

<b>Subject:</b>	<b>Review of community mental health support services</b>		
<b>Date of Meeting:</b>	<b>April 23<sup>rd</sup> 2012</b>		
<b>Report of:</b>	Geraldine Hoban, Chief Operating Officer, Brighton and Hove Clinical Commissioning Group Denise D'Souza, Director of Adult Social Care		
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<b>Key Decision:</b>	<b>Yes</b>	<b>Forward Plan No: JCB24256</b>	
<b>Ward(s) affected:</b>	<b>All</b>		

## 1. SUMMARY AND POLICY CONTEXT:

1.1. A paper was presented to the JCB in February 2012 setting out the findings of the consultation process, which had taken place on the following areas of Community Mental Health Support services:-

- Information & Advice
- Outreach Support
- One to One & Group Support
- Day Services
- Employment Support

The paper also detailed final proposals for service changes which were recommended in light of the consultation feedback obtained and in context of changes to the configuration of other mental health services in Brighton and Hove. These proposals were approved by the JCB.

1.2 This paper and appendices provide:-

- An explanation of the preferred route to securing new services.
- Outline outcome-based service requirements against which potential providers will be invited to make bids for services.

## 2. RECOMMENDATIONS:

2.1 That the JCB agree the preferred route to securing new services.

2.2 That the JCB note the outline service requirements which will be developed for use in a forthcoming prospectus – *contained in Appendix 2.*

### **3. RELEVANT BACKGROUND INFORMATION/CHRONOLOGY OF EVENTS**

#### **3.1 Background**

Community Mental Health Support Services in the context of this report is a term used to describe a range of services that support people living in the community to manage their mental health and wellbeing. The services discussed in this report are mainly provided by the community & voluntary sector.

These services are an important part of the overall system of mental health and wellbeing care and support. For some people, these services provide sufficient support on their own without the need for them to be referred on for clinical mental health treatment. For other people, these services form part of their overall package of care in that it supplements their clinical therapy and treatment programmes.

This paper follows two previous papers to the JCB meetings (in November 2011 and February 2012) which provided detail of outcomes from the formal consultation process and set out proposals for changes to the provision of community mental health support services.

It is recognised that any changes may present challenges and cause concern to service users and their carers that they must receive sufficient and appropriate support during the period of transition. Therefore, all existing contracts within the framework of the review have been extended so that they remain in place until 31<sup>st</sup> March 2013. At this point they will terminate and new arrangements will replace the current service contracts.

#### **3.2 Securing New Services – A Prospectus Approach**

Consideration has been given to the most appropriate route to securing services. Options include a full procurement process, awarding funding agreements for services via a prospectus approach or a mixture of both. It has been decided that the prospectus approach best suits the services under consideration in this report and should be adopted throughout. Potential providers will be given the option to bid for entire services or parts thereof.

This approach is in line with a number of national strategies including, Think Local Act Personal, 2010, Healthy Lives, Healthy people white paper and the Social Value Bill 2012. It is also the direction of travel within the Brighton & Hove Local Authority and has been used successfully to commission a broad range of voluntary and community services of both large and small financial values by other joint commissioning organisations most recently in East Sussex where in 2011/2012 £7.2 million of funding was made available over three years to third sector organisations wishing to work in partnership with the Council and local NHS.

The prospectus approach is focussed on the delivery of outcome-based services and fosters the involvement of the voluntary and community sector in developing sustainable and innovative models of service delivery.

Whereas, in traditional procurement, weighting is usually divided between quality and cost components, a prospectus approach includes the dimension of social capital to support the evaluation of how organisations can promote choice and control for local people, capitalise on the connections among people and their social networks, build collaboration and demonstrate how a thriving voluntary and community sector can best support people to improve their lives.

The system results in the award of 'Funding Agreements' containing terms and conditions which mirror those of formal contracts; performance indicators are based on desired outcomes measured in terms of Quality, Cost and Social Capital. The process of bidding for funding awards is less onerous than full procurement (both for commissioners and providers) and will, therefore, not discourage or preclude smaller organisations from taking part. It encourages prospective service providers to be more creative and flexible with regard to the way in which they meet agreed objectives. Agreements can be entered into for up to a three year period, where this is thought to be advantageous and likely to create stability and sustainability, or for a one year period where it is felt new models of delivery may still be emerging or new arrangements need to be piloted in the first instance.

