

DUNDEE CITY COUNCIL

REPORT TO: Social Work Committee - 22 August 2005

REPORT ON: Adult Mental Health Review in Tayside

REPORT BY: Director of Social Work

REPORT NO: 495- 2005

1.0 PURPOSE OF THE REPORT

- 1.1 The purpose of this report is to advise the Social Work Committee of the progress that is being made towards implementing the outcome of the Adult Mental Health Review in Tayside and to request that as part of the process of implementation of the Review, the Director of Social Work, or his representative, be authorised to "sign off", within current powers of delegated authority, business cases put to the Programme Board.

2.0 RECOMMENDATIONS

It is recommended that the Social Work Committee;

- 2.1 Notes the progress that is being made towards implementing the Adult Mental Health Review in Dundee as summarised in paragraph 6.1.2 of this report;
- 2.2 Authorises the Director of Social Work or his representative to sign off, within current delegated powers, business cases approved by the Project Board, and;
- 2.3 Instructs the Director of Social Work to bring back to the Social Work Committee for approval, any recommendations that exceed the current powers of delegated authority.

3.0 FINANCIAL IMPLICATIONS

- 3.1 There are no financial implications that arise directly from the content of this report.

4.0 LOCAL AGENDA 21 IMPLICATIONS

- 4.1 Two of the main purposes of the review of mental health services are to ensure that opportunities for equitable access to local services are optimised and that a health improving approach is taken to the delivery of mental health services.

5.0 EQUAL OPPORTUNITIES IMPLICATIONS

- 5.1 The implementation of the review of mental health services will provide a more health improving approach to the delivery of mental health services in Dundee and will help improve awareness of mental health issues.

6.0 MAIN TEXT

6.1 Background

6.1.1 The Adult Mental Health Review in Tayside was a comprehensive review of adult mental health services which concluded with a report to Tayside NHS Board in December 2004 recommending priority elements of a proposed programme of activity be implemented.

6.1.2 The programme was to be implemented through detailed project planning co-ordinated by a Programme Team and managed and endorsed by a Programme Board. The review itself, and the operation of the Programme Team and Programme Board have been constructed on a partnership basis. This recognises the interrelationships and dependencies between statutory bodies, service user and patients, carers and statutory and non-statutory service providers. Dundee City Council has representation on the Programme Team and Programme Board.

6.1.3 The project planning process introduced to oversee the complex task of implementing this broad ranging review requires action to be presented in the form of a business case and signed off by each member of the Programme Board.

6.2 Progress with the Review

6.2.1 Appendix 1 to this report is a summary of the progress that has been made to date with the Adult Mental Health Review in Tayside. In terms of the direct impact on citizens of Dundee;

- a) planning is progressing on a revised model for the operation of community mental health teams;
- b) additional services to psychological services have reduced the waiting list for Dundee citizens and further staffing enhancements are planned that should reduce waiting times further;
- c) a detailed evaluation and audit of community based social care services is in progress with a report of findings imminent. When the findings are approved additional and enhanced services will be introduced;
- d) interim arrangements have been introduced for the provision of Rehabilitation and Continuing Care services pending longer terms redesign of this area of service delivery;
- e) planning is progressing on a Tayside-wide proposal for intensive psychiatric care; and
- f) a workforce planning team has been established to put in place a workforce plan to support the entire implementation process.

6.3 It is proposed that members of the Social Work Committee;

- a) note the progress that has been made towards the implementation of the Tayside Adult Mental Health Services Review; and
- b) approve that the Director of Social Work or his representative be authorised to "sign off" business cases presented to the Programme Board as long as the recommendations or actions do not exceed current powers of delegated responsibility.

7.0 CONSULTATION

- 7.1 The Chief Executive, Depute Chief Executive (Finance) and Depute Chief Executive (Support Services) and Adult Mental Health Services Programme Board have been consulted in the preparation of this report.

8.0 BACKGROUND PAPERS

None.

