mental health issues, relevant charities, service departments and outside organisations.

Lines of enquiry

Identifying Needs and Early Identification

1. How are people with mental health problems currently identified and supported across the Borough and how can this be improved and standardised, including support in a crisis?
2. How good are local awareness, early identification and diagnosis?

Information and support for users and carers

3. What information, support and advice is available to those that may need it? How can this be improved?
4. What treatment and support and recovery services are available e.g CNWL Recovery College?
5. What support is available for the carers of adults with mental health issues? Is this support sufficient/ how could this be improved?

Enabling people to make choices, balancing risks and community involvement

6. How are service users' and carers expectations and concerns reflected in local service delivery
7. How are adults with mental health issues involved in their communities and civil society?
8. How are issues of supporting people take exert choice and control in their lives balanced against issues of potential risk the individual and wider community.

Partnership Working

9. How well developed are local strategies and partnerships with regard to adult mental health issues?
10. Are there any barriers to successful partnership working?

Staff Training and Development

11. What training is available to staff to properly assist them in supporting people with mental health difficulties
12. How can education for professionals and carers be improved?

Learning from best practice

13. Which other areas/councils are recognised as successful in supporting people with mental health needs in their local communities?

Resources

14. What funding is available and how sufficient is this to meet the needs of the demand of the service required?

PROPOSALS

To be developed as the review progresses.

LOGISTICS

Proposed timeframe & milestones

Meeting	Action	Purpose / Outcome
ESSC – 31 July 2012	Agree Scoping Report	Information and analysis
11 September 2012	Introductory Report / providing an overview of CNWL activities and looking at best practice Witness Session CNWL representative Alan Coe Verbal or written evidence from beacon Local Authorities	Evidence & enquiry
9 October 2012	Partnership Working (Voluntary Sector and Council service providers) Witness session CNWL Rethink, Mind and Mental Health Matters Library Services	Evidence & enquiry
7 November 2012	Witness session	Evidence & enquiry
4 December 2012	Draft Final Report	Proposals – agree recommendations and final draft report

Equalities

The Council has a public duty to eliminate discrimination, advance equality of opportunity and foster good relations across protected characteristics according to the Equality Act 2010. Our aim is to improve and enrich the quality of life of those living and working within this diverse borough. Where it is relevant, an impact assessment will be carried out as part of this review to ensure we consider all of our residents' needs.

Risk assessment

The review needs to be resourced and to stay focused on its terms of reference in order to meet this deadline. The impact of the review may be reduced if the scope of the review is too broad.