

BRIDGEND MENTAL HEALTH PARTNERSHIP



LOCAL ACTION PLAN FOR INDIVIDUALS WITH FUNCTIONAL MENTAL HEALTH NEEDS WITHIN BRIDGEND COUNTY BOROUGH

2008-2009

Introduction & Background

This document seeks to set out the modernisation of Adult Mental Health services for Bridgend County Borough within the context of a local action plan. The targets and actions contained within this action plan have been collated from the following National and Local Policy and Review sources:

- 'Raising the Standard' – revised National Service Framework for Adult Mental Health, Welsh Assembly Government (2005)
- Baseline Review of Bridgend County Borough Adult Mental Health Services, Wales Audit Office (2005)
- Annual Operating Framework (AOF) Health Targets – Welsh Assembly Government
- Health, Social Care & Well Being Strategy: Bridgend County Borough 2008-2011 (2008)
- Stronger In Partnership, Welsh Assembly Government (2004)
- Designed for Life, Welsh Assembly Government (2005)
- National Service Framework for Older People, Welsh Assembly Government (2006)

The action plan will also take account of local clinical governance issues raised by Primary Care colleagues and the specification for Directed Enhanced Services for the care of people with mental illness as part of the General Medical Services contract.

The Bridgend Joint Mental Health Strategy Planning Team (JMHSPT), this being the multi agency and multi professional mental health partnership group for Bridgend County Borough, is tasked with the implementation of this action plan and will undertake regular review and update of the plan as appropriate. The JMHSPT has a structure of sub groups to take forward the implementation of the plan (see Appendix One) and have developed and agreed a values statement that underpins the working of the team.

Values

The JMHSPT values statement underpins the service model for the County Borough of Bridgend. Within this values statement (Appendix Two i) people have the right to:

- Be treated with respect and dignity
- Be treated as unique individuals
- Be treated fairly
- Be treated equally
- Enjoy the best possible standards of health and well-being

- Opportunities which enable them to reach their full potential
- A life free from discrimination and oppression, with respect for their race, language, gender, religious beliefs, sexuality, sexual orientation, economic and social status

These values will be achieved in partnership with people with mental health needs and those that support them. In doing this, disruption to their lives and relationships will be minimised and they will be empowered to retain control over their lives as far as practicable in the process of their recovery.

The JMHSPT has also endorsed a Service User and Carer Charter '*working in partnership for equality*' (Appendix Two ii) which outlines the relationship between the partners and service users and carers through the design, planning, delivery, monitoring and evaluation process for mental health services.

Bridgend County Borough Health, Social Care & Well Being Strategy 2008-2011

Within the Health, Social Care & Well Being Strategy for Bridgend County Borough (2008), the following key targets have been outlined for Adult Mental Health provision:

- Addressing the physical health needs of people with mental health issues and the mental health needs of people who have chronic conditions
- Ensuring that people with mental health issues have access to affordable and accessible housing where it is needed
- Continue to improve care and support pathways and integrated systems of working between primary, secondary, social care and universal community services and across agencies, directorates and specialised services to ensure assessments are holistic; that all assessed needs are addressed and that communication is improved
- Consider the support needs of bereaved people who may be vulnerable to the development of physical or mental ill health as a consequence of bereavement
- Implement the Suicide Reduction and Prevention Strategy
- Identify the language and cultural needs of migrant workers and service users
- Improve access and re-model or commission services that encourage healthy lifestyle choices and tackle environmental and social disadvantage that have an impact on people's mental health and emotional well-being.

Aims and Objectives of the Action Plan

To co-ordinate the development of mental health services in a way that addresses the key actions of the revised National Service Framework (2005), recommendations from the Wales Audit Office Baseline Review (2005), requirements within the Annual Operating Framework and priorities identified within the Health, Social Care and Well-being Strategy for Bridgend County Borough.

