

ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
19 JANUARY 2016

ADULT PREVENTATIVE MENTAL HEALTH SERVICES
IN LEICESTERSHIRE

REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of the Report

1. The purpose of this report is to provide an update to the Adults and Communities Overview and Scrutiny Committee about the current status of preventative mental health services to the citizens of Leicestershire, with particular reference to Black and Minority Ethnic (BME) communities and other hard to reach groups. This update was requested by the Committee at its meeting on 3 March 2015.

Policy Framework and Previous Decisions

2. Following the strategic review of Adult Preventative Mental Health Services in 2012-13, a new service model for preventative mental health services was developed and approved by the Cabinet on 20 November 2013.
3. On 3 March 2015, the Committee received a report providing an update on the new model and its implementation. The Committee noted the work to date and the generally positive initial feedback, and requested another report at a later date to provide further information on the performance of this contract.

Background

4. Following the strategic review of Adult Preventative Mental Health Services in 2012-13, a new service model for Preventative Mental Health Services was developed to address the specific issues identified in the review:
 - Services were geographically inequitable: some areas of the County had little or no provision;
 - Services were not providing for older people (over 65);
 - Large variations in costs between the contracted providers;
 - Inequitable provision of BME specific services across the County.
5. The new service specification was designed in response to the findings of the review to ensure that services could meet demand, provide equitable access (both geographically and demographically), focus on positive outcomes, and provide value for money. An Equality Impact Assessment (EIA) was undertaken in 2012, and an action plan developed, to ensure that inequalities would be addressed through specification requirements and ongoing monitoring of the new service model.

6. The service specification contains three elements:
 - Social drop-in groups;
 - In-reach support for people who experience barriers to accessing preventative mental health services (including, but not limited to age, gender, culture, rurality, disability);
 - Development of peer support.
7. All elements of the service must be available to adults over 18 with a diagnosed mental health condition, and must be accessible to people with protected characteristics. An EIA was undertaken in 2012, and an action plan developed to monitor the service delivery. The action plan has been implemented in full, and reviewed by the Departmental Equalities Group (DEG).
8. A procurement process was undertaken and the contract for the new service model was won by Richmond Fellowship. Service delivery commenced on 1 October 2014.
9. Contract monitoring includes requirements for data about the numbers of people with any protected characteristic accessing the service, as well as feedback on any specific needs identified and outcomes achieved. This data is reviewed on an ongoing basis by the Adult Social Care Compliance Team.

Status Update

10. The Committee originally expressed a concern that the new approach to commissioning could impact negatively on the number of people from BME communities accessing services. Specific attention has therefore been paid to monitoring usage of the service by that group, and shows that there has been an increase from 50 to 63 service users from BME communities accessing the groups (21% increase). Links have been made with Charnwood's Human Rights Equalities Council to further support BME clients and there are plans to develop links to Lesbian, Gay, Bisexual and Transgender (LGBT) groups.
11. It was also identified that men from BME communities were under-represented in usage of this service, and it was felt this might be due to cultural issues which could be addressed through specific provision. To date this planned specific provision has not been developed because staffing difficulties have resulted in insufficient capacity to set up new specific groups as well as continuing to provide the current generic groups which are open to all.
12. Service users have reported to visiting Compliance Officers that difficulties with staffing levels have impacted on some of the service provision. This has been acknowledged by Richmond Fellowship and an action plan has been put in place to address issues in relation to staffing and ongoing change management to ensure that groups continue to move towards the required model of provision.
13. Service recipients have also stated they are generally satisfied with Richmond Fellowship staff and experience them as empathic and supportive. The group venues are generally well received and reported as fit for purpose. Some groups have been supported to take ownership for organising activities in and out of the groups and are supporting each other as a peer group in maintaining this well.

14. A report has been prepared by Healthwatch Leicestershire, attached at Appendix A, following engagement with service users and staff at Richmond Fellowship in August 2015 to gather their views of the service. The report highlights the staffing issues, which are acknowledged, but also reflects the resistance to change from some long standing service users experienced by the service provider. No issues specifically related to service users from BME communities have been identified in the report.
15. Many people who access the social drop-ins have used this service and its predecessors for many years, and it is clear that their expectations and wishes do not match the Council's current model of service, designed to support progressive recovery and independence.
16. Work is ongoing to continue to manage change and address reluctance to embrace the new model of service provision. It is focused on increasing the number of people with an outcome-focussed support plan that will enable them to regain their independence and move on from the groups, and to support people to maintain their wellbeing through friendships, peer support, and shared experiences, outside of the drop-in setting.
17. Further work on pathways through the service is underway and closer partnership working will support greater effectiveness and progression for drop-in service users.
18. The model of future preventative mental health support will be reviewed prior to the end of the current contract, with the aim of ensuring that service is aligned to the new Adult Social Care Strategy and the Medium Term Financial Strategy (MTFS), as well as complementing (but not duplicating) provision from Health partners and the work of the Better Care Together Mental Health Workstream.

Conclusion

19. This report provides an update on the progress of the Adult Social Care Preventative Mental Health Service, with particular reference to the support offered to service users from BME communities and other hard to reach groups, where usage has increased. The report offers evidence that the concerns about the new service model being less accessible to all communities have not materialised.
20. Whilst staffing issues have impacted upon aspects of delivery of the service, resulting in a focus on social drop-in group delivery and other developmental work (peer support, volunteer co-ordination and outreach), rather than closer monitoring of outcomes of individuals, this is addressed in the action plan. The plan also deals with the recording requirements, to improve the quality of data received by the Council and inform future decision-making in relation to all protected characteristic and any specific needs.

Background Papers

- Report to Cabinet: 9 July 2013 – Strategic Review of Adult Preventative Mental Health Services in Leicestershire - <http://ow.ly/WstAR>
- Report to Adults and Communities Overview and Scrutiny Committee 3 September 2013 - <http://ow.ly/Wstle>

- Report to Cabinet: 20 November 2013 - Strategic Review of Adult Preventative Mental Health Services in Leicestershire - <http://ow.ly/WstMU>
- Equality Impact Assessment - <http://ow.ly/WstQY>
- Report to Adults and Communities Overview and Scrutiny Committee 3 March 2015 - <http://ow.ly/WstU5>

Circulation Under Local Issues Alert Procedure

None.

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List of Appendices

Appendix A – Lost in Translation. Findings from Mental Health Service Users and Staff at Richmond Fellowship, Healthwatch

Equality and Human Rights Implications

21. The Equality Improvement Plan was reviewed by the DEG in March 2015 and all actions are either completed or continuing in the case of contract compliance and service delivery monitoring.