

Report to Overview and Scrutiny

AGENDA ITEM:4

Committee:	Adult Services
Date:	14 September 2005
Title:	Developing Mental Health Services in Buckinghamshire
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Introduction

1. After the Shaping Health Services consultation in 2004, a separate consultation on mental health services was called for during 2005. The Buckinghamshire Health Overview and Scrutiny Committee called for a range of issues to be addressed. (Appendix 1.)
2. A public consultation document, 'Putting People First' has been developed by the three Primary Care Trusts and Buckinghamshire Mental Health Trust. It is asking for the views of the public on a number of options to deliver proposed changes to specialist mental health services across Buckinghamshire. These involve:-
 - Changing the management of specialist mental health services for the South Bucks District
 - Developing high quality community and inpatient services for adults of working age, older people and people with a learning disability across Buckinghamshire
 - Developing and changing services for people who have long term-mental health needs across Buckinghamshire
3. Geographically the consultation will cover the county of Buckinghamshire, excluding Milton Keynes. It also makes reference to two areas of specialist care on which there will be a separate opportunity to comment, these are Forensic Services and mental health services for people with a learning disability.
4. The outcome of the consultation will inform the development of a Strategic Outline Case (SOC). This will make the case for capital investment to improve Buckinghamshire Mental Health Trusts hospital infrastructure. The SOC will be submitted to Thames Valley Strategic Health Authority for approval once the views of the public have been considered.

Consultation issues

5. The consultation will invite views on the three areas above. Each of these areas will set out current facts and important issues in relation to the existing arrangements. It will also set out those services that have been developed in the last three years and those that we will continue to develop over the next three years.
6. Set out below is a summary of the key proposed changes by the three Primary Care Trusts and Buckinghamshire Mental Health Trust for each of the areas.

Changing the management of specialist mental health services for the South Bucks District

7. People needing specialist mental health care often need a combination of treatment and social support to help them lead a fulfilling life as active members of the community. To provide comprehensive support and treatment, specialist mental health services must bring together health and social care functions.
8. It is being proposed that people living in South Bucks District would be served by the integrated mental health provider in Buckinghamshire. The county boundary would determine which organisation provides specialist mental health care, regardless of age. In 2006 it is being proposed that resources will be transferred from Berkshire Healthcare Trust to Buckinghamshire Mental Health Trust to support and enable the delivery of integrated specialist mental health services.

Developing high quality community and inpatient services for adults of working age, older people and people with a learning disability across Buckinghamshire

9. Inpatient care is an integral part of specialist mental health services and exists to provide intensive treatment and care for people who are acutely unwell and cannot have their needs met at home or by services such as day hospitals. The National Service Framework for Mental Health promotes the provision of intensive round the clock home treatment as the first line of response instead of hospital admission. The significant developments in home treatment options and a comprehensive range of community-based alternatives will change the role that inpatient care has historically had. We want to improve the inpatient facilities to ensure that we have purpose built, environmentally safe and well-staffed facilities. To achieve this it is being proposed that we:-
 - Bring together inpatient facilities for adults of working age in a new unit on the Manor House site in Aylesbury. This would replace the facilities at Haleacre (Amersham) and Tindal (Aylesbury) and would include acute admission and intensive care beds and an acute day hospital.
 - Extend inpatient facilities for older adults with organic illness (dementia) at Amersham Hospital, to offer one larger ward and associated day services.
 - Bring together service for older adults with a functional illness at the John Hampden Unit, Stoke Mandeville Hospital Aylesbury and cease to provide this service at Amersham Hospital. This would allow for the delivery of mental health services along side general hospital services.
 - Build a new inpatient unit for older adults to replace the John Hampden Unit, which would provide inpatient services for people with organic illness and a countywide service for people with functional illness.

Developing and changing services for people who have long term-mental health needs across Buckinghamshire

10. People whose mental health needs have stabilised may need services for a longer period of time. We believe that people should have access to high quality accommodation and support; meaningful day opportunities and access to employment services; financial advice and advocacy; the most effective medication with the least debilitating side effects and access to high quality physical health care from their local primary care practice.

