FLINTSHIRE COUNTY COUNCIL

REPORT TO: CABINET

DATE: TUESDAY, 17TH DECEMBER 2013

REPORT BY: DIRECTOR OF COMMUNITY SERVICES

SUBJECT: MENTAL HEALTH COMMISSIONING PLAN -

SERVICE UPDATE

1.00 PURPOSE OF REPORT

- 1.01 The Mental Health Commissioning Strategy and Summary documents appended to this report describe our plans for the provision of training, education and work opportunities within the context of supporting recovery for service users with a mental health.
- 1.02 The strategy also aims over time to address a gap in the area of accommodation support.
- 1.03 The focus of this commissioning strategy excludes dementia or dementia related illnesses.

2.00 BACKGROUND

- 2.01 In drawing together this strategy a range of statutory drivers, legislation and strategic policy has been taken into account.
- 2.02 The key messages from these documents (which is reinforced by what people have told us locally) is that our Mental Health Commissioning Strategy should continue to provide an approach that is community based and further develops people's rights to respect and to have independent and fulfilled lives.
- 2.03 Current mental health services include:-
 - Direct support to individuals provided in partnership with the Betsi Cadwaladr University Health Board in the form of Tier 1, Primary Mental Health Support Services based locally within GP practices and Tier 2, Community Mental Health services which are specialist multidisciplinary teams based in Deeside and Mold.
 - Local authority provided mental health support services including Occupation and Employment Support, Community Living and Medium and Intensive Support Teams providing varying degrees of support based on an individuals needs.
 - Direct Payments/ Citizen Directed Support.

- Joint working with Housing colleagues in the council and with other housing partners.
- Residential & Nursing Care.
- A range of Voluntary Sector services provided via grants from the authority.
- 2.04 Our ongoing planning work is reinforced by a strong and active Mental Health Strategic Planning Group including service user and carer representatives.
- 2.05 The mental health support services delivered by the council provide holistic support to individuals, something that was recognised when the services won a recent Care Accolade from the Care Council for Wales.

3.00 **CONSIDERATIONS**

3.01 We have had a joint vision with Health Partners since 2005, which is:

"We aim to develop a Mental Health Service that is planned and delivered around the needs and aspirations of service users".

"We will do this by assisting service users to recover their mental health and to lead the lives they choose. We will fully involve individuals in a holistic assessment of their needs, which covers the key aspects of life (mental and physical Health Partners, education, occupation, income, accommodation, relationships, social support, social roles and spirituality)"

"We will provide responsive services which help people recover and maintain their role in society"

3.02 This vision remains as valid today as did when initially developed in 2005.

We will achieve this vision by:-

- Working in conjunction with Health Partners to further embed recovery in the Community Mental Health teams.
- Re-designing Mental Health Support Services to further embed recovery.
- Increasing and promoting the range of opportunities for social inclusion which includes setting up Social Enterprises and the growth of the Mentoring and Volunteering Project.
- Increasing involvement of service users and carers in all aspects of service delivery, including training and developing service user operated services.
- The establishment of Wellbeing Centres.

- 3.03 Working in conjunction with housing partners to develop further housing and support options for service users.
- 3.04 In developing this strategy a simple exercise was carried out to test the market for potential independent sector providers who may be able to deliver the community living and intensive support arms of the service currently provided by the local authority. The only proposal received was considered not to have the potential to deliver an improved quality of service, or efficiency savings.
- 3.05 This strategy therefore supports continued in-house provision of such services.
- 3.06 As noted within the strategy, opportunities to consider social enterprise as part of service delivery will continue to be considered.
- 3.07 The Commissioning Strategy sets out a direction for the service. It does not assume fixed resources or that service models will remain static. Mental Health Services will remain open to further modernisation and efficiency.

4.00 RECOMMENDATIONS

4.01 That Cabinet consider and agree implementation of the Mental Health Commissioning Strategy.

5.00 FINANCIAL IMPLICATIONS

5.01 The Mental Health Strategy aims to ensure that future provision can be met within current budgets. This takes into consideration likely increases in demand and the need to encompass that demand within current services.

6.00 ANTI POVERTY IMPACT

6.01 Not Applicable.

7.00 ENVIRONMENTAL IMPACT

7.01 Not Applicable.

8.00 **EQUALITIES IMPACT**

8.01 An Equalities Impact Assessment of this Strategy and its development has been completed.

9.00 PERSONNEL IMPLICATIONS

9.01 Not Applicable.

10.00 CONSULTATION REQUIRED

- 10.01 Standard 2 of Fulfilled Lives Supportive Communities Commissioning Framework states that 'Representatives of service providers need to be engaged at each stage of the analysis process as they can make valuable contributions towards identifying changes in need and with regard to the existing capacity to deliver services and options for future developments'
- 10.02 The requirement has been fully met
- 10.03 The full involvement of the Mental Health Strategic Planning Group (MHSPG), representatives, including all voluntary sector services we currently commission, health partners, service users and carers.
- 10.04 Managers from our provider service and mental health teams inputted via team meetings.

11.00 CONSULTATION UNDERTAKEN

- 11.01 The views of stakeholders have informed the 'analysis of need' stage of the development of this commissioning strategy.
- 11.02 The Strategy was discussed with our partners via the Mental Health Strategic Planning Group (MHSPG) at an early stage and their responses have influenced the document. Final feedback from this group was received on the 29th October.
- 11.03 Managers from commissioned services and in –house provision were involved via team manager meetings and workshops.
- 11.04 The findings of the Mental Health Support Services annual customer satisfaction questionnaire 2013 shaped our commissioning strategy. Alongside feedback obtained from previous Annual Council Reporting Framework workshops, with representation from all those connected with the service.
- 11.05 The report was considered by Social and Health Overview Scrutiny on the 25th November 2013. The Committee was supportive of the report and recommendations.

12.00 APPENDICES

- 12.01 Appendix 1 Mental Health Commissioning Strategy 2013- 2018
- 12.02 Appendix 2 Summary Mental Health Commissioning Strategy 2013- 2018

LOCAL GOVERNMENT (ACCESS TO INFORMATION ACT) 1985

BACKGROUND DOCUMENTS

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