Director of Social Work

Date: 10 August 2005

REPROVISION OF GENERAL ADULT PSYCHIATRY SERVICE IN TAYSIDE

1. PROGRESS TO DATE

Following NHS Tayside's Board meeting on 9th December 2004 the implementation of priority elements of the programme have progressed significantly. Real benefits for individuals are beginning to emerge this year as specific elements of the redesign are implemented including provision of additional community mental health staff, psychological therapy staff, enhancement of Level 1 services through the provision of additional investment. Progress is also being made with the initial phasing of the redesign of inpatient services covering interim arrangements that will move towards safer, more secure environments and the redesign of models of care to provide the cultural and therapeutic environment changes identified within the review. Many process elements have had to be undertaken to reach the point of being able to provide real outcomes for individuals but as the year progresses, beneficial changes and impacts will be felt across Tayside by service users, carers and staff as implementation moves forward.¹

1.1. Tayside Wide Guidance

Project teams have been working hard over the last 6 months in order to develop and refine Tayside wide operational policies for Community Mental Health Services covering mild to moderate mental illness at Level 2 and severe and/or enduring mental illness at Level 3. Included in this work was the development of patient care pathways within and between Levels 1 to 4. The project teams have already largely endorsed these policies and the next step is to communicate this to the locality Strategic Planning/Task groups for agreement and implementation.

1.2. High level scoping work

An outline proposal has been developed to take forward accommodation with support, community rehabilitation and inpatient rehabilitation and continuing care service on a combined basis as these services are closely interrelated and the definition of the model for one service area has a direct impact on the functioning of the others. This work will ensure an appropriate care pathway for individuals is defined. The initial work of this group has been circulated to the Programme Team for comment and will then be more widely consulted upon before being presented to the Strategic Planning/Task Groups at their July meetings for implementation. This will enable comprehensive rehabilitation of patients within their own local area.

1.3. Community Mental Health Services

All of the community mental health teams across Tayside are to be enhanced to provide a more inclusive service and to extend the current hours of provision. The review specifically identified the requirement for Perth & Kinross community mental health teams to be brought up, in the first instance, to the same staffing levels as those already in place in Angus and Dundee. In line with the phased input of additional funding to support these services, a plan was developed that would allow Perth & Kinross teams to be enhanced in the first year of implementation.

The implementation of the new policies and enhanced staffing levels will provide individuals with easier access to services and ensure that the development of an equitable service across Tayside is progressed.

1.3.1. Perth & Kinross

To progress the development of and to provide additional leadership to the community mental health nurses, as the redesign process gets under way, two nursing Team Leader posts have been advertised and one appointment has already been made. These posts will provide the focus and drive to maximise the development of the teams and facilitate cultural change as the additional staff come on stream and to ensure that new Tayside wide policies and procedures are implemented and adhered to. In the meantime all other staff increases are being progressed throughout the year to match the need, the availability of accommodation and recruitment opportunities.

The current teams have been restructured from four to three to ensure easier access to patients within the localities. A more effective booking and administration system for outpatient appointments has been introduced and will be evaluated throughout the year. A Single Shared Assessment process is being implemented to assist in the coordination and continuity of care and access to an electronic referral system through MITER (Mental Illness Tayside E Record) has also been introduced across the locality.

1.3.2. Tayside Wide

To allow the further development of all community mental health services in 2006 and beyond, project teams will shortly be formed to take forward the planning work required to enable implementation of further enhancements from April 2006 when the agreed additional recurring funding becomes available.

To support the overall community mental health service model across Tayside, accommodation is being reviewed to ensure that there is sufficient and appropriate space. Local managers are also liaising with the Community Health Partnership General Managers to secure or plan for space to accommodate outpatient activity in the future.

1.4. Out of Hours Arrangements

1.4.1. Interim

From July 2005, an appointment will be made to lead the Specialist Mental Health Out of Hours Team. Following this appointment a number of additional senior mental health practitioners will also be appointed and will be available to all patients Tayside wide who require a mental health out of hours service and access to assistance from 18.00 hrs to 04.00 hours seven days per week. This enhanced service will alleviate pressure within the overall out of hours service as well as providing a specialist mental health component for patients who require it.