11. The proposals around changes in services for people with long term conditions are recommending that where people no-longer require inpatient care they should have access to a range of comprehensive and flexible health and social care services to meet their continuing and changing needs in their own home. The document proposes that where this is the case that community alternatives are developed.

Consultation Process

12. The consultation period will run from the 1st September to the 30th November 2005.
13. After the consultation period responses will be evaluated and presented to the Chief Executives and Chairs of the Primary Care Trusts and Buckinghamshire Mental Health Trust at a meeting to be held in public in December 2005. The meeting will take decisions on follow up action. Details of its time and venue will be publicised closer to the time.
14. People will be able to give their views in writing, by e-mail or via the consultation website or at meetings.
15. Public meetings will take place in five towns across Buckinghamshire. This will offer a chance to discuss the consultation and for people to ask questions and give their views. The consultation will also be discussed at other meetings.

Public Meeting dates

Amersham	Community Centre, Chiltern Avenue, Amersham, HP6 5AM	Monday 24th October	3pm
Aylesbury	Multicultural Centre, Friarscroft Way, Aylesbury, HP20 2TE	Tuesday 25 th October	3pm
Buckingham	Buckingham Community Centre, Cornwills Meadow, Buckingham, MK18 1RP	Thursday 27 th October	7pm
Burnham	Parish Hall, Windsor Lane, Burnham, SL1 7HR	Monday 31st October	7pm
High Wycombe	Bassetsbury Manor, Bassetsbury Lane, High Wycombe, HP11 1QX	Wednesday 2 nd November	3pm

16. After the consultation period responses will be evaluated and presented to the Chief Executives and Chairs of the Primary Care Trusts and Buckinghamshire Mental Health Trust at a meeting to be held in public in December 2005. The meeting will take decisions on follow up action. Details of its time and venue will be publicised closer to the time.

Appendix 1

Extract from *Shaping Health Services: - Formal Response to the National Health Service's Proposals for Reshaping Health Services in Buckinghamshire*, Buckinghamshire Health Overview and Scrutiny Committee, June 2004

Mental Health

Emerging Issues:

- Importance of Local Services
- NSF for Mental Health Services
- Location of Services
- Need for increased community based care

63. It is understood that the current proposals are about the “direction of travel” and that further public consultation will take place on the future location and configuration of services once the review of the estate of the Buckinghamshire Mental Health Trust has been completed. The Committee considers that there should have been a separate consultation for mental health, taking into account evaluation of newly developed services and the estates review, and addressing the whole of the mental health service.

64. It was unhelpful that consultation on Shaping Health Services coincided with the publication of the Joint Commissioning Strategy for adult mental health services. Both documents advocated the development of one County based site for adult mental health services. This action had the effect of both pre-empting the response on the Shaping Health Services proposals and delaying the signing off of the Strategy.

65. The Committee understands why the proposals advocate a change to in-patient services and appreciates that, with improvements to services and the way that people are treated; more people will be able to remain in the community. This is to be applauded. However, no information has been given on the possible location of services or details included of any investment or organisation of community services. It is not possible for the Committee to agree with the proposal until such information is available. This should not cause any delay in planning for change.

66. It is recognised that as people get older they become more dependent on health services as their physical dependency increases. Approximately 69,674 people in Buckinghamshire are aged 65+, which is 14.6% of the population. In addition 80% of the people who use NHS services are over 65 years of age. There would appear, therefore, to be merit in locating mental health services for older people adjacent to general hospital services in order to facilitate ongoing liaison between both services.

The Committee does not support the proposal for Mental Health services as outlined in the Shaping Health Services document.

The Committee considers that the status quo must be retained until such time as the option appraisal for estates has been completed, proposals for improved community services have emerged and been evaluated and details are available for the funding of the modernisation of the service.