

Buckinghamshire Mental Health Joint NHS and Social Care – Integrated Plan 2013-15

Vision	No Health Without Mental Health Improving outcomes, quality and value for money Making sure that people who use mental health services, their families and carers, are fully involved in all parts of mental health services, contributing to the goal of ‘no decision about me, without me’.					
Underpinning Aims	<ul style="list-style-type: none"> Achieve key quality and outcomes measures Develop and support high quality secondary care services 		<ul style="list-style-type: none"> Maintain financial balance Develop self-care, primary and community capacity 		<ul style="list-style-type: none"> Improve patient experience and support carers Align and/or integrate health & social care Deliver service changes safely Commission for outcomes 	
Objectives	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
	Strategic Priorities 2013/15		Transformational Change 2013/15		End State Ambition/Outcomes for 2015	
Commissioning	To strengthen the partnership between the Council and the CCGs through joint planning and joint commissioning to deliver shared priorities for mental health and wellbeing. To align health and social care systems to deliver the best care as close to home as possible. To commission services based on the delivery of successful outcomes.		<ul style="list-style-type: none"> The partnership between the Council and the CCGs will be strengthened through the Section 75 (Health Act) Partnership Agreement between the agencies. Ensure that all services are safe – deliver the Winterbourne action plan and deliver a visiting framework for main providers. Move away from performance monitoring of input and outputs and move towards the development of meaningful outcome measurement. Closer working between commissioners and providers ensuring clinical and management input. 		<ul style="list-style-type: none"> Joint Commissioning has been successful in providing the leadership to the delivery of mental health services. Aligned and/or integrated health and social care processes and projects are in place. All performance monitoring is based on the assessment of safety and quality through the demonstration of clear outcome measures. 	
Community Engagement	To engage local communities as partners in developing and delivering community support so that people with mental health problems can live well longer in their own communities. To ensure active involvement by patients, carers and other stakeholders.		<ul style="list-style-type: none"> Develop community capital and capability with partners to support self-management. Increase community groups' use of healthy living programmes, e.g. Movers and Shakers groups. Increase the availability of Mental Health First Aid Training to groups across the county. Develop the Mental Health Partnership Board as a vehicle for service user engagement with commissioners, statutory and third sector organisations. Increase engagement of marginalised groups. 		<ul style="list-style-type: none"> The population is confident seeking advice, accessing information, and managing their own health and wellbeing. 	
Payment by Results	To transform service delivery to focus on delivering successful outcomes through the implementation of the Mental Health Payment by Results regime. To engage with DH to inform CAMHS PbR development		<ul style="list-style-type: none"> Change of focus to the commissioning and provision of outcomes and quality. Performance monitored through the demonstration of outcomes being achieved. Mental Health Trust delivering against the Payment by Results Clusters, ensuring safety and quality. To work closely with DH on CAMHS PbR framework 		<ul style="list-style-type: none"> Payment by Results delivers a clear set of mental health pathways that provide improvement in measurable outcomes for individuals. CAMHS PbR is developing as a robust tool to improve commissioning for outcomes 	
Children and Young People	To focus on early intervention and prevention and links to the wider pathway of emotional wellbeing and resilience To promote a whole system approach to emotional wellbeing and mental health		<ul style="list-style-type: none"> In-patient services will be commissioned through Specialised Commissioning arrangements. Community mental health services to continue to be commissioned by the Council in partnership with CCGs. Service to be re-tendered in 2014. To map antenatal and postnatal mental health pathway to better inform commissioning approaches To support roll out and embedding of CYP IAPT locally To establish a CYP Emotional Wellbeing and Mental Health Partnership Forum Promote further shared care, using NICE guidelines. 		<ul style="list-style-type: none"> Early intervention and prevention are the focus for children and young peoples services. Multi-agency early detection and interventions are in place. Antenatal and postnatal mental health pathway across agencies is in place. As a result - detection of post-natal depression is improved. New community contract in place 1st April 2015 	
Adults	To deliver first class mental health care and treatment promoting prevention and recovery.		<ul style="list-style-type: none"> Improve early identification and diagnosis of mental illness offered with support and signposting to self-management and information. Promotion and increase in those making use of a direct payment as a personal budget. Review all community mental health services with the view of integration on a locality structure. Implement locality structure for all mental health community services. Complete the build of the new mental health hospital due to open in Aylesbury in early 2014. Delivery of modern, fit-for-purpose, high quality in-patient resource. Review of services for those with Personality Disorders. Forensic and eating disorder services will be commissioned through Specialised Commissioning arrangements. 		<ul style="list-style-type: none"> Integrated community mental health services (health and social care) offer a single point of access for referrers. Integrated pathways and aligned teams are managing both physical and emotional health. Feedback is routinely sought from patients and carers. All patients at each stage of their health journey are treated with dignity and respect. The new hospital is delivering high quality care and treatment in a safe environment. Services deliver on prevention and recovery. 	
Dementia care	To deliver whole system, multi-agency, approaches to caring for those with dementia.		<ul style="list-style-type: none"> Implement a consistent approach to memory assessment, with capacity to cope with rising prevalence Increase integrated community support, maximising the use of existing statutory and third sector resources to help people live well with dementia at home. Strengthen intermediate type services, including crisis response. Assess and develop service input into care homes. Initiate work on developing dementia friendly communities. Implement the dementia challenge projects. 		<ul style="list-style-type: none"> All people with dementia are helped and managed with dignity and respect. Integrated pathways and aligned teams are managing both physical and emotional health. Communities are more understanding and accepting of people with dementia. 	
Primary Care Mental Health Services	To improve health and social care outcomes for those with common mental illnesses.		<ul style="list-style-type: none"> Delivery of primary care psychological services through the IAPT programme, CBT and non-CBT modalities and development of employment retention. Review of full psychological therapy pathway – step 1 to step 4. Development of therapies for those with co-morbid LTC and COPD. Improvement in clinical education (PPIP Care) and case discussions. 		<ul style="list-style-type: none"> Improved links between primary and secondary care providers Psychological therapies pathway is in place across treatment tiers. Referrers (including self-referral) fully understand the pathway and what to expect. 	
Acute Trust interface	To promote the joint working of mental health clinicians and acute hospital staff in the early assessment and care planning of those with mental illnesses.		<ul style="list-style-type: none"> Develop and implement the Psychiatric In-Reach and Liaison Service (PIRLS) in the acute hospital trust. PIRLS to provide rapid assessment and care planning for those in A&E and admitted to wards in the acute hospital trust. Reduce to a minimum the number of patients unnecessarily occupying acute beds. 		<ul style="list-style-type: none"> People attending the acute hospital trust are offered proper assessments of their mental state as a matter of course. PIRLS has successfully reduced acute/mental health interface issues. 	
Autism	To develop and implement an integrated pathway for those with an Autistic Spectrum Disorder. To attend to transition issues as young people move into adulthood.		<ul style="list-style-type: none"> Sustain the tiered approach to training of staff and monitor the uptake. Attend to transition issues as young people move into adulthood. Full development of inter-agency system for assessment and care planning for those with co-morbid ASD and mental illness/learning disability and signposting for all others. 		<ul style="list-style-type: none"> Integrated pathway for ASD is in place and referrers fully understand the assessment and care planning system. The transition from young person to adult is managed effectively in relation to expectations regarding service delivery. 	