This service configuration is an extension of the model piloted in Angus that has already shown good outcomes. The service will be closely aligned with the GP Out of Hours Service and will be managed through the same route.

1.4.2. Future

The interim arrangement will be evaluated over a six month period to inform the shape of the future service to be in place from April 2006, when the resources are available on a recurring basis to ensure 24 hour, seven days a week cover and therefore augment the care delivered by the community mental health services.

Next year, 2006, will see the development of the Specialised Mental Health Out of Hours Service that will provide cover from 21.00 until 09.00 and teams in all three localities being enhanced to provide a service with extended hours, from 09.00 until 21.00.

1.5. Psychological Therapies

To begin the enhancements to the Psychological Therapies teams, job descriptions have been developed and refined according to Agenda for Change requirements and several posts have been advertised over the last two months to enable the implementation of the first years proposed staffing increase as early as possible within 05/06.

The identified funding has been targeted initially to address areas with the highest waiting lists and has utilised the population and deprivation weightings and the availability of new staff. The areas with the highest waiting list were Dundee Primary Care and Perth Primary Care.

Within Dundee Primary Care the filling of 2 vacant Clinical Nurse Specialist posts plus the new monies to fund an additional 0.6 Clinical Nurse Specialist has contributed to the waiting list falling from 732 in January 2005 to 559 in April 2005. An additional 1.6 Clinical Psychology posts are currently being advertised for Dundee Primary Care. If appointments are successful then this should have an additional positive impact on waiting times.

The allocation of 1.0 Clinical Psychology post to Primary Care in Perth is currently being advertised. Changes in the model of service provision have enabled Perth Primary Care to reduce its waiting list from 181 in January 2005 to 67 in April 2005 and the maximum waiting time in this specialty is now 12 weeks. A successful appointment to this service would ensure that maximum waiting times of 26 weeks could be achieved and maintained.

1.6. Level 1 Services

To ensure equity and consistency of Level 1 services across Tayside a project team was established, and tasked with providing a template to identify core Level 1 services. This team has taken into account the joint working required around Level 1 services and has incorporated representation from local authority partners and Strategic Planning and Task Groups from each of the three localities. This multi agency representation has provided diverse and broad input into the process and has allowed wide ranging debate at a strategic level. This high level information regarding core elements of service is complete and has been distributed to each of the locality Strategic Planning/Task Groups for detailed consideration and action at their July Meetings. A prioritisation framework has been developed to facilitate the commissioning process within each locality. Commissioning processes are slightly different within each of the localities and the joint management arrangements will ensure that implementation within each locality achieves the desired equitable outcomes and benefits. The Strategic Planning and Task groups will also be provided with information detailing the current commissioned Level 1 Services and advised of the process for commissioning new services and resources available with timescales.

To evaluate current services from a service user perspective, the Tayside User and Carer Federation sought and received external funding from the Scottish Communities Action Research Fund to facilitate this piece of work. Dundee City

Council is also currently undertaking an evaluation of local provision as a separate piece of work. The outcomes from both of these specific areas of work will be available towards the end of 2005, and, with the information already available from the extensive work undertaken in Angus, will continue to help shape and inform future services.

Each Strategic Planning/Task group will have responsibility for ensuring that the services commissioned fall within those identified in the Tayside wide template and that new services are in place commencing in the autumn of this year. This will improve the equity of Level 1 services locally and on a Tayside wide basis as each locality prioritises commissioning of additional and enhanced services. This process will continue over the next three years as the recurring additional funding becomes available.

1.7. Acute Admission and Assessment Inpatients

A workshop entitled "Aiming for the Ideal" took place on 23rd June 2005. The purpose of this was to achieve consistency of approach in the design, development and delivery of Acute Admission and Assessment beds Tayside wide. An action plan was developed on the day to take forward associated tasks.