An external evaluation of the Prospectus introduced in East Sussex was undertaken by the Institute for Public Care (IPC) at Oxford Brookes University in October 2011. This concluded that the approach '*has provided a clear framework for both integrating commissioning across departmental and organisational boundaries and the supporting back office functions*' and that '*it can be judged to be a more efficient model compared to more traditional tendering arrangements, and has the significant advantage of commissioners (in East Sussex) being able to take a whole County view of the patchwork of services being delivered and ensure a fair and equitable spread as appropriate... (it) generated efficiencies, improved business planning and refined the reach and scope of services.*'

The prospectus approach will not alter the agreed timeline for new arrangements to be put in place. The plan remains to work with successful bidders from November 2012 to April 2013 to implement a full change-over plan designed to help service users to move to the new services with minimum disruption to their existing routine and level of support.

#### **4. Service User Involvement**

Service users will be involved at key stages leading up to award of Funding Agreements (e.g. discussions with potential bidders on required service outcomes and evaluation of bids) and in preparing plans for the transition of services to new providers.

Regular updates on plans and progress will continue to be communicated to users via meetings, presentations, emailed bulletins and a maintained Frequently Asked Questions sheet to the following:-

- MIND - LIVE
- Day Services Managers
- User Engagement (Gateway) Leads

## 5. FINANCIAL & OTHER IMPLICATIONS:

### 5.1 Financial Implications:

Existing contracts will remain in place until 31 March 2013. As reported to February JCB in 2012-13 a total of £188,000 (PCT £180,000, LA £8,000) savings will be delivered from the community mental health support budget through changes to existing services. The budget for the financial year 2012-2013 across health and social care for community mental health support services is £1,942,000.

It is anticipated that through the prospectus and the resultant funding agreements further efficiency savings will be delivered in 2013/14 and the range of services are expected to be delivered within an indicative budget envelope across health and social care for 2013/14 of £1,819,000.

The combined efficiency savings across health and social care on completion of the process is expected to be £300,000.

The specific allocation of resources for each service area will be detailed in the prospectus. Any changes compared with current resource allocation will be in line with the proposed service changes.

*Finance Officer Consulted: Name Debra Crisp/Anne Silley Date: 04/04/12*

### 5.2 Legal Implications:

In accordance with the joint arrangements between Brighton and Hove City Council and Brighton and Hove NHS, JCB is the body responsible for commissioning arrangements for Mental Health Services in Brighton and Hove. As public bodies both partners must have regard to responsibility to the public purse and statutory requirements for and guidance concerning the provision of services. This report follows 2 previous reports proposing a re-modelling of service provision to ensure adherence to these duties and equity across the system informed by full consultation.

*Lawyer Consulted: Name Sandra O'Brien Date: 29-03-12*

### 5.3 Equalities Implications:

NHS Brighton and Hove has completed an equalities impact assessment which has informed the priorities including the need to address the key populations in the city. The key message from this process has been to ensure that the at risk populations identified in the needs assessment are included and there are sufficient and adequate access points for the traditionally excluded populations. A full Equalities Impact action plan is being developed and this is expected for completion by May 2012.

#### 5.4 Sustainability Implications:

The most significant impact of these plans will be on social equality and opportunities, on health, building sustainable communities and on the economy.

#### 5.5 Crime & Disorder Implications:

None identified

#### 5.6 Risk and Opportunity Management Implications:

There is a risk of destabilising service delivery during this process. The PCT and Brighton and Hove City Council have agreed that the most appropriate way to secure new services is via a prospectus approach. The advantages to this approach in terms of inclusivity particularly to small service providers has been described in section 3.2.

The timetable for contract implementation allows 5 month transition time from funding agreement award to service start date to enable commissioners to work collaboratively with providers to minimise any disruption to service provision.

#### 5.7 Public Health Implications:

The proposals in this report include specific targeting of resources at risk communities and those least likely to engage in mental health services. This is part of a strategic approach to reducing health inequalities within mental health.

