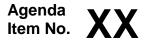
Report No. ACS 12018

London Borough of Bromley PART 1 - PUBLIC



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Decision Maker: Adult and Community Policy Development Date: 10 Apr 2012

and Scrutiny Committee

Decision Type: Non-Urgent Non-Executive Non-Key

TITLE: SCRUTINY OF BUDGET AREA: MENTAL HEALTH SERVICES

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Chief Officer: Lorna Blackwood, Assisstant Director Commissioning and Partnerships

Ward: N/A

Reason for report

This report outlines the services funded through the mental health budgets in adult and community services in line with the Policy Development and Scrutiny Committees objective to scrutinise the main areas of spend within Adult and Community Services.

RECOMMENDATION

1. The Policy Development and Scrutiny Committee is asked to consider the area covered by this report with particular emphasis on the continued shift from residential to flexible support to enable people to remain independent and deliver budget savings of £700k from 2008/09.

Corporate Policy

Existing policy: Building a Better Bromley priority to support people to live independently in the community

Financial

- 1. No cost
- 2. <please select>
- 3. Budget head < Mental Health Budget Code 821900
- 4. Total budget for this head £5,124,190

<u>Staff</u>

- 1. Number of staff (current and additional) -34 FTE
- 2. If from existing staff resources, number of staff hours -N/A

Legal

- 1. Statutory requirement:
- 2. Call-in is not applicable:

Customer Impact

Estimated number of users/beneficiaries (current and projected) - 2646 individuals using secondary mental health services with an additional 560 known to Primary care using universal services

3. COMMENTARY

3.1 Background

3.1.1 At any one time, one adult in six suffers from mental health problems of varying severity. One person in four will experience some kind of mental health problem in the course of a year. 60-70% of adults will at some time in their lives experience depression or worry of sufficient severity to influence their daily activities. It is suggested that more than half of those who attend their general practice may have some symptoms of depression. Mental health problems affect a large proportion of the population, with approximately 158 people per 1,000 of the Bromley population aged 16 to 74 years suffering from a mild to moderate disorder (ie anxiety and/or depression) which equates to about 36,000. At the more severe end of the spectrum, over 2,500 people in Bromley (1% of the adult population) have been identified by GPs as suffering from serious mental illness.

The breakdown below gives an overview of what treatment those who experience mental health problems are likely to seek and get:

- Around 300 people out of 1000 will experience mental health problems every year in Britain
- 230 of these will visit a GP
- 102 of these will be diagnosed as having a mental health problem
- 24 of these will be referred to a specialist psychiatric service
- 6 will become inpatients in psychiatric hospitals.
- 3.1.2 Services for adults with mental ill-health in Bromley range from services for people who require support with a short term mental health problem to services to people who have serious and enduring mental ill health. Bromley Primary Care Trust (PCT) fund the majority of services, through Primary Care, specialist secondary mental health services provided through Oxleas NHS Trust and tertiary services provided by South London and Maudsley Trust. The PCT also fund individual health placements and fund a number of other services jointly with the Council.
- 3.1.3 Mental Health services support the Portfolio's strategic vision of promoting independence, giving greater choice and control to service users and their families, enabling people to participate in their community, and promoting improved quality of life for all service users. The draft revised Mental Wellbeing Strategy groups services into the following areas:
 - Universal services providing access to mainstream services such as housing, leisure and education
 - Specific supports and interventions providing services targeted to people with specific eligible needs
 - Self directed support enabling people to exercise more choice in how their needs are met.

3.2 Resources

There are a total of 34 fte council staff delivering mental health services:

- 1 fte strategic commissioner, (50% funded by Bromley PCT).
- 33 fte social care staff seconded to Oxleas NHS Trust under a Section 75 Agreement of which two posts are funded by Oxleas NHS Trust and the remainder by the Council

The total controllable mental health budget is £5.1m which is allocated as follows:

| Universal Services | 403 |
|---|-------|
| Oxleas NHS Trust | 1,554 |
| Specific support and initiatives | 973 |
| Residential services | 2,330 |
| Self directed support | 67 |
| Staffing contribution to health and housing | 341 |
| Total gross budget | 5668 |
| Income (client contributions/ third party payments) | -544 |
| Total net budget | 5124 |