1.8. Intensive Psychiatric Care, Rehabilitation and Continuing Care Inpatients

The review produced very clear definitions of the requirements for inpatient beds for each of these patient groups including the number of beds and the physical location of them. NHS Tayside supported this with a commitment to the recurring resource required to achieve the ultimate configuration of these specialist services. In order to progress this, detailed design work must now be undertaken to ensure that the new service and buildings provide safe, secure and therapeutic surroundings that contribute to the recovery of individuals. Half-day workshops have been held, where multi agency representatives discussed in detail what the interior of the above wards and the cultural environment should provide. This information has been fed into the design process.

Project teams are progressing inclusion/exclusion criteria and a care pathway that shows the access and discharge paths to these components of service. The development of interim arrangements for these services is progressing and this work will also inform the development of the future operational policies for these inpatient services.

1.9. Rehabilitation and Continuing Care Interim Arrangements

As part of the phased process to achieve the redesign of these services within the few years, some interim arrangements must be progressed that take the service forward for existing patients and staff. Initial interim arrangements for Rehabilitation and Continuing Care services were agreed in principle by the Programme Board in January 2005 and are under further development.

The planning of the Almond Ward refurbishment at Murray Royal Hospital to improve the patient environment for those requiring rehabilitation and continuing care within a hospital setting is underway to take forward the refurbishment work required to provide this first phase of the interim arrangement. A new model of care, developed in keeping with the new Tayside wide model for Continuing Care and Rehabilitation Unit, is being implemented alongside the environmental changes to ensure that the most vulnerable patients are receiving the best available evidenced based practice within an appropriate environment. These refurbishments will enable the move towards the

new bed configuration and the most recent resettlement of patients now able to live as independently as possible within their own communities will allow the closure of Elcho ward. This work will be concluded in the autumn of 2005.

Further successful patient resettlement allowed the closure of Ward 15 on the Sunnyside site in February of this year in line with the ongoing resettlement programme.

In Dundee the current resettlement programme has reduced patient numbers on the Royal Dundee Liff Hospital site and, while longer term provision for the remaining individuals has been agreed, discussions are ongoing regarding local interim arrangements.

Intensive Psychiatric Care Interim Arrangements

The clinical concerns associated with the current configuration of General Adult Psychiatry Intensive Psychiatric Care were highlighted in the progress report provided to the Board in December 2004. The main issues identified at that time, and which remain current, relate to clinical safety, inappropriate environments and inadequate female provision.

Since that time considerable work has been undertaken with all relevant stakeholders to identify possible interim IPCU arrangements to achieve some measure of improvement in services in advance of a custom-built Tayside-wide facility being made available at the Carseview Centre, Dundee.

While various options have been scrutinised over the past months and consulted upon, the constraints of the existing accommodation coupled with significant issues in respect of nursing and medical staffing, which in themselves would present major implementation difficulties, have restricted progress. Nevertheless several avenues continue to be explored. These include focussing male IPCU provision for Dundee and Perth & Kinross patients at the Carseview Centre and the creation of a small female IPCU provision at the same location by some minor reconfiguration and redesignation of existing accommodation. This proposed reconfiguration within Carseview also has the potential to achieve single sex environments consistent with national guidance.

All of the above would contribute incrementally in moving towards the Tayside-wide model for IPCU services already endorsed for implementation.

Given the potential limitations of any interim solutions that can be implemented, priority attention continues to be given to progressing the planning of the Tayside-wide IPCU facility for males and females, which it is anticipated, will be available by 2008/09.

1.10. Workforce Planning

With the proposed service design and development covering all clinical and administration and clerical staff over a five-year period, a Tayside wide workforce planning team has been established. This team is working on priority tasks including the completion of a detailed five-year workforce plan that will be used to track staff movements from current to future requirements. Recruitment and retention forms an integral part of this plan and work is underway to produce a recruitment pack with a focus on Mental Health in Tayside as a career. Links have been made with Agenda for Change to ensure that future job descriptions not only include the core elements required but also include health specific skills and competencies required within mental health.

