



HEALTH, SOCIAL CARE & WELLBEING SCRUTINY COMMITTEE – 3RD DECEMBER 2013

**SUBJECT: INTEGRATION OF MENTAL HEALTH SERVICES WITH ANEURIN BEVAN
HEALTH BOARD**

REPORT BY: CORPORATE DIRECTOR SOCIAL SERVICES

1. PURPOSE OF REPORT

- 1.1 The purpose of this report is to provide members with a position statement in respect of mental health integration. It offers a summary of progress to date, current deliberations, timescales and next steps.

2. SUMMARY

- 2.1 During 2010, a series of listening events were held with users of mental health services and their carers. These sessions along with an on-going dialogue with service users and carers through a variety of fora led to the development of the Integrated Mental Health Strategy for Gwent. The strategy placed equal focus on both the well-being and service agendas and had 8 strategic priorities. One of the priority areas within the strategy was to pursue a programme of integration between providers of health and social care in Gwent.

- 2.2 Partners in Gwent have been working together to pursue a programme of mental health integration for the past two years. Over this time, there has been a sustained commitment to the integration of delivery, policies, processes, resources (both staff and budgets) and structure. Through the development and approval of the Gwent Mental Health Strategy which has been adopted by the 5 Local Governments and Health Board in Gwent, there has been a longstanding commitment to pursuing a programme of integration, which partners have cited as:

- Delivering integrated services to those that need them through services that are organised around individual needs.
- Ideally this requires an integrated delivery and management framework with a single budget and compatible IT systems.

- 2.3 Members of Scrutiny Committee have received several reports referencing progress with regard to integrated mental health services. These reports were considered on the:

- 28 June 2011
- 25 October 2011
- 6 December 2011
- 15 February 2012
- 26 October 2012
- 4 December 2012

3. LINKS TO STRATEGY

3.1 The policy landscape to support integration has grown stronger in respect of supporting integration over the past few years. Integration is then embedded in a diverse policy framework. Some are outlined below :

- **National**

- Together for Mental Health : Welsh National Strategy for Mental Health
- A framework for delivering integrated health and social care
- Social Care & Well-Being Bill
- National Vision for Dementia
- Mental Health Measure Wales
- Carers Measure Wales

- **Local**

- Gwent Mental Health Strategy
- Gwent Learning Disabilities Strategy
- Gwent Carers Strategy
- Single integrated Plans for Blaenau Gwent, Caerphilly, Monmouthshire, Newport & Torfaen

4. THE REPORT

4.1 During 2012, approval was gained from all organisations to work up a detailed proposal that supported the development of an integrated service, delivered in each unitary authority area, managed within a single structure (health) and supported by a pooled budget, single line management arrangements and compatible IT systems. Governance arrangements would be via a section 33 agreement and a multi-agency collaborative. The original considerations were to include both adult and older adult services. This was confirmed at a Partnership Board meeting during December 2012. At a subsequent meeting during summer of 2013 however this decision was re-visited and older adult services removed from the scope of the integration project.

4.2 A bid to support collaboration was also made to the Welsh Government against the collaborative funds and approved. By the end of the 2013 year, it is anticipated that a full team will be in place to offer the necessary capacity to take all of this work forward. A tremendous amount of work has been undertaken across the 6 organisations in the last two years, to get a baseline position on all services, staffing structures and finances supporting mental health delivery in Gwent.

4.3 Based on the agreement from all organisations to move forward, detailed work was undertaken to make a proposal in respect of which services should be integrated, which should remain in each Borough (and not be included in any pooled budget) and also which staff would be affected by the creation of integrated staff teams. It has long been planned to align existing teams and finances, locking them into a section 33 agreement and then to redesign as necessary the pathways that exist across Gwent, to eliminate waste, reduce variation and achieve better user outcomes. Proposed Governance arrangements for the service and associated resources were also proposed.

4.4 The total value of investment in non specialist mental health services in Gwent is circa £64m. The following services are however deemed those that should sit within an integrated management structure and as such equate to a financial value of approximately £25million. The staff who are linked to these services are approximately 470 in number.

- Primary Mental Health Teams
- Community Mental Health Teams

- Assertive Outreach Teams
- Crisis Resolution Teams
- Voluntary sector services
- In-patient units (adult)
- Continuing Health Care

This proposal was made to the Mental Health and Learning Disability Partnership Board on 18th October 2013. This was the same week that organisations had learned of their position related to financial allocations, and set a different context for the debate than had previously been considered.

4.5 Current Position

- 4.5.1 Information presented to the Partnership Board on this occasion was felt sufficient for a formal proposal through the Decision Making bodies of each of the statutory organisations. Through discussions, however, members clearly cited the challenges inherent in 'locking in' budgets to a section 33 agreement within the current climate as a challenge. They suggested an alternate phased approach of achieving integration within the timescales as agreed for securing the collaborative bid:

A phased approach to integration should take place with the first phase being appointment of the integrated posts and alignment of the related teams, with a memorandum of understanding supporting this. In a second phase, a pooled budget will be created for the remainder of the service budgets and governed by a 33 agreement. We will focus in detail in the next year on how the service could look.

- 4.5.2 Work has commenced on the development of the Memorandum of Understanding, and discussions are also currently underway to secure support for the systems thinking work. Financial support for this could be accessed via the collaborative fund if secured in this year. Staff are being kept informed of discussions at this point via a core brief which is cascaded throughout organisations.

4.6 Timescales

- 4.6.1 Funding has been secured for the collaborative proposal until 01 April 2016. As such this sets the timeline for the achievement of integrated service delivery in Gwent.

There are five key phases to the integration project. A possible timeline is set out below:

- Phase One: Baseline of existing financial staff and service information
- Phase Two: Original scoping phase and pathway redesign and transition
- Phase Three: Section 33 development and endorsement
- Phase Four: Structural and financial integration
- Phase Five: Full Implementation

Appendix 1 illustrates the project phasing over the appropriate financial years.

5. EQUALITIES IMPLICATIONS

- 5.1 This report is for information only and an equality impact assessment is not required. When it is determined that an impact assessment is required this will be completed by Aneurin Bevan Health Board as the lead agency.

6. FINANCIAL IMPLICATIONS

- 6.1 The budget for Caerphilly Borough Council for 2013/14 for the Mental Health services referred to in this report is £4.6 Million.

7. PERSONNEL IMPLICATIONS

- 7.1 Initially personnel implications will be restricted to the appointment of the integrated posts and alignment of the related teams. Further Personnel implications will be considered as they emerge and there will be continued dialogue with staff and Trade Unions.

8. CONSULTATIONS

- 8.1 All comments from consultations are reflected in the main body of the report.

9. RECOMMENDATIONS

- 9.1 Members are asked to note the progress to date and in particular the revisions to the project scope and timeframes.

10. REASONS FOR THE RECOMMENDATIONS

- 10.1 Partners in Gwent have worked closely together over the past two years to together understand how best they could integrate mental health service delivery for better service user outcomes. Extensive work has been undertaken to baseline the current position and make initial proposals as to how the service could look. A challenging financial climate has resulted in the need to revisit the project scope and phases and as such a revised option is now being pursued. The revised approach will achieve the same timescales and outcomes, but via an alternate approach.

11. STATUTORY POWER

- Local Governments Acts 1972 and 2000
- National Assistance Act 1948
- National Health Service And Community Care Act 1990

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Appendices:
Appendix 1 Integration Project Phasing Diagram