Whole System Model of Care

The JMHSPT has developed a model of care (Appendix Three) which has been included within the action plan to demonstrate the whole system approach taken within the JMHSPT to the modernisation of Adult Mental Health Services within the County Borough. The model has four tiers of service and corresponding models of intervention. The eligibility criteria, which is based on the guidance in the Creating a Fair and Unified Assessment (2002), has also been referenced to illustrate the joint agreement reached through the development of the CMHT model within the County Borough. The opportunity has also been taken to highlight the service developments and modernisation that has already taken place. Those service areas highlighted in italics, which are subject to primary development or service reconfiguration through the National Policy directives such as the Annual Operating Framework are also outlined and provide focus on the areas which require development.

The model developed has followed the 'Stepped Care' approach. This model illustrates the various tiers of service provision that an individual with functional mental health needs could access dependent on presenting need and risk. Each tier of provision builds on the previous in terms of intensity of intervention. The tiered approach offers the individual with mental health needs the minimum input compatible with effective treatment in order to maximise independence and minimise dependency. The model has clearly described criteria for each tier with well defined pathways from one tier to the next.

Development Framework – Content and Overview

The Development Framework (see Appendix Four), agreed by the JMHSPT, draws upon the outcomes of the Wales Audit Office Baseline Review report (2005), and the standards and key actions of the revised National Service Framework (2005). Local priorities have been determined, which will be allocated to the sub groups of the JMHSPT to progress. Chairs of each sub group will be expected to provide regular progress reports to the JMHSPT. The Framework also details the Annual and Operating Framework targets. The key actions contained within the framework have also been allocated to groups that are responsible for planning and implementation of mental health services however are not sub groups of the JMHSPT. These include a Care Programme Approach Group that reports to the Bridgend Unified Assessment Implementation Team and a series of task and finish groups established to specifically progress Annual Operating Framework targets.

The framework has been formulated through the following columns:

Development Area – This specifies the particular key recommendations arising from the Wales Audit Office baseline review report.

Key Recommendations – This is a description of the recommendations of the review report.

Key Objectives/Actions – This illustrates what needs to happen to meet the requirements of the key recommendations. These will be progressed through the JMHSPT Sub Group structure.

Key Outcomes – This illustrates what would be the desired outcome of both the key tasks and key actions.

Lead– This illustrates the sub group from the Bridgend JMHSPT who will take the lead role.

