

COMMUNITY MENTAL HEALTH SERVICES REVIEW

Purpose of Report

1. To provide Members with an overview of the Community Mental Health Services Review prior to the presentation by the Cardiff & Vale University Health Board at this meeting of the Scrutiny Committee. The Case for Change is attached as **Appendix A** to this report.

Background

2. At the September meeting of this Scrutiny Committee, Members considered Quarter 1 Performance. The Director of Social Services' report on performance outlined progress against a Community Mental Health Services Review project, which was being lead by the Cardiff and Vale University Health Board.
3. Members agreed that they would wish to receive a briefing on the Review project to advise them of the proposals.

Overview of the Project

4. The Review aims to further improve integrated mental health services for working age adults in the community, consisting of the Community Mental Health Teams (CMHTs), Crisis Teams and specialist teams within a whole community system including primary care mental health services and non-statutory services.

5. The Review also intends to address concerns over poor accommodation of CMHTs, as well as increasing demand and the impact this has on professional and statutory roles and the delivery of psychological interventions. Improving these aspects of the service will support changes that will help continue work towards a vision for services whilst continuing to provide therapeutic, high quality and safe service. The catalyst for this Review relates to previous concerns raised by community staff, service users and carers, feedback from GPs and also benchmarking of community performance.
6. The review is complementary to the “Shaping Our Future and Well Being” Strategy, and “Together for Mental Health” delivery plan.

What are Mental Health Community Services?

7. Mental well-being has been defined by the World Health Organisation as: *‘A state whereby individuals recognise their abilities, are able to cope with the normal stresses of life, work productively and fruitfully, and make a contribution to their communities’*. The **‘Together for Mental Health’** national strategic plan focuses on resilience, prevention and recovery and has an all ages, life course approach. The strategy focuses on the needs of people with and without a mental health diagnosis and acknowledges the roles that primary care, the statutory and third sector play in promoting well-being for service users and carers.
8. In 2010, the Welsh Government issued the Interim Policy Implementation Guidance and Standards for Delivering Community Mental Health Services. This guidance sets out a tiered model of mental health care and places CMHTs at the heart of secondary mental health care in Wales. It states that CMHTs:
 - Receive referrals (at present mainly from primary care)
 - Undertake screening assessments
 - Offer a range of more specialist assessments and interventions and deliver a constructive discharge

9. In 2012 the Mental Health (Wales) Measure 2010 was implemented. The Measure provides primary legislation and regulation on the provision of Local Primary Mental Health Support Services (Part 1) and the co-ordination of care and treatment for relevant patients receiving secondary mental health services in Wales (Part 2). Part 2 of the Measure places recovery and a holistic approach to care and treatment planning at the forefront of delivering secondary mental health care.

Overview of Mental Health Services in Cardiff and the Vale of Glamorgan¹

Diagnosis of Mental Illness

10. According to the GP registers in Cardiff and the Vale as at March 2016, there were 4,372 people with a diagnosis of a serious mental illness.
11. There were also 2,947 people with a diagnosis of dementia. However, according to the Alzheimer's Society 2014 report, GP data represents only a fraction of people with dementia in the community²; therefore, under-diagnosis is an issue, despite Cardiff and Vale having the best detection rate in Wales.