#### 5.8 Corporate / Citywide Implications:

These service should be accessible to people with mental health needs who live in the city.

### **6. EVALUATION OF ANY ALTERNATIVE OPTION(S):**

- 6.1 The alternative option is no change. This is not supported because of the identified opportunities for improvements in service provision and value for money as well as the potential to enable a greater number of people to access community mental health support services.

### **7. REASONS FOR REPORT RECOMMENDATIONS**

- 7.1 The recommendation for change is based on the outcomes of a public consultation. The key messages from the consultation is that community mental health support services are valued but there is recognition of the need to change to ensure services work better together as an overall system of care.

## **SUPPORTING DOCUMENTATION**

### **Appendices**

1. High level milestone plan
2. Prospectus - Service Outcomes for Community Mental Health Support Services

### **Documents in Members' Rooms**

1. None.

### **Background Documents**

1. None

**Community Mental Health Services**  
**High Level Milestone Plan for Next Phase**

Activity	End Date
Outcome based indicators drawn up for new services	April 2012
JCB discussion of outcome based indicators and bidding process	April 2012
Prospectus launched	May 2012
New Funding Agreements in place	October/November 2012
Handover/transition plans in place	October/November 2012
New services begin	April 2013

## Appendix 2: Draft Prospectus wording

### Information & Advice

#### Objective:

The widest possible range of information and advice regarding promotion of good mental health and the availability of local and national support services for patients are carers will be available in both specific mental health settings and integrated with general advice and information.

#### Outcomes:

The service will ensure:-

- Availability of a comprehensive, accessible, quality-assured, user friendly, one-stop, mental health website, providing advice on maintaining mental health, on self-help for mental health problems and where to find further help. *This to include the promotion of good physical health through information on diet, exercise, smoking, alcohol and drug misuse*
- Availability of up to date and quality-assured hard-copy information materials are available in community settings for anyone seeking advice on services to help prevent mental health problems from occurring and on where to seek help and support when they have already occurred
- Information and advice is accessible to broad demographic groups in an appropriate form for specific target groups\*
- GPs/clinicians/healthcare professionals are easily able to signpost those presenting with mental health problems to the most appropriate guidance and help
- Open-access venues in various locations across the city for all members of the public to receive face-to-face preventative, confidential and independent advice, information and signposting to other appropriate services

\* *Men with a high risk of poor mental health*

*Homeless / rough sleepers*

*LGBT communities*

*Older people*

*Refugees / asylum seekers*

*Groups who may have practical difficulties in accessing services such as people with*

*Disabilities, autism, carers*

*Groups with cultural barriers including new migrants, travellers, some BME subgroups, military veterans*

#### Proposed Activity Level:

tbc

#### Geographical Remit:

Information must be available throughout East, West and Central areas of the city of Brighton & Hove.

**Maximum funding available for whole service:** £.....

*(please refer to Section ... re. variable funding)*



## **Psycho-Social Support including Outreach**

### **Objective:**

Psycho social support aims to help build community and individual resilience to manage mental health difficulties and improve wellbeing. Outreach aims to engage people from communities which are known to be hard to reach.

### **Outcomes:**

The service will ensure:

- One to one and group support is available to equip people with the tools they need to safely maintain good mental health in challenging circumstances such as following a bereavement, experiencing suicidal thoughts, adjusting to a disability, becoming a carer for others, dealing with unemployment, etc. The level of support, and qualifications of those providing it, will be appropriate to the level of risk presented
- Safe places are accessible to people from disadvantaged or hard to reach groups where they can articulate problems and receive advice and support specific to their needs. This will include providing links to mainstream services
- People with mental health problems or challenges are able to achieve or maintain skills for living in the wider community
- On-line and/or telephone services are available anonymously for those who may perceive stigma in declaring mental health challenges
- The most hard to reach groups are specifically targeted, these being:-
  - Men with a high risk of poor mental health
  - Homeless/rough sleepers
  - LGBT communities
  - Older people
  - Refugees/asylum seekers
  - Groups who may have practical difficulties in accessing services such as people with disabilities, people with autism spectrum conditions, carers
  - Groups with cultural barriers including new migrants, travellers, some BME subgroups, military veterans
  - Those who have been bereaved
  - People with suicidal thoughts
  - People leaving prison
- Issues related to discrimination and stigma, which create barriers to accessing and engaging with services, are addressed
- Partnerships are created with other specialist community groups and agencies, especially with providers of wider information and advice to ensure information on specific services is up to date and easy to understand

### **Proposed Activity Level:**

tbc

### **Access to the service:**

tbc

### **Geographical Remit:**

Services must be easily accessible for people within the city of Brighton & Hove.