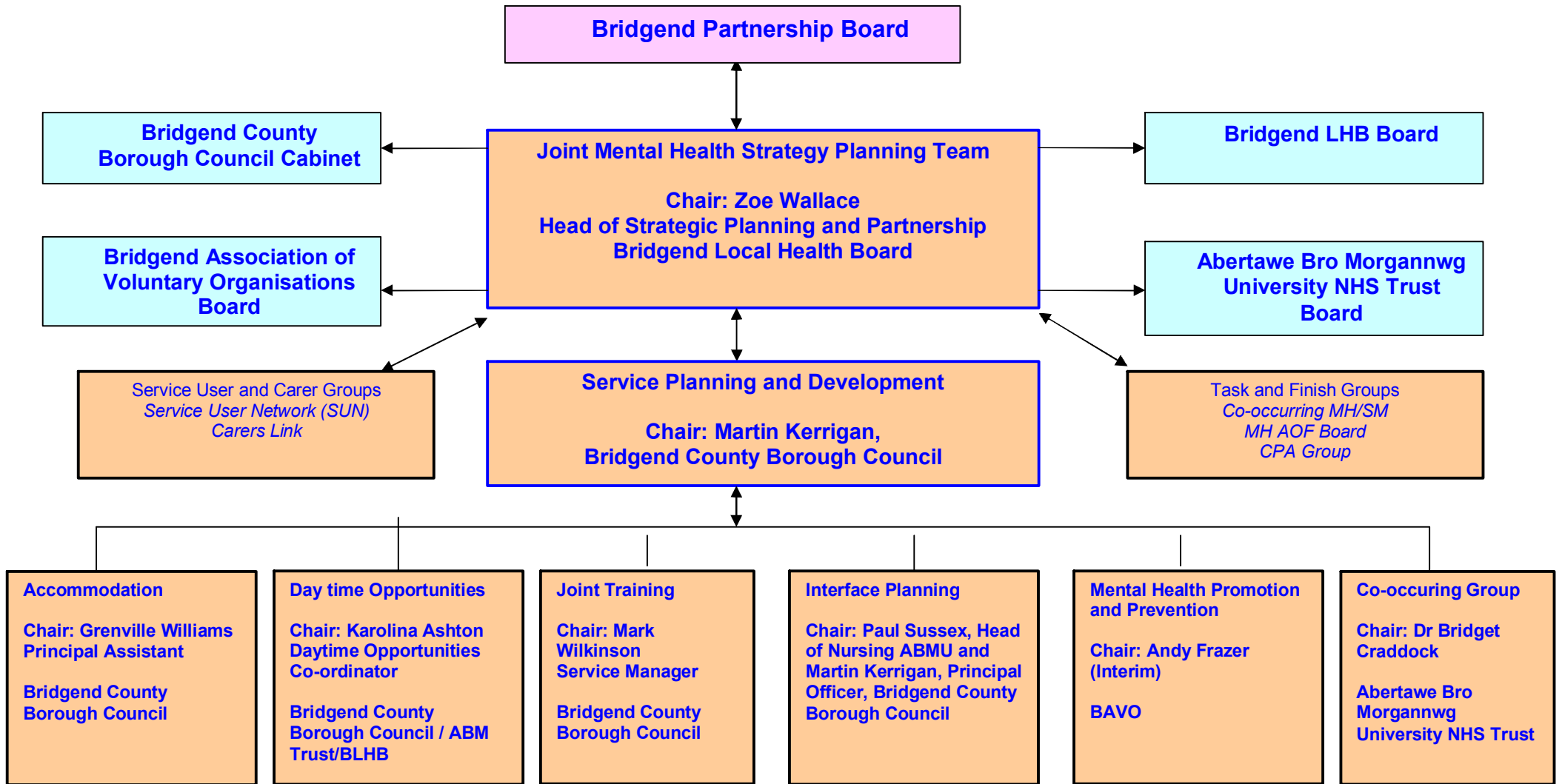
Performance Indicators – This illustrates the measure that will be used to determine progress and performance of implementation of the key action.

Costings – This illustrates the financial resource implications of achieving the respective key action.

Target date – This is determined either by the dates stipulated in the National Service Framework or the JMHSPT will stipulate the expected completion date of this particular target and cross refers to the Annual Operating Framework and National Service Framework key actions and target dates.
















Appendix One

Illustration of Bridgend County Borough Adult (18+) Mental Health Partnership Structure



Appendix One Bridgend Joint Mental Health Strategy Planning Team

Membership consists of:

-  Individuals who use mental health services and their carers
-  Abertawe Bro Morgannwg University NHS Trust
-  Bridgend Association of Voluntary Organisations
-  Bridgend Community Health Council
-  Bridgend County Borough Carers Forum
-  Bridgend County Borough Council
-  Bridgend Local Health Board
-  Bridgend Mental Health Service User Forum
-  Bridgend Mental Health Voluntary Sector Network
-  Bridgend Mental Health Carers Link
-  Bridgend Youth Offending Team
-  Gofal Cymru
-  Hafal Cymru
-  Mental Health Matters (Wales)
-  National Public Health Service

Appendix Two (i) Bridgend Joint Mental Health Strategy Planning Team Values Statement

The Bridgend Joint Mental Health Strategy Planning Team has developed a values statement which addresses the four principles set out in the National Service Framework for Adult Mental Health Services in the following ways:

Empowerment

- Listen to and involve people in making decisions about the kind of services they want, how they want them, and when
- Help people to develop the skills and confidence to make sure they can have a say in decisions about services
- Make sure people are given the information and support to take control and responsibility for their own recovery
- Work together with individuals to address dissatisfaction