3.3 Universal services

- 3.3.1 Universal services for people with mental ill health are funded jointly with the Bromley NHS to provide a range of services to both people eligible for social care and those who are not, the percentage of funding from each commissioning organisation reflecting this. The services provide a range of interventions which include:
 - Advice and guidance services including signposting to other services
 - Open access sessions for peer support
 - Support to employment
 - Coping with Life classes
 - Individual support and planning
 - Advocacy, both community and Mental Health Act advocacy
 - Benefit advice and support
 - Involvement of users in services
- 3.3.2 These services were tendered in 2010 -11 realising savings of £ 8,417 to the PCT and £27,940 to the Council. A further efficiency of £75,000 has been identified in relation to Community Well-being services for 2012-13, which is subject to a separate paper to this Committee.
- 3.3.3 There are approximately 1280 individuals who use universal services with approximately 560 of those being supported through Primary Care. These are approximate numbers as some individuals will access a number of services at any one time.

3.4 Oxleas NHS Trust

3.4.1 Oxleas NHS Trust provides secondary mental health services for adults over 18 years including in patient provision provided primarily at Green Park House. Bromley NHS funds these services with the Council contributing £1.5 m through a Section 75 agreement to community services. In 2012/13 an efficiency saving of £75,000 will be made with a similar amount in the following year on this budget. The Council employs 33 FTE staff who work within the integrated mental health community teams and contributes to Oxleas NHS Trust

- management costs. Through the Section 75 Agreement the local authority duties for assessing need are delegated to Oxleas NHS Trust and to members of the integrated teams.
- 3.4.2 The social workers within the teams are Approved Mental Health Professionals and discharge the Authority's statutory responsibility for assessments under the Mental Health Act for individuals of all ages. The Emergency Duty Team is funded to carry out this function out of hours. On average for both Oxleas and Emergency Duty Team there are 93 assessments per month resulting in 39 hospital admissions. When an individual is sectioned into hospital under the Mental Health Act the Authority is obliged to meet the costs of storage, kennelling of animals etc there is also funding for the provision within the Section 75 Agreement.
- 3.4.3 Under the Section 75 Agreement the Council has effectively "outsourced" assessment and support planning for people with mental ill-health to Oxleas NHS Trust. Benchmarking information on caseloads, the total of which may be around 2600 at any one time, confirms that the Oxleas service demonstrates value for money and delivers good outcomes for individuals. The continuing work with Oxleas on support planning and through the demand management panel in embedding personalisation within mental health services is being recognised nationally as an effective model for delivering improved outcomes for individuals as well as efficiencies.

| Team | Service provided | Ave no. referrals in last 12 months | | |
|---|--|---|--|--|
| Liaison intake team | Team assesses & triages referrals for all adult (18-65 years) mental health services. | 2214 | | |
| Short term intervention team | Work with individuals (18-65 years) who require short term support and intervention of up to a year | 936 | | |
| Complex care teams | Work with individuals (Over 18 with a functional mental health problem) who require support and intervention on a longer term basis | 137 | | |
| Rehabilitation support team | Work with individuals (over 18 with a functional mental health problem) who require intensive long term work to enable them to regain skills in living independently | 18 | | |
| Assertive Community Treatment team | Work with hard to engage individuals (Over 18 with a functional mental health problem) who often have mental ill health and misuse substances | 21 | | |
| Home treatment team | Crisis team who support people of any age to remain at home where possible | 2347 | | |
| Early Intervention in Psychosis Team | Specialist team working with younger people in the first episode of psychosis to prevent individuals becoming long term service users | 63 | | |
| Older peoples Service | Working with people of any age with dementia and people who are over 65 presenting with a functional illness | 352 | | |

NB. This is not the number of individuals, as an individual may be known to several teams at any one time