Service usage

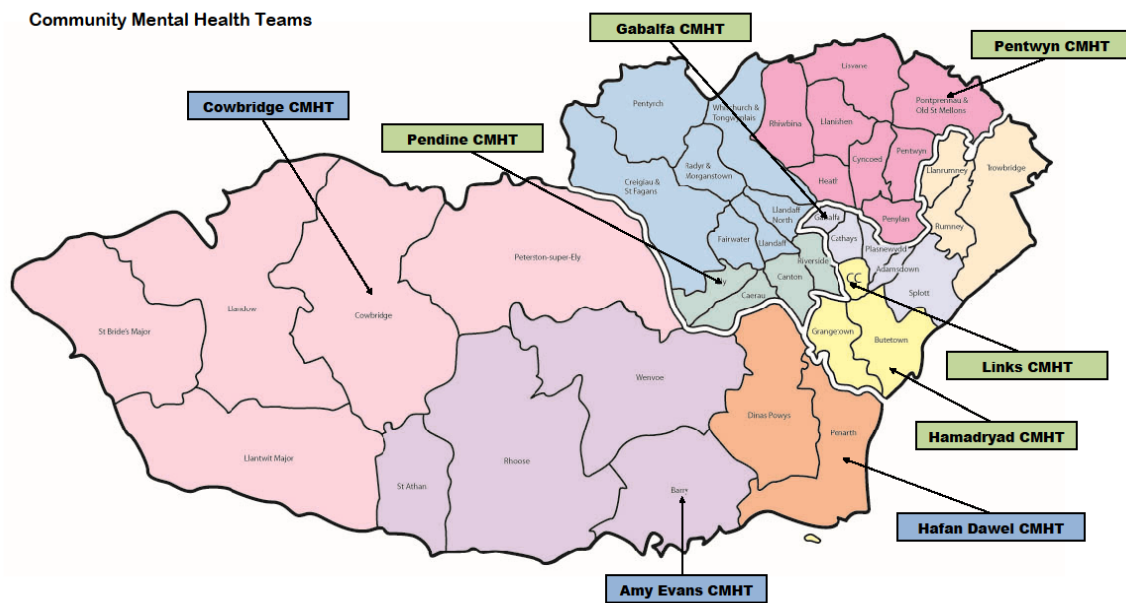
12. Benchmarking data shows that the Community Mental Health Team caseload per 10,000 weighted populations is 147 within Cardiff and Vale, which is similar to NHS Benchmarking data of 140. Within this service, there are 252 contacts per whole time equivalent, compared to 240 across the UK.
13. The numbers of admissions per 100,000 populations are 245 in Cardiff and Vale, compared to 234 across UK benchmarking data. Bed occupancy in Cardiff and Vale is 115%, whereas across the UK it is 91% on average.

¹ Source: Case for Change – Proposed Developments for Community Mental Health Services – Cardiff & Vale UHB

² Alzheimer's Society, http://www.alzheimers.org.uk/site/scripts/download_info.php?fileID=1666

Cardiff and Vale Community Mental Health Services

14. In Cardiff and the Vale adult mental health community services are delivered out of 8 CMHTs, five in Cardiff and three in the Vale.



Way Forward

15. At this meeting, the following witnesses will be in attendance:

- i) Councillor Susan Elsmore (Cabinet Member for Social Care, Health & Well-Being)
- ii) Tony Young (Director of Social Services)
- iii) Amanda Phillips (Assistant Director, Adult Services)
- iv) Ian Wile (Director of Operations for the Mental Health Clinical Board, Cardiff & Vale UHB)
- v) Rebekah Vincent-Newson (Operational Manager, Mental Health)

Ian Wile from the Cardiff and Vale UHB will make a presentation to Committee.

16. Members may decide any comments, observations or recommendations they wish to pass to the Cardiff and Vale UHB and Cabinet for their consideration following the presentation at this meeting.

Legal Implications

17. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not to make policy decisions. As the recommendations in this report are to consider and review matters there are no direct legal implications. However, legal implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Cabinet/Council will set out any legal implications arising from those recommendations. All decisions taken by or on behalf of the Council must (a) be within the legal powers of the Council; (b) comply with any procedural requirement imposed by law; (c) be within the powers of the body or person exercising powers on behalf of the Council; (d) be undertaken in accordance with the procedural requirements imposed by the Council e.g. Scrutiny Procedure Rules; (e) be fully and properly informed; (f) be properly motivated; (g) be taken having regard to the Council's fiduciary duty to its taxpayers; and (h) be reasonable and proper in all the circumstances.

Financial Implications

18. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not to make policy decisions. As the recommendations in this report are to consider and review matters there are no direct financial implications at this stage in relation to any of the work programme. However, financial implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Cabinet/Council will set out any financial implications arising from those recommendations.

RECOMMENDATIONS

It is recommended that the Committee:

- i. Consider the information provided in the presentation and the information set out in **Appendix A**; and
- ii. Decide the way forward with regard to any further scrutiny of this issue.

DAVINA FIORE

Director of Governance and Legal Services

7 November 2017