COMMITTED TO QUALITY – THE BUCKINGHAMSHIRE APPROACH TO BEST VALUE

Service Plans 2001-2002:

Name of Service Plan Area: SERVICES FOR PEOPLE WITH MENTAL HEALTH NEEDS

Service Plan Ref: SS4

Part 1: Description of service

Purpose of service

To improve the help to local people with mental health care needs as a result of severe and enduring mental illness. To support their carers and local communities by providing assessment and services that are timely and sensitive. To work with partner agencies in primary and secondary health care and voluntary sector services to ensure that services are well focused and integrated, thus avoiding both duplication, omission and confusion for service users and their families.

People who have severe and enduring mental health needs should be supported to live as independently as possible and make choices about their lives. This has to take into account their own safety and well-being and that of their carers and other members of the community. The services are shaped by what the law says, and by the money that the council is able to provide.

In previous years this Service Plan would have included mental health for older people. At the time of completing this Plan there are significant changes in policy guidance for mental health services for older people, which is now part of the National Service Framework for Older People. A supplementary plan will be developed during the year to meet the needs of this group. This plan therefore concentrates on services for adults of working age.

What are the statutory parameters that regulate how the service operates?

Legislative Requirements

- 1. Mental Health Act 1983 (undergoing major revision)
- 2. NHS and Community Care Act 1990
- 3. Children Act 1989 (where person with mental health problems is a child)
- 4. Carers (Recognition and Services) Act 1995
- 5. Health Act 1999

National Policy Documents

- 1. Mental Health Strategy "Modernising Mental Health Services: Safe, Sound, Supportive"
- 2. National Service Framework for Mental Health (for adults of working age)
- 3. The National Plan for the NHS this sets out targets for further development and integration between health and social care in respect of mental health services

All of the above are developed through Department of Health guidance and case law. It has most recently been influenced by guidance in the LAC (99)8 "Modernising Mental Health Services; NHS Modernisation Fund for Mental Health Services; Mental Health Grant 1999/200" with revision for financial year 2001/02;the policy document 'Modernising the Care Programme Approach" which requires health and social care assessment processes for mental health services to be integrated.

County Council Policy Steer(s) relevant to the service

- The Council must live within its means next year and over the medium term.
- All budget managers to deliver 2% efficiency savings.
- Social Services spend to not increase above the current 20.6% spending above SSA.
- Service Plan options to be delivered which:
 - show how core services can be delivered within the resources available
 - indicate how best to respond to the developing Partnership expectations within the NHS.

Supporting Policies

We will:

- 6d) Through joint working with the New Mental Health Care Trust, ensure that our mental health clients live as independently as possible, taking into account the safety and well being of themselves and others.
- 6e) Devise improvement plans that achieve service quality and efficiency targets.
- 6f) Proactively establish partnership arrangements with Health, Primary Care Groups and Primary Care Trusts, the voluntary sector and other key partners, to provide seamless "one stop" services for: Learning and Physical Disability, Mental Health and Older People clients.
- 6g) Work with the Health Authority to meet its responsibilities under the NHS plan and discuss its policies and performance in Buckinghamshire on a periodic basis.
- 6h) Evaluate unit costs to achieve best value and where feasible reduce costs to those of similar authorities.
- 6i) Put in place the necessary management information to enable the service to be managed as efficiently and effectively as possible.
- 6j) Develop policies that take into account the ability to pay and which support clients to claim all relevant state benefits, protecting the provision of care to those most in need.
- 6k) Develop and implement service strategies that reflect the resources allocated to Adult Care Services

Show how required savings or growth for next year will be delivered	£'000
Current net budget	2,979
Spending Pressures	1,039
Other growth items (specify)	
Total	4,018
Cash allocation	3,778
Gap (or Available Growth) - See Appendix 1	-240

SOCIAL SERVICES	Gross Expenditure	Income	Budget for 2001/02
SOCIAL SERVICES	Expenditure		2001/02
SERVICE – PEOPLE WITH MENTAL	£'000	£'000	£'000
HEALTH NEEDS			
Support Costs	1,173	-5	1,168
Residential Care	2,556	-673	1,883
Nursing Care	567	-328	239
Day Care	725	-26	699
Support at Home – Home Care	158	-3	155
Support at Home – Other	722	-152	621
Joint Finance Funded Schemes	103	-12	91
Old Care in the Community Funded	95	-560	-464
Schemes			
Mental Illness Specific Grant (70%)		-368	-368
Mental Health Grant (100%)	82	-348	-266
Specific Grants from DOH (Drug	86	-64	22
Misusers, HIV/AIDS)			
SERVICE – PEOPLE WITH MENTAL			
HEALTH NEEDS	6,318	-2,539	3,779