3.5 Specific support and interventions

- 3.5.1 Oxleas NHS Trust provides secondary care services to people with mental ill health. Staff undertake assessments of individuals needs both in terms of their mental health and social care needs. If social care services are required they are identified and discussed with the individual and referred on to the mental health panel. The panel identifies a personal budget where appropriate and then reviews the service a minimum of every six months (this may be more regularly if an individual is moving on or is experiencing a period of illness). This model of demand management is being adopted by other authorities in London, including Greenwich and Bexley.
- 3.5.2 In line with the Portfolio vision of promoting independence, reliance on residential services continues to reduce by enabling individuals to move into their own accommodation with individual support. Use of in borough residential care places has remained relatively static over the last three years at 40 places for which the Council fund one third of the total placement costs with the remainder being funded by the PCT. There has however been a focus on reducing the use of out of borough residential placements been a steady reduction in the use of high cost out of borough residential placements over the same period as demonstrated below with a consequential saving of approximately £700k from 2008/09 as illustrated in the table below.

| Year | 2008/09 | 2009/10 | 2010/11 | 2011/12 (as of Feb 2012) |
|---|----------|---------|----------|--------------------------------|
| Number of individuals in out of borough placements | 53 | 55 | 31 | 27 |
| Savings on residential budget including monies transferred into other budgets | £200,000 | £47,000 | £206,000 | £257,000 |

- 3.5.3 Some of the savings delivered from the residential budget have been realigned into other budgets to reflect the need to expand flexible support services to support people in their own homes. Funding (£50k from 2008/09) was also allocated to Appointee and Deputyship which provides a service managing individual's monies enabling them to be supported to live in their own home. Again this service has been recognised nationally as an example of good practice. £100,000 was also realigned to the direct payments budget in recognition of the shift in focus to increased choice and control.
- 3.5.4 For individuals who live in mental health supported accommodation the service is supplied on the basis of individual need enabling service to be reduced as individuals are able to become more independent. It also enables more support to be a delivered if an individual has a period when they become unwell. There are two exceptions to this model of service. Edward Road is a 24 hour supported living service for 11 people part funded by the PCT for individuals who require a higher level of support and Queens Road is a shared house for older people who moved from long stay hospitals.
- 3.5.5 In order to support people in their own homes to gain independence, flexible support can be provided from a variety of providers depending on individual need this ranges from 21 hours per week to 5 hours per week. It is usual that the more intensive provision is for individuals leaving hospital or moving from residential provision, mirroring the reablement model of service in older people's services. The use of this service has increased as the use of residential services has decreased resulting in improved outcomes for individuals and increased value for money. On average a mental health residential placement costs £1000 per week whereas the average support package to an individual is £208 per week.

- 3.5.6 A tenancy support service funded through Supporting People provides support to people who require low level support of less than 5 hours per week this service supports up to 50 people.
- 3.5.7 ACS Mental Health budgets also contribute to funding the Housing Support and Resettlement team to enable people to move into their own tenancies from hospital or residential services.

3.6 Self directed support

3.6.1 There is a small take up of Direct Payments within the mental health service, for most it is an option that they do not choose as managing their day to day lives is often a significant challenge and with which they need support. Where it is taken up it is usually by individuals whose needs are longer term and is used for live-in carers or establishing a programme of support to meet their specialist circumstances.

3.7 Future demand

3.7.1 Whilst the number of people using mental health services is expected to remain reasonably static over the next five years this will be due to improvements in early identification of ill-health and early intervention rather than a reduction in absolute numbers. Budget pressures arising from the cost of individual services will continue to be managed by the joint health and social care mental health panel.

3.8 Summary of achievements 2011-12

- Continued reduction in the use of out of borough residential placements
- Continued increase in the use of individual flexible support to enable individuals to increase their independence
- Integration of social care staff into the Older Peoples Complex Teams within Oxleas NHS
 Trust

3.9 **Priorities for 2012-13**

- Tendering of flexible support and tenancy support services as one service providing increased value for money and delivering savings required from Supporting People funding.
- Publication of the revised Mental Wellbeing Strategy which is currently the subject of consultation.
- Reconfiguration of in borough residential and supported living provision on behalf of the Bromley PCT to provide enhanced services and value for money.
- Continue to manage service demands through the mental health panel and to ensure that individuals move to greater independence

4. POLICY IMPLICATIONS

4.1 Mental health services activity supports the Council's objectives in respect of independence and delivering excellence.

| Non-Applicable Sections: | LEGAL, FINANCIAL, PERSONNEL IMPLICATIONS |
|--------------------------|--|
| Background Documents: | None |