### **Maximum funding available for whole service: £.....**

*(please refer to Section ... re. variable funding)*

**Day Services:****Objective:**

Services will be provided through a maximum of two building based (hubs) Day Centres with other drop-in services and programmed activities in community settings (spokes) to enable access across the City.

**Outcomes:**

- People with mental health problems will have local access to recovery-orientated and socially inclusive activities.
- Good physical health will be promoted through links to exercise and stop smoking schemes, etc
- Vulnerable people will be made to feel safe and appropriate safeguarding actions will be implemented
- Services will be accessible to, engage with, and meet the needs of people from known hard to reach communities
- Meal/café facilities providing low cost, healthy hot and cold food and drinks will be made available
- Independence will be promoted through opportunities to plan and review recovery
- Informal peer support working will be encouraged and facilitated; underpinned by Recovery Model approaches and the Social Inclusion Framework
- Employment Support will be integrated into activity programmes through joint working with named providers
- Carers of service users will also be offered support and advice
- Optimal efficiency and effectiveness will be achieved by working collaboratively with other Day Service provider(s) to create and maintain a coordinated system of data recording and sharing with appropriate agencies

**Proposed activity level:**

tbc

**Access to the service:**

tbc

**Geographical remit:**

Services must be easily accessible throughout the East, West and Central areas the city of Brighton & Hove.

Venues to be agreed in line with known need and sourced by the provider(s).

**Maximum funding available for whole service:** £.....

*(please refer to Section ... re. variable funding)*

### **Day Services for People with Personality Disorders:**

The services will be provided from a single site within Brighton & Hove and will include community based activities. They will be developed in partnership with statutory services and with service users; the therapeutic elements being provided by the statutory sector with community support as an integral part of the service.

#### **Outcomes:**

- People with personality disorders will have a central role in decision making and running of the centre
- Access will be provided to recovery orientated activities and support to prevent crisis
- Support will be available for carers and families of people with personality disorders
- There will be support and advice for service users (e.g. in accessing housing advice and advocacy)
- Networking and peer support will be facilitated
- Education and activities which work towards attitude change and challenging stigma will take place

#### **Proposed activity level:**

tbc

#### **Access to the service:**

tbc

#### **Geographical remit:**

Venue to be advised.

**Maximum funding available for whole service:** £.....

*(please refer to Section ... re. variable funding)*

## **Employment Support:**

### **Objective:**

Focussed on people with long term mental health illness<sup>1</sup>, the service will follow evidence based practice that helps people stay in work as well as find work. It will be an integral part of other services, specially:-

- Assessment and Treatment Services provided by Sussex Partnership Foundation Trust.
- Day Services

### **Outcomes:**

- Individual Placement and Support (IPS) model programmes will be provided through employment specialists
- People who are newly unwell and signed off work will be supported to retain employment (for example, help to negotiate reasonable adjustments under the Disability Discrimination Act)
- Negative attitudes to employing people with mental health issues will be addressed
- Local employers and employees will have a greater awareness of how to deal with adverse stress in the workplace
- Collaborative working will take place with Day Services (delivering an agreed level of specialist support on site within a hub and spoke model) and with other agencies

### **Proposed activity level:**

tbc

### **Access to the service:**

tbc

### **Geographical remit:**

Services must be easily accessible throughout the East, West and Central areas the city of Brighton & Hove and also linked to Day Centre hub(s) and spokes.

### **Maximum funding available for whole service: £**

*(please refer to Section ... re. variable funding)*

<sup>1</sup> Employment support for people with common mental health conditions (e.g. anxiety and depression) is an integral part of the new Primary Care Mental Health Service to start on 1<sup>st</sup> June 2012.