Volume of service (2001/2)

Number of customers/users Number and location of sites

Number of staff (FTE) 2000/01 = 71.97 2001/02 changes = 3 2001/02 Total = 74.97

Special Factors

How the Council delivers mental health services will be substantially altered during 2001/02 with the creation of a new integrated health and social care Mental Health Trust for Buckinghamshire. This development is consistent with the NHS National Plan and the Mental Health National Service Framework. The Council will need to ensure that appropriate governance and management arrangements are in place to enable the delegation of some local authority functions to the Mental Health Trust.

The Welfare to Work initiative and the BASE local employment scheme will impact on mental health service users who will have increased opportunity to obtain employment.

Part 2 Performance of Service

Current performance (in relation to 2000-01 Service Plan outcomes and targets)

Progress has been made against the all of the outcomes and targets in the 2000/01 Service Plan for the Mental Health services. Where services have not fully reached the target, particularly in respect of outcomes 1 and 2, this has been largely due to difficulties experienced in meeting expectations for new services without the level of additional resources expected, in health and social services budgets, when the plan was drawn up.

Outcome 1: Star Rating *

Improved crisis response through the provision of 24 hour access to care available equally across the County.

Dedicated mental health telephone helpline SANELINE in place, providing quarterly information on the nature of calls received to support service planning processes. No additional services being piloted in at least one area

Outcome 2: Star Rating *

Assertive outreach services developed that seek out vulnerable people who find it hard to stick with the care and treatment they need.

Housing Support Workers across the county working in CMHTs established providing assertive outreach to users in housing need, Revolving Doors project expanded to provide assertive outreach to those with a dual diagnosis and in contact with the criminal justice system. Limited progress has been made in establishing multi-agency assertive outreach services across Bucks.

Outcome 3: Star rating ***

All services can demonstrate how they respond to specific requirements expressed by users.

Dedicated mental health advocacy services now in place across the county. User Focused Monitoring of services developed and funded by Social Services

Outcome 4: Star rating ***

Increased integration of health and social services so that people with severe and enduring mental health problems and their carers can get access to a range of services through a single route (Community Mental Health Teams).

Multi-agency project has developed recommendations for integrating assessment procedures and management arrangements between health and social care to be implemented by the Mental Health Trust and Social Services during 2001/02

Outcome 5: Star rating **

A safe, timely and supportive service with adequate numbers of trained staff, qualified and unqualified.

Mental Health Trainer appointed to manage a pooled budget for training. Honorariums for ASWs awarded. Continued pressure on placement budgets with an increase in the number of residential placements for dual diagnosis in Wycombe area, suggesting that work needs to be done to develop a broader range of service responses

Outcome 6: Star rating **

Carers of people with severe and enduring mental health problems are well supported in their caring roles.

Social Services are working with mental health carers groups to inform them of their right for a carers assessment. Carers Education and Support Programme commissioned for carers of mental health service users. Links made with the primary care identification project to provide information and support for carers that are currently unknown to the statutory services.

RELEVANT PORTFOLIO FLAGSHIP PROJECTS

PROJECT OUTCOM (+ Links to Supporting Po		KEY STAGES	BY WHEN
The interest of our clied our staff are safeguard the effective operation New Mental Health Tr	ents and • ded in • of the	Joint Investment Plan agreed Learning Disabilities Partnership Board established(by October) Joint Commissioning arrangements in place New working arrangements for staff in place	March 2002
3. The future developm delivery of services planned and delivere establishment of a Partnership Board. (1)	is jointly ed by the Senior •	Clarify service aims for client stream Undertake review of spending pressures for client stream Client stream representation on Senior Partnership Board established	October 2001
4. The effective scrutiny services is underto Bucks County Counc a detailed framew required by the Health Service Plan.	aken by il through vork as National	Client group representation on scrutiny body	March 2002
5. Performance mar information requirem understood and an IT has been agreed to them.(6i)	Strategy	Performance management requirements for client stream are established	October 2001
6. The joint review of Services produces a balanced report bed the Council's propreparations. (6e)	fair and •	Strengths and weaknesses of service performance are analysed Strategies to address weaknesses are implemented	August 2001
7. Service quality is m as a result of the r taken to recruit ar staff. (1b and 6e)	measures	Additional funding is secured to support a policy of recruitment and retention Staff recruitment and retention improves	June 2001