Equity

- Provide a range of services to meet a variety of individual needs
- Fill the gaps in our services as identified by the people who use them
- Be easy to access by those who need them
- Be delivered in ways that are acceptable to people

Effectiveness

- Provide services that will help people recover from mental health difficulties
- Explore new and different ways of meeting people's needs
- Be based in evidenced good practice
- Be based on agreed values and beliefs
- Measure performance against stated objectives
- Measure performance against agreed values and beliefs

Efficiency

- Provide services that can cope with change
- Ask people what they think about services and make sure we use this information to make sure we get better at meeting people's needs
- Respond to changing needs and circumstances
- Be open and honest about how well we are doing by monitoring, evaluating and reviewing service provision

Appendix Two (ii) Service User and Carer Charter (October 2008)

Bridgend County Borough Service User and Carer Participation Charter **'working in partnership for equality'**

When participating in the design, planning, delivery, monitoring and evaluating of mental health services, service users and carers should:

- Be treated with dignity and respect
- Expect confidentiality regarding personal circumstances
- Be offered a variety of ways to participate
- Be given the opportunity to take part anonymously
- Have clear pathways to make a complaint and right to reply
- Be reimbursed for expenses incurred through involvement
- Have meetings held at times and venues accessible for all participants
- Have training needs identified and met
- Be clear of the role they are undertaking and be supported to take part
- Be provided with all relevant paperwork prior to meetings in a timely fashion
- Be given reasonable notice of the cancellation of meetings and groups
- Expect all participants to be introduced at every meeting including which organisations they represent
- Expect 'jargon' to be kept to a minimum and given full explanation for any still used

- Always be given an opportunity to comment
- Receive minutes showing clear action points and responsibilities
- Expect feedback for their views and involvement

Service users and carers participating in the design, planning, delivery, monitoring and evaluation of mental health services should:

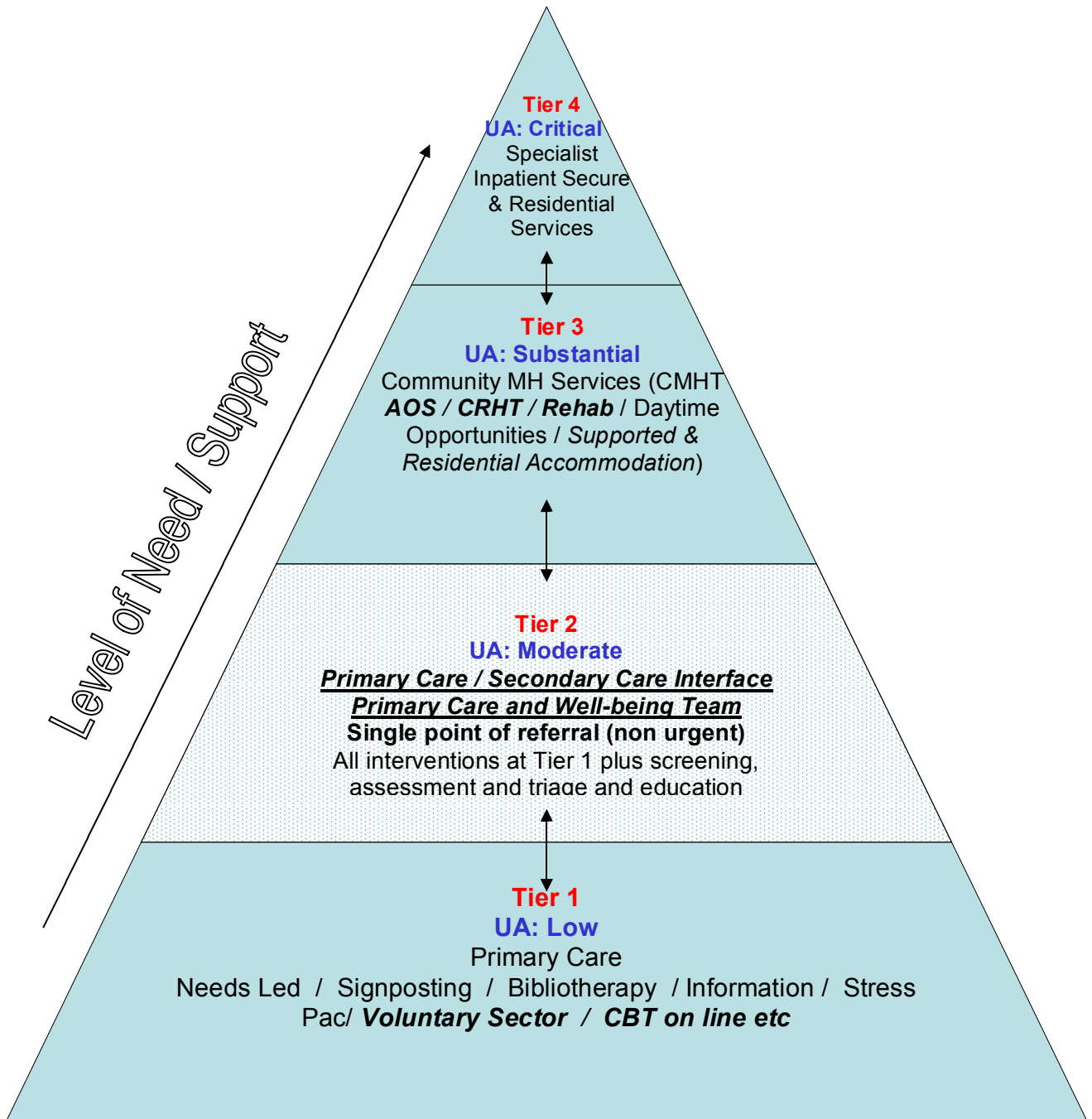
- Make every reasonable effort to participate regularly once they have made a commitment to do so
- Offer views that are representative of others and make clear when views are made regarding personal experience
- Be mindful of safety policies at venues such as procedures in case of fire
- Have realistic expectations regarding their involvement and appreciate the importance of partnership working

Service User Involvement::

To represent, share experience and expertise, to challenge and question’.

Bridgend Service User Network (SUN)

Appendix Three Bridgend County Borough Adult Mental Health Service
Whole System Stepped Care Model



APPENDIX FOUR

**BRIDGEND COUNTY BOROUGH DEVELOPMENT FRAMEWORK
FOR ADULT MENTAL HEALTH SERVICES**

(Source: Wales Audit Office (WAO) Bridgend Baseline Review - September 2005)

SECTION A: LOCAL PRIORITIES 2008/09

Framework Reference Number	Development Area (Ref: WAO Baseline Review 2005 recommendations)	Key Recommendations	Key Objectives /Actions	Key Outcomes	Lead JMHSPT Sub Group	Performance Indicator	Cost	AOF/NSF related target and date
LP 1	Mental Health Promotion and Prevention	<p>Implement programme of local action to tackle stigma and discrimination.</p> <p>Promote social inclusion.</p>	<p>Update local mental health promotion strategy to reflect needs of functionally ill over age of 65.</p> <p>Develop and implement local initiatives and programmes to promote better mental health.</p> <p>Maintain close links with implementation of the Suicide Reduction and Prevention of Self Harm Strategy for Bridgend County Borough.</p>	<p>Updated local mental health promotion strategy signed up to by partner agencies.</p> <p>People with mental health needs are treated with respect and dignity, as unique individuals, are treated fairly and equally, enjoying the best possible standards of health and well-being.</p>	Mental Health Promotion & Prevention Sub Group	<p>Mental Health Promotion Strategy Updated and adopted.</p> <p>Numbers of people receiving training and awareness.</p> <p>Number of initiatives developed and implemented.</p> <p>Feedback from Service Users and Carers.</p>		<p>NSF Key Action 2/3 2008/2009</p> <p>AOF ISSR1/2</p>