There are already strong links with Universities and this will ensure our future staffing requirements are reflected in the planning of future courses in respect of skills and competencies and numbers of students.

Service users and carers throughout the consultation process identified training as a key priority. Work is underway to ensure staff are retained and existing staff within the inpatient services have opportunities to gain additional psychological skills to enhance practice.

Community staff requirements arising from the implementation of new Tayside wide operational policies will also be addressed. This will involve new ways of working by all professionals and will ensure that a philosophy of person centred planning is embedded into future practice.

All of the above will inform the production of an Organisational Development Plan, which will identify the cultural and organisational changes to be addressed.

1.11. Financial Framework Updates

The original financial plan for 05/06 review implementation has been revisited and levels of slippage identified. The level of funding allocated for 05/06 has been signed off by the Savings/Review committee in line with natural slippage identified.

All costings associated with the Review are being updated to 05/06 price levels and to reflect impacts such as Agenda for Change. The bridging finance required for Years 2 to 5 (2006 to 2009) will be updated as more refined manpower planning information becomes available.

Finance input to the Outline Business Case is ongoing and work is being progressed to look at future site running and capital costs to assist in the compilation of a public sector comparator cost to take forward the procurement process.

Finance support will continue to be provided to all project teams to assist the implementation process throughout the year and ensure efficient use is made of all resources allocated.

1.12. Outline Business Case Development (Capital Elements)

Production of the detailed Outline Business Case is continuing and the first draft of this was presented to the Programme Board in June. This document sets out in detail the requirements for Tayside General Adult Psychiatry inpatient beds including any new build or refurbishment and the potential costs associated with this. Design teams are being appointed to work with the programme team on a design solution that will determine detailed specifications. This will enable the detailed costing information to be developed which is required for the Public Sector Comparator as part of the procurement process to ensure that best value is achieved.

Although developments at Carseview are noted in the OBC, changes to the building will be dealt with as an extension of the Carseview Contract as this is an existing PFI. Work is already underway looking at the required changes within the Carseview Centre to accommodate General Adult Psychiatry, Neurosurgery for Mental Disorders and Learning Disabilities.

1.12.1. Procurement Interfaces

Across Tayside other mental health services are also developing strategies that require changes to or the development of new buildings. In order to maximise value for money, all of these project leads will liaise closely with one another to ensure that where buildings are situated on the same site the procurement options are looked at for the site, in its entirety, rather than based solely on a specific service. For instance on the Murray Royal Hospital site in Perth, Mentally Disordered Offenders and Psychiatry of Old Age services both plan new buildings and these are likely to be included in any PFI tendering process, in accordance with guidance from the Scottish Executive.

1.13. Planning for 2006/2007 Implementation

Planning must now be undertaken for those elements of service that are to be implemented from 2006 and these are detailed below. However as these additional project teams are being brought together, further work on all the previously stated projects will continue, with increasing investment levels commencing in April 2006/07.

1.13.1. Specialist Mental Health Out of Hours Service Tayside wide

Once the interim arrangements are in place, work will continue to be progressed, taking account of the pilot activity data, to develop a specialist mental health out of hours service, from April 2006, when recurring resources will be available. This will be fully integrated with NHS 24, GP Out of Hours Services, Out of Hours Mental Health Officer provision by local authorities and will interact with community and inpatient services as well as the wider community.

1.13.2. Dundee and Angus Community Mental Health Services

Strategic Planning Groups have already discussed the need to plan for implementation to commence in April 2006 and are about to set up sub groups to take forward this work in keeping with the Tayside wide guidance.

Mrs Hazel Mitchell
Programme Director
Date 30th June, 2005

¹

Level 1 Community resources and voluntary based services provided in the wider community.

Level 2 Psychological Therapy services will be available for those individuals with mild to moderate mental health problems.

Level 3 Community Mental Health Teams will provide services for those individuals with severe and/or enduring mental illness.

Level 4 Inpatient services will be provided for those individuals requiring a safe and secure hospital environment.