Three year outcomes, measures and targets for mental health services will be subject to revision as a result of expectations of the NHS plan and the revised Joint Investment plan due to be completed by March 2001. New outcomes will be required specifically for older people with mental health problems as a result of the National Service Framework for Older People and the District Audit Report on Mental Health Services for Older People.

THREE YEAR OUTCOME	MEASURE OR INDICATOR	PERFORMANCE 2000/1	TARGET 2001/2	TARGET 2004/5
Improved crisis response through the provision of 24 hour access to care available equally across the County	Emergency Psychiatric Re- admission rate (A6) (shared PI with NHS)	13.4	13	12.8
Assertive Outreach services developed that seek out	No. of assertive outreach teams in place	0	1	2
vulnerable people who find it hard to stick with the care and treatment they need	% of service users on enhanced CPA and at risk of losing contact receiving an assertive outreach service (NSF milestone)	Baseline being established	50	100
	Emergency Psychiatric Re- admission rate (A6)	13.4	13	12.8
Increased integration of health and social services so that people with severe and enduring mental health problems and their carers can get	% of Social Services mental health care managers working in health and social care teams managed by a single manager	14%	50%	100%
access to a range of services through a single route	Extent to which effective joint commissioning of mental health services is in place	Plans to establish joint commissioning agreed	Joint commissioning established with agreement to pool budgets	Joint commissioning of services with pooled budgets in place
A safe, timely service with adequate	No. of clients on CPA with care programme	91%	95%	100%
numbers of trained staff, qualified and unqualified	Unit cost of residential and nursing care for people with mental illness understood in the context of Bucks (B15)	367	376	385
	Admissions of supported residents aged 18-64 to residential / nursing care (C27)	No. of admissions April – July 2000: 8		

	Adults with mental health problems helped to live at home (C31)	1.9	2.0	2.5
	% of staff working in social care who have completed core skills mental health training	Baseline to be established	50%	90%
Carers of people with severe and enduring mental health problems are well supported in their caring roles	No, of carers assessments undertaken (D42) Number of short-term breaks offered	Recording of carers and carers assessments started 21 June 2000 Baseline to be established		

Part 3 For more information

Associated County Council Business Plans, and links with other Service Plans or Statutory Plans

- Community Care Plan for Buckinghamshire
- Health Improvement Programme for Buckinghamshire
- Mental Health Local Implementation Plan for the National Service Framework
- Mental Health Joint Investment Plan
- Community Safety Service Plan

When is the service due for a Best Value Root and Branch Review?

A Best Value review of mental health services is currently being undertaken. This review will be completed by March 2002.

Accountable Officer: Judith Burton

APPENDIX 1

The gap will be covered by the following actions:

Efficiency Savings

				£m
1.	Cash freeze grants to voluntary sector	Current services may not be able to be maintained.	-4	
2.	Total of minor savings identified over a large number of budget headings.	No impact	-30	
3.	Minor works – cash freeze on non-pay budgets.	Reduction in non-pay budgets in real terms which will need to be managed.	-1	
	Total Efficiency Savings			-35
	Savingo/Daduations			
4.	Maintain placements for Drug and Alcohol rehabilitation at 1.5 per month.	There is increased demand for placements in current year which was reflected in an spending pressure. This will retain the current position and means that this could result in a waiting list for vulnerable people seeking rehabilitation. The service will take steps to consider other ways in which people can be helped.	-45	
5	Review Day Care Services, including developing a shared resource with Health where appropriate.	Reduction in choice of day care placements.	-60	
6	Review of community support and Group Homes	A planned review of community support. Will reduce voids in Group Homes and re-target community support to people with highest need. People with lower need may not receive service.	-100	
	Total; Savings/Reductions			-205
	TOTAL SAVINGS			-240