Framework Reference Number	Development Area (Ref: WAO Baseline Review 2005 recommendations)	Key Recommendations	Key Objectives /Actions	Key Outcomes	Lead JMHSPT Sub Group	Performance Indicator	Cost	AOF/NSF related target and date
		Access to tier 1 (primary/voluntary sector) psychological therapies and support services (e.g counselling).	Scope need for tier 1 psychological therapy provision and support services. Develop pathways and provision of tier 1 psychological therapy and support service provision.	Pathways developed. Increased provision of psychological therapy and support services as part of increased provision of tier1 Mental Health Services	Service Planning and Development Group (links to AOF Project Board).	Feedback from Statutory and Non Statutory agencies. Nos attended counselling. Reduced demand on secondary care.		NSF Key Action 26 2008/2009 AOF ISSR1/2
LP2	Accommodation	Ensure access to services for homeless people. Meet the needs of individuals with mental health needs who are homeless. Links with Local Housing Strategy and Homeless Strategy Partnerships. Links to Supporting People agenda.	The introduction of a simple single point of access for people with mental health needs who are homeless. Membership and strategic and operational input to Local Housing Strategy Plan and Partnerships including Supporting People Planning Group.	The operational functioning of a single point of access for people with mental health needs who are homeless or in need of accommodation That the accommodation needs and aspirations of people with mental health problems who are homeless or	Accommodation Sub Group	Numbers of people referred to the Accommodation Planning Group. The basic data of people movement through Glyn Cynffig, PATH Beds, Crisis Breaks, SPRG		NSF Key Action 9b 2007/2008

Framework Reference Number	Development Area (Ref: WAO Baseline Review 2005 recommendations)	Key Recommendations	Key Objectives /Actions	Key Outcomes	Lead JMHSPT Sub Group	Performance Indicator	Cost	AOF/NSF related target and date
				in need of move on accommodation is reflected both in operational and strategic plans and activities		schemes, Core and Custer Floating Support. The annual review and scrutiny of Strategic Housing and Supported People Operational Plans for the inclusions of reference to the needs of people with mental health needs.		
LP3	Co-occurring Mental Health and Substance Misuse	Ensure access to mental health services for individuals with a co-occurring mental health and substance misuse need.	Development of jointly agreed care pathway and protocols for communication of risk, transfer of care and sharing care within agencies.	Individuals with co-occurring mental health and substance misuse needs will be able to access appropriate services according to their presenting needs.	Co-occurring Task and Finish Group.	Development of model of service Implementation of model		WAG Substance Misuse Treatment Framework for Supporting People with Co-occurring Mental Health and

Framework Reference Number	Development Area (Ref: WAO Baseline Review 2005 recommendations)	Key Recommendations	Key Objectives /Actions	Key Outcomes	Lead JMHSPT Sub Group	Performance Indicator	Cost	AOF/NSF related target and date
			<p>Jointly agreed eligibility criteria to access services.</p> <p>Development and implementation of service model to ensure that individuals are able to receive appropriate support, based on a continuum model of care.</p>					Substance Misuse Problems.
LP4	Daytime Opportunities	<p>Further develop daytime opportunities to meet the needs of individuals with functional mental health needs over the age of 65.</p> <p>Develop employment strategy.</p>	<p>Development of local employment strategy including social, leisure, recreational, training and lifelong learning opportunities (including opportunities for homeless individuals with mental health needs)</p>	<p>Further Development of Daytime Opportunities Service to cater for needs of individuals with functional mental health needs aged 65+.</p> <p>Development of Employment Strategy.</p> <p>Individuals with mental health</p>	Daytime Opportunities Sub Group	<p>Daytime Opportunities Employment Strategy Produced.</p> <p>Numbers of individuals aged 65+ accessing daytime opportunities.</p> <p>Service User and Carer Feedback.</p>		NSF Key Action 10 2006/07 and 2007/08

Framework Reference Number	Development Area (Ref: WAO Baseline Review 2005 recommendations)	Key Recommendations	Key Objectives /Actions	Key Outcomes	Lead JMHSPT Sub Group	Performance Indicator	Cost	AOF/NSF related target and date
				needs to be able to access range of employment opportunities as part of daytime opportunities model.				
LP5	Training	To develop a Joint Training programme which will support the work of the sub groups and help address the issues which have been identified as key priorities for Bridgend.	Through the use of a training needs analysis to identify specific training requirements, arrange and publicise the courses and monitor and evaluate their effectiveness.	Individuals with mental health needs to be able to access range of employment opportunities as part of daytime opportunities model.	Joint Training Sub Group	Reports on the Number attending courses representing all the partner organisations. Report on feedback and evaluation from the courses.	46,000	

SECTION B - NATIONAL SERVICE FRAMEWORK PRIORITIES 2008/09

Framework Reference Number	Development Area	Key Recommendations	Key Objectives /Actions	Key Outcomes	Lead	Performance Indicator	Costings	AOF/NSF related target and date
NSF 1	Mental Health Promotion	<p>LAs/LHBs to implement a programme of local and national action to tackle stigma and discrimination as part of the Mental Health Promotion Action Plan.</p> <p>LAs and LHBs to implement national and local action plans to promote social inclusion.</p>	<p>Local strategies and initiatives in place to promote better mental health and tackle stigma associated with mental illness.</p> <p>Services geared up to provide quick and effective response to early signs of a person developing mental health problems.</p> <p>a) Implement the mental health promotion strategy b) Reduce stigma within context of whole systems approach across all sectors, services and age groups</p>	<p>Professionals have an increase knowledge and understanding of mental health promotion.</p> <p>People with mental health needs are treated with respect and dignity, as unique individuals, are treated fairly and equally, enjoying the best possible standards of health and well-being.</p>	Mental Health Promotion & Prevention Sub Group	<p>a) Mental Health Promotion Strategy updated</p> <p>b) Numbers of people receiving training and awareness</p> <p>c) Service User & Carers Survey</p>		<p style="text-align: center;">NSF Key Action 2/3 2008/2009</p> <p style="text-align: center;">AOF ISSR1/2</p>

Framework Reference Number	Development Area	Key Recommendations	Key Objectives /Actions	Key Outcomes	Lead	Performance Indicator	Costings	AOF/NSF related target and date
NSF 2	User and Carer Empowerment	LAs/LHBs to ensure mental health information is available in minority languages and Braille and arrangements in place to ensure regular updates.	Robust process in place to ensure all users and carers receive timely and relevant information in appropriate languages and formats.	Ensure updated directory / information available in range of formats. Further development of information available for service users and carers.	Service Planning Group	Review of accessible information		NSF Key Action 5 2008/2009 AOF ISSR1/2
NSF 3	Advocacy Services	LAs/LHBs to ensure access to non statutory advocacy services is available across all inpatient services	Review of existing arrangements for access to advocacy services. Assess the extent to which inpatient advocacy services are able to meet the needs of users and carers. Review funding arrangements for advocacy services.	Good access to inpatient advocacy service. Sustainable funding to support provision of advocacy services.	Service Planning Group	Nos of individuals accessing services. Time taken to access service. Capacity for advocacy.		NSF Key Action 6 2008/2009 AOF ISSR1/2

Framework Reference Number	Development Area	Key Recommendations	Key Objectives /Actions	Key Outcomes	Lead	Performance Indicator	Costings	AOF/NSF related target and date
NSF 4	Liaison Psychiatry Services	LHBs/NHS Trusts to ensure that arrangements are in place at all District General Hospitals to deliver effective liaison psychiatry services.	Review of existing arrangements. Assess the extent to which liaison psychiatry services are in place to meet the needs of users. Review funding and capacity to provide service.	Provision of and access to liaison psychiatry services at all District General Hospitals.	AOF Project Board.	Nos of individuals accessing services.		NSF Key Action 25 2008/2009 AOF ISSR1/2
NSF 5	Developing Primary Care Mental Health Services	LAs/LHBs to have structured counselling available in primary care.	Develop provision of counselling services in primary care.	Increased provision of counselling services as part of increased provision of Tier1 Mental Health Services.	Interface Planning Group	Nos attended counselling. Reduced demand on secondary care.		NSF Key Action 26 2008/2009 AOF ISSR1/2
NSF 6	Rehabilitation Services	LAs/LHBs to ensure full range of community peripatetic and residential rehabilitation services are in place. This should include an ability to	Scoping exercise of current provision. Agree model and establish service	Delivery of integrated rehabilitation service.	Modernisation of Mental Health Project Board	Range of services available		NSF Key Action 27 2008/2009 AOF ISSR1/2

Framework Reference Number	Development Area	Key Recommendations	Key Objectives /Actions	Key Outcomes	Lead	Performance Indicator	Costings	AOF/NSF related target and date
		provide a supportive/ assertive outreach approach for complex cases.						

SECTION C - ANNUAL OPERATING FRAMEWORK TARGETS 2008/09

Framework Reference Number	Development Area	Key Recommendations	Key Objectives /Actions	Key Outcomes	Lead	Performance Indicator	Costings	AOF/NSF related target and date
AOF 1	Delivery of NSF Actions 2008/09	By March 2009 delivery of the key actions set out within the Adult Mental Health National Service Framework (2005) - Annual Operating Framework 08/09 Target ISSR 1.	See NSF Targets	See NSF Targets	AOF Project Board	See NSF Targets	See NSF Targets	AOF ISSR1 NSF Key Actions 2/3/5/6/25/26/27
AOF 2	Delivery of Local Action Plan 2008/2009	By March 2009 implement all milestones for 2008/2009 contained within the approved Local Mental Health Action Plans.	See Local Priorities/NSF Targets	See Local Priorities/NSF Targets	AOF Project Board	See Local Priorities/ NSF Targets	See Local Priorities/ NSF Targets	AOF National Target 16 NSF Key Actions 2/3/5/6/25/26/27

Framework Reference Number	Development Area	Key Recommendations	Key Objectives /Actions	Key Outcomes	Lead	Performance Indicator	Costings	AOF/NSF related target and date
AOF 3	Assertive Outreach Services	In accordance with NSF, an assertive outreach service will be established which provides intensive support and has the capacity to meet the needs of clients who have or are at risk of disengaging with services in accordance with the level of need identified in the baseline assessment (SaFF target 21 2007/08) and offer early intervention of clients with a first episode psychosis allowing for the commencement of treatment within 3 weeks of referral to the early intervention service.	Scoping exercise in line with SaFF 2007/2008. Review the need for early psychosis service.	Adequately resourced supportive outreach services in place that maintain contact with individuals with complex and enduring problems and facilitate early intervention when problems arise.	AOF Project Board	Increased access for difficult to engage service users		AOF National Target 14 NSF Target 9b 2007/2008 SaFF Target 21 2007/2008

Framework Reference Number	Development Area	Key Recommendations	Key Objectives /Actions	Key Outcomes	Lead	Performance Indicator	Costings	AOF/NSF related target and date
AOF 4	Delayed Transfers of Care	To reduce the number of delayed transfers of care and number of days delayed in mental health facilities per 100,000 population.	Ensure appropriate balance between inpatient beds and community services Reduce pressure on acute beds through development of community based services that provide alternative to hospital treatment	Reduced number of delayed transfers and days delayed	AOF Project Board	Numbers of delayed transfers. Numbers of days delayed.		AOF National Target 18 2